Development and disadvantage in Eastern Indonesia

♦ The Eastern Indonesia Project
Nine important papers based on five years collaborative research between the Demography Program, The Australian National University and the Centre for Population and Manpower Studies of the Indonesian Institute of Sciences (PPT-LIPI)

♦ Features
Past and future prospects for East Timor

♦ Update
Population explosion or implosion; reproductive health in Bangladesh

♦ Viewpoint
Australia’s 1999–2000 overseas aid budget; the importation of hazardous waste into Thailand; AIDS in Asia

♦ ACFOA Briefing
The Network

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Editor
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Associate Editor
Mary-Louise Hickey

Correspondence

Development Bulletin
Development Studies Network Ltd
Research School of Social Sciences, Australian National University
Canberra ACT 0200, Australia
Tel: +61 (0)2 6249 2466, (0)2 6279 8257
Fax: +61 (0)2 6257 1893, (0)2 6279 9785
E-mail: devnetwork@anu.edu.au

ISSN 1035-1132
The Development Studies Network Ltd
A.C.N. 008 613 929
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**Eastern Indonesian Project**

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Since our last issue of Development Bulletin the Network has, amongst other things, launched our new book Education for sustainable development: Getting it right, held our first Advisory Board and Editorial Board meeting and our third Director's meeting, and found funding for two new exciting issues of Development Bulletin. We are also in the early stages of organising a one-day symposium to discuss issues of Gender and Governance. If you would like to be involved in any of these activities please contact us.

Education for sustainable development

Our patron, Ian Sinclair, very kindly took time out from chairing the Drug Summit in Sydney to come to Canberra especially to launch our new book. Our grateful thanks to Ian Sinclair and Ian McAllister, the Director of the Research School of Social Sciences, for giving the book such a warm welcome. As Ian Sinclair said at the launch, 'This is an important book that includes excellent discussion on the role that education can play in social and economic development as well as useful advice for those involved in funding, planning and implementing programmes of educational assistance. Getting the balance between basic and tertiary education right is critical if development assistance is to be of value'. We have included a brochure if you or your colleagues would like to order the book. We recommend it—it's a good read.

Network advisory board meeting

If you would like the minutes from our meetings please e-mail us on devnetwork@anu.edu.au

Development and disadvantage in Eastern Indonesia

We are pleased to be able to publish this special issue of the Development Bulletin on Eastern Indonesia. It includes the major results of a five-year collaborative research project undertaken by the Demography Program at The Australian National University and the Centre for Population and Manpower Studies of the Indonesian Institute of Sciences (PPT-LIPI) in Indonesia. AusAID provided funds for both the research and for the dissemination of its results through the Development Bulletin. Thank-you AusAID. We also include an additional five papers on East Timor. In keeping with the theme of this Development Bulletin, we have included reviews of recent books, reports and monographs on Indonesia, information on the work of Eastern Indonesian NGOs and websites on development in Indonesia.

ACFOA

We are pleased to announce a new collaborative relationship with the Australian Council for Overseas Aid (ACFOA). Beginning with this issue of the Development Bulletin we will include a special section, ACFOA briefing, which will present NGO perspectives on current development issues. Pat Walsh, the human rights coordinator for ACFOA discusses Australia's role in East Timor. ACFOA briefing starts on page 128.
Update

We have had considerable positive response to our last Development Bulletin 'Development assistance and family planning', and two papers on this theme. Well known demographer John Caldwell takes a long look at population and provides some controversial conclusions regarding global population growth rates. Shahjahan Hafez Bhuiyan and Niaz Ahmed Khan review reproductive health education for female workers in the garment industry in Bangladesh.

Viewpoint

It's aid budget time again. Australia's financial commitment to development assistance has declined. In Viewpoint, ACFOA provide an analysis of Australia's aid budget. Catherine Hesse-Swain considers the impact of importing hazardous waste into Thailand.

From the field

At the end of 1998 the State, Society and Governance in Melanesia Project ran a workshop on 'Women, Christians, citizens: Being female in Melanesia today'. It was a remarkable event in which Melanesian women challenged gender stereotypes. We are very pleased to include in this section Bronwen Douglas's report on this workshop.

Good reading.

Pamela Thomas and Mary-Louise Hickey
Historically the Eastern provinces of Indonesia have been disadvantaged. Isolation, lack of access to resources, poor communications, diverse minority cultural groups and government neglect are associated with poverty and its concomitants – a poorly educated population, high levels of unemployment, poor nutrition, high infant and maternal mortality, and low life expectancy. These long-standing problems have been brought into sharp relief with the recent violence in Ambon and the possibility of East Timor's independence. The current situation is rooted not only in location but in the region's religious, economic and cultural history.

This issue of Development Bulletin provides special insights into development and disadvantage in Eastern Indonesia and the factors that must be taken into consideration if this disadvantage is to be overcome. The discussion series is divided into two sections. The first includes the results of an important collaborative five-year research project undertaken by the Demography Program of The Australian National University and the Centre for Population and Manpower Studies of the Indonesian Institute of Sciences. The second includes five additional papers undertaken by academics outside The Eastern Indonesia Project. These papers provide an historical review of the current situation in East Timor and prospects for the future.

Education is closely associated with opportunities for development and improved health status. Although education levels in Eastern Indonesia have improved considerably over the last decade, and most children finish primary school, few go on to secondary education. Drop out rates are high and enrolments in lower secondary education are declining. Unless these problems can be overcome, education levels in Eastern Indonesia will remain the lowest in the country. May's study found little evidence that children dropped out of school because family needed their labour. Girls drop out of school because the family cannot afford the cost of transport, school uniforms, equipment and food to eat at school. Transport costs are particularly high for many students attending junior high school. Boys were more likely to drop out because of laziness but cost is also a major issue. The intention to continue to secondary school was closely related to father's education and occupation and economic factors were the main reasons for not continuing. Jones and Nagib recommend scholarships for students from poor families, government grants to schools serving poor students, school fee payments in instalments rather than lump sums and a flexible policy on uniforms.

Infant mortality, a commonly used indicator of social and economic well-being, tends to be considerably higher in Eastern Indonesia provinces than in the rest of Indonesia. While infant mortality is falling, there are many infant deaths that could be prevented with safer birth practices, good hygiene, adequate nutrition and beneficial care. Hull, Rusman and Djohan discuss the concept of beneficial care and the need for health service providers to focus on time for service, fostering respectful and egalitarian attitudes and encouraging grassroots advocacy to overcome shortages in supplies and equipment.

Culture has a considerable influence on delivery of health, education and agricultural support. This is particularly pertinent in Eastern Indonesia where there are a number of diverse cultural, religious and linguistic groups, all of which have very different values and behaviours from the dominant political leadership. This leads to considerable gaps in understanding between the producers and consumers of food crops and health care services, most notably family planning and reproductive health. As Hull, Hartono, Romdiati and Djohan point out, there needs to be greater effort given to training indigenous cadre of paramedical health workers and midwives.

In considering the marginalisation of swidden farming communities Hayes points to serious problems for indigenous farmers as forest on which their livelihood depends.
is converted to other uses and more prosperous transmigrants buy the best agricultural land.

High level of transmigration, and illegal migration into Eastern Indonesia from other parts of Indonesia have exacerbated the situation. Poverty and lack of employment opportunities have led to young, better educated Eastern Indonesians leaving to seek work in Malaysia and elsewhere – often illegally.

The Eastern Indonesia Project provides a bibliography of useful studies on Eastern Indonesia for further reading.

Together, these papers and the bibliographies provide the kind of detailed qualitative and quantitative ‘inside’ information upon which all programmes of development assistance should be based.

In the East Timor section, Hull and Chauvel provide historical information which leads to a better understanding of current events. McNaughton looks at the health situation and Beazley provides a detailed and illuminating perspective of future prospects for East Timor.
Introduction

Gavin W. Jones, Demography Program, The Australian National University
Yulfita Raharjo, PPT–LIPI

This special issue of the Development Bulletin reports on research conducted under an AusAID-funded research initiative on Eastern Indonesia. The official title of this project is Indonesia–Australia Population-Related Research for Development Planning and Development Assistance in Indonesia, better known as The Eastern Indonesia Project. The Project was initiated in 1990 when Tim Terrell, then Deputy Director General of AusAID, approached the Demography Program of The Australian National University (ANU) to gauge interest in developing a proposal for such research on Eastern Indonesia. AusAID thinking was that their many projects in Eastern Indonesia were disadvantaged by the lack of appropriate research to illuminate broader issues of population and development. The purpose of the project was to use the research to guide development planning and development assistance. The Demography Program designed a project that would be conducted collaboratively with the Centre for Population and Manpower Studies of the Indonesian Institute of Sciences (PPT–LIPI). A workshop was held in Mataram in September 1991, to give the design more specifics. This workshop was held under the guidance of the Indonesian development planning agency, BAPPENAS, and with the participation of the provincial development planning agencies and university researchers in the five eastern provinces. The agreement for the project was finally signed in 1993 by the head of LIPI and the Australian Minister of Health, Carmen Lawrence. It was the first time AusAID had funded a bilateral project consisting entirely of research and the dissemination of research findings.

Every research study under the project was conducted by a team consisting of researchers from Australia and LIPI. The collaboration was very productive for a number of reasons. One is that very close links already existed between the ANU Demography Program and PPT–LIPI, because many of the staff of PPT–LIPI had done their graduate studies at the ANU. Another is that staff of both institutions already had wide population research experience in Indonesia, with a particular emphasis on Eastern Indonesia in the case of PPT–LIPI.

The eastern region of Indonesia as defined by the five provinces of Nusa Tenggara Barat, Nusa Tenggara Timur, Maluku, Irian Jaya and Timor Timur is diverse ecologically, culturally and ethnographically. It is one of the most isolated regions of Indonesia due to its mountainous terrain, inaccessible interiors and archipelagic fragmentation. Poor inter-island and intra-island communications, poor trade links, lack of skilled and semi-skilled manpower, and poor health and sanitation facilities are all significant constraints on development in the region. The five provinces have a population of about 13 million, and the region as a whole still experiences relatively high rates of population and labour force growth, and low levels of human resource development (as reflected in low levels of health and education).

The project consisted of ten research projects, nine of which are reported on here. 'Population-related research' has been given a rather broad interpretation in this project, to include various aspects of human development, particularly in the health and education areas. The breadth of the project is best demonstrated by simply listing the various studies conducted under the project. These were:

- Infant and child mortality
- Child labour and educational planning
All of these studies have now produced a final report, as well as at least one policy paper and a variety of other publications. These are listed on page 46, so that interested readers can follow up particular topics in more detail.

We expect that the analysis of issues and proposed policy and programmatic approaches to dealing with them, while specific to the situation in the various provinces of Eastern Indonesia, will have considerable relevance to other parts of Indonesia and more widely throughout the developing world. The approaches we have used in researching these topics, we believe, will also have wider interest to Development Bulletin readers. Thanks are due to our teams of researchers for preparing reports on their studies for inclusion in this volume. Finally, we would like to thank AusAID for the confidence they have shown in our two institutions by funding the project under which this research was conducted, to BAPPENAS for giving their support to the concept of a truly collaborative project between an Indonesian and an Australian research institution, and to Development Bulletin for devoting an issue to this topic.

April 1999
Nine years’ schooling for all? Children, work and schooling in Eastern Indonesia

Marian May, Demography Program, The Australian National University

Background

Despite international action and policies and programmes in many countries over many decades, concern remains about the extent to which children undertake work which interferes with their education, health and nutrition. Whether this work is paid work outside the home or unpaid work which benefits the household, there is general agreement that children are disadvantaged by not going to school and that their economic role is a central component in their degree of commitment to education and the potential for continuing to higher levels of school. One of the ways in which this right of children to education is protected is by the introduction of compulsory education at least for the primary years and then extending to junior high school.

Indonesia began promoting equal opportunity for primary schooling in 1973, followed by a national compulsory education programme for children aged 7–12 years which was instituted in 1983. With the apparent success of the primary programme, the Indonesian Government launched its nine years’ compulsory education programme in May 1994, aiming to achieve its policy goals within 15 years.

The implementation of the nine years’ compulsory education programme was expected to face many problems. Many students were still dropping out before completing their primary education. The quantitative target was enormous, with 29.5 million in primary school (sekolah dasar – SD) in 1993–94 and only nearly seven million at junior secondary school (sekolah lanjutan tingkat pertama – SLTP). To address the low SLTP participation rate with such high numbers of dropouts would require a huge financial commitment from the government. The government strategy included increasing the capacity of junior secondary level education, recruiting new teachers, providing more facilities, proposing a new budget, abolishing government school fees and subsidising private schools. A very important component of the strategy was the strengthening of alternative education through ‘non-conventional’ schools.

The main aim of the ANU-LIPI study of children, work and schooling was to provide policy makers in Indonesia with information about the economic role of children in the Nusa Tenggara Barat (NTB) and Nusa Tenggara Timur (NTT) provinces of Eastern Indonesia, in order to ascertain the likelihood of success of the nine years’ schooling policy. The study used both quantitative and qualitative techniques to focus on the economic roles and school attendance of children aged 10–15 years in semi-urban settings in three islands: West Lombok NTB, Central Kupang (West Timor NTT) and Ende (Flores NTT). Secondary data on labour force participation and educational attainment were analysed, as well as questionnaires filled in by parents, junior secondary students, and children under 15 who had dropped out before completing junior secondary school. The qualitative research component utilised in-depth interviews of parents, children, teachers and government officials.

A government junior high school (SMPN) was chosen as the focus of the study in each of the areas, and each area was selected because of its particular religious and cultural context: SMPN1 Kediri, in a predominantly Muslim area south of Mataram in West Lombok; SMPN Tarus, north of Kupang, with a predominantly Protestant population; and SMPN Ndona, north of Ende, the main urban centre of Flores, where the majority are Catholic. Most of the population in all three areas were wet-rice growers, with a mix of small industry and service occupations. People had relatively easy access to a major urban centre. Thus, physical access to school was not the major issue for most students.

What work do children do?

Less than two-thirds of the children who had dropped out of school were in fact working, and the majority of households surveyed received no portion of household income from the earnings of the dropout children. Those children who worked were mostly family workers in agriculture, with similar proportions of boys and girls overall. Less than one-third of those working were employees who contributed to household income. Many dropouts were doing nothing, either in the household or elsewhere. Boys were more likely than girls to have large periods in the day when they were not engaged in any productive activity. Many children who had left school early, particularly girls in Ende and Kupang, worked in the house. Girls spent a larger proportion of their time on housework and had less free time than boys.

The low proportion of children working is not surprising in view of the limited labour opportunities in all three areas. There are no large industries and most employment is in agriculture, in cottage industries or in vending and small scale services. Demand for labour in agriculture is mainly limited to
times of harvest. Where their households controlled enterprises, both students and dropouts had more flexibility in employment.

Working was not confined to children who had left school: about 60 per cent of SMP students had worked at some stage during the past semester. Of these, it was the student's wish to work in 70 per cent of cases, although, like those who had left school, it may be that children were acting to relieve pressure on their parents. Also like those who had dropped out, most students were family workers, often working for only a few hours a week at harvest time. The few that were paid received low daily wages. Students' households were more likely to have household enterprises than were the households of dropouts.

Who drops out?

Girls were more likely to drop out of school than boys. Although parents and students all said that boys and girls were equal and should have an equal chance of attending school, interesting sex differences emerged in the reasons that parents gave. Parents were more likely to state that boys left school because of sickness, lack of ability and 'laziness', while girls were more likely to leave because of lack of money or a need to work. Girls were more likely to leave school where a household had limited resources or where there was a need for a child to work. In many cases, however, with limited paid work opportunities, girls often ended up 'helping out', not doing any real work.

In Lombok, where differences in school attendance for boys and girls were greatest, parents said that in practice it was too expensive to educate their daughters. In the Lombok villages, most of the girls who had dropped out worked as ngerampok or nepes, collecting the remains of the rice harvest left on the ground once harvesting was finished for the day, and helped with housework. Their parents considered housework to be of benefit in the future when they married; some considered that if a girl was educated and then married, the education went with her to her husband's family, and her own parents received no benefit.

Again, it appears to be a matter of scarce resources. If people had enough money, they would educate both boys and girls, but where there was not enough, the boys were likely to be chosen.

Why do children drop out?

Education, while nominally free, places a heavy economic burden, particularly at SMP level, on parents in NTT and NTB. The major costs are transport, clothing, school equipment and food to eat at school. Clothing and equipment usually need to be purchased at the start of the school year, often when households are most heavily in debt before the harvest. Food and transport are continuing costs. Transport was more expensive for many SMP students because the schools were situated further from their homes. The cost of school uniforms was a major obstacle to attendance in all three areas. Correct uniforms were expected for everyday wear, for sport and for pramuka activities. The lack of a uniform seemed to be the most tangible evidence of a child's inability to meet the requirements for attending school; children were often singled out by teachers and their peers for not wearing uniforms.

Lack of money was the major reason for children, particularly girls, leaving school. For Kupang and Ende, the two areas with the lowest incomes, over 80 per cent of the parents of dropouts reported difficulties paying for SD schooling. Students invariably gave lack of money as the probable reason for their classmates dropping out, and they recognised the role of family income in their own cases: 'Luckily, my parents have enough money. I can go to school' (SMP Ndona student, 15 years old).

The second most common reason given by parents was that children were 'lazy' or could not be bothered (malas). However, so-called laziness often covered up other more fundamental reasons for leaving school. Dropping out was usually the culmination of a long process of discouragement or disaffection to which other factors contributed but which, in the long run, meant that children did not feel like going to school. This is quite clearly illustrated by the case of Markus, a 14-year-old boy, one of 12 children in a blended household, who had dropped out when he was in Grade 5 SD. When asked why he had stopped going to school, he replied: 'I can't be bothered. It's too far.' In the course of the interview, it emerged that, because his family could not afford the cost of transport to school, Markus walked an hour each way, leaving at 6 am and returning around 2 pm. He liked school and studying, but he had no shoes and the school uniform was expensive. His parents had no money, so he eventually stopped going.

Children who were still at school said that, once their classmates started missing school, they found it difficult to catch up on the work and this became an added disincentive. The initial absence was often because of something else, perhaps illness, a family wedding, or a temporary lack of money. Many students missed weeks at a time if they suffered bouts of malaria.

Who decides who drops out?

It is difficult to determine who made the decision that a child should leave school. The decision often appeared to be the child's because it was the child's behaviour that changed, as a result of the pressures on them. Sometimes, leaving school was the culmination of a long chain of events which were not intended to have such a consequence but where few choices remained. Even if children were said by their parents to have decided to leave school, they may have done so in order to save scarce household resources and lessen the pressures on their parents. This is especially likely to have occurred in poor households.

In the case of Karolina, aged 12 and the eldest of six, her mother wanted her to continue at school. But Karolina just refused to go. The underlying factor was lack of money, which
embarrassed Karolina at school because her fees were late and she did not have the required uniform. Her mother had asked for extra time to pay, but the school was 'very strict'. Karolina eventually stopped going, despite all her mother's efforts: 'I was embarrassed and frightened. Threatened by the teachers.'

**Alternative education options**

In NTT and NTB, alternatives to formal schooling were very important for students who could not otherwise have attended school. The Indonesian Government has established two alternative streams to SMP schooling, in recognition of the difficulties that many children and adults have in continuing their education. Students who take the non-formal Paket A, B or C can then enrol in the Open University (Universitas Terbuka). SMP Terbuka (open junior high school), on the other hand, leads to formal SMP qualifications, allowing students to transfer to the regular senior high school by passing the same examination as those in SMP Regular. SMP Terbuka operated out of SMP Tarus in West Timor and Paket B out of SMP Ndona in Flores. Most students were there because it was more flexible and because, with some supervised study sessions held closer to their homes and uniform optional, the costs were lower. In 1994, about 25 per cent of SMP Terbuka students at SMP Tarus were employed as well as attending school. Despite the outstanding success of these alternatives, those in charge experienced problems with resources, slow delivery of student modules from Jakarta, and payment and availability of staff.

**Policy issues and implications**

This study expected to find that children were dropping out of school because their households needed their labour. However, we found little evidence that the economic contributions of children were preventing them from attending school. The difficulty for children was to find economic activities that they could undertake which did not draw them away from school. Poverty and limited employment opportunities meant that poorer households could not afford even the basic costs of schooling.

The majority of children in Eastern Indonesia finish primary school. However, substantial numbers do not even enter SMP, and a much smaller number enter but do not complete SMP. Once students make the transition to SLTP, they tend to continue their schooling. In NTT, the obstacles appear to be significantly greater than in NTB, especially in the rural areas. The problem, then, if the compulsory nine years’ education policy is to succeed, is how to increase the number of SD students, especially girls, continuing to SLTP and, once they are at SLTP, how to keep them there. The success of the policy will largely depend on minimisation of the costs of schooling, which, will in turn give more girls the means to continue their schooling. Parents of students completing SD must be especially targeted, both in provision of information about the nine years’ compulsory education policy and in provision of financial support. Some strategies also might apply to areas other than NTT and NTB; others must depend on the particular needs and initiatives of local communities and individual schools.

**How can schooling costs be minimised?**

**Uniform costs**

- The role of uniforms needs to be reassessed.  
- Uniforms (if necessary at all) need to be simple, flexible and cheap.  
- Schools could establish second-hand-clothing pools from which uniforms might be borrowed by those who cannot afford to buy them (some schools in Australia keep a supply of school clothing which can be borrowed on official occasions by children who cannot afford all items of uniform).

**School environment**

- In-service programmes are needed for teachers on encouraging students to attend (attitudes to uniform, factors in non-attendance).  
- It is important to nurture a school environment which values children's attendance, regardless of their socioeconomic status.

**Transport**

- Either the schools could come to the students (for example, by extension of SMP Terbuka) or the students could be brought to the schools.  
- Cheaper local school transport arrangements could be a part solution (for example, a subsidised school mini-bus or subsidised fares).  
- Transport ID cards for SLTP students would remove the need for school uniforms as a means of identifying them as eligible for student rates.

**Scholarships and financial support**

- Parents suggested scholarships as the most desirable form of support; criteria should include household income.  
- If more scholarships were allocated to girls, this might go some way in correcting the gender imbalance.  
- Exemption from school fees in the first year of SLTP would be helpful (a similar scheme was effective in encouraging all students to attend primary school).  
- Schemes for flexible or staggered payment of fees (for example, monthly rather than per semester), with a system of interest-free or low-interest loans, could be introduced.
• Free school lunches or at least snacks (as in some Indian states recently) could be provided.
• Free textbooks (as in Sri Lanka in the 1980s) could be made available.

How can schooling be made more flexible?

The expansion of alternative and more flexible forms of schooling is necessary in order to cater for all children, including those who need to work.

• Schools need to have flexible arrangements which also allow for working children, for example modification of school hours around peak work times (particularly harvest times).
• The very successful SMP Terbuka should be extended in areas where children find difficulty in regularly attending SMP Reguler, either because of distance or cost.
• Extension of non-formal system options, such as Paket B, should be considered.
• More reliable funding and resourcing arrangements for SMP Terbuka and Paket B are needed.
• More trained supervisors for students in local study centres are required to reduce the need for transport (as in SMP Terbuka); for example, local university students and teacher trainees could be recruited.
• Some forms of modified distance education (as with the SMP Terbuka module system) might be implemented; however, expensive 'high-tech' solutions (relying on centralised radio or computers) are not likely to succeed unless high-level support services are also provided.
• Skills training is needed for children who leave school: most dropouts have ample time in which to attend training programmes which can equip them for work.
• Investigation and follow-up of individual cases, and advocacy on behalf of children (facilitation between home and school), are important, for example by community workers who can look into the problems of individual households with sensitivity.

Conclusion

The long-term success of the nine years' compulsory education policy in Eastern Indonesia will necessarily involve an immediate increase in spending on SLTP education and, more specifically, on those poorer children who currently cannot afford to attend school. The policy can only be implemented by schools themselves once a variety of measures are in place which support and encourage it. Improving household incomes through long-term rural development programmes to benefit the poorest people is crucial. Measures to lower costs for parents and to increase access for girls must be implemented immediately by government and local communities if the outcome of nine years' schooling for all Indonesian children is to be achieved. Scope exists for NGOs and other donors to support the Government of Indonesia in the implementation of this education policy, at both national and local levels.

Acknowledgement

This paper reports the findings of a study conducted in 1996 by Daliyo, Philip Guest, Marian May and Riwanto Tirtosudarmo.

Endnotes

1. The study was originally called the 'Child labour study', but the research team subsequently felt that this misrepresented the situation in the study areas and prejudged the findings of the study, rather than examining the interrelationships in the broader social and economic context of poverty, where there was little work for children to do.
2. The government scouting/guiding organisation.
3. Uniforms have become a general topic of debate since the economic crisis in Indonesia. T-shirts are said to be favoured, with no school badge to distinguish students who attend minority schools.
Education and labour market issues in
East Nusatenggara

Gavin W. Jones, Demography Program, The Australian National University
Laila Nagib, PPT-LIPI

Introduction
The agricultural share of employment in East Nusatenggara province (NTT) is 76 per cent, the highest in any Indonesian province. Even if the rather small non-agricultural sector grows quickly, it is unlikely to be able to absorb a very large proportion of the new entrants to the workforce. Therefore, employment planning cannot rely on the non-agricultural sectors to absorb the rapidly growing workforce.

As in the rest of Indonesia, the educational credentials of younger people are much higher than those of their parents’ generation. In NTT in 1995, the proportion with completed lower secondary education had reached 29 per cent among the cohort aged 20–24, a far higher figure than among older cohorts. There are a number of reasons for this improved educational attainment over time. One is that the Indonesian Government has adopted a uniform educational policy throughout the country, so that every province has experienced a broadening of its educational base, irrespective of its economic or other circumstances. Another has been a strong public demand for education and make it even harder for the high school educated to meet their aspirations.

However, there are some indications that the public appetite for secondary education had slackened, even before the economic crisis hit in 1997. Enrollment rates in lower secondary education declined in both 1997 and 1998. Part of the reason seems to be concern about income forgone when young people continue longer in school, and worries about whether the schooling will enable them to find the desired kinds of employment. Therefore, the policy of increasing compulsory education from six to nine years, announced in 1994, may be quite difficult to accomplish.

In order to explore the issues in expanding secondary education and in matching the high school educated labour force with available employment in Eastern Indonesia, a two-year study was undertaken of 800 students completing their upper secondary education, focusing on their background, aspirations and subsequent educational and labour market experience. The study combines analysis of macro-level data, survey research and intensive fieldwork. Because it was not possible to cover all of Eastern Indonesia, it was decided to focus the study in one province (NTT) and, in fact, in one part of that province – the western part of the island of Timor. The students selected for interview were roughly representative of West Timor as a whole, of Kupang and other parts of West Timor, of government and private schools and of academic and vocational schools.

In the first phase of the study, students about to complete their final-year examinations were interviewed to investigate their aspirations, especially with regard to the choice between entering the labour market or continuing on to higher education, paying special attention to the differences in these aims according to the socioeconomic background of the students and the types of schools attended. In the second phase of the study, conducted 13 months later, the study attempted to discover whether these aims had been realised and, if not, what factors were important in the non-realisation.

Students’ background and aspirations
The higher socioeconomic groups – those from urban backgrounds, non-agricultural backgrounds and whose fathers had secondary education – are greatly overrepresented among students who complete upper secondary school. Senior high school students in Timor are considerably older, on average, than in many other parts of Indonesia. In this survey, more than one-quarter of the students were aged 20 or above. This reflects mainly late entrance to school and possibly some repetition of grades.

Payment of school fees is a problem for a considerable proportion of these students; in many cases, livestock must be sold to pay the fees. Some students are forced to work while studying, and others who come from distant places are drawn into the ‘pengampu’ system, whereby they are provided with accommodation by a household in the town but in return have to work, normally as a household servant, while completing their schooling. Only 6 per cent of students have ever received any scholarship support.

Sixty per cent of respondents wanted to continue their education, with little difference between male and female
were working, but that few of them were continuing their education with those who had attended schools in other places. Some problems of representativeness arise here because there is a large group for whom information was obtained from informants, it appears that at least 25 per cent of young school leavers were still looking for work 13 months after leaving school. Among the students who were directly interviewed in the follow-up, there is a rough correspondence between their aspirations when completing their education and their activities a year later. In particular, most of those who intended to work were either working or looking for work. But only about half of those who had hoped to continue in higher education were doing so, and of the rest twice as many were looking for work as were working. This seems to indicate both a high slippage between the intention to continue to study and its realisation, apparently mainly because of financial difficulty, and also difficulty in finding the kind of work that these young people consider satisfactory.

The follow-up phase of the study

The aim of the second phase of the study was to follow up as many as possible of the students interviewed in the first round. The target was to interview at least 150, but this target was greatly exceeded, as 230 were interviewed and information on a further 283 was obtained from informants. The students followed up in the second round were fairly representative of those interviewed in the first round, in terms of sex composition, status of the schools (private or public), and whether academic or technical stream. However, students who had previously attended schools in Kupang were overrepresented, compared with those who had attended schools in other places.

To what extent was the current activity of these ex-students consistent with their aspirations at the time of finishing school? Some problems of representativeness arise here because there was a large group for whom information was obtained from informants who did not know their current activity. There is reason to believe that most of them were seeking work and some were working, but that few of them were continuing their studies. If this is indeed the case, the percentage continuing their education (44 per cent) was much lower than the percentage intending to pursue further education when interviewed just before leaving school (60 per cent).

Those who were continuing in higher education were disproportionately drawn from government schools in Kupang, from academic rather than technical schools, and from those whose academic performance in school had been above average. When related to socioeconomic background, students whose father was better educated and worked in non-agricultural activities (especially government servants and traders), and who had not experienced difficulty paying for the student's education, were more likely than others to be continuing in higher education.

Among the students who were directly interviewed in the follow-up, there is a rough correspondence between their aspirations when completing their education and their activities a year later. In particular, most of those who intended to work were either working or looking for work. But only about half of those who had hoped to continue in higher education were doing so, and of the rest twice as many were looking for work as were working. This seems to indicate both a high slippage between the intention to continue to study and its realisation, apparently mainly because of financial difficulty, and also difficulty in finding the kind of work that these young people consider satisfactory.

Combining the information obtained directly from the respondents themselves and from informants, two-thirds of the students continuing in higher education were doing so in Kupang and almost one-third in Java. Many of the students who were studying at Nusa Cendana University in Kupang had been accepted in universities in other provinces but did not take up these offers, for a variety of reasons, the most common of which was lack of funds. State universities such as Nusa Cendana were more popular than private universities. Those who entered private universities tended to be those who failed to be offered entry into state universities.

Among the 45 respondents interviewed who were working, more than one-third had been working for the entire period since leaving school. On the whole, they had obtained the job through the help of family members. The main difficulty they acknowledged in finding work was their limited capital and skills. Most of them were working either as private sector employees or in self-employment, in sales, clerical or production occupations. They were scattered across a wide range of industries, the most prominent of which was trade. Almost three-quarters of them said that their current work did not meet their aspirations. In particular, many of them had hoped to find employment in government, but few did so. This is one reason more than one-third of those who were working said they were also looking for work at the same time.

Hours of work were long for most of these respondents: 57 per cent were working between 35 and 60 hours a week, and 23 per cent were working more than 60 hours a week. These long hours of work did not result in high incomes. Almost half of the respondents were earning less than Rp. 100,000 a month, which is below the minimum wage of Rp. 106,500 a month in NTT. Only 28 per cent were earning more than Rp. 200,000 a month.

Although we cannot be sure of the current activity status of many of those for whom information was obtained from informants, it appears that at least 25 per cent of young school leavers were still looking for work 13 months after leaving school. The great majority of these had been searching during that whole period. Admittedly, many of the respondents had not shown
much initiative in looking for work, applying only once during the period – when applications were invited for the limited number of job vacancies in government service. But this probably reflects the actual shortage of work opportunities rather than laziness on their part. Many had taken short courses since leaving school in an effort to increase their chances of finding work.

Policy implications

Improve educational retention rates
This study revealed considerable slippage between the intention to continue in higher education at the time of completing high school and actual continuation. To some extent, this is really just a continuation at a higher level of the problem children from disadvantaged families face in continuing at all stages of their education, a problem which has been exacerbated since the economic crisis broke in Indonesia just after our study was completed. Our studies on education in Eastern Indonesia made a number of recommendations, before the economic crisis broke, about ways to enable poor students to continue in school. These, we believe, continue to be relevant in the current situation, not only for Eastern Indonesia but also for Indonesia as a whole:

- scholarships for students from poor families. The particular focus for these scholarships should probably be on those entering junior secondary school, because this is the point at which the government policy of extending compulsory schooling to nine years will succeed or fail. Criteria will have to be established for determining which students deserve to receive these scholarships;
- government grants to schools serving mainly poor students to enable them to keep their fees low;
- allow payment of school fees to be made in instalments, rather than as a lump sum at the beginning of the school year;
- a more flexible policy on uniforms, which are the greatest expense for poor families trying to maintain their children in school; and
- expansion of systems of providing education to students who have difficulty maintaining full-time enrolment in the regular schools (SMP Terbuka, Paket A and Paket B).

These days, a high proportion of rural students have access to junior high schools without needing to board in town. But this is not the case with senior high schools. The costs of transport and boarding in town are significant barriers to rural children's aspirations to continue their education in provinces such as NTT, Maluku and Irian Jaya. Additional recommendations are therefore needed for the senior high school (SMU) level of education, including the following:

- the provision of asramas and other inexpensive accommodation for students from rural areas who must stay in town in order to pursue their studies;
- closer monitoring of the pengampu system by teachers and parent-teacher associations to ensure that the system is working fairly to the benefit of both the student and the host family.

Link educational expansion with labour market needs

The other key issue confirmed by this study was the limited employment opportunities for the well-educated. A substantial proportion of senior high school graduates remain unemployed after one year. Job opportunities outside primary industry are very limited in NTT. There are only nine enterprises which employ more than 100 workers, the largest being the cement factory and the port of Kupang. Government departments employ relatively small numbers, even in Kupang. Thus, employment in NTT is almost exclusively in small enterprises or in self-employment.

At the same time, new entrants to the labour force are increasingly better educated, and many of them are reluctant to work in agriculture, fisheries or animal husbandry. In fact, this study has shown that over 40 per cent of the students about to sit their final senior high school examinations hope to find government employment, either straight after they leave school or after continuing their studies to tertiary level. Interestingly, this is approximately the same proportion of students whose fathers work as government servants. Nevertheless, it is an unrealistically high proportion in terms of their own work prospects. Many students apparently do not realise this. When asked what work they thought was available for people with their level of education, 53 per cent gave as their main answer: work in government offices. Yet probably only about ten per cent of these students can realistically hope to find government employment in NTT.

Given the projected rapid increase in the number of labour market entrants with upper secondary and tertiary education, it is clear that graduates of these levels of education will not find enough jobs waiting for them in the occupations to which they could traditionally aspire, mainly in professional, managerial and clerical work. Therefore, if the policy decision is made that educational expansion should proceed at much the same pace in NTT as elsewhere in Indonesia, this implies the need for:

- special efforts to increase the pace of economic development in NTT, so that employment opportunities for the educated will increase more rapidly. This will require a broadening of the economic base of the province and, although there are many barriers to this, macro policies can help, including the granting of greater regional autonomy and the removal of trade restrictions which disadvantage primary producers;
• modifications to the content of education so that it is better suited to the labour market prospects facing young people in the region; and
• recognition by planners that an 'even-handed' development of education throughout Indonesia will almost inevitably result in increased levels of outmigration from provinces such as NTT, particularly of educated young people.

One important point to recognise is that outmigration of the educated from Timor seems to be mainly based on the pursuit of higher education in Java, rather than on a direct search for work outside NTT. It is not clear what proportion of those studying in Java eventually return, but a substantial proportion apparently do not. This is not necessarily a bad thing from a national point of view, in light of the limited work opportunities in Timor. The only way to really counter the outflow of students would be to provide more good quality institutions of higher education in Timor. Without these, students will continue to be forced to migrate if they want better higher education and there will be little by way of desirable jobs to draw them back.

Encourage initiative for self-employment

Given the limited work opportunities in NTT, especially in large enterprises, there is a particular need to encourage senior high school graduates to display initiative in entering self-employment of various kinds. Many students (22 per cent) expressed an interest in self-employment, citing most frequently the desire to raise livestock, become a trader, open a workshop or small industry or, in a few cases, in construction. To achieve this aim, however, is not easy. Many obstacles stand in the way, including lack of experience in opening a small business, whether in agriculture or livestock or in trade or repair of machines. But probably the greatest impediment for most high school graduates is the lack of capital, because many of them come from poor families who cannot help them in this way. There is a need for government programmes to provide seed capital to those graduates who want to start their own businesses, along with basic training in how to conduct a small business.

Link content of education more closely with work opportunities

The broad distinction between academic and vocational streams of education is a distinction between preparing students for higher education, in the first case, and preparing them directly for the labour market, in the second case. Continuing attention is needed to the better preparation of vocational school students for the job market, for example through apprenticeship arrangements. A more pressing issue, however, is that 30 per cent of those completing the academic stream do not intend to continue their studies but, instead, will enter the job market directly, like their counterparts from vocational schools. In the great majority of cases, the reason is that their economic situation does not enable them to continue. It was the general opinion of teachers and other informants that the academic stream does not prepare students to directly enter the job market.

Given this situation, imaginative thinking is required to enable the substantial number of academic stream (SMU) graduates who directly enter the labour market to compete more effectively in finding work. Ideally, perhaps, those who do not intend to continue to higher education should not have been enrolled in SMUs in the first place. But to provide them all with places in the vocational school system would not be a realistic alternative because this would require many more expensive vocational school places than presently exist. On the other hand, if the situation is to continue in which 30 per cent of SMU graduates directly enter the job market, much more attention needs to be paid to preparing them for work. The myth that almost all SMU graduates will proceed to higher education must not be allowed to spoil the labour market chances of those who do not.
Neither *dukun* nor doctor: Some problems of the village midwife programme in Eastern Indonesia

Terence H. Hull, Demography Program, The Australian National University
Dra Widayatun, Aswatini Raharto and Bayu Setiawan, PPT–LIPI

Overview

In response to the high and stagnant levels of maternal mortality observed in the late 1980s, the Indonesian Government developed a scheme of village midwifery designed to bring modern medical care within easy reach of rural women. The village midwives (*bidan di desa* – BDD) were meant to replace the traditional birth attendants, the *dukun bayi*, and to act as outreach workers from the community health centres (*puskesmas*). To accomplish this, the Ministry of Health was given the target to train 54,000 BDD before the end of the second year of the Sixth Five Year Plan (1996), using both national and donor resources. Graduates of the three-year secondary level nursing schools (SPK) were given one year of midwifery education in the health training schools (*pusdiknakates*) to qualify them to work in villages under the supervision of the *puskesmas*. At the end of a set period of service, they were expected to continue in the villages as private practitioners, although a few might be able to obtain permanent government jobs as nurses or midwives.

Nationally, the numbers of BDD graduates failed, by 4,000, to meet the 1996 target. More importantly, serious questions have arisen concerning the quality of the training, the commitment of the young BDD and the long-term viability of this attempt to support midwifery. In a number of field studies in Maluku, Nusa Tenggara Barat (NTB) and Nusa Tenggara Timur (NTT), researchers from the Indonesian Institute of Sciences and The Australian National University examined the administrative and practical difficulties faced by the BDD.

Outline of policy development

The village midwife programme is shaped and governed by a series of regulations and instructions set out by a series of health ministers. Researchers are often confused by the patterns of behaviour they find in clinics and villages, unaware that these puzzles are often explicable in the historical record. BDD are only one type of trained midwife in the health system, and they are subject to rules and regulations developed over many years to shape the profession of midwifery in both the public and private sphere.

The basic regulation defining the duties of village midwives is the Ministerial Instruction (SK) Menkes No. 363/1980. Under this instruction, village midwives must live in a village more than five kilometres from a health sub-centre, serving a minimum of 500 households and covering an area of at least ten square kilometres. The village midwife reports directly to the head of the health centre.

In 1984, the Department of Health and the National Family Planning Coordinating Board (BKKBN) signed an agreement to jointly develop and run a network of integrated health posts at the level of the hamlet. Called *posyandu*, these posts consist of monthly meetings at which pregnant women are given antenatal care, infants are weighed and measured, immunisation is provided, and women can receive family planning information, counselling and supplies. The village midwife is expected to participate in the running of the *posyandu*.

In 1989, the Minister for Population and Head of the BKKBN recognised the need for a large-scale expansion of village based, trained health workers to support the national family planning effort. At his urging, President Soeharto determined that this need should be met by the expansion of the village midwife scheme through a crash programme of training and placement of nurse-midwives. These new recruits would be called the *bidan di desa* (BDD – midwife in the village), as distinct from the old term *bidan desa* (BD – village midwife). As a necessary step in this process, the Minister of Health issued an instruction (PP Menkes No. 623/1989) clarifying the duties of BDD. A series of special training initiatives using different curricula were established, with the result that there were soon midwives of a wide variety of qualifications practising in hospitals, clinics and birth centres across the nation.

At the same time as the BDD programme was being developed, the government faced growing difficulties in coping with the expanding and unwieldy bureaucracy. Following the changing practices for hiring doctors, the BDD were hired on strict limited-term contracts, with no promise of ever becoming permanent government employees. These contracts were for three years in the first instance and could only be extended for one additional term. In an attempt to further clarify the standing of the various types of midwives, the Minister of Health issued an order (Permenkes 706/1992) to establish the basis for the licensing of midwives. This was followed in 1993 by the formal establishment of teams under the local health offices (*dinas kesehatan*) to register and license midwives.

In what can be regarded as a ‘major leap in the development of midwifery in Indonesia’, the Minister of Health in 1996 issued an order (Permenkes 572/1996) to give midwives who were
out of reach of facilities formal authority to practise. This meant that they were not under the direct control of doctors in the performance of a range of obstetric procedures.

By the 1990s, the BDD had become the most numerous single category of health personnel in the country. While the numbers were impressive, there was concern over the quality of training they received. With only one year of midwifery after their nursing degree, and with limited practical experience, these midwives were expected to perform life-saving functions in a village context. Serious questions arose concerning their readiness for this task.

The nature of the problem

One overall impression gained from examining the village midwife (BDD) programme is that the difficulties encountered by this innovative scheme are actually rooted in the longstanding institutional, structural, organisational and financial constraints facing the health services in Indonesia. Among the most important issues are:

- the long-term administrative gap between the maternal child health (KIA) services provided by the Ministry of Health and the family planning (KB) information and services supported by the BKKBN. Village midwives are responsible for both KIA and KB, and thus look to two sources for guidance, supervision, direction and supply. At the same time, they come under the administrative control of the Ministry of Home Affairs by being regarded as the partial responsibility of the village head (lurah);
- budgetary limitations and financial management complexities which sometimes delay payments of wages and allowances or disrupt the steady supply of equipment and supplies;
- inadequate budgets and systems for the maintenance of facilities and equipment;
- the increasing reliance on the village midwife as the proximate care provider, health promoter and community development worker, as a result of the numerous complex programmes offered through the health system;
- many complex and often contradictory reporting requirements and procedures; and
- the lack of facilities for BDD to effectively treat severe post-partum bleeding (the major cause of maternal death), and the lack of resources to ensure speedy transfer of patients to referral facilities.

Studies of BDD risk misinterpretation if they assume that these problems are simply a matter of the BDD programme and not inherent in the larger context of the national health system and overall government administrative system. By the same token, recommendations to improve the performance of BDD need to address constraints in this larger setting if they are to be truly relevant.

Selection, training and organisation of midwives

Before 1989, most midwives in Indonesia had full training as nurses before being extensively trained in midwifery through schools attached to hospital obstetric programmes. They tended to be government employees (pegawai negeri sipil – PNS), based in clinics (puskesmas) or hospitals. Often, they had private practices in afternoon or evening hours. There were also a number of midwives who had wholly private practices based in their homes. While most of these midwives worked in a clinical setting, some worked specifically in villages. These government midwives with major responsibilities in communities also came to be known as village midwives (BDD-PNS) and they provided an important, though small, portion of total rural midwifery services throughout Indonesia.

The basic concept of the BDD programme begun in 1990 is that a trained nurse who has an additional one year's training in midwifery skills can significantly improve the quality and quantity of antenatal, obstetric, postnatal and contraceptive services in a village. By implication, the crash programme approach to producing village midwives on temporary appointment (BDD-PTT) means that most candidates are young (19–21 years old) and unmarried, and lack relevant work experience. Most have spent their formative years living in urban areas.

At first, the BDD-PTT lived in the home of a village head or other village member but later was housed in a polindes (pondok kersalin dea – village birthing hut), which was both her home and her workplace. At the end of her PTT service period, the BDD is expected to continue to offer midwifery services in village areas through a private practice. She might also return to school to gain higher qualifications (three-year Diploma-level certification). A few might also expect to successfully apply to become PNS.

Rivalries among midwives

If there is one new problem arising from the village midwife programme, it is in the contradiction between the relative status and relative remunerations of the puskesmas PNS and PTT midwives. Both sides are prone to resent the other. Some of the reasons for these tensions include:

- The PNS is generally older, married and better trained, while the PTT is generally around 20–22 years old, usually single, and often the product of 'emergency' training arrangements to meet targets. There is little sense of personal, social or professional solidarity between the two groups.
- The PNS gets a low monthly government wage according to a rigid hierarchy of level of appointment. The PTT is paid a higher explicit monthly wage which is unaffected by duration of service.
- The PNS receives a variety of additional compensations and access to a variety of privileges.
related to work responsibilities. The PTT receives less by way of extra-salary compensation.

- The PNS has job security and the promise of a pension. The PTT has a three-year appointment which can be extended for an additional three years. Very few PTT are ever accepted into PNS status.
- BDD-PNS are more likely to have the necessary izin praktik (licence for private practice) to open a legitimate evening clinical service. BDD-PTT lack the experience and qualifications for private practice.
- Community health centres where bidan PNS work tend to be located in areas of population concentration where clients have purchasing power, access and motivation to use private services. PTT are often placed in remote locations where clients lack the purchasing power to make a private midwifery practice viable.

While it was clear that these factors often spoil the relations among different categories of bidan, we were also impressed that in many areas the working relations were remarkably good. The biggest problem seems to be that all of these differences seriously complicate the structure of technical and administrative supervision.

Ideally, the BDD would be closely supervised and mentored by a senior bidan whose greater experience would be the source of ongoing training for the BDD. This would require the supervisor to visit the BDD regularly, to do an on-the-spot inspection of work performance, and to give regular assistance and advice on difficulties faced by the BDD. This clearly does not happen. Instead, the BDD goes to the pukesmas once a month to present reports and discuss difficulties. The senior midwives and nurses generally visit the BDD-PTT at either the posyandu (integrated health services post) or in the polindes every month or so. This could be regarded as relatively light supervision, given the needs of a young inexperienced worker.

This situation is exacerbated because the BDD-PTT reports to the clinic doctor in technical terms, but to the village head in terms of day-to-day living and work matters. This dual responsibility situation sometimes leads to BDD playing off one authority against another. It can also lead to them being exploited or ignored by both, depending on the specific attitudes of the leaders.

**Housing and equipment**

The saddest part of the research on midwives in Maluku was observing their extraordinarily bad housing. The polindes were uniformly badly designed and virtually all were appallingly constructed. The system for organising the construction had outside contractors being appointed by the provincial and regency health officials, with the village head being told to sign approval of payment only when the work was satisfactorily completed. Since the village heads were not part of the system in either formal or informal terms, they were often encouraged to sign the forms under duress or ignorance. This was not only the observation of the study team, but the regular report of doctors, village heads, BDD and local people. The most common phrase used to describe the polindes in Maluku Utara and Halmahera Tengah was 'rumah kumuh' (slum unit), but phrases like 'chicken house', 'goat hut' and simply 'jelek' (terrible) were also common. We observed only one habitable unit, while others ranged from 'incomplete' to totally and permanently unusable.

In contrast, we saw a number of quite good polindes in NTT. The administrative procedures for the construction were quite different. The village head and the BDD-PTT jointly managed the construction of the units in NTT, and villagers on a voluntary, mutual assistance basis supplied the labour and much of the building material.

Equipment promised to BDD seemed adequate, but sometimes problems of budget or transportation delayed the timely deployment of the equipment or supply of drugs and other expendable material. More often than not, BDD complained that they could not get the drugs they requested from the pukesmas and so they purchased them (generally antibiotics, analgesics and vitamins) from pharmacies and sold them to patients in the village.

**Faults of policy or faults of implementation?**

In reflecting on the problems found in the system of midwifery services in Maluku, the study team considered the issues of causality and opportunity. What were the basic tractable causes of the problems faced by BDD and clinic midwives? Were they problems of inadequate policy, or were the policies adequate and the problems more a matter of implementation? Further, what opportunities were available for resolving these problems?

To the study team, it seems clear that the most important source of problems is at the policy level. The BDD programme is inherently flawed in design; thus, even with substantial additional effort to improve implementation, effective solutions will still be far away. It is unrealistic to think that very young women with three years of nursing training and one year of midwifery training can achieve substantial improvement in maternal child health and general health services in relatively isolated villages. It is especially unlikely that this will be achieved if they have divided loyalties (between the clinic doctor and the village head), poor living arrangements (in unhealthy polindes), and minimal supportive and educative supervision. Most of their problems relate to the policy decisions that led the BDD programme into a target-oriented emergency effort that saw the compromise of professional and administrative standards in the name of quick coverage and inexpensive implementation. Essentially, solutions need to be found in policy revision at the national level, and in consolidation and reformation of implementation measures locally.

**Research priorities**

Recent research on village midwives undertaken by the Ministry of Health and a variety of other institutions has given a very
comprehensive and frank perspective on the nature of the problems facing the midwives. As young, unmarried women whose limited training has not prepared them to provide adequate obstetric or general medical services in isolated circumstances. These midwives are neither respected enough by the people to replace the dukun, nor skilled enough to provide a level of primary health care comparable to that given by general practitioners. In reviewing those studies, and making direct observations in Maluku, NTT and NTB, it is clear that further research needs to be directed to some particularly thorny issues of policy and programme implementation: the organisation of midwifery services, general medical diagnosis and treatment by BDD, and the use of information and reference materials.

The organisation of midwifery services
Perhaps the most important research needed at the moment is on the working and professional relations of different providers of midwifery services. These include the puskesmas midwife, the village midwife on permanent appointment (BDD-PNS), the village midwife on temporary appointment (BDD-PTT), qualified midwives providing services through private practices (including the first three groups), trained traditional midwives (dukun terlatih) and untrained traditional midwives (dukun tidak terlatih). Three themes need to be pursued: structures of supervision and cooperation, recording and reporting, and remuneration.

Because such research would reflect on the workings of line agencies, researchers with no vested interest in the status quo should be selected. Perhaps contracts with university research organisations, or such 'arms-length' professional organisations as the Indonesian Association of Perinatology or the National Epidemiology Network, would achieve this.

BDD general medical diagnosis and treatment
All of the village midwives we interviewed provide general medical services in their daily work and in after-hours informal private practices. Most distribute general medicines for fever, diarrhoea and other common ailments. Often, they buy these medicines from drug stores and sell them to patients. Sometimes, they obtain free medications from the puskesmas and distribute them for free, but charge a small fee for injections or diagnosis. Presently, there is no system for recording details of diagnosis and treatment (medical record) for patients seen out of hours, and there is thus no way of responsibly supervising medical treatments by paramedical personnel. Research is needed to understand how the system works in different regions, and to develop ways of improving the professionalism of the treatment.

Research might well take a 'situation analysis' approach, looking at the BDD as the unit of analysis, and the polindes, puskesmas, posyandu and home base as the sites of her operations. Such research should be coordinated by highly experienced public health researchers using well designed methodologies, but there might be value in involving researchers from local universities as junior collaborators to give them experience in data collection and analysis.

Use of information and reference materials
Both puskesmas and BDD are relatively isolated health service delivery units needing access to written materials on health care, drug therapy, and emergency procedures. Casual observation indicates that the excellent publications produced by the Ministry of Health and the BKKBN are seldom found in the field. When they are, they appear to be seldom used for reference in the course of daily diagnostics and treatment. More systematic research is needed on the actual availability and use of reference materials in the puskesmas, pusu, polindes and posyandu. The outcome of this research could be directed both to improving the distribution and storage of reference materials, and to focusing training on improving skills in the effective use of information and reference materials for professional improvement and quality assurance.

<table>
<thead>
<tr>
<th>Table 1</th>
<th>Need for and placement of village midwives in Eastern Indonesia to 1997</th>
</tr>
</thead>
<tbody>
<tr>
<td>Province</td>
<td>Total villages</td>
</tr>
<tr>
<td>---------</td>
<td>----------------</td>
</tr>
<tr>
<td>Indonesia</td>
<td>68,724</td>
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<tr>
<td>NTB</td>
<td>592</td>
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<tr>
<td>NTT</td>
<td>1,725</td>
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<tr>
<td>Maluku</td>
<td>1,517</td>
</tr>
<tr>
<td>Irian Jaya</td>
<td>2,280</td>
</tr>
<tr>
<td>Timor</td>
<td>442</td>
</tr>
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Source: Sumber: Direktorat Bina Kesehatan Keluarga, Departemen Kesehatan (Family Health Promotion Directorate, Department of Health)
They simply die: Searching for the causes of high infant mortality in Lombok

Terence H. Hull, Demography Program, The Australian National University
Roosmalawati Rusman and Eniarti Djohan, PPT-LIPI

Introduction
In the vast ethnic mosaic that constitutes modern Indonesia, Lombok has acquired the unenviable reputation of having the highest recorded rate of infant and child mortality. With that reputation, confirmed by all censuses and surveys since the advent of the New Order Government, has come the mixed blessings of numerous intervention projects aimed at reducing infant morbidity and improving access to medical care. Such interventions are welcomed by policy makers and parents who desire to improve the survival chances of children, but they carry a price in terms of bruised pride and vulnerability to criticism and ridicule. The people and the leaders of Lombok are sensitive to the seemingly persuasive case that their communities and their customs are allowing their offspring to die.

Lombok's reputation is not as well-founded as many observers believe. Little is known about the levels and trends of infant mortality among the Sasak people of Lombok, and even that limited information is subject to a variety of errors of measurement and interpretation. However, weak data are not an argument for complacency. Even the most casual observation in the clinics and villages of Lombok reveals serious problems in terms of infant morbidity and mortality. Large numbers of babies die of easily preventable illnesses, often because they are not able to obtain adequate curative treatment. In some ways, the rates or numbers of these deaths are less important for policy than the circumstances in which they take place. For this reason, the bulk of the ANU-LIPI research project on infant mortality in Lombok concentrated on the analysis of the causes of infant death, with cause being extended beyond the narrow medical definitions of pathogens and other aetiologies to include the social and cultural settings of death in Lombok communities.

While mortality is clearly falling, it is obvious that many deaths are preventable. To speak of 'easily preventable', as we do in the previous paragraph, is to underestimate the efforts required to ensure safe birth practices, good hygiene, adequate nutrition and beneficial care. The latter is the key concept because, if all participants could be shown ways to care for mothers and children in more effective ways, they would discover for themselves the 'easy steps to prevention and cure' which would bring mortality down to the levels in Thailand, Malaysia and the Philippines. In the end, this might be the greatest challenge: to teach health personnel to care for their patients in future, without implying that they do not care at present. To enhance the concept of 'beneficial care', service providers must focus on the efficient commitment of time for service, fostering respectful and egalitarian attitudes, and encouraging grassroots advocacy to overcome shortages in supplies and equipment. This requires social and cultural changes, not so much among Sasak parents as among the people of many ethnic backgrounds who have dedicated themselves to the health - the caring - professions in Lombok.

'Rashomon' in Lombok

The methodology applied in this study was a novel innovation on standard qualitative research techniques. We named the approach the 'Rashomon Technique' after the famous Japanese story and film in which witnesses to a rape and murder were found to have totally different perceptions of the same dramatic event. The fictional story is a masterpiece of existential provocation, with readers and viewers being left puzzled over the various 'truths' presented and uncertain about their own ability to discern truth in an inherently contradictory setting. In applying the metaphor of Rashomon to social science methodology, we have found that what is unsettling in fiction becomes a powerful tool for explanation and policy advice when applied to the contradictions arising from social realities.

We know that children have died, and it is easy to identify the various people who played important roles in attempting to save the infants' lives. Parents, neighbours, traditional healers, religious leaders and health centre personnel all have clear, but sometimes contradictory, roles when children become ill. By recording their stories and analysing the similarities and differences of the accounts, we gain insight into some of the major behaviours and beliefs which conspire to make treatments succeed or fail. This leads to a more realistic, if more complicated, set of policy recommendations, framed both in terms of the specific life-saving actions needed to be mobilised to address priority medical problems, and in terms of the different types of information, education and communication interventions that might be needed to resolve contradictions in role expectations among the various people responsible for the health and welfare of infants and children.

We have developed this notion into an approach to the collection and analysis of qualitative data related to a dramatic shared event, in this case an infant death or life-threatening situation. The basic notion is that, for each case, there are a number of 'witnesses' or participants who can be relied upon to
provide a detailed account of what they experienced and observed. These witnesses also have interpretations of the causes and responsibilities involved in producing the particular outcome—an infant's death or survival.

In developing an analytical strategy to process both the full transcripts and our summaries of various perceptions and reports, we did not attempt to prove any particular witness right or wrong, nor were we attempting to assign individual blame for the sequence of events. Rather, we developed an additional analysis based on our (external) perspective, with a concentration on the medical issues surrounding the events. The material used to make this assessment included full transcripts of the witnesses' stories and any other evidence the research team could collect from the field (such as clinic records, police reports, death certificates and other documentary evidence). These led to an external assessment about why the death occurred. This assessment was expressed as a set of themes about both the relative importance of specific events and the dynamics of specific relations among witnesses, and what policy and procedural changes implementable by health service and local government agencies could prevent such events in future.

Listing infant deaths in a village

Finding the families to interview for the study presented the research team with a major challenge and a major insight into the issue of infant death in Lombok. Comparison of information from different sources (district, subdistrict and village offices, clinics and birthing centres, health personnel, traditional midwives, hamlet heads and religious leaders) all produced very different numbers, and contradictory information about the timing, age and circumstances of deaths. Where registers and officials were able to report on one to four infant and child deaths in the half-year from 1 January to the mid-year date of the study, interviews with hamlet heads, traditional birth attendants and religious leaders who have the duty to bath the corpses quadrupled or quintupled these figures. Moreover, the closer the source of information to the family experiencing an infant death, the more accurate was the information about the details and circumstances of the death.

Examples of the types of errors discovered during the listing process included serious errors in the recording of names of children and of parents, making the task of cross-checking and verification among various registration systems time consuming. For instance, where a mother gave her child's name as Soni Harudin, the official register listed the nickname Oco. In another case, of twins, the registered death recorded the name of the child who had survived. Often, the names of parents were incorrect or missing from records. However, while the issue of names is important from the viewpoint of checking records, it is generally of little consequence for the calculation of rates and trends. More important in this context were the large discrepancies among registration sources that were supposed to cover the same numbers of deaths, and details of the events.

This was particularly true when asking about the cause of death. Early in the study, one child was recorded in the village records as having died of 'fever'. The grandmother insisted that the child had died of 'antu' (evil spirit), brought on by the departure of his mother who had gone overseas to work.

We found that data from clinic, village or other official sources are subject to large errors, which make them virtually unusable for any serious epidemiological or demographic research. At the same time, the very weaknesses of the data make a strong statement about the way government and the community view infant death. It is not a matter of unimportance but, rather, that the importance of such deaths falls outside the 'official' dimensions of society. For that reason, we concentrated on the informal dimension of social life to gain understanding.

Interviewing a variety of witnesses

The heart of the Rashomon Technique is the acceptance of differences of perceptions—and beliefs, opinions and memories—among a group of people who all played some role in a single dramatic event, such as a baby's death. The researcher using Rashomon approaches does not seek 'truth' in the sense of a single version of events based on the word of an authority, or the application of some notion of verification through cross-checking. It is understood that, even if a person believes something that never happened, that person's belief must be understood and responded to rather than the researcher's understanding of the reality. This is particularly true in policy-oriented research, where the conclusions are directed towards the development of educational and institutional inputs to improve responses to mortal situations. These inputs must be geared to the perceptions of the participants, both so the information or motivation will be recognised as relevant and so it can be designed to address and change dysfunctional behaviour. The research project developed three themes that captured different aspects of infant mortality in Lombok: the fatalism expressed by many parents, the delays involved in taking children to health facilities, and the problems of basic professional knowledge among health workers and of practical health knowledge among parents.

Spiritualism and fatalism: Anak itu lahir mati (the baby was born dead)

By using the Rashomon Technique to obtain a variety of interpretations of the cause of death, the Lombok study was able to describe in detail those statements of fatalism which were offered by family members or neighbours to explain a child's death. It was found that the vocabulary and force of such descriptions varied according to personal religious orientation and community religious institutions in the three study villages. Religion in Lombok has a mixture of traditionally based animism and more formal Islamic teachings. Communities like Bayan in the northern mountains, where the traditional stream of waktu
Adequate treatment of infant and childhood illness must be quick and appropriate. Delays in the case of diseases of infancy can often have fatal effects. For this reason, modern health care stresses the need for timely diagnosis and the correct treatment of problems. A wide variety of factors and a complex socioeconomic and cultural process are involved in the parental assessment of disease symptoms and subsequent decision making about appropriate sources of assistance. Parents look beyond the biomedical indications to the relationships between the family and other community members, and presume supernatural influences before they take steps to treat an infant's illness. This means that they sometimes turn to spiritualists before medical doctors in their search for appropriate help. Their concerns over the relative costs of treatment can also have an influence on their decision making. This is not to say that perceptions of biomedical factors are not important — the severity and stage of illness do precipitate action — but that they are subject to other influences and, in some cases, this causes delay. Because of the proliferation of factors entering parental thinking, it is important for health service interventions to stress attention to biomedical symptoms and quick action to ensure that parents and communities are not so distracted by other considerations that they delay seeking appropriate treatment, with potentially fatal consequences.

Problems of empowering providers and clients in the health delivery system

Health services involve a transaction between people who are ill or at risk of illness and people who have information and supplies to prevent or cure illness. For this transaction to be successful, both sides need to bring knowledge and confidence to the exchange and to be open to learning from each other. In Lombok, it was found that parents of sick children often lack the most basic knowledge of health and medication, such that they frequently failed to take up opportunities for care which could have had an important impact on their child's condition. Health workers, on the other hand, often lacked the professional knowledge and discipline to allow them to carry out their job efficiently and effectively. In the words of a number of workers, 'saya kurang profesional', by which they mean 'I don't feel capable of adequately carrying out my duties'. This case study from Lombok identifies a wide range of issues: from the rational use of drugs, through the development of more collaborative team approaches to service, to the promotion of open and transparent systems of charging for services. Both sides of the health care equation need 'empowerment' training to ensure that the best quality medical treatment is available in a timely and relevant manner. For a number of practical reasons, the most strategic way of promoting this goal is to give priority to professional staff training, since, as they are empowered, they will gain the skills and knowledge to reform clinical practices and educate the community in better forms of health promotion.

Rethinking infant mortality in Lombok

The Rashomon Technique of interviewing a number of witnesses to an infant death served to demonstrate the wide variety of factors which conspire to expose newborns to the risk of illness and which subject sick children to the mortal consequences of untimely or improper treatment. More than that, Rashomon-style analysis brings out the contradictions among the stories of well-intentioned witnesses and enriches our perceptions of the social environment in which health education interventions must be set.

What Rashomon cannot do is verify the quantitative measures of infant and child mortality. Data from large sample surveys and numerous registration efforts were used to check and re-estimate the infant and maternal mortality rates, in an effort to verify the figures. In virtually all of the estimates reviewed in preparation for this project, the calculation and interpretation of infant mortality rates was found to be flawed. As a result, it is concluded that, while the rates in Nusa Tenggara Barat (NTB) are undoubtedly high, it is not possible to state with any assurance that they are higher than the true rates in some other provinces of Eastern Indonesia. Moreover, most of the efforts to calculate rates at the level of kabupaten and kecamatan have been seriously constrained by problems of either sample design (in the case of surveys) or coverage and accuracy (in the case of registration data). Reports that now talk of rates in terms of '113.5 per 1,000 live births' should probably be rephrased to express mortality as 'about 10 per cent of infants die before attaining their first birthday'. What is lost in numeric precision is more than made up for in veracity. Adopting more
imprecise terminology for discussing the estimates and trends should not reduce one iota the concern or commitment of government to deal with the unacceptably high levels of infant and child mortality in Lombok.

The interviews with witnesses reflect the major theme of the whole research project. When asked to describe the circumstances of the illness and death, parents, neighbours and medical personnel all revealed an open but disarmingly simplicity of interpretation. They did not describe heroes and villains but, instead, spoke of the virtually forlorn situation of obvious problems with unknown solutions. While in the end their interpretation was sometimes fatalistic, in almost all cases the parents made important efforts to obtain treatment for an infant's illness. While they seemed to think that modern medical care would be more efficacious than traditional healing, there was a widespread tendency to use a variety of interventions, either in sequence or in tandem. They believed that treatments should provide immediate recovery. If symptoms or weakness persisted, then it was thought likely that the cause of the problem was different from that postulated by a particular practitioner and that solutions should be sought elsewhere. When infants died, the parents were likely to describe the problem as being too powerful — and, in essence, it being God's will — rather than the practitioner being inadequate.

Medical practitioners spoke at length about the many social, cultural and environmental conditions that made infection rampant and compliance with therapy inadequate. While they believed in the power of medicines, they did not acknowledge any responsibility for malpractice related to the prescription of inappropriate drugs. Nor did they accept that their services were generally neither educational nor communicative — in their view, the failure to communicate lay with the ignorance of the community rather than with the attitudes of health personnel.

Traditional healers possessed an enormous variety of backgrounds and motivations. They ranged from 'professional' healers who had a calling to assist the sick, to religiously gifted neighbours who applied their prayers to assist those in need. Belief is the key to both the therapy and the diagnostics applied. But this foundation in faith makes for a wide range of contradictory understandings about the nature of illness, and implies quite different behavioural interventions to prevent or cure disease. Black magic, unwarranted anger or boiling resentments related to the behaviour of parents can result in illness in an infant as a kind of spiritual punishment. To the degree that the community as a whole believes such aetiologies of disease, calls for better hygiene will attract only limited understanding.

In the eyes of people used to the anonymity of middle-class urban communities, the spontaneous and intense involvement of neighbours in cases of infant illness and death was particularly striking. Neighbours often knew immediately if a child had fever or diarrhoea and were often called on for assistance in seeking treatment. Home remedies and methods of nursing were discussed freely, and neighbours were quite open in expressing their disagreement with particular treatments or behaviours. Most importantly, at the time of death, the neighbours immediately converged to wrap the grieving family in a tight net of personal support and assistance, thus softening the blow and helping the parents to resolve their feelings of loss and responsibility. Religion and religious leaders were key elements in this stage, and custom and ceremony dictated all the steps of mourning and funeral with a clarity that made the roles of all community members predictable.

Among policy makers and project officials, there is a tendency to regard 'culture' as a cause of high mortality without specifying the behavioural elements linking particular beliefs, practices and institutions to infant mortality. 'Culture', in this sense, is a term used to refer to ethnicity, religion or education. In the case of Lombok, it is often invoked as a shorthand referent for Sasak culture (which is wrongly assumed to be homogeneous) and 'traditional' behaviour. As the preceding paragraphs suggest, culture is such a rich, contradictory, and reasonable set of beliefs and actions. It is incorrect to ascribe responsibility for high mortality to 'Sasak culture', or even to indict traditional behaviours without specification of the conditions under which the actions are dangerous. In advancing such explanations for high death rates, there is a tendency for policy makers to adopt the perspectives of urban service-provision agents, rather than those of consumers of health care services. In the process, health care institutions are absolved of much of the blame for persistent high mortality because it is argued that parents and communities follow traditional practices and 'fail' to take advantage of modern health care alternatives. As the interviews and the case summaries make clear, parents frequently are disappointed with the availability and efficacy of clinical services, and seldom receive the information and explanations likely to strengthen their belief in modern diagnostics and treatment.

The key to improving services, as revealed through the in-depth interviews with a wide range of community members, is the systematic promotion of communication among parents, community leaders and health care workers. They need to develop a shared understanding of the methods of preventing and curing diseases of infancy. This is the form of 'rethinking' most needed at this stage of health development in Lombok.
Family planning and family decision making in Nusa Tenggara Timur

Terence H. Hull, Demography Program, The Australian National University
Titik Handayani, Aswatini Raharto, Mita Novaria and Bayu Setiawan, PPT-LIPI

Introduction
The scattered islands and various ethnic and religious groups of Nusa Tenggara Timur (NTT or East Nusatenggara) have long felt isolated, and have long been poor in relation to the rest of Indonesia. This includes not only the obvious economic dimensions but also the benefits of health and family planning services provided by the government. Central government family planning efforts reached NTT only in the late 1970s, and strong initiatives appeared in the 1980s. At the outset, the programme suffered serious problems of design and implementation. Even today, officials and citizens alike refer to the coercive attempts at community mobilisation between 1982 and 1990 as ‘mistakes’ which have left unfortunate legacies of resentment, dissatisfaction and ignorance. Rather than enhancing people’s choices, the family planning programme often limited options or forced compliance. Additionally, the largely Christian populations on the island of Timor – and, particularly, the Roman Catholic portions of this group – sometimes resented the assumptions and presumptions of central government initiatives that paid little attention to local sensibilities and desires.

The ANU-LIPI research team that visited NTT in 1995 and 1996 found the issue of family planning to be far more complex, and far more problematic than the situations in Java, Bali or NTB (West Nusatenggara), particularly in terms of family decision making. Using a combination of in-depth and group interviews, the team collected information about various dimensions of decision making: from the arrangement of marriage, through behaviour related to sexuality, and including decisions about contraception and abortion. The approach was explicitly directed to consider policy and development assistance priorities in advance of the AusAID-funded Women’s Health and Family Planning project which was in preparation and at the early stage of implementation at the time. In what follows, we highlight some of the major issues canvassed in the research, with particular emphasis on issues yet to receive serious policy attention. The research team was particularly concerned that many of the problems identified disadvantage women more than men but, in the end, couples suffer in their relationships and their efforts to achieve comfortable and prosperous lives. In the 1980s, the government had declared gender a key element in development planning. Family welfare had been defined as the prime goal of the family welfare movement (the successor name to the family planning programme in Indonesia). In this context, it was clear that government would need to look beyond contraceptive use to the gender dimensions of marriage and contraceptive decision making in assessing the impact of collaborative development activities. For this reason, the team focused on marriage, contraceptive decision making and the special case of ‘natural’ family planning in order to assess the current state of family planning in the western part of the island of Timor.

The arrangement of marriage
Marriage in NTT is not an event but a process. It is initiated with the establishment of marriage-like personal commitments between young men and young women, and proceeds through traditional (adat) negotiations and ceremonies, religious counselling and ceremonies and civil registration. Cohabitation before formal legal marriage is common but the patterns of marital arrangements have been changing rapidly in recent years. The report suggests that governments and religious organisations need to adopt more proactive and flexible policies to help young people to better achieve their goals through marriage, while avoiding the burdens of traditional inter-familial payments and onerous administrative procedures. Sometimes, national textbooks, media stories, and public and private sector regulations do not recognise the early stages of the process of marriage, with the result that couples, and more specifically women, suffer discrimination in terms of access to educational, employment and economic opportunities and legal protections. The research team recommended that the relevant authorities of NTT communities towards the establishment of loving relationships as an early foundation of later marriages should be acknowledged. School, media and regulatory measures need to be adapted to protect the rights of couples and their children throughout the full course of the marriage process. One element of this might be the effort to advance legal marriage in the sequence to precede traditional marriage contracts.

Pregnancy is not dependent on either traditional or formal marriage. It can be a tool used by a couple to push through marriage negotiations between families on favourable terms. When the pregnancy occurs accidentally, social norms dictate that the young man should immediately propose marriage to the parents of the young woman. If he does not, he is expected to pay a fine of livestock and money to the woman’s family to compensate them for the burden and shame he has caused. In fact, women are often disadvantaged in such arrangements and
lack protections of legal recourse to claim ongoing support for themselves and their children. After interviewing a number of nona punya bayi (unmarried mothers), the research team thought it important to raise the issue of the legal status of women with the local government. It was recommended that legal provisions and legal counselling be provided to NTT women to protect them against inadequacies in traditional systems of dealing with extra-marital pregnancies. Education department policies related to premarital pregnancy are currently limited and negative (expulsion of the girl but not of the boy, and no provision of alternative schooling). There is a need for a provincial initiative to develop positive approaches to the education of all adolescents in ways to prevent premarital pregnancies and to avoid exploitative personal relationships. Part of this should be to come to grips with the great inequities faced by girls who become pregnant while in school.

Traditional marriage (kawin adat) negotiations have broad and deep economic and social implications and involve the couple's extended families and neighbours. Children cannot carry out kawin adat if their parents' kawin adat pinangan (traditional bride price payments) is not finalised. There are regional and social variations in the conventions governing the nature and implementation of marriage payments. Traditional leaders have the voice and the influence to introduce adaptations to traditional procedures. Local government and the National Family Planning Coordinating Board (BKKBN) should consider initiatives to recognise the potential of this influence through meetings to discuss family welfare initiatives, marriage arrangements, and the protection of young women, mothers and children.

Religious marriage generally requires premarital counselling and the posting of bans. Christian marriage is required before children can be baptised. Some parishes require that kawin adat be completed before religious procedures are initiated, and this sometimes has the effect of greatly delaying formal marriage at couples and families disagree over traditional obligations. The justification is to ensure that the marriage has the full support of families and the community before it is solemnised. The Catholic Church in Atambua has recently decided to allow couples to go through religious ceremonies before or instead of kawin adat ceremonies, making the latter a purely personal matter for the couple to resolve. Catholic and Protestant churches throughout NTT should work to simplify prenuptial requirements, so as to avoid procedures or regulations which inhibit or delay religious recognition of a marriage.

Legal marriage requires registration at the sub-district office and the payment of a standard fee. The legal marriage of co-resident parents is required before a child's birth can be registered. Legal registration of marriage is also required of civil servants in order to qualify their family members for various allowances, health insurance and legal rights. It appears that many couples fail to register their marriages because of the long and complex requirements of traditional and religious marriage, combined with the expensive and often inconvenient requirements of civil registration. In some localities, sub-district officials offer to register marriages in isolated villages on a group basis and, in other places, they arrange registrations in churches to coincide with religious services. Local governments should be encouraged to experiment with different approaches to simplify civil registration, including 'fee amnesties', packages of marriage and birth registration, regular visits of registrars to villages, and educedical efforts to stress the positive benefits of marriage registration rather than the administrative sanctions of failing to register.

**Contraceptive decision making**

The strong influence of parents and other senior family members on the contraceptive decision making of young couples appears to be one of the strongest barriers to effective family planning. The cases reviewed in this study raised many questions about the degree to which individual women can be said to have freedom of choice in making decisions of great importance to their health and well-being. Discussions with women, men, clerics and health personnel indicate that most couples have some degree of communication about family formation issues, but this is often focused on promoting fertility if the family size is small or trying for a son if they have only produced daughters. The initiation of child-bearing is less a matter of decision than the acceptance of convention, except in the case of premarital pregnancy where it is regarded as a by-product of decisions about sexuality. The tendency to defer overt, considered decisions about family size until after the birth of two or three children probably increases final family size and promotes poor decision making habits. Institutions and individuals responsible for marriage counselling and family planning services need to promote early consideration of child-bearing options, including purposefully delaying the birth of the first child and spacing births.

Respondents indicated that, while the extended family may have an impact on family formation decision making, it is less a determinant than an element of the environment. The older generation observes, and the younger generation is concerned, that the problems of properly raising and educating children are greater today than in the past and, as a result, young couples desire fewer children and are more open about discussing ways to space and limit pregnancies. The researchers felt, though, that while such changes indicated more communication between husbands and wives, this communication tended to produce agreement by one side (either husband or wife) to the strong opinion or decision promoted by the partner. It was accommodative rather than compromising communication. Family planning counselling and motivation need to foster more effective forms and content of husband–wife communication and decision making so that mutually satisfactory decisions are formed jointly, rather than simply accepted on one side.

The lack of an egalitarian and open pattern of discussion and decision making may in part be due to continued normative
beliefs in the supremacy of male authority in the household and in the broader community. Ironically, while such patriarchal patterns probably inhibit quicker and more sophisticated adoption of contraception, they are supported by government policies and programmes (for example, concerning proper economic roles for women, the workings of women's organisations, and the implicit responsibility for contraceptive use) which accept and promote obsolete notions of male-dominating authority. There seem to be three major arenas for influencing expectations and practices concerning husband-wife communication related to families and family planning. First is the school system, which plays a major role in the socialisation of young people. Second are the community meetings, either of particular church or secular groups, or of general community members. Third is the clinical setting, where group or individual counselling can be offered to couples seeking to adopt contraception. It was observed that, in each of these settings, women often tend to take a quiet, subservient role and in issues of importance often defer to their fathers or husbands. People responsible for such settings probably need training and encouragement if they are to effectively use these opportunities to promote the status and interest of women. Public and religious institutions should all be systematically encouraged to promote equitable participation in organisations, including speaking, voting and leadership. This will be the most effective way of promoting fairness and equity in household decision making.

**Barriers to contraceptive choice**

Quite naturally, people rely on professional advice before making decisions about using contraceptive options that have potential health consequences. Unfortunately, the study found that medical professionals in NTT place quite unnecessary barriers in the way of many options. They often refuse access to methods on the basis of a total misunderstanding of indications and contraindications, and often dictate conditions rather than helping women to understand their options and make their own informed choice of method. The international literature calls these ‘medical barriers’ to family planning. The most effective way to remove such barriers is to ensure that professionals have adequate and correct information on contraceptive side effects and complications, and that they are confident in discussing this information with their patients. This would seem to be a major challenge for both the BKKBN and the Department of Health, the agencies sharing responsibility for training medical professionals.

There are a number of medical barriers to the provision of selected contraceptives to clients. They include the standard operating procedures followed by medical and paramedical staff relating to contraindications (hypertension, varices, ‘flecks’ and various pre-existing medical conditions) and standard advice based on age and parity. These discourage use of hormonal contraception in favour of the IUD (in Kupang) or advocate shifting from implants to injectables (in Timor Tengah Utara). In addition to 'pseudo-clinical' justifications for method switching, it was found that para-medical staff interpreted widespread rumours about contraceptive side effects (for example, about condoms, sterilisation and IUD) as arguments for narrowing the range of methods recommended to clients, who, it was assumed, would never accept certain methods. Unfounded rumours were thus validated rather than corrected by the service providers. All these forms of medical practice narrow rather than broaden the range of choice available.

Conversely, many of the medical practitioners interviewed complained about logistics or other problems which reduced access to effective contraception. For example, it was found that the province has not had supplies of Copper-T IUDs for some months, despite repeated requests for resupply. Doctors recognise that the Lippes Loop is more prone to failure and side effects than the more modern forms of IUD, but they are forced to offer this inferior device because of logistics problems. This is another form of 'medical barrier', but one that is management based rather than provider based. Similarly, the crisis in medical staffing caused by the failure of the contract doctor scheme (dokter PTT) to provide general practitioners to clinics in NTT means that the effective availability of certified providers of implants and sterilisation is compromised.

We concluded that the BKKBN and the Ministry of Health should issue a regular series of bulletins (at least bi-monthly) to all hospitals and clinics to ensure that medical personnel are fully informed of the current recommendations concerning contraindications for specific contraceptive methods. Doctors and midwives should be instructed to avoid the imposition of barriers to client choices without strong medical reasons. Managers should closely monitor logistics systems and medical staffing to ensure that a wide variety of methods is available in NTT.

Sterilisation can be a relatively inexpensive and very effective way to prevent further pregnancies. Despite some religious objections to the use of what is seen as an irreversible form of contraception, sterilisation for both men and women is available in NTT, and there are some indications that there is potential for a major expansion of voluntary sterilisation to meet the demand for birth limitation. However, vasectomy is losing ground in Timor because a number of problems have not been effectively addressed by the family planning programme: the belief that the operation severely reduces the stamina (tenaga) of hard-working men, the misperception that the operation involves castration (kebiri), the fear of impotence, and concern arising from widespread rumours and verified cases of wives becoming pregnant after the husbands' operation.

It appears that some regions with high rates of vasectomy are also regions of widespread opposition to the method. Previous achievements were attributed to forceful government mobilisation of acceptance (in the 1980s), rather than to informed personal preference for the method. As a result, acceptance rates for sterilisation in many regions have fallen in
recent years as authoritarian approaches have been discouraged but educational approaches have failed to fill the gap. Special educational efforts are needed to explain the true nature of vasectomy and the economic advantages of the method. 'Model' users might be called on to testify to their continued high levels of physical strength and stamina. These activities might be combined with efforts to promote recognition of male responsibility for contraception.

The government makes available a wide range of contraceptive options, most of which are provided on a free or heavily subsidised basis. In the long-term, family planning will only be sustainable if a growing portion of the population pays a growing portion of the costs of their own family planning. This requires the institutionalisation of fees for services in a way that still subsidises people with a genuine economic need for government support. In NTT, many people who can well afford to pay for part or all of their family planning service needs expect the government to provide free services. It will be difficult to raise awareness, and break dependencies, without reducing service coverage. Efforts to promote self-sufficiency through reducing subsidies and promoting payment of fees should be strengthened through a programme of information telling the public of the actual costs of production and distribution of contraceptives, so they will understand and appreciate the large and continuing subsidy involved in family planning. Fees for family planning services should be clearly and openly posted in public and private clinics.

The BKKBN target system of promoting contraceptive use was officially abandoned in 1993 in favour of demand fulfilment (pemenuan permintaan masyarakat – PPM) approaches to planning, logistics and programme administration. However, at the provincial level, and even more so at lower levels, the programme is still committed to meeting rigidly fixed prevalence and contraceptive mix targets. Efforts to ensure numeric targets sometimes lead to practices which compromise the quality and safety of services provided to clients. Health and family planning personnel who were interviewed agreed that the target system injected discipline and commitment into their work, pushing them to higher levels of performance than might be expected if there were no administrative pressure to ensure that services are delivered. At the same time, they and their clients noted the unfortunate side effects of this pressure, in the form of inhumane treatment of clients, exploitation of the weak status of the poor and isolated members of the community, and thoughtless use of police and security apparatus in ways which intimidated non-acceptors.

The central government announcement of the 'elimination' of targets was thus seen as a justified repudiation of the excesses of the 1980s, but it is an incomplete measure to raise the quality of services in the 1990s. It is quite likely that some form of 'targets' will always be needed to focus and motivate a large bureaucracy providing health and family planning services. However, these targets should be designed and monitored to guarantee that they enhance the quality, and ensure the supply, of comprehensive services. What are needed are service targets that foster service mentalities rather than target mentalities. Practical interventions are needed. Services should be redefined so that PPM does not refer simply to the act of a single operation, insertion, implantation or injection, but rather to the full range of services required by the procedure, including counselling, routine follow-up checks and the treatment of any side effects. Thus, a PPM for IUD or implantable would be registered only after the one week and one month follow-up checks had verified the successful provision of the service. Reporting and recording practices should send clear signals of a comprehensive service, rather than a simple quantitative target orientation.

**Natural family planning options**

Many people in NTT are attracted to methods of contraception that rely on periodic abstinence, either as a means of avoiding what they see as unacceptable medical risks, or as a means of fulfilling religious goals. The government family planning programme has, at various times, sanctioned such efforts, but to date there has been no effort to provide the advice and support couples need to use these methods effectively.

Despite the large Christian population, and the relatively large number of people interested in non-hormonal and non-mechanical contraception, the status of natural family planning (NFP) methods within the family planning movement remains problematic. While the government has officially recognised the potential for users of NFP to be registered as family planning acceptors (in a letter from then Deputy Haryono Suyono: 3368/KBS-106/E2/1983), this has not been carried out in fact. The acceptor cards for NFP are issued by NGOs, rather than by the BKKBN, and are not recognised as 'official' acceptor cards for the purposes of identification. Users complain that their 'white' cards mean slower service in the clinic than the 'pink' cards of acceptors of other methods.

There is, of course, a need to strictly define the criteria for registering a NFP user, including evidence of training, clear knowledge of the technique, and registration of both partners as 'users'. The programme must obviously rely on self-reporting of use but, in this regard, the method is not different from pills, condoms and contraceptive tissue, all of which assume routine compliance. One of the major advantages of promoting NFP techniques is that the educational requirements have beneficial flow-on effects, through raising awareness of basic human biology, thus providing a foundation for explanations and counselling related to hormonal and mechanical methods. NFP training early in a couple's reproductive career is probably useful as well in establishing more open, equitable communication between spouses on matters of sexuality and reproduction. The research team members thought that the BKKBN acceptance of natural family planning methods should be operationalised by recording proven active users of these methods as family
planning acceptors in the monthly service statistics (perhaps replacing the 'vaginal tissue' column on the form, which in any case lists very few users), and issuing official acceptor cards. Counselling and training in NFP should be part of family planning service delivery. Books, booklets and brochures, as well as training aids, should be made available at hospitals, health centres and health post services centres for use in teaching all clients about the basic principles of human reproduction, as a foundation for understanding and better using techniques of fertility control, including NFP.

'Counselling' is a word frequently used by providers and community leaders in Timor, but there is little evidence that either group or individual counselling is used to broaden the range of contraceptive choices. Even clinical counsellors indicate that they see their job as explaining the action of a single chosen contraceptive, rather than elucidating options and promoting the process of choice by the couple. The majority of Timorese couples of reproductive age are literate and interested in contraception but have no access to written information. Practical pamphlets on correct methods of use, and on potential side effects and complications, should be widely distributed as a part of counselling sessions to overcome the widespread ignorance and misinformation which inhibits efficient use of many contraceptive methods, including NFP.

Conclusion

Family planning is both much broader in scope and much less sensitive to local communities than many development assistance projects assume. The problems faced by women in West Timor have to be explicitly recognised by the community before they can be effectively addressed through legal, administrative and budgetary initiatives. As a first step, though, effort must be invested in the mobilisation of consensus across ethnic and religious groups to accept the major goals underlying a human rights approach to reproductive health. These include the rights of women to legal and social protection from injustice and exploitation in matters of schooling, work and health care. One of the best ways to achieve women's rights is to define and promote men's rights to family welfare, including their right to participate in reproductive health decision making in an informed and responsible way. Such conclusions may seem particularly relevant to Timor, but they are by no means limited to this small Christian enclave. Similar aspirations have been voiced for people in other regions of Eastern Indonesia, and globally, as expressed through the International Conference on Population and Development in Cairo in 1994 and renewed in The Hague in 1999. The challenge now is to turn those aspirations into action through development projects.

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Culture and reproductive health in Irian Jaya: An exploratory study

Terence H. Hull, Demography Program, The Australian National University
Djoko Hartono, Haning Romdiati and Eniarti Djohan, PPT-LIPI

Introduction

Culture has pervasive influences on health and health care behaviour, in both positive and negative ways. To the extent that the socialisation of people can be modified to improve the health impacts of cultures, governments are often willing to invest resources (and power) to achieve these beneficial outcomes. However, the challenge they face is that of identifying the elements of culture that are in need of change, that are open to change and that will clearly lead to improvements. This is territory to be explored with care, since history provides many examples of well-intentioned interventions that either failed to produce the desired changes or produced changes that exacerbated problems instead of solving them. This is particularly the case where the government deals with citizens who have a ‘foreign’ culture — a people who do not share the values and behaviours of the dominant political leadership. Disjunctures of class, ethnicity, religion or race produce gaps between planners and people, and these gaps are filled with misunderstandings.

The case of the indigenous people of Irian Jaya as citizens of the nation of Indonesia is an extreme example of the potential gap in cultural understanding between the producers and consumers of health care services. With planning and budgeting in the hands of bureaucrats and politicians thousands of kilometres away in Jakarta, the ‘tyranny of distance’ is already a major challenge for the appropriate management of health services. Added to this is the cultural distance of Melanesian-Irianese from the major ethnic groups of Indonesia, such as Javanese, Sundanese, Batak and coastal Malay-speaking peoples. This distance is defined in terms of spiritual traditions and contemporary religious adherence; different orientations to trade, travel and concepts of territorial ownership; and varying orientations of family relationships and political and social authority.

This article reviews the need to recognise and deal with cultural gaps between the Dani people of the interior of Irian Jaya and the government servants in Jayapura and Jakarta in designing appropriate and effective initiatives to improve reproductive health. Two points emerge as key issues for policy and development assistance. First is the fact that geographic isolation stands as a major threat to the health and survival of mothers and infants. This is because the costs of overcoming geographic isolation — in terms of transporting goods, maintaining access to services, and placing and supporting trained personnel — are enormous. Second, in consequence, there is little doubt that high priority will have to be given to the training and continuing employment of Irianese to provide health services in the province. This is because reliance on non-Irianese involves high costs to both compensate for isolation and promote adequate cultural understanding.

The field research on which this report is based took place under difficult conditions. When the research team arrived in Jayapura in August 1997, the first reports were appearing of a serious drought in the province. In Waimena, local officials told of their concern that hundreds, or perhaps thousands, of people in remote villages might be suffering from famine. This concern was all the more palpable as reports in the international press told of similar scenes across the border in Papua New Guinea. As a result, the visit to Waimena was not as long as we would have liked, nor could we explore some of the issues of reproductive health in detail with officials since they were understandably distracted by the more pressing issues of identifying famine areas and organising relief. At the same time, the team received a high degree of assistance from local health workers and women with reproductive health experiences, which helped to shape an understanding of culture and the use of primary health care services to deal with problems of pregnancy, childbirth, infections and child care. This paper is a summary of the full report prepared in Bahasa Indonesia.

Basic conditions of health

Unlike the situation found in many areas of Indonesia where team members have worked in the past, the people of the Baliem Valley appear to have relatively low levels of maternal anaemia. Instead, health workers worry about protein malnutrition. This is undoubtedly a result of the dietary practices of the Dani people, who have a comparatively high consumption of sweet potato leaves and tubers and a low consumption of meats and legumes. In this mountainous region, the major causes of illness are upper respiratory tract infection (including influenza), pneumonia and malaria. Diarrhoea, scabies and dysentery — three diseases of poor hygiene — are also common, as are worm infestations, conjunctivitis and ear infections.

The Dani and their neighbours, the Yali and Ngalam, have traditions of hunting and gathering, and histories of intergroup warfare, but in recent years they have become settled agriculturalists. All of these groups place great value on physical strength and recognise illness as a factor robbing them of the
power to work and carry out routine household chores. Symptoms affecting strength are more salient than symptoms causing irritation and, while this pattern may be changing, it still shapes the likelihood of people presenting to health service facilities for treatment.

In common with the whole province of Irian Jaya, the coverage of health care services is measured not only in relation to population but also to land area. The ratio of doctors to people of 1 to 24,000 may sound almost feasible when compared with the ratio of 1 to 7,000 nationwide. However, when the one doctor in Irian Jaya is seen to be serving those 24,000 people over a land area of 3,000 square kilometres, it is obvious that the task is far greater than that faced by colleagues in Java or Sumatra.

Attempts to prioritise reproductive health interventions in the regions around Waimena thus face serious challenges beyond the normal problems found elsewhere in Indonesia. The dimensions of geography and culture exaggerate the scope of the problems. It is to these dimensions that we constantly return when thinking of ways to improve the health and survival chances of mothers and infants.

Antenatal care

Kabupaten Jayawijaya data from the three years prior to the study indicate strange inconsistencies in the trends of use of antenatal care. Two measures are commonly used to capture the coverage of such services: the proportion of women presenting for a first antenatal visit (designated as K1), and the proportion attending for a fourth visit (K4). Over the period from 1994 through 1996, K1 attendance dropped from 27 per cent to 18 per cent before popping up to 48 per cent. Similarly, the K4 went from 16 per cent to 7 per cent and then up to 21 per cent. In part, this seems to reflect problems in identifying the total number of pregnant women (the totals bounced from 12,800 to 13,700, and down to 11,100) in any year, but that cannot fully explain the pattern. It is likely that the impact of local factors (such as information campaigns, weather and economic conditions, and changes in transport services) and problems of data collection also determine swings in the numbers. However, whatever the potential shifts and errors, two things stand out. First, the important first antenatal visits are very low, with the implication that most women miss out on the blood tests and general counselling on nutrition and preparation for a healthy pregnancy. Second, very few women attend a full course of antenatal visits, so the potential to identify and refer women with high-risk pregnancies is inhibited.

Observations in the field suggest that geography is a major barrier to more frequent antenatal visits, but it is geography with a distinctive cultural dimension. Though the region has pressed hard to build more dense networks of health facilities—from puskesmas (clinics) to a variety of associated sub-clinics and maternity huts—the major problem seems to lie less in the physical than in the human capital placed in the region. Hours or days of opening of the clinics are limited, and observation shows that many of the staff are not present even for those limited opportunities to serve clients. Medical staff recruited from other regions of Indonesia understandably find the terrain and societies of Irian daunting, and frequently cluster in cities for companionship and comfort. Even many locally recruited staff find it difficult to live in remote areas with people of different language and cultural groups. The remoteness that fostered the hundreds of languages and cultures in Irian is a barrier that makes attempts to provide trained medical help all the more difficult. It is a barrier that is unlikely to be overcome with rules, higher salaries or exhortation. In the meantime, antenatal care drifts along with little chance of improvement.

Birthing practices

Among the Dani, both the wife and husband have spiritual as well as physical contributions to fulfil at the time of pregnancy and childbirth. In forming the child, the father is regarded as contributing the 'fluid' while the mother contributes the 'blood' over the first months of the pregnancy. As the foetus grows, the role of the blood also grows and the mother assumes full responsibility for the physical maturation of the child. Meanwhile, the role of the father becomes more focused on the satisfaction of traditional obligations. Among some groups, the father is expected to acknowledge all of his 'sins', since it is believed that the child will not emerge if the father has hidden obligations to other people in the village or to the spirit world.

Difficulties in pregnancy also imply obligations on the part of the father—not so much to rush his wife to the hospital, but to conduct appropriate ceremonies or actions to satisfy angry spirits. An important aspect of the sense of complementary roles of males and females during the pregnancy and birth is the division of place in carrying out these obligations. The birth takes place in 'women's territory', with the mother being assisted by a female relative or traditional birth attendant. The man carries out his obligations in 'male territory', away from the family of his wife.

Case studies collected during fieldwork suggested that this territorial gap inhibits communication and, in cases of complications of pregnancy, can lead to serious delays in the transfer of the woman to appropriate health facilities. These delays have two important aspects. First, the geographical and social separation of husband and wife requires effort to overcome. The husband needs to be mobilised to effect the transfer of his wife to the clinic or hospital, and any delay in contacting him can easily translate into delay in arranging transport and making the move. Second, even if it is not difficult to find the husband, the first interpretation many people have of difficulties in delivery is that the husband has not adequately fulfilled his spiritual obligations. Midwives and doctors tell of husbands who, once contacted, immediately carry out ceremonies before coming to assist their wives. In a society where there are strict notions of obligation, guilt and retribution, few relatives or neighbours would have the power to step in to assist

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the woman until the husband agrees to act. For Dani women, assessment of 'risk' in pregnancy needs to take into account familial ties, geographic isolation and spousal understanding, as well as the classic measures of anaemia, oedema and presentation.

Sexual practices and sexually transmitted diseases

Ethnographic evidence, observation by medical staff, and the stories of local people all indicate that the sexual mores of the Dani are quite different from those of most other Indonesian societies. Descriptions using terms like 'sex parties', 'free sex' and 'multiple partners' indicate the views many outsiders have of Dani practices and provide some of the reason for the lack of empathy, and widespread unease, many health care workers display when talking of the reproductive health problems of Dani women.

Frequent traditional ceremonies, variously named *pepek*, *tern* or *hisilum* and involving dancing and feasting, often also include pairing off to engage in sexual relations. For the unmarried, this is one of the major elements of courtship, with young people indicating their choice of marriage partner by repeatedly pairing off with the same person at the ceremonies. Obviously, this kind of sex practice serves social and cultural functions that go far beyond questions of personal pleasure, and thus should not be viewed through the lens of morality of other Indonesian or Western cultures in an attempt to understand the health implications of these ceremonies. At the same time, clinical presentations indicate that these practices are related to high rates of gonorrhoea and syphilis, as well as other sexually transmitted diseases. Local health officials have made particular efforts to control the spread of infections among teenagers by making a special effort to diagnose and treat syphilis among high school students. Unfortunately, these efforts have not been very successful, because reinfection from outside the student population is so difficult to prevent.

While it is probably true that the local society suffers negative health consequences due to prevailing patterns of sexuality, approaches to care that make negative normative judgements about such practices are unlikely to adequately engage the Dani to seek assistance or comply with medical treatment.

Elements of appropriate interventions

Since the gaps between clients and health service providers are both geographic and cultural, and since those gaps are particularly wide among the Dani in Irian Jaya, it is sensible that interventions to promote better primary health care should focus on narrowing both gaps simultaneously. This is particularly true for reproductive health services that face serious gender and moral issues. The following initiatives would offer improvements:

- Develop a cadre of indigenous paramedical health workers and midwives who can be relied upon to be in the local clinics, sub-clinics and maternity huts at all times. In the short run, paramedical staff should be trained to provide first aid and cultural translation services for non-Dani medical staff. In the long run, the paramedics and midwives should receive continuous training to raise their skills to be able to provide care for the most common health complaints and reproductive health needs.
- Train all non-Dani medical staff in indigenous medical understandings and therapeutics. The emphasis of this training should be to empower medical staff to distinguish benign from dangerous practices, and to give them the linguistic and cultural tools to educate local people and practitioners in ways to minimise harm and promote healthy behaviour.
- Negotiate with communities (families, clans and sub-clans) to anticipate and prepare for the potential need to transfer women with problems in childbirth to appropriate medical facilities. Such local planning offers the opportunity to educate whole communities in the need for antenatal monitoring, and specifically brings together the families of both husband and wife to work together to overcome problems with a minimum of delay.
- Promote improvements in local registers of health and demographic data by initiating specific local reporting of basic statistics to leaders and community members. This might be done in conjunction with religious groups, local government offices, or health committees constituted to provide local volunteer support for health personnel.

These initiatives will not solve all of the reproductive health problems of the Dani. Efforts to improve data quality, in particular, may lead to apparent rises in death rates as more accurate recording is attained. However, the main point of these suggestions is to redirect the health programmes to pay more attention to the geographic and cultural gaps, through actions directed specifically to issues relevant to the Dani, rather than models constructed largely on the basis of Javanese experience.
The future of swidden farming communities in the Spice Islands

Adrian C. Hayes, Demography Program, The Australian National University

Many indigenous farmers in Eastern Indonesia still practise swidden agriculture and, like similar farmers in other parts of the world, are at risk of being left behind and marginalised by current development trends. The introduction of technologies associated with the so-called Green Revolution predominantly benefited those farmers, especially on the Inner Islands of Java and Bali, who were already practising irrigated agriculture or who were farming in areas where this could relatively easily be introduced. Indigenous swidden farmers on the Outer Islands of Eastern Indonesia benefited little, if at all. As more of the forest on which their livelihood depends is converted to other uses, and as more prosperous transmigrants buy up the best agricultural land, indigenous farmers are increasingly at risk of being left behind by the mainstream of development.

This, of course, is not the scenario intended by government planners. The government has built schools and health posts throughout the region. Those living in the most inaccessible places are encouraged to relocate to where they can more readily partake of the fruits of development. Government agricultural extension workers visit the farmers to persuade them to give up their slash-and-burn techniques and adopt more 'modern' ways of permanent agriculture. Yet, despite these efforts, there is widespread agreement among experts and officials that development is not working well for many swidden-based communities. The farmers have changed some of their traditional ways in response to population pressure and other developments but still use slash-and-burn techniques and are far from practising modern permanent agriculture. They claim that they are often misunderstood by officials and that programmes offered them are impractical. Clan elders ponder aloud whether anything from their rich cultural heritage will survive. Young people say that they see no future in farming but feel trapped because they lack the skills and resources to plan for a meaningful alternative. There is a palpable sense of frustration and disappointment in many swidden farming communities.

Policy issues

This article addresses the issue of how to construct a more viable path to sustainable development for indigenous farming communities in Eastern Indonesia. In order to better understand the complexities on the ground, fieldwork was undertaken in 1995 and 1996 in the western and northern parts of Seram, in earlier times one of the famed Spice Islands and now part of the modern Indonesian province of Maluku. The main focus of the research was the land-use patterns and resource management practices of indigenous farmers, and how these are changing in response to rising population pressure and other developments in the area, including government programmes to encourage swidden farmers to adopt permanent agriculture.

Traditional subsistence farming in Eastern Indonesia has for centuries been based on swidden agriculture (Monk et al. 1997:693–710). This entails the clearing of irregular patches of secondary forest by slashing and burning, and then planting a selection of food crops in the clearings. Each clearing or kebun is cultivated for one or more years, depending on how quickly the fertility of the soil declines, and then is abandoned to allow secondary forest growth to take over again or tree crops are planted to form a dusun. After a number of years, the community will normally return to a given patch and clear it for cultivation again, and the whole cycle is repeated. The fallow period may be as short as a few years or as long as two or three decades, depending on local conditions and needs. For centuries, the Moluccas were the world’s sole source of cloves, nutmeg and mace, most of it produced by smallholders practising swidden.

Development and environment are interdependent. While the amount of deforestation and environmental destruction due to swidden farming rather than to commercial logging and plantations was often exaggerated by officials in the past (Sunderlin and Resosudarmo 1996), it is true that this form of agriculture is not sustainable for denser populations. Policies aimed at intensifying local farmers’ agricultural systems in Eastern Indonesia and converting them to a form of permanent agriculture have often been unsuccessful, however. They have often failed to take sufficiently into account the fact that the soils and other qualities where the farmers live are generally less favourable for intensive farming than in Java (Donner 1987). Moreover, government planners sometimes forget that swidden farming comprises an entire way of life and is not just a question of farming techniques (Visser 1989); if the transition to permanent agriculture is to be completed successfully, it will involve a total change in culture and outlook for the local communities and not just a change in their technology.

The cultivation and resource management practices of swidden farmers are nonetheless constantly evolving. A sizeable majority of the farmers we interviewed in western Seram reported changes in their farming management practices during...
the last ten years, specifically regarding their overall farming system, their land management and the kinds of crops and livestock they cultivate, but not much change in their use of agricultural tools. They have adapted in response to changed circumstances brought about by transmigration, commercial logging, plantations, improvements in transportation and communication, and increased population pressure. Some swidden farmers sell vegetables and other produce to the burgeoning local non-farm population, although transmigrant farmers are more market oriented and effective in this. Local farmers in the more densely populated areas now practise a transitional form of swidden agriculture which works the land more intensely than their traditional pattern of shifting cultivation. Some of the adaptations - most notably, a progressive shortening of the fallow periods without the aid of chemical fertilisers and other modern inputs - have been made out of necessity in difficult times and are not sustainable in the longer term. The intensification of agriculture has not evolved primarily as an adaptation to indigenous population growth (Boserup 1965), but as a response to other developments imposed on their communities as a result of government policies. It is what Leslie Potter (1998) calls 'imposed intensification'.

When assessing the environmental impact of these changes, it is important to distinguish indigenous swidden farmers from 'forest pioneers' (Weinstock and Sunito 1989), that is, migrants who move into forest areas where access is made easier by virtue of the fact that they have already been commercially logged over. Forest pioneers often have little appreciation of the local ecology and will apply slash-and-burn techniques inefficiently and wastefully. They have no title to the land and may choose to exploit it to exhaustion and move on rather than practise rotational agriculture. The distinction between swidden farmers and forest pioneers is not always made clear by development planners, partly for ideological reasons (Sunderlin and Resosudarmo 1996:5–6). While both practise slash-and-burn, their overall way of farming and use of the forest is quite different.

**Factors undermining the development of swidden farming communities**

There is a complex array of factors currently undermining the successful development of swidden farmers in Maluku. Among the most important are the following.

**Swidden farmers are resource poor**

Swidden agriculture has evolved as subsistence farming. While most swidden farmers in Maluku harvest tree crops (in their *dasun*) for cash, as well as growing their own in their swiddens (*kebun*), most remain poor. They cannot afford the chemical fertilisers and other modern inputs needed to convert to permanent agriculture on a sustainable basis. Under conditions of imposed intensification, they are often too 'investment poor' (Reardon and Vosti 1995) to protect the quality of their land. Assistance programmes relying on expensive inputs are unrealistic.

**The single most important resource they have - their land - is, in effect, shrinking**

Swidden agriculture has been practised for centuries and is sustainable so long as the population density is low and the swiddens are left fallow for 20 or 30 years before being reopened using slash-and-burn techniques. As population density increases, the farmers are forced to shorten the fallow period and the forest can eventually be destroyed. The situation is exacerbated by the growing demands of others - transmigrants, commercial loggers, plantation owners - for the same land resources, and the area of forest left for swidden farmers effectively shrinks, thus making the ratio of population to area of forested land even more unfavourable.

**It is not possible to provide a standard package of agricultural assistance to swidden farmers**

Even within the single province of Maluku, swidden farmers live in a wide range of topographical, climatic and ecological circumstances. Their farming practices and the crops they grow are heterogeneous and adapted to local conditions. It is not possible to provide swidden farmers with a relatively standard package of agricultural assistance in the same way that uniform combinations of higher-yielding crop varieties, pesticides and chemical fertilisers could be offered as a 'technological fix' to millions of Indonesian rice farmers during the Green Revolution.

**Communication between swidden farmers and government officials has, in many instances, broken down**

The Department of Agriculture's extension services promote the national policy of 'seven principles' (*sapta usaha*), which can be seen as rooted in the Javanese experience. Meanwhile, swidden farmers in Maluku have their own culture and way of life. The extension workers offer the local farmers what they think is best for them, such as chickens or new crops, when the farmers say what they really need is help with their land preparation and sago production. Some officials interpret local farmers' lack of enthusiasm for their proposals as proof that they are 'lazy' and 'unmotivated', while farmers see the officials' lack of response to their needs as evidence that they are ignored and undervalued by the government. There is a breakdown in communication because the underlying cultural assumptions are incommensurable.

**Policy recommendations**

The following policy recommendations are aimed at helping local farming communities participate more fully in the mainstream of development, but in ways that respect and build on their past experience of managing Maluku's land resources.
Policies and programmes aimed at swidden farmers should be ‘farmer friendly’

Programmes directed at local farmers should be ‘farmer friendly’ (Hidayati 1998a:3) in the sense that they are culturally acceptable (World Bank 1990:38), they take into account the goals and aspirations farmers have for their own development, and they are designed with local participation. Farmers can be expected to be more committed and more enthusiastic towards programmes with these features than those which are imposed top-down. This broad recommendation is not new (Chambers et al. 1989), but it needs to be reaffirmed and pursued more vigorously (SME 1997:388–92).

Development policies for swidden farmers should respect local knowledge and local institutions and should capitalise on them

Swidden farmers possess a vast knowledge about their local environment (soil conditions, flora and fauna, microclimates, and so on) and about what will grow where. Drawing on this experience helps to ensure that new programmes are viable and that promising possibilities are not overlooked. Indigenous practices of crop rotation and intercropping are generally far more ecologically benign than introduced monocultures.

An important institution in many parts of Maluku is known as *sasi*, whereby a ban is issued on the use of a particular resource in a specified area of land or sea during a specified period (Monk et al. 1997:537–57). Benda-Beckmann et al. (1995) caution against viewing *sasi* solely in terms of its significance for sustainable development, as if this were a case of pre-modern people ‘thinking globally while acting locally’. The institution has diverse functions, which changed during the colonial and post-colonial periods and which vary by locality. Villagers today often say that *sasi* is more important for preventing theft and restoring discipline than for ecological reasons. Nonetheless, *sasi* does have positive environmental consequences and, while government policies in the past have served to undermine it and its associated beliefs and practices (Kissya 1995), a participatory approach to sustainable development could affirm and build on these positive aspects (Zerner 1998:559–65).

More assistance should be provided to swidden farmers to modernise their cultivation of tree crops

Tree crops are the main source of cash for swidden farmers. The predominant tree crops in Maluku today are sago, coconut, cloves, nutmeg, coffee and cacao. The techniques that swidden farmers use to tend and harvest these crops have changed little in a century or more, although the technology has developed significantly on plantations. Improved techniques could raise the cash earnings of swidden farmers, which in turn could be used to reduce the pressure on the ecology from their food crops and their need to slash-and-burn (Noordwijk et al. 1995, Tomich et al. 1998).

Sago is an important staple food for many swidden communities in Maluku and an important part of their culture (Brouwer 1998). Programmes should respect it as such; assistance should be considered in order to improve its cultivation and to explore its commercial possibilities. The potential contribution of sago to food diversification aims is underappreciated by development planners (Hidayati 1998b).

Research needs to be undertaken to facilitate a more fruitful mutual accommodation of scientific and indigenous agricultural systems

Most agricultural research aims at improving the efficiency of modern farming techniques, while most research which has been undertaken on swidden farming uses an ethnographic perspective. Consequently, the two research literatures use different approaches based on different assumptions. There is a need for research which bridges this gap so as to facilitate a fruitful accommodation between the two farming systems.

The *HPH bina desa* (Forest Concessionnaire Village Construction) programme needs to be revised and strengthened so that it can give more strategic assistance to the long-term development goals of local communities

The principle that logging concessionnaires (*HPH*) should devote part of their profits to assisting the development of local communities is sound. Timber companies generally lack expertise in community development, however, and the programme (introduced in the early 1990s) has concentrated on one-off improvements, such as building a village hall or improving a stretch of road, or on developing model cultivation plots based on farming principles developed elsewhere, with little thought as to whether the techniques will be sustainable after the programme's inputs of seeds and fertilisers end.

There is a need to reconceptualise and strengthen the *HPH bina desa* programme, perhaps with donor support, to ensure more local participation in its design and a greater focus on community and agricultural development which is sustainable. More technical assistance is needed for diagnostic studies identifying which kinds of investment – for example, in agriculture, in human resource development so that local people can obtain employment in manufacturing or services, or in practical skills such as managing money and credit – are most likely to help specific communities to develop.

Acknowledgement

This article is based on findings from the Project's research study, *Population and environment issues in Maluku* (Hayes et al. 1999). The research has been collaborative and, although this article appears under single authorship, credit is also due to Deny Hidayati, Herry Yogaswara and Andi Zaelani. The present author is responsible for any deficiencies in the analysis.
Endnotes

1. Geertz (1963:26) cites an estimate that, on average, swidden in Indonesia could support populations of up to about 50 per square kilometre. The average population density of Maluku is still only about half this, but is around 60 per square kilometre for land under 40 per cent slope.

2. The seven principles are: seed variety, land processing, fertilizers, pesticides, irrigation, processing and marketing.

3. This recommendation inevitably raises dilemmas about how to establish equitable national laws at the same time as respecting local cultures, dilemmas which are beyond the scope of this article (Monk et al. 1997:561–73).

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The choice facing migrants from Flores to Malaysia

Suko Bandiyono, Aswatini Raharto and Haning Romdiati, PPT-LIPI

Introduction

Eastern Indonesia is characterised by considerable diversity, both in terms of its ethnicity and its natural resources. During the course of the last two decades, there has been a tendency for more people from the western parts of Indonesia to flow to Eastern Indonesia than vice versa. This is because, although the lack of job opportunities in Eastern Indonesia force many young people from the region to seek their fortune elsewhere, there have been a number of migration flows from Western to Eastern Indonesia which more than counteract these reverse flows. These eastward flows include the following:

• the transmigration programme, which has moved large numbers of people, mainly from Java and Bali, to eastern provinces, especially Irian Jaya and Maluku;
• the placement of government officials from other parts of Indonesia in these provinces; and
• the movement of traders, especially from South Sulawesi, to all the cities in Eastern Indonesia, dominating the markets and shops in Irian Jaya and East Timor and also having a significant presence in East Nusatenggara and Maluku.

Transmigrants are generally from poor backgrounds and have limited education, but the other two kinds of migration outlined above are highly selective in terms of education and skills. The tendency for these migrants to do better than the local population is a cause of considerable jealousy and unhappiness. While economic conditions were improving, this unhappiness could be kept under control, but the situation has become more complex in recent months, when Indonesia has proceeded through high school than previously, and they are finding great difficulty in fulfilling their aspirations through locally available work opportunities. Therefore, they are tending to look further for work. Also, the endemic poverty in much of Eastern Indonesia is no longer accepted as passively as it has been by much of the population. More and more young people are exploring the possibilities of working far away from their province of birth, in order to escape the poverty trap and the impact of the current crisis. Eastern Indonesia already features prominently in the flows of overseas migrant workers, notably:

• from South Sulawesi to Sabah in East Malaysia;
• from East Nusatenggara (NTT) to Sabah and to West Malaysia; and
• from West Nusatenggara (NTB), especially Lombok, to West Malaysia, with a smaller flow to Sabah.

This article will report on a case study of an Eastern Indonesian population which regularly migrates overseas in search of work. This is the population of East Flores, which has developed a pattern of migrating to the state of Sabah in Malaysia. This case study will be used as the basis for considering issues of migration policy.

Illegal migration

The kabupaten (regency) in East Flores with the largest number of migrants to Sabah is Larantuka. Half a century ago, the population of Larantuka, especially those from Adonara, had already Developed a pattern of temporary migration to Sabah. This migration is generally illegal in that it is conducted without work visas. In mid-1996, the number of illegal workers in East Malaysia from NTT, most of whom were in Sabah, was estimated to be more than 10,000, most of them married males. Issues related to labour migrants abroad have recently received considerable attention from the Indonesian Government, from NGOs and from researchers, consistent with the increasing importance of the issues.

Illegal Indonesian workers in Malaysia have caused problems for both the Indonesian and Malaysian Governments. Many studies have shown that, although accurate documentation is impossible, the number of illegal Indonesian workers exceeds the number of legal Indonesian workers. They enter their destination country in two ways. The first is without any immigration documents. The second is with a tourist visa, which they overstay after passing the limit of one month. Both methods are usually assisted by a broker. The illegal migration is actually preferred by many employers because they can exploit the situation by paying lower wages and by not providing facilities and protection to the workers. Viewed from a human rights perspective, the workers are very susceptible to exploitation...
because they are breaking the law. Studies by PPT-LIPI show that they are at risk of being arrested by the police, deported, cheated, tortured and even murdered. Although they face these risks, most of them can overcome the problems they face in the interests of sending remittances to the family they have left behind.

Historical factors have certainly been important in creating this system of illegal chain migration, but the system continues to operate because of the difficulty of arranging to go to Malaysia as a legal migrant worker. The complexities and expenses involved have pushed many potential legal migrant workers into going illegally. In addition, people from NTT who want to work in East Malaysia illegally do not experience any particular problems in arranging it, because:

- there is a straightforward transportation system by sea or air from Flores to Ujung Pandang to Nunukan, the jumping-off point to enter Sabah;
- there are go-betweens to arrange passports and sea transport from Nunukan to Tawao, the port of entry into Sabah;
- there are relatives and friends to accompany the migrants and look after them in Malaysia; and
- there are facilities for borrowing money from relatives and friends (the system being to pay back double the amount borrowed within 12 months, after working in Malaysia).

Because of these factors, anyone from the region can arrange to go at any time. All they need is to bring an official letter saying that they are visiting their family in Kalimantan. In Nunukan, they arrange their passport with the purpose of visiting their family in Malaysia. They then look for work in Malaysia, usually with the help of a caie (broker) or friend/relative who is already working there, or if they have worked in Sabah before they may simply return to their former workplace. The employer (taoke) tends to look after the interests of the illegal workers from Flores because of their good character, hard work and willingness to receive relatively low pay.

Because of their illegal status, these workers often become the target of police operations. Raids on illegal workers are carried out in towns such as Kota Kinabalu, Labuan, Sandakan, Sepitang, Keningau, Lahad Datu and Tawao. The workers who are arrested are brought to the police station in Tawao to await deportation to Indonesia via Nunukan. This situation has become a problem for the provincial government of East Kalimantan, which has to provide accommodation. To avoid being arrested, the illegal migrant workers tend to hide themselves away at their place of work and to avoid unnecessary moving around. Those who are arrested generally bribe the police to let them go. There are also employers who protect their Indonesian workers, even arranging the Surat Perjalanan Laksana Paspor (passport) in order to avoid police raids. Some of the Florinese migrants are legal, of course, having received work permits from Malaysia. In November 1998, as many as 3,000 illegal workers from Indonesia had been made legal by arranging their documents beforehand in Nunukan. At the time of receiving the permit, they had to pay a total of 1,500–1,800 ringgit: 150 ringgit for the passport, a levy of 720 ringgit, a work pass for 420 ringgit, and the remainder for the services involved in arranging the work permit.

In recent times, the situation of illegal Indonesian workers in Malaysia has become increasingly difficult because of competition for available work from workers from other countries, especially the Philippines, and the increasingly tough attitude of the Malaysian Government towards illegal workers.

**Legal workers**

On a national level, issues about contract workers have been frequently discussed in the press and have even been the subject of demonstrations at the Department of Manpower by workers who have been cheated. Indonesian contract workers frequently complain about the shoddy treatment they receive from contract worker agencies and about the inadequate information they are given about their rights and conditions of work, as well as the excessive time taken to place them. In the destination countries, there are complaints about excessively long hours of work, limited access to social services, exploitation, inappropriate kinds of work and low wages. The fact that most contract workers are females lends special importance to these complaints. On completion of the contract, there are complaints about the lack of coordination which forces workers to arrange their own return, sometimes without the agency even being aware that they are returning. From their arrival at the airport until they reach their home village, they are pressured and cheated by irresponsible elements.

Despite these problems, there are many success stories whereby the contract workers are able to accumulate substantial sums of money, increase their knowledge and experience, and improve the economy of the family they have left behind. On a macro level, this means success in job creation and in increasing the regional income.

With specific reference to legal contract workers from East Flores, this has only been happening since mid-1994. The sending of legal workers from NTT has mainly been organised by PT Parco Laut, which has concentrated on sending female workers to Singapore and Hong Kong. Another contract worker agency has been PT Binawan Iati Utama, which has concentrated on sending male workers to Malaysia to work on estates. Up to the end of 1996, PT Parco Laut had sent a total of 368 contract workers from East Flores. This number is far lower than the total number of illegal workers. Although statistical data are not available, from interviews with local people it can be concluded that substantial numbers of people are migrating illegally to Malaysia from almost every village in this kabupaten. The reasons for the very limited numbers of workers taking the option of legal contract work are, among others:
• the limited quota for contract workers from East Flores;
• the lack of knowledge among potential workers about the contract worker programme;
• the administrative conditions;
• the relatively high payments required to arrange contract work; and
• the selection criteria (age, education, health).

In addition, workers who want to go legally to Sabah have to obtain their work visas from the Malaysian Consul-General located in West Kalimantan. This procedure is certain to require considerable time and money. Also, to register to become a legal contract worker, the candidate has to pay a considerable sum of money—Rp. 900,000. This relatively high payment is frequently cited as a reason for not following legal channels. Overall, the option of going illegally is much more appealing.

The two contract worker agencies mentioned above function only as branches seeking workers on the orders of their central offices. The training of the contract workers is not conducted in Flores but, instead, in Malang for Parco Laut and in Lombok in the case of Binawan Inti Utama. The problem is that, after the workers are sent for training, they are no longer the responsibility of the East Flores branch of the enterprise arranging their contract. Similarly, on their return from abroad, the branch of the sending agency in East Flores does not tend to help them in arranging documents and transportation to their home area. Therefore, the problems experienced by the contract workers when they are away from Flores cannot be solved by the East Flores branch of the enterprise. This illustrates the lack of professionalism in the management of the labour contract agencies, for example in failing to take seriously the needs of the returning contract workers.

The advantage of legal contract work is that the worker’s safety is better assured, as their documents are complete. The big problem is the long time required to arrange the documents. Although these arrangements are made by the contract worker agency, the candidate also has to invest considerable time and money- Rp. 900,000. This relatively high payment is frequently cited as a reason for not following legal channels. Overall, the option of going illegally is much more appealing.

Policy issues

There are already regulations relating to the placement of Indonesian workers abroad, but policies now in place are limited to arrangements for sending migrants legally and do not deal with illegal migration flows. Special attention needs to be paid to the issue of illegal migrants, so that resulting problems can be minimised, for example through bilateral agreements. Various international conventions and recommendations concerning the protection and rights of both legal and illegal migrant workers, issued by the International Labour Organisation and the United Nations, can provide relevant input for new Indonesian policies. Also, current regulations do not cover all of the issues faced by legal workers, for example regarding wages and work safety. The Department of Manpower is considering new regulations and, in doing so, should take into account the experience of the Philippines, which is considered relatively successful in managing matters relating to overseas workers. Given that problems of migration are complex, a comprehensive policy is needed, which takes as its starting point the aspirations of intending migrants to widen their experience, improve their family’s conditions and use their remittances productively.

The Indonesian Government has tried to cut off illegal migration flows, but these policies have not succeeded. In the current crisis conditions, it is necessary to consider how to optimise the benefits that can be gained from international labour migration. In this context, is it possible to reduce illegal migration flows?

It must be kept in mind that work opportunities are limited in many parts of Indonesia, particularly at present, and the labour force is continuing to increase more rapidly than the population as a whole. The pressures to migrate abroad can therefore be expected to increase. Unless legal channels for this migration are widened and simplified, illegal migration can be
expected to increase. As a display of initiative in seeking work, illegal migration should actually be supported, but this should be accompanied by efforts to minimise its negative aspects. To achieve this, the following steps are proposed:

- Improve the system of arranging legal labour migration so that it is fast, efficient, decentralised and free of corruption. The Department of Manpower both in its central and regional offices, along with other institutions, needs to exert tighter control over the agencies arranging for Indonesian contract workers, particularly over recruitment practices, training and reporting after returning. In order to obtain feedback from the workers, every prospective worker and workers returning should be called to the regional office of the Department of Manpower to complete a questionnaire and an interview, for monitoring and evaluation purposes. Controls are necessary to avoid mistakes in the process, such as supplying underage workers or false documents. The contract worker agencies are business enterprises, so there is a tendency to cut costs by not properly fulfilling their responsibilities.

- Bring the programme of overseas migration closer to the people. Efforts to socialise people about legal and illegal migration have not been very successful. The lack of clear information about working and living conditions in the destination country put the migrant workers at considerable risk. The potential contract workers have little understanding about their responsibilities and rights as contract workers. Therefore, it is very important to disseminate better knowledge in the areas from which they come.

- Conduct bilateral discussions with labour-importing countries in order to deal effectively with the problems of labour migration. Some of the matters which need to be discussed are:
  - how to protect labour migrants from unfortunate experiences;
  - how to provide better services (for example, health, banking and insurance) during the placement and work period of the migrants;
  - how to arrange transfer from illegal to legal status, for example the policy of the Sabah Government announced in November 1998;
  - the need for a standardised wage system which is beneficial to contract workers; and
  - in the case of Malaysia, the need to establish a consulate-general in East Kalimantan. This would greatly assist and speed up the organisation of entry of legal workers from Nunukan to Tawao.

Conclusion

In the economic conditions currently faced by Indonesia, the attraction of working in a higher-wage country will inevitably increase. Unfortunately, because Malaysia is also facing economic problems, the welcome received by migrant workers may not be as warm in future. This emphasises the need for a close understanding between the Malaysian and Indonesian Governments over migrant labour issues. Both Sabah and East Flores have benefited from the labour migration that has taken place, and efforts are needed to ensure that these benefits to both parties are continued.
Approaches to policy research

Adrian C. Hayes, Demography Program, The Australian National University

What we were trying to do

During the course of the ANU–LIPI Eastern Indonesia Project, ten research studies involving fieldwork were carried out. Each study focused on a particular issue (or cluster of issues) of current concern to development planners involved with programmes in Eastern Indonesia. The aim of our research was always to produce results and analysis which could be useful to officials involved in development planning and development assistance. As stated in the Project Implementation Document, 'the goal of the project is to generate developmentally relevant information and analysis in population-related fields in Eastern Indonesia so research results may be incorporated into development planning and programming.' The methodology we adopted to try to achieve this deserves a comment.

We wanted to avoid a common sequence of events:
1. development planners identify a certain problem which calls for a new policy intervention or response;
2. they recognise that they have insufficient information to ascertain what this intervention should be;
3. a team of researchers is contracted to make the necessary study;
4. the researchers design and carry out their research and, in due course, submit their report;
5. the policy makers learn much about the causes, consequences and characteristics of the problem but are disappointed to find that the report does not discuss policy interventions, except perhaps in very vague terms; and
6. the research is soon forgotten and the report left to languish on dusty office shelves.

This familiar sequence comes about because the researchers see it as their job to provide scientific answers to questions about causes and consequences of the problem, while what policy makers really want are scientific answers to questions about the conditions and consequences of various policy instruments which might be brought to bear on the problem. The first set of answers has some bearing on the second, but precisely what this bearing is requires further analysis. The research report, all are agreed, is 'relevant', but exactly what this relevance is and how it can be used is never made clear. The researchers typically consider it is not their responsibility to fashion policy instruments from scientific findings, while the policy makers rarely have the time or inclination to undertake this further analysis themselves.

Our approach to policy research

The Eastern Indonesia Project was designed to try to forestall the kind of shortcomings listed above. The Australian Agency for International Development (AusAID) first perceived the need for such a project, focusing on population and development issues in Eastern Indonesia, and approached The Australian National University's (ANU) Demography Program in 1990. The ANU team prepared a preliminary proposal based on their discussions with AusAID and a series of consultations with PPT–LIPI and the National Development Planning Agency (BAPPENAS). AusAID then agreed to support the preparation of a complete Project Implementation Document (PID). In September 1991, a workshop was held in Mataram, Lombok, at which the ANU and LIPI researchers were able to sit with officials from BAPPENAS, the National Family Planning Coordinating Board (BKKBN), the Ministry of Health (Depkes), the Provincial Development Planning Boards (BAPPEDA) from Eastern Indonesian provinces, as well as local university researchers, to discuss the issues and research priorities. Following the workshop, the draft PID, dated February 1992, was prepared in Canberra.

The project design embraced a number of 'dialogue and dissemination' activities aimed at keeping communication and consultation open between the researchers, on the one hand, and policy makers, development planners, programme managers and development assistance officials, on the other. The design provided the necessary resources for the researchers to keep in touch with development planners throughout the full cycle of research activities.

The project formally commenced in October 1994. In November, two senior project staff from LIPI and two from the ANU travelled around Eastern Indonesia:
• to meet with provincial and local government officials, academics, representatives of NGOs, and others, and discuss with them local perceptions of population and development issues in the five provinces;
• to collect relevant statistical data, research reports, maps, and provincial development plans available in the provinces; and
• to inform local officials about the project and discuss areas of mutual concern. The team met with dozens of officials, including provincial governors.
Research topics were decided only after lengthy discussions with planning officials in Jakarta and the provinces, and in Canberra. Officials were invited to give their comments on the proposed scope of the respective studies and the approaches to be taken. Eventually, ten separate research studies were carried out, each involving at least one senior researcher from both Indonesia and Australia.

The research team for each study was free to design its own research as it saw fit, but, as components of a common project, the studies shared certain characteristics. Each focused on a problem which could be identified (at least in a preliminary way) in previously available statistical data. Each study involved fieldwork at a limited number of sites in its attempt to clarify and explain the problem and to make policy recommendations. Research sites were selected in consultation with provincial and local officials. Each study relied on a combination of quantitative and qualitative approaches and was multidisciplinary. Each study approached its problem from the perspective of population and development, so that, despite the variety of topics, the studies exhibit a certain 'family resemblance' and complement one another.

A newsletter was published by the project four times a year in Jakarta and widely distributed in Indonesia and elsewhere to disseminate the latest news on research progress in a timely fashion. Each year, an annual research conference was organised by the project, at which the preliminary results of our studies and final research reports were presented and discussed with invited Government of Indonesia officials from both Jakarta and the provinces, and with representatives from AusAID, other donors, NGOs, academics, and others. The first such conference was held in Mataram in May 1996, the second in Kupang in July 1997, and the last in Jakarta (with considerable media coverage) in October 1998.

Towards the close of the project, in February 1999, seven senior members of the project travelled to West and East Nusa Tenggara to conduct workshops in Mataram and Kupang with provincial officials (hosted by the respective BAPPEDA offices) and to collect feedback on the usefulness of the research. In short, the project invested considerable resources in sustaining discussion between researchers and development planners throughout.

**Our experience and conclusions**

Was the approach we adopted successful? Has the research been used by development planners? Indonesian Government officials are on record as saying the research study results and policy recommendations are relevant and useful (see Hull 1999), and AusAID has drawn on the project’s findings and resources to inform its development assistance programme. Nonetheless, it is too soon to give a comprehensive answer. The policy formulation process takes time and rarely do development planners change their policies as soon as new research findings come to light. Moreover, at the time this article was written, the project’s research reports and policy papers are still being distributed, and a few have still to be published. We can offer the following observations, however.

First, our approach did succeed in sustaining open dialogue between researchers and development planners for over four years, and it bridged the gap between the ‘written report’ and ‘sponsored seminar’ subcultures. Looking back on our experiences, it seems to us that our success in this regard was due in large part to the institutional arrangements underlying the ANU-LIPI collaboration. Personal and professional ties between PPT-LIPI and the ANU Demography Program go back more than 20 years. Moreover, the PPT-LIPI team has longstanding relations, both formal and informal, with development planners and policy makers, and it is in regular contact with a range of government agencies at both the central and provincial levels. The methodology adopted to keep the research relevant to development planners built upon and exploited the pre-established social capital at LIPI and the ANU, and did not rely just on the human capital of the researchers.

It is important to recognise that dialogue between researchers and development planners is not something that can be easily introduced on an ad hoc basis with each new policy related research project. A principal reason for so many policy related research studies having had so little impact in the past may be that they were not able to mobilise the required social capital.

Second, even though the project was able to sustain and benefit from a fruitful dialogue between researchers and development planners, some gaps in understanding between the two ‘subcultures’ remained. Several provincial-level officials at the last annual research conference in Jakarta expressed some disappointment that policy recommendations made by the ten studies had not been presented in more operational detail. Some of the recommendations may have been roughhewn but, at the same time, the researchers felt that research of this type is more appropriate to setting ‘menus’ than producing ‘recipes’; the latter process is a matter for project design missions. The lesson here is that it is important early in the dialogue between researchers and planners to reach some understanding of what kind of policy recommendation is expected to issue from the research, and at what level of detail. This will avoid misunderstanding and disappointment later on.

Third, the success of a policy related research project should not be assessed only in terms of the number of policy recommendations which are adopted. Policy formulation takes place in a particular political context, and policy makers necessarily respond to many material and ideological pressures, not just to the results of policy research. Even when research results have informed policy, it is often difficult to document this fact. There are no traditions in Indonesia comparable to Royal or Parliamentary Commissions, gathering information on a particular issue and making policy recommendations which are then officially adopted or rejected by the government. Part
of the value of a project such as ours may be in the way it stimulates and improves policy debate among a broad audience of stakeholders, including but not restricted to development planners and policy makers. An important function of research studies is to refute widely-held myths and stereotypes (for example, children drop out of school because the parents want them to earn money, or swidden farmers are not interested in 'development') which otherwise might serve as the basis for unsound policies and programmes.

The dramatic changes currently underway in Indonesia include an inchoate shift to decentralised budgeting and planning. This will most likely result in an even higher premium being placed on policy related research at the provincial and regency level in future. Development assistance agencies wishing to support such research projects may want to consider the methodological points made above and give careful attention to designing the projects to the type of policy recommendation being sought, the measure of success which will be applied in monitoring, and – perhaps most important – whether the project can marshall sufficient social capital to ensure fruitful dialogue between researchers and development planners.

Endnotes
1. The description ‘development planners’ is used broadly in this essay to include policy makers, programme managers, development assistance officials, and so on.
2. Because of the considerable social, cultural and ecological variation in Eastern Indonesia and the limited number of research sites in each study, we had to be careful not to overgeneralise our conclusions and policy recommendations.
3. The itinerary also included a segment in Ambon (Maluku), but this had to be cancelled at the last minute because of social unrest.
4. As a result of the findings from the project’s Village Midwives Study (see Hull et al. 1998), AusAID asked three project staff to conduct another study of midwives in Nusa Tenggara Timur (NTT) and Nusa Tenggara Barat (NTB) for development assistance programme planning purposes (see Hull, Rusman and Hayes 1998).
5. ‘Many planners and policy makers mentioned the need for operations research to bridge the gap between the ANU-LIPI research results and the needs of project planners to have proven interventions. Such research would be appropriately integrated into development assistance projects ...’ (Hull 1999:9).

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East Timor: Prospects for the future?

Harriot Beazley, Department of Human Geography, The Australian National University

Introduction

The Indonesian Government has announced its intention to move towards autonomy or independence for East Timor. This paper is a summary of a desk study undertaken for AusAID in January and February 1999. The original study presented a brief situational analyses of the principle development sectors in East Timor (health, education, community development and institutional capacity building), and encompassed a comprehensive set of key development indicators (Beazley 1999). In light of the climate of political reform in Indonesia the study was intended to set a framework of possible Australian development assistance to East Timor, after the province gains independence or autonomy. This paper provides some background information on East Timor. It contains information pertaining to the province's population, including its religious and ethnic makeup, and provides an overview of the impact of the Indonesian occupation and the subsequent military conflict. It then focuses on the AusAID study's findings of the level of health and education in East Timor, and the provision of services in these two sectors.

Population dynamics

The population of East Timor is currently 839,719. East Timor is the least urbanised province in Indonesia, with only 8.8 per cent of its people living in towns and cities (Mboi 1996:181). There is still considerable debate over the numbers of lives lost since the Indonesian annexation of the province in 1975. Up to 200,000 people are said to be 'missing' since the invasion (Aditjondro 1994:11). These shortfalls in numbers can partly be accounted for in the refugee exodus from human rights abuses at the hands of the Indonesian military, as well as refugees from the increased religious tension in the province. Lives were also lost due to fighting, lack of medical care, and disrupted food production (causing malnutrition and famine) during the war.

Transmigration programme

Indonesian Government policy has encouraged population mobility to East Timor. In particular, the immigration of Javanese and Balinese rice farmers has been strongly supported. There are reportedly between 150,000–200,000 Indonesian immigrants in East Timor, although most migration to the province has been through spontaneous migration. Many of these migrants enter the informal sector. The transmigration programme is strongly resented by the East Timorese population, who see it as a policy to undermine the Timorese population and ethnic identity.

Ethnic and religious groups

There are over 30 East Timorese ethnic groups, each with their own separate language. Tetum is considered to be the lingua franca of East Timor and has become the language
of 'East Timorese' religion and identity. Portuguese was the official language until 1975 and is widely spoken by those educated during the colonial era. However, Bahasa Indonesia is now the sole language of instruction and communication under the Indonesian regime. In 1997, 70.65 per cent of men and 58.61 per cent of women in East Timor could speak Indonesian. This compares with a national average of 91.45 per cent of men and 85.74 per cent of women able to speak the language in the same year.

In 1975 the majority of East Timorese were animists. In recent years East Timor has witnessed a surge in Catholic membership. In 1980, 17 per cent of the population were Catholic. In 1999, 92 per cent of the population are officially Catholic. The Catholic Church has played a crucial role in resisting the oppression of the Indonesian regime and supporting the rights and welfare of the population, and Catholicism has emerged as an expression of 'East Timor' identity. Islam is regarded by many East Timorese as the religion of the occupier. This is because the overwhelming majority of Indonesian troops, administrative staff, doctors, teachers and transmigrants are Muslim.

**Indonesian occupation and military conflict**

Indonesia's strategy for integrating East Timor into Indonesia has drawn on a combination of tight internal security and efforts to promote economic and social development. The Indonesian administration has cultivated an image of the Indonesian Government having significantly benefited the region. Many people who see the new buildings, schools, bridges and roads built by the Indonesians accept this picture. In reality, however, the process of 'integration' has done damage to East Timor's infrastructure, administration and traditional organisation. It is true that huge amounts of money have been poured into the region by Indonesia: East Timor has been allocated, on a per capita basis, by far the largest amount of Indonesian Government development finance, exceeding even Irian Jaya. It is also true, however, that little of this money has been disbursed into the province due to administrative deficiencies, and much has rebounded back to the Indonesian centres (Soesastro 1989:219–21).

The strategy of promoting development and maintaining internal security has been overseen by ABRI (the Indonesian armed forces). ABRI has a civil as well as military role throughout Indonesia, known as the 'dual function' (dwi fungsi) doctrine. There are up to 14 ABRI battalions in East Timor and numerous government agents in villages for intelligence gathering and command. Numerous reports tell of how the East Timorese people have been systematically terrorised and traumatised by the Indonesian occupation and there is a culture of fear and intimidation throughout the countryside.

Indonesia has never been able to eliminate the East Timorese desire for self-determination, and armed warfare between the East Timorese resistance movement and the Indonesian military continues in the territory. Indonesian counterinsurgency strategies have involved deporting people to outer islands and forcibly removing entire villages off their land to military controlled 'resettlement' camps to separate them from the guerrilla (much like the creation of 'strategic hamlets' during the Vietnam war). This tactic has resulted in populations being concentrated in small areas, without enough land to cultivate.

The intensity of ABRI's approach in dealing with opposition to its occupation has actually reinforced resistance to Indonesian rule in East Timor. Ongoing political tension has hampered development efforts, by limiting the advancement of local skills and human resources, discouraging private or foreign investment, deterring visitors and tourists, and limiting the capacity of local organisations to undertake development activities. In recent months fear and intimidation have driven many people from the countryside to the capital city Dili, as well as to other large towns. This has placed enormous pressure on the already over-stretched resources of family members, as well as on welfare services provided mainly by the Church and local NGOs.

**Health**

East Timor is the poorest of Indonesia's provinces, with a substantially lower income, and a higher percentage of families below the poverty line, than any other region. In 1994, 71 per cent of the East Timorese villages were classified as poor (Mboi 1996:179). Poverty is a key, although not the only, factor leading to ill health in East Timor. Also of significance are the demographic and economic transitions in the region, the spread of education, the impact of war, the processes of urbanisation and environmental change, and the provision of, and accessibility to, health services.

Indonesia's approach to improving health in East Timor has emphasised the expansion of health and information services, and expenditure on health has been high. As a result, accomplishments have been notable in terms of the health services implemented, and the general improved health of the East Timorese people. The Indonesian Government has built numerous hospitals and medical centres, and the ratio of doctors, nurses, health extension officers, and community health workers to the population are said to be good.

**Access and quality of health services**

The effectiveness of all these services are dependent on the quality of human and material resources, and the critical issue of the population's perception and attitude towards the facilities. In spite of the favourable numbers of hospitals and health centres per capita compared to other provinces, the accessibility, quality,
and range of the services are reportedly inadequate, and many of the new buildings are said to lack adequate equipment and medicines. In addition, most health service facilities are still concentrated in Dili and a few main towns, and many people suffer illnesses without medication because they live too far away to attend treatment.

Statistics vary widely, but it is recorded that half of the doctors in East Timor work in the ten provincial hospitals, and that only 16 doctors are East Timorese. The majority of doctors in East Timor are Indonesian and are often sent to the region when they are newly graduated and inexperienced. Despite their lack of experience, new doctors are often put in charge of hospitals and medical centres. Other doctors have not yet graduated and are on obligatory assignments as part of their training from Indonesian universities. It is very difficult to persuade Indonesian doctors to accept assignments in East Timor, and as a result not all health centres have a doctor. A serious management question is how effective these health centres are.

Further, there is a strong aversion to using the government health system among the East Timorese population, particularly East Timorese women. This is because Indonesian doctors and health administrators are often unfamiliar with the local culture and cannot speak Tetum. Many women (especially in rural areas) do not speak Indonesian. This causes enormous communication problems between doctor and patient, as well as problems in the provision of adequate health care and information. Communication problems are further exacerbated by the reported negative attitude of many doctors toward the East Timorese population who complain that medical staff are rude and dismissive towards them.

There is also a widespread fear of the military who (through their 'dual function' role) have been involved in providing health care services to the province. One programme which has particularly generated a lot of fear has been the 'recruitment' of young women to the national family planning programme (KB), which has allegedly involved East Timorese women and girls being singled out and sterilised or injected with Depo without their knowledge. The distrust of Indonesian health services has been compounded by stories of people suspected of political disloyalty being killed by the military through lethal injections while in hospital (Sissons 1997).

Military presence has therefore contributed to a strong identification between health services and Indonesian violence against the East Timorese people. As a result, a deep seated distrust exists towards government health services, with people (particularly women) refusing to take malaria tablets and vitamins, or accept vaccinations, for fear of being sterilised or poisoned. The Indonesian Government's family planning programme also violates the Catholic Church's policy on contraception, and the church has warned women to avoid government health systems where possible (Sissons 1997:140). All these issues reduce the efficiency of health delivery systems, and substantially reduce the health advantages obtained from the favourable ratio of doctors and health centres to the population.

People's health

The nutritional status of a population is a reliable indicator of a community's general health. In East Timor the nutritional status of the people is the worst of all the provinces in Eastern Indonesia, and child malnutrition rates are the highest in Indonesia. In 1991 an Indonesian nutrition survey found that approximately 51 per cent of preschool children in East Timor were malnourished (Dibley 1994).

Infant mortality rates (IMR) and maternal mortality rates (MMR), are also reliable indicators of the overall health of a region. According to government statistics, the IMR has decreased significantly from 93/1,000 live births in 1985 (when the National IMR was at 71.2/1,000) to 85/1,000 in 1990 (with a breakdown of 93/1,000 for boys and 77/1,000 for girls). However, statistics from other sources found that at 149/1,000, East Timor had one of the worst IMR in the world (surpassed only by Sierra Leone, Afghanistan, Mali and Liberia). The high IMR in East Timor is believed to be caused by three factors: the low nutritive condition of the mother during pregnancy; the shortage of qualified assistance during child birth; and limited medical facilities.

MMR are also said to be very high. Unfortunately province specific data are unavailable for Eastern Indonesia, although over 67 per cent of women in East Timor give birth assisted by only relatives. The worst district was Munufahi, where 87.7 per cent of women only had relatives to assist them. This figure is double for that of Irian Jaya, and five times the average for other regions in Eastern Indonesia.

Morbidity

Health data indicates that the major diseases for the population during 1997 were respiratory diseases, followed by malaria, diarrhoea (or related diseases whose symptoms include diarrhoea), skin diseases and tuberculosis. All these diseases are especially dangerous when combined with malnutrition, and are considered to be life threatening in East Timor.

Water and sanitation

The management of scarce water resources is a key issue in East Timor, and the widespread incidence of basic health problems such as diarrhoea, parasitic worms, skin diseases and malaria are directly related to the lack of adequate clean and safe water and sanitation facilities. Most of those East Timorese who have been resettled by military relocation programmes live in poor facilities without any running water or toilets. Only 45.81 per cent of the population have access to private toilets, with 43.29 per cent using other facilities. This compares to the Indonesian average of 28 per cent without access to adequate sanitary facilities (Statistik kesejahteraan rakyat 1997).
Education

The improvement of the education sector has been the main concern of the Indonesian administration, and one of the most significant achievements in East Timor has been the expansion of formalised mass education at primary school level. The Indonesian Government has built primary schools and junior high schools in almost all sub-district towns, and the primary school programme has resulted in high rates of attendance. In spite of the universal education programme, however, not all school age children go to school in East Timor, and not all children benefit from available services equally. In 1997, 46.76 per cent of the East Timorese population over 10 years had never attended school (50.25 per cent of the rural population). This was by far the highest rate in Indonesia, and compares to a national average of 10.27 per cent (13.40 per cent rural). The drop out rates for East Timor are also high in primary, junior secondary and senior high school. In 1990–91, 14.79 per cent of children dropped out of primary school (in all of Indonesia the rate was much lower at 4.14 per cent); 11.13 per cent dropped out from junior high school (8 per cent in all of Indonesia); and 33.84 per cent from senior high school (8.17 per cent). These figures are increasing since the impact of the financial crisis.

Literacy levels and resources

By 1994 illiteracy levels for people aged over ten years had declined from 80 per cent (ten years before) to 52.7 per cent of the population; this compared to a national average of 14.3 per cent, and was the highest illiteracy rate in Indonesia. The overall quality of education, particularly basic education, is said to be much lower than expected by Indonesian national standards, and education facilities are relatively deficient in terms of access to books, laboratories and quality instruction. There are complaints, for example, that primary school pupils cannot read or write, and that materials for fourth grade are being used for fifth grade. This is partly due to inadequate facilities such as books and supplies (which all come from Java), to support the teaching-learning process.

Access and equity

In East Timor even the lowest level of education is not accessible to the very poor, and urban residents have a more favourable access to educational opportunities than rural residents. The issue of equity in schooling affects disadvantaged groups, particularly the poor, linguistic and ethnic minorities, and street and working children. The difference in access to education between boys and girls is also a serious issue, and gender differences still persist and actually widen with each rising level of schooling (Sissons 1997). Although school is supposed to be free, children complain that they have to buy school books, pens and the compulsory uniform, and pay for transport to and from school. Another common problem is that children in rural and isolated areas find it very hard to get to school if there is no transport. There is also a problem for children who have to work for part of the day, and who find it difficult to fit school into their work hours. In addition, the health and nutritional status of many Timorese children is poor, which results in poor concentration levels and difficulties in following classes.

According to one Indonesian press report, in 1992 East Timor was in need of an additional 2,500 qualified teachers, as well as housing for teachers, books, and other educational aids. The constant need for qualified teachers has involved recruitment from throughout Indonesia, and many teachers in the province are from outside the province. One recent 1999 report states that of the 3,698 teachers in East Timor, 427 are East Timorese. The others come principally from Java (1,205), and NTT (1,353). This situation has resulted in similar complaints to those about doctors: that teacher's from outside do not understand the local population, do not speak a local language, and lack cultural sensitivity. Teachers themselves complain that East Timorese children have short concentration spans, come late to class, do not wear uniform, and are disobedient and undisciplined (Mubyarto and Soetrisno 1991).

Human resource development

There has been a failure to empower the East Timorese in public or private enterprise. The poor quality of human resources in East Timor is primarily due to the poor education system, poor health conditions, low incomes and a lack of East Timorese entrepreneurial opportunities. As a result much of the administration and trade needed in East Timor is provided by migrant (Indonesian) workers. There are few training facilities available to train local people for these positions (such as adult education colleges).

Only a few East Timorese civil servants have managed to reach the upper level strata of the bureaucracy (Saldanha 1994). Most East Timorese are concentrated in the lower levels of provincial government hierarchy, while the higher levels of the bureaucracy are principally occupied by outsiders from other parts of Indonesia, mainly Java. As a result, many East Timorese who have trained overseas or in Java stay there to take up employment, and many young people remain unemployed or join the increasingly crowded informal sector.

Unemployment

A crisis situation is emerging. With few employment opportunities and severe competition for existing jobs, the prospects for poor East Timorese youth are bad unless they have important connections into work. An increasing perception exists that positions in the job market are closed off to East Timorese, and for these reasons many young people do not see the point of going to school (Mubyarto and Soetrisno 1991:55). They cannot see the connection between the knowledge they receive (with a curriculum which stresses Indonesian history
and national philosophy), and regard it as irrelevant for real life. Parents are also sceptical about the benefits of their children attending school, and prefer them to work and contribute to the family income. As well as reports of the growing numbers of marginalised and unemployed youth, the increased numbers of children working on the streets of Dili is also being reported. Many of these street children are escaping poverty and conflict in the countryside.

Conclusion

This article has identified some important social, economic and political aspects affecting the lives of the East Timorese people as they approach their uncertain future. A review of the education sector reveals that there are four interconnected problems facing education in East Timor: accessibility, cost, quality and relevance. These issues have contributed to the increasing number of drop out rates at all levels of schooling. In addition, public health data reveals that a significant proportion of the population suffer from treatable diseases. These diseases can be managed with basic health education and improvements in water and sanitation.

The prospect of a quick independence has raised fears of a heavy aid burden for the Australian Government, of damaging civil conflict between opposing East Timorese factions, and of the collapse of the health and education services which are mainly staffed by Indonesian professionals. Pro-independence leaders, however, stress that East Timor's share of the Timor Gap oil and gas deposits (which they anticipate will be relinquished to the province by Indonesia) will be sufficient to ensure the region's economic survival. They also stress that there are many highly educated East Timorese (currently living overseas) who are ready to step into positions of government and business.

Whatever the outcome of the referendum this August, it is clear that human development is one of the key issues to the future of East Timor. Substantial levels of funding and personnel are required in education and skills training, so that the East Timorese can prepare themselves for Independence (or limited autonomy). There is also an urgent requirement for training support in relation to provincial government and administrative positions. Training centres need to be established and improved to educate East Timorese for legitimate roles in their own government, and special training is required to create more opportunities for the East Timorese in administration, management, health, trade, manufacturing, and services. It is vital to upgrade the skills of existing teachers and instructors, and to train many more local teachers. This is particularly important since the mass exodus of Indonesian teachers and other government personnel from the province due to the increased political and social unrest.

Endnote

1. As an incentive, an Indonesian medical degree requires three years training in a difficult post (East Timor) or five in easier ones (Java and Bali).

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East Timor: The hard road to self-determination

Geoffrey Hull, Linguistic Survey of East Timor, University of Western Sydney Macarthur

Only a few hundred kilometres off Australia’s northwestern shore, a life-and-death drama has been unfolding on the island of Timor for the past 25 years. The struggle of the East Timorese people for survival and freedom has captured the imagination of the Australian public and made a strong appeal to our moral sense. Thanks to an awareness campaign kept alive by the Indonesian troops entered the former Portuguese territory in December 1975, most Australians feel deep sympathy for the plight of the East Timorese and support their right to self-determination, despite the claims of Jakarta.

But behind the political and humanitarian issue of East Timor is a country of many complexities and contradictions, one which few Australians have had the opportunity to explore. To date our relationship with East Timor has been one of interest and involvement in the big island to its east, New Guinea, Timor had received scant attention from Australians before 1975. It is strange to think that the geography and history books of Australian schools practically ignored the existence of a neighbouring land which was not only the oldest European possession in this part of the world, but the base from which, as long ago as 1523, the three caravels of the Portuguese explorer Cristóvão de Mendonça apparently sailed to Cape York and down the east coast of Australia, rounding Cape Howe and perhaps venturing as far west as Warnambool.

This intrepid voyage (if Kenneth Gordon McIntyre is right in his reconstruction of it) was kept a secret by the Portuguese, who knew that they had strayed into waters claimed by their rivals the Spaniards. A Portuguese and, later, Spanish presence along the coasts of northern and eastern Australia had long been suspected, but this was not a mystery that the Portuguese conquerors of the continent had any interest in penetrating. Nor would later writers of Australian history have anything to say about our army’s violation of Portuguese Timor’s neutrality during World War II, an action which precipitated a brutal Japanese invasion and plunged the colony into a bloody civil war. Timor’s one and only claim to fame in Australian history was its being the island that Captain Bligh reached in an open boat from Tonga after the mutiny on the Bounty in 1787.

Actually, the part of Timor where Bligh and his starving companions landed was Kupang, held by the Dutch. Most of the island was then still under nominal Portuguese rule. Portuguese sailors from Malacca had first sighted Timor in 1512 on their way to the Moluccas to buy the spices so much in demand in Europe. Only later did Portugal realise the value of Timor as a source of another fragrant commodity: sandalwood.

As elsewhere in Asia, Portugal’s mission was twofold: the quest for new riches competing with a passionate zeal to relive and perpetuate the Reconquista by checking the spread of Islam and gaining new souls for Catholicism. It isn’t surprising then that the first Portuguese colonisers were Dominican friars who doubled as traders and soldiers. Timor’s destiny was to become Lisbon’s last stronghold in Southeast Asia, the one territory the Portuguese were able to keep after their Dutch rivals robbed them of Malacca, Macassar, Ambon and, as late as 1859, Flores and Solor. The Dutch had occupied the Portuguese fort of Cupão (Kupang) in 1653, but it wasn’t until the end of the nineteenth century that they managed to extinguish the last vestiges of Portuguese power in the area now forming West Timor.

The Dutch had great difficulty in conquering the western part of Timor because of any opposition from a Portuguese army. The real rulers of West Timor were the so-called topasses or ‘Black Portuguese’, an elite of mixed European and islander blood who, though Christian and Portuguese-speaking, fiercely resisted every attempt by Lisbon to impose direct European rule. The ‘White Portuguese’ governors of Lifau (in the modern Oecussi enclave) had so much to suffer from topasse aggression that in 1769 they finally gave up and moved their capital east to Dili, remaining there ever since. Exasperated by Black Portuguese treachery, the flying governor futilely offered Lifau to Holland, but the Dutch were too afraid to accept it, and the old capital and the district around it would continue to be nominally Portuguese territory after the Dutch had finally succeeded in destroying topasse power in the West.

In East Timor, Portugal was able to maintain its rule only by making alliances with the indigenous kings or liurais, on whom the governors lavished Christian baptism, Portuguese names and aristocratic titles. In return for this welcome into the Portuguese pewrage and the Bark of Peter, the liurais joined the Europeans in their campaigns against the Muslims and the Dutch and enthusiastically embraced aspects of Portuguese culture that harmonised with native institutions. Even the kings’
animistic subjects venerated as a *lulik* or sacred symbol the red and green flag of Portugal.

Portuguese missionary endeavour was weak in the early centuries, more from a lack of manpower than from a lack of fervour, especially between 1834 and 1874 when an anti-clerical government in Lisbon excluded priests from the colony. New Catholic missions were launched in the 1880s, but Portuguese Timor remained part of the diocese of far-off Macao until 1940 and by 1974 only one-third of the population had embraced Catholicism.

The Portuguese rarely used compulsion in seeking conversions from the Timorese. There was also considerable tolerance of animist customs that didn't conflict with Christian doctrine, and the animists' sympathy to the missionaries (who were the main providers of education, medical care and defence against the occasional injustices of the colonial authorities) advanced the spread of Portuguese civilisation throughout the colony.

Assimilation, not integration, was the colonial policy pursued by Portugal and its fellow Catholic powers, Spain and France. Whereas the Dutch (like the British) generally left their colonial subjects free to practise their indigenous cultures and religions, the Portuguese believed firmly in their 'civilising mission'. The ultimate goal was to make the East Timorese fully Portuguese, in speech as well as in culture and religion. In schools full-blood indigenous children were told that they were no less Portuguese than children born and bred in Lisbon or Oporto. Timorese schools taught nothing about local culture: their pupils studied only the language, literature, geography and history of the 'mother country' and were punished for speaking their native dialects which were expected to disappear with the eventual spread of Portuguese civilisation. In 1951 when Salazar proclaimed the full political integration of East Timor into Portugal as an 'overseas province', there was no objection from a population whose native hierarchy had long since embraced a Portuguese identity.

The Portuguese imprint on East Timor was not only political and cultural. From the first the Kings of Portugal had encouraged their colonists to marry indigenous women, to convert them to Catholicism, and bring up their mixed-blood offspring as Portuguese-speaking Christians. If the Portuguese could be accused of materially neglecting East Timor, the Cindrella of their Empire, they could hardly be accused of racism. Portuguese blood runs in the veins of a considerable slice of the Timorese population today, and the exotic mix has been increased by generations of intermarriage between Timorese and other non-European subjects of the Portuguese Empire: Goan Indians, Macanese Chinese and Mozambican Africans (most of the latter brought to East Timor as soldiers to put down the last native rebellion in 1912).

In language, too, the Portuguese imprint in East Timor is enormous. Tetum, the *lingua franca* of the territory, is an Austronesian language that has been radically transformed by the addition of Portuguese loanwords, sounds and structures. Quantitatively and qualitatively the impact of Portuguese on Tetum is broadly equivalent to the French influence on English after the Norman Conquest. In colonial times the Portuguese used Tetum (a simple creole language) to communicate with their mainly illiterate subjects, only a minority of whom ever learned Portuguese.

This *lingua franca* was necessary in a country where at least 13 different languages were spoken. Ten of them are Austronesian (like Tetum and Malay): offshoots of dialects brought by Proto-Malay settlers from Muna, Buton and the Tukang Besi Islands of southeast Celebes probably no more than one thousand years ago. Three of the languages of East Timor (Bunak, Makasae and Fataluku) are, by contrast, of Papuan origin: pre-Austronesian languages introduced from the Bomba Peninsula of northwestern New Guinea about three millennia ago. The rich linguistic tapestry of East Timor was thickened by influences from the vernaculars of the Central Moluccas and Macassar and by a strong infusion of Bazaar Malay in the pre-Portuguese period, when Muslim spice-traders visited the island in search of its sandalwood and beeswax.

The population of East Timor was basically a blend of Proto-Malay and Papuan before the men of Portugal and the Portuguese Empire added their genes to the local pool. With only a tiny community of foreign Muslims and a small minority of southern Chinese (the colony's trading class), Timor was ethnically very diverse from Java and the other islands of Western Indonesia where the population was prevalingly Mongoloid in race and Islamic in religion. This being the case, President Soeharto might have thought twice about his plan to turn half a million Luso Timorese into average Indonesian citizens.

Ironies

There are several ironies surrounding Indonesia's disastrous annexation of East Timor. The first is Jakarta's faith in its ability to 'liberate' and 'integrate' into the mainstream of its national life a population that had already been well integrated into Portuguese civilisation. When the Indonesian army invaded in 1975, East Timor was already free. With the fall of the old right-wing dictatorship in 1974 all the Portuguese overseas provinces were suddenly offered independence - a possibility barely contemplated in the past, at least in Timor. Although the interim coalition government of the leftist Fretilin Party and the conservative UDT came undone in the civil war of August 1975, and despite the fact that Fretilin's unilateral declaration of independence the following November gave Soeharto his pretext to invade, the 'province' officially annexed by Indonesia in July 1976 was not an oppressed colony but an emerging (if politically unstable) nation-state with no desire to abandon its Portuguese cultural heritage.

For the political instability which was an expansionistic Indonesia's opportunity, Portugal was largely to blame, both the former Salazar-Caetano régime, which prevented the
development of democratic institutions in East Timor, and the new socialist regime, which, preoccupied with troubles at home, failed to supervise the transition to independence and abandoned the Timorese to their fate when the civil war broke out.

A second irony of Indonesian rule has been the fact that the cruel and murderous circumstances of the annexation led not to the extinction of Portuguese culture in East Timor, but to its strengthening. Today, 24 years after the invasion, Portuguese is still widely spoken in East Timor, not just by older people, but by many young people educated under the Indonesians. The Tetum language, at least in its written form, still draws on Portuguese for its higher vocabulary and refuses to admit loanwords from Indonesian. The position of Tetum in the territory is stronger than ever before, thanks to the Indonesians' banning of liturgical Portuguese, a decision that resulted in Tetum becoming the language of the churches, the last bastions of national identity.

The third irony is that whereas only some 30 per cent of the people were Christians in 1975, practically the whole indigenous population is Catholic today, as a result of the Indonesian state ideology of pancasila, which requires all animist citizens to embrace one of the world religions. That the traditionally sympathetic animist population of East Timor would choose Catholicism en masse and not waver in favour of Islam was a foregone conclusion. The frustration experienced by post-invasion Muslim missionaries is illustrated by the story of the animist chief who was unsure whether to choose Catholicism or Islam for his subjects. The Muslim 'deal' was sounding good. 'If you become a Muslim you can have several wives', the proselytiser assured him. Then the Indonesian added: 'Of course, if you embrace our faith you must never eat the flesh of pigs again.' The pagan chief needed no more convincing. 'Good', he said, 'I will become a Catholic.' If one thing is unthinkable to a true Timorese, it's a diet without pork!

Apologists of the Soeharto regime make much of the fact that Jakarta has poured a great deal of money into its new province, paving roads, extending modern conveniences and services, setting up new industries, building schools and churches and founding a university. But Javanese materialism, wounded by the pride and ' ingratitude' of a population preferring diversity and their commitment to the pursuit of self-determination, either within the political context of Indonesia or in that of a sovereign state. In the latter scenario (the one evidently preferred by most of the population), the relationship between an independent East Timor and the Indonesian Republic will be a crucial one, and one on which the political stability of our region will depend.

For the East Timorese and their friends this is a time for reflexion and planning, so that by understanding the past and tackling the problems of the present, the foundations of a brighter future might be carefully laid. Among the many contributions being made this year by Australians is a series of academic conferences to study the many faces of East Timor and to contribute at a scholarly level to the ongoing planning process. It is our hope that the Sydney July conference organised by the University of Western Sydney Macarthur in collaboration with Macquarie University will take the achievements of the Melbourne April conference and The Australian National University, Canberra, May conference one step further towards a better understanding of East Timor and its needs as an emerging nation whose place in the southern sun is long overdue.

Geoffrey Hull is convenor of the international academic conference East Timor towards self-determination: The social and cultural questions, to be held at Parliament House, Sydney, 15–16 July 1999 (see Conference calendar for details).

April 1999
Ambon's second tragedy: History, ethnicity and religion

Richard Chauvel, Department of Asian and International Studies, Victoria University of Technology

Pattimura is Ambon's only Indonesian national hero. In 1817 he led the most significant revolt during the three centuries of Dutch rule. The revolt is celebrated each year on 15 May with villagers carrying a torch between Saparoa where Pattimura's revolt occurred to Merdeka Plain in Ambon Town, where there is a statue to his memory. The torch is lit in an adat (traditional) ceremony on Gunung Seniri, where Pattimura and followers plotted, then taken by a relay of runners across Saparoa island, by boat to Tulehu, and on to Ambon Town.

In the approach to Ambon Town, the torch has to pass through Batumerah and Mardika, where four months ago the violence started. By tradition runners from Batumerah, a predominantly Muslim urban kampong, carried the torch to Merdeka Plain. This year as a gesture of reconciliation, the organisers wanted the Batumerah runners to pass the torch to their Christian neighbours in Mardika.

Awaiting the arrival of the torch on Merdeka Plain were the governor and other provincial dignitaries together with the Army Chief of Staff, General Subagyo. This year the celebration of Pattimura's revolt was to be combined with the restoration of the military unit that bears his name as a military region (KODAM).

In recognition of the violence that had engulfed Ambon since January, the relay was to be held in daylight rather than in the evening, as was the usual practice. This proved to be insufficient precaution. Instead of the planned transfer of the torch from Batumerah to Mardika runners, a violent clash occurred between residents of the two kampungs. Security forces fired into the rioting crowd, killing seven people and about 15 were wounded. A few military vehicles were destroyed and several more houses burnt, adding to the death and destruction that has become part of life in the Ambonese islands since January.

The Pattimura torch never reached the assembled dignitaries. The Pattimura Day violence took place just three days after Ambon's political, adat and religious leaders, together with Muslim and Christian youth and representatives of the Sulawesi migrant communities, signed a peace pledge in the presence of Jakarta's Defence Minister and Armed Forces Commander. General Wiranto received a torch of peace that had been carried in the analysis of the violence in Ambon. First, Ambonese Christians and Muslims share a common adat and historical experience. The Pattimura Day celebrations were an opportunity to rekindle the solidarity of Ambonese society. Pattimura was a Christian, but his followers came from both communities. Muslim Batumerah's participation in the celebration suggests that this remains significant. The shared adat rituals were part of the lighting of the torch on Gunung Seniri and the relay to Ambon. The common adat and shared historical experience seems no longer strong enough to bridge the religious divide.

Second, the peace pledge and the Pattimura Day deaths demonstrate not only the intensity of conflict between Ambon's religious communities, but also the diminished authority the elite exercises over Muslim and Christian Ambonese society and the Muslim immigrant communities. The peace pledge was an elite attempt at reconciliation, but its signatories could not make it stick in the broader society, in this case among the youth of Batumerah and Mardika. The security forces have proved fragile instruments of authority, where mass violence is directed towards other sections of society rather than against the state.

Third, although the violence in Ambon is not principally directed against the central government in Jakarta, it does involve issues of provincial autonomy. The use of Pattimura Day to restore Maluku's military to KODAM status was designed to redress the slight felt when Maluku was incorporated in a KODAM based in Irian Jaya. The leadership of the provincial parliament had requested Wiranto to restore Pattimura to KODAM status. The appointment as commander of Brigadier General Max Tamaela, a Christian Ambonese, provided Pattimura its first Moluccan commander in over three decades. Tamaela's appointment also gave a more balanced appearance to provincial leadership, providing a counterpoint to Muslim Ambonese Governor Saleh Latuconsina.

Unprecedented violence

On 19 January, a fight broke out between a Christian Ambonese mini bus driver and one or more Buginese in the Mardika bus terminal/central market area of Ambon Town. The fight escalated as the combatants returned to their respective neighbourhoods to gather supporters. In the violence that ensued, several houses were burnt. Buginese migrants have a strong position in the market and the local transport system and fighting between them and Christian Ambonese is not uncommon (Human Rights Watch 1999). Why and how this unexceptional event became a catalyst for the violence that has engulfed the Ambonese islands, and other areas of Maluku, is
the central problem. This paper will discuss the historical, social and political context in which the violence has taken place.

After four months of violence the death toll is around 300. Tens of mosques and churches have been destroyed, along with thousands of houses, numerous schools and government offices. The major market areas have been destroyed and much of the town laid waste. The food distribution system is barely functioning.

The duration, extent and nature of this death and destruction are unprecedented in Ambonese history. A previous high point in communal tensions was during the revolt of the Republic of the South Moluccas (RMS) in 1950. At least one Muslim village, Kailolo, was razed by Christian RMS soldiers, as much for suspected pro-Indonesia sympathies as for religious reasons. During the last century and a half of colonial rule, including the Patrimura rebellion, there were no instances of Ambonese Muslims and Christians killing each other on this scale. To assert that this year's violence is unprecedented does not imply acceptance of the idealised vision of religious harmony—Ambon Manise—of which so much has been made in the Indonesian and foreign media. This ideal is important in so far as many Ambonese, Muslim and Christian, as well as other Indonesians, have subscribed to it. However, the sectarian divide is the key to understanding the dynamics and structures of society in the Ambonese islands.

Like the rest of Indonesia, political, ethnic and religious conflicts in Ambon were for the most part effectively suppressed, but left unresolved, in the three decades of Soeharto's rule. The surface harmony gave few signs of the dynamics and tensions within a society experiencing rapid social change. Ambon's last period of relatively open politics, from the end of the Pacific War through to the late 1950s, provide some insight into the changing relationship between politics and religion.

The great political issue was whether Ambon should be part of an independent Indonesia and, if so, within what sort of constitutional structure. During the revolution political alignment cut across the sectarian divide. The leadership of the Ambon-based pro-Indonesia groups that dominated Ambon politics was Christian and Muslim and support came from both communities. The prominent Java-based Ambonese supporters of Indonesian independence—Latuharhary, Leimena, Latumenten, Siwabessy and Latumahina—were Christians. The other side of politics, those who initially wanted to separate from Indonesia and remain part of the Kingdom of the Netherlands and later supported the proclamation of an independent RMS, were predominantly but by no means exclusively Christian, as were the former colonial army soldiers who gave the RMS its military capacity. Nevertheless, the support of Ibrahim Ohorella, Raja of Tulehu, and other Muslim Raja was critical to the 'success' of the proclamation of the RMS. Along with Manusuma and Soumokil, Ohorella was one of the key conspirators. Without his initiative, organisation and support it is difficult to imagine the RMS being brought into existence. Ohorella was the only Muslim member of the RMS Cabinet, but the participation of Muslim Ambonese in the administration was quite extensive. One of the most respected Muslim leaders during the current tragedy held a senior bureaucratic position in the RMS administration.

The RMS, its proclamation and suppression, was the first Ambonese tragedy. It was the worst conceivable way in which Ambon could have become part of independent Indonesia. The RMS leaders played no further part in Ambon politics. They were killed, imprisoned or escaped into exile. The Ambon-based pro-Indonesia politicians were discredited. Their dominance of post-war politics notwithstanding, when the crunch came they had failed to convince their fellow Ambonese that the future was as part of Indonesia. The Ambonese who won the fruits of independence—the senior civilian and military positions in post-RMS Maluku—were the Java-based pro-Indonesia Ambonese, many of whom had a tenuous base of support in their homeland. The RMS significantly heightened religious tensions in Ambonese society and brought about a realignment of political loyalties along religious lines. In the 1955 elections the Masyumi (modernist Islam) and Parkindo (Protestant Christianity) emerged as the biggest parties, roughly reflecting the demographic balance between Christians and Muslims. Some of the Christian and Muslim leaders of the pro-Indonesia Partai Indonesia Merdeka attempted, with little success, to re-establish a non-sectarian political base under the PNI banner (Feith 1957:78–9).

**Decolonisation and the changing political and demographic balance**

Independently of the RMS, decolonisation brought fundamental change in relations between Christians and Muslims. Their respective experience of the colonial experience was radically different. Christian Ambonese were part of the colonial enterprise. They had privileged access to education and employment in the colonial state. As government officials, professionals and soldiers, they occupied a grey area between the ruler and the ruled. Many of them felt superior to other Indonesians and considered that they had a special relationship with the Dutch. During the last 80 years of Netherlands India, there was an exodus of Christian Ambon's most ambitious, brightest and fittest.

Muslim Ambonese were largely excluded from colonial enterprise. The first schools were established in Muslim villages in the 1920s. Sons of the Muslim adat elite were permitted to attend Dutch language schools from about the same time. This group, the first generation of educated Muslims, were politically significant during the Revolution and have grown steadily in influence and status since independence. The present governor and his immediate predecessor are Ambonese Muslims.

Decolonisation meant the respective communities' relations with the authorities in Jakarta was transformed. While the Dutch
remained, Ambonese Christians felt that they, as a small religious and ethnic minority, had a special link to the government. That was broken. The inclusive ideology of Pancasila notwithstanding, in the eyes of Christian Ambonese all the governments of independent Indonesia have been Muslim dominated, perhaps none more than that of President Habibie. The Christians' dominance of all colonial society has ebbed away. Advantage in education and access to employment opportunities has slowly disappeared.

Underlying this shift in political and social status, has been a long-term change in the demographic balance between the two communities. In the last colonial census of 1930, the Protestants constituted 66 per cent of the 'Ambonese' in the Ambonese islands and Muslims 33 per cent. Butonese were the largest immigrant group making up about ten per cent of the total population of the islands. By the end of the colonial period it was thought that balance had shifted towards a 55–45 per cent split and recent estimates suggest a society equally divided along religious lines. The demographic change has come about through Christian emigration and the immigration of non-Ambonese Muslims, mainly Buginese, Butonese and Makassarese from South Sulawesi. The latter groups dominate the market, local transport and much of the unskilled urban labour force. This pattern of migration and ethnic segmentation of the labour force is not unique to Ambon in Eastern Indonesia. The initial catalyst on 19 January was a fight between Christian Ambonese and Muslim migrants in the Mardika market and much of the subsequent violence in Ambon Town has followed the same pattern.

These shifts in demographic balance, political and social status are important for understanding the context of the recent violence for a number of reasons. First, although there has been a shift in power and influence from Christians to Muslims, the more important transfer of power has been from the provincial elite to the central government. The Ambonese elite, both Christian and Muslim, have lost authority to 'Jakarta'. By the simplistic measure of the number of governors each community has produced, the score is three Muslims, including the two most recent ones, to two Christians, both Sukarno era appointments. Using the same measure, there have been many more outsiders as governors. The significance of Tamacle's recent appointment as commander of Pattimura was that his only Ambonese predecessor was Colonel Herman Pieters, who retired in 1969. It is argued above that the loss of the provincial elite's authority started with the suppression of the RMS. It is notable that the three Ambonese Governors of the Sukarno era, as well as Herman Pieters, had made their careers in Java.

The loss of the provincial elite's autonomy was further exacerbated through the 1970s reform of village government that served to undermine the adat-based authority within the village. In a more general sense, Soeharto's very success in binding provincial elites to 'Jakarta' has detached them from their own societies. One of the remarkable aspects of the past four months is just how little the governor and the provincial government feature. The peace pledge and the Pattimura Day reconciliation are but the most recent failures of top-down conflict resolution initiated by Governor Latuconsina. The interventions and appeals of the religious leaders of both communities have been no more successful. It is as if the established elite has lost control of its own society. The disruption of the Pattimura Day torch relay seems to suggest that much of the violence has been initiated and organised from outside the elite.

This dynamic suggests a breakdown in hierarchical relations in Ambonese society as well as horizontal ones between the two religious communities.

Second, the long-term demographic, political and social trends have made many Christian Ambonese acutely sensitive about their place and security within the Indonesian nation state. In the period since January, it was the killing of Muslims in early March in Ahuru, a Muslim kampung in Ambon Town, and the reaction to it from Muslims all over Indonesia that most touched this sensitivity. Although the initial reports proved inaccurate, it was asserted that the Muslims were killed at prayer in the Ahuru Mosque (Human Rights Watch 1999). Understandably, the response to these reports was outrage. Muslim student organisations in Java demanded that the Armed Forces restore order in Ambon, if not, in the spirit of jihad they would do it themselves. Also, there seemed to be a concerted effort to associate Christian Ambonese with the RMS and the RMS with the violence. Assertions about the involvement of the RMS gained currency and credibility, when the Minister of Transmigration, Hendropriyono, stated that RMS activists in Holland wanted to dismember Indonesia. Whatever the veracity of these claims, they may have had the effect of making Ambonese Christians feel that separation is the only option. Tarring the Christians with the RMS brush might become something of a self-fulfilling prophecy.

**Pela and the common adat heritage**

The mass exodus of Buginese, Butonese and Makassarese migrants from the violence in Ambon has also concerned Muslims outside Maluku. The exodus affirmed the ideal that Indonesians should be free to settle anywhere in the nation and live in peace. As noted above, the initial fight which ignited four months of violence was between a Buginese migrant and a Christian Ambonese. Much of the fighting in Ambon Town has followed this pattern. In the conflict between Christian Ambonese and Muslim migrants factors of ethnicity, religion and economic rivalry coincide and reinforce each other.

Outside Ambon Town, elsewhere on the island of Ambon and on the neighbouring Lease islands the violence has been between Muslim and Christian Ambonese. For example, in mid February fighting on Haruku island between villagers in Pelauw and Kariu, left seven dead, 15 wounded and many houses burnt. Kariu is a small Christian enclave, originally settled around a
Portuguese fort. A much larger Muslim village, Pelauw, surrounds it. In reality the two villages form one settlement. Pelauw has a long and rich history of nationalist politics and struggle about Islamic reform. Conflict with the Christians in Kariu had not been a significant part of Pelauw’s history.

This paper started with Pattimura and the celebration of his revolt, which is a heritage Christians and Muslims share. Ambonese of both religious persuasions have much more in common. They share adat and have similar social structures. One particular institution in the shared adat has been widely discussed in the media coverage of the violence. Pela relationships link Ambonese villages, often across the religious divide, in a set of mutual obligations and rights. Typically, Ambonese like to explain pela in terms of when a Christian village needs to repair its church, the Muslim village with which it has a pela relationship will assist, on the understanding that when their mosque needs work the Christians will help. One village may have two or three pela relationships. Collectively, if all the pela relationships were represented on a map of the Ambonese island it might appear as a string bag. Some scholars have argued that pela is the glue that binds Ambonese society together across the religious divide. Pela is the institutional expression of the religious harmony many Ambonese idealised. Why has it failed?

First, the Muslim migrants who have been important combatants in the violence are not part of the common adat shared by Ambonese. Their communities do not have pela relationships with Ambonese villages. Second, although pela relationships collectively create an ethos of religious harmony, the relationships bind individual villages together. They are not ‘contracts’ between the two religious communities. Third, pela relationships function in the world of the village. Even before the current violence, there is little evidence to suggest that they have influenced political, religious and economic attitudes beyond the village. Ambon Town, where the violence started, is a large ethnically plural, multi-faith urban community. Fourth, pela is part of a broader complex of adat belief and practice, the authority of which has been weakened by social and political change over the past century. Mention has already been made of how 1970s reforms of village government undermined traditional authority in Ambonese villages. The New Order was fond of citing Ambon as an example of good communal relations, yet its governance did much to undermine the values and authority on which that harmony rested.

The paper has discussed some of the historical, political and social context of the violence in Ambon. This broad contextual analysis does not provide much insight into the immediate causation. Ambon is by no means the only part of Indonesia to have experienced unrest since the fall of Soeharto. The sudden removal of authoritarian social and political controls are a common factor. Ambon’s economic circumstances did not seem to fit into the general picture of Indonesia’s economic crisis. As of late 1998, the subsistence economy was strong and supported by a few export commodities. After Tommy Soeharto was cut out of the clove monopoly the price had gone up. Politics was not driven by economic disintegration, as seemed to be the case on Java.

There remain more questions than answers.

References
The health situation in East Timor

Andrew McNaughtan, Australia East Timor Association NSW

East Timor is a country of great physical beauty, populated by an engaging and warm people. However, currently there is a campaign by the Indonesian occupying army, in conjunction with militia gangs that they have set up, armed and paid, to wage a campaign of terror against the population. Dozens of unarmed civilians have been killed, many are hiding or have fled in terror, and there are thousands of internally displaced refugees who have little or no access to help. The few aid organisations still operating in the area are unable to get to them with help or supplies. Whilst this situation is extreme even by East Timor's standards, it does indicate how impossible it is to separate the health situation from wider political issues – specifically the effects of more than 23 years of war and military occupation.

To put the health care problems in context it is necessary to give a broad outline of these problems. Reliable information is hard to come by and official statistics are generally considered rather unreliable. The magnitude of the problem is outlined in recent comments by Dan Murphy, an American doctor currently working with a church clinic in Dili. He estimates that 50 to 100 people are dying of preventable diseases each day in East Timor and that the incidence of tuberculosis (TB) would be amongst the highest in the world. The territory is returning to a state of open war, yet there has been no civilian surgeon for the 800,000 people of East Timor for more than six months. This leaves the regular injuries from shootings, machete and stabbing wounds, and regular surgical needs, inadequately treated.

Background

A significant factor in the ill health of the population is chronic malnutrition. This has been a protracted problem, exacerbated by some aspects of the military occupation. East Timor has always been relatively poor and food supplies have been marginal. Anecdotal information indicates that many people are now more malnourished than during the Portuguese period. About 80 per cent of the East Timorese population live as subsistence farmers with little involvement in the money economy. They are very vulnerable to any failure in the seasonal rainfall and other impacts on their ability to produce food.

The Indonesian occupation from December 1975 has had a number of negative impacts on the food supply in the predominantly rural population. During the invasion, most of the population fled to the mountains, living in communities that were able to be self-sufficient for a number of years. However the military targeted the population and their crops in a very effective bombing campaign that forced the starving population out of the mountains into military-controlled resettlement camps on the coast. Famine occurred as people were not able to adequately cultivate and were unfamiliar with farming in these new conditions. Malnutrition and overcrowding made them susceptible to diseases such as TB and dysentery. Many also died from malaria. It has been estimated that about 100,000 people died at this time from famine and illness.

Of course life for the average villager had not been without hardship during Portuguese times. Medical services were limited or non-existent for many, and traditional village life in the mountains was devoid of modern conveniences. However the society had evolved and adapted to the conditions, and by most accounts the traditional lifestyle had a very rich culture. Most were better fed than now. Chronic illnesses like TB were certainly present, however anecdotal comments indicate that the general level of nutrition was higher and the incidence of illnesses such as TB may have been lower.

The occupation by Indonesia and the chronic low grade conflict in the countryside has reduced the agricultural production significantly in some areas. In Dili, for instance, the population has been forced to move from fertile land to less productive areas. Farmers may be relocated up to eight kilometres from their land, necessitating a time consuming and tiring walk to and from the fields each day. For 'security reasons' they may need to be home before nightfall, meaning that their productivity is severely curtailed. This applies particularly in the eastern regions, where agricultural production has dropped significantly in areas that were formerly highly productive.

The buffalo population has reportedly been reduced drastically by the war. Traditionally a source of protein for villagers as well as being integral to traditional farming many have been killed by the Indonesian armed forces for food. Now numbers are much less and this traditional protein source is missing.

Enforced relocation of the population along roads (often for strategic military purposes) has of course improved access to transport, but moved people away from the best farming land and natural water sources. Deforestation has occurred due to bombing in the early years of the war, and later because of stripping of the forest by the military for commercial gain – and to eliminate cover for the guerrilla resistance forces. This deforestation has resulted in erosion of the hilly terrain with diminished productivity of the land. It is considered by some to have upset weather patterns resulting in less reliable rainfall. In
addition, some of the best land has been taken over by transmigrants from elsewhere in Indonesia.

All of these influences have reduced the agricultural productivity in East Timor and resulted in exacerbated malnutrition amongst the population, with related effects on the health of the population.

Two medical systems in East Timor

There are two medical systems operating in parallel in East Timor: the Indonesian Government-run system and the Catholic Church-run system. In addition, some medical services in the larger towns are provided by private medical practitioners. Generally the facilities are rather meagre with insufficient equipment, supplies and medical staff.

The government-run health system includes 67 health clinics (one in each subdistrict in the territory) and ten hospitals, which range from a more than 100 bed hospital in Dili to others which are much smaller with very limited facilities. Two of these hospitals service the Indonesian military.

Normally there are about 120 doctors in East Timor (of whom approximately 20 are East Timorese) – one doctor per 6,500 people. The ratio has worsened recently with the departure of some Indonesian trained staff. About 80 doctors remain now – one per 10,000 people. At the time of writing, there has not been a civilian surgeon in East Timor for more than six months.

The implementation of the family planning programme in Timor has caused a lot of controversy. In staunchly Catholic East Timor the programme (which operates in the rest of Indonesia) caused objections. Allegations of the enforced injection of young women, including school girls, with Depo Provera led to accusations that this was part of an intentional programme to make the Timorese a minority in their own country. This process has now been curtailed.

Twenty-five clinics are operated by the Catholic Church and staffed by a variety of trained and untrained members of religious orders. These are often even less well equipped in terms of human and material resources than the government-run clinics, but enjoy greater public confidence and support, often being overcrowded with patients. There is a modern Catholic Church-run hospital at Suai in the southwest of Timor, and a TB eradication programme run through the church clinics and funded by Caritas (the Norwegian Catholic aid agency).

The reasons for the relative lack of patronage of the government health system are cultural, financial and related to a poor public perception of government hospitals. Most services in the public health system are cultural, financial and related to eradication programme run through

Main health problems

In 1995 the principal causes of death according to government statistics were pulmonary TB (15.5 per cent), malaria (12 per cent), diarrhoea (6 per cent), and other respiratory illnesses, including pneumonia (15 per cent). Pregnancy and labour remain risky in Timor with high mortality both during delivery and post partum. Anaemia, skin infections and parasitic infections are also common. Goitre, presumably from iodine deficiency, is common among the people living in the mountains.

These illnesses are of course fairly typical of many Third World situations and bear some resemblance to the problems encountered amongst the Australian Aboriginal population. These illnesses (with the exception of tropical diseases like malaria) are similar to the health problems in Europe last century and share some aetiological factors.

Chronic malnutrition with protein deficiency is generally agreed to be a major factor in the poor health of the population. Poverty, overcrowding and poor water supply and sanitation are also significant factors. An inadequate health system providing insufficient access to appropriate treatments and services, such as surgery, is also a significant factor.

Ironically the overall response from the Indonesian Government has been to block much of the international assistance that has been offered. At the time of writing, at least three organisations (International Red Cross, Médecins Sans Frontières and the Australian Government) had requested permission to send medical teams to the territory, and had been denied access. Tons of medical supplies bound for Timor have been held on the docks in Jakarta for weeks. Some NGOs that have investigated working in East Timor have found it difficult or impossible to be granted access. Certainly some aid groups (particularly those associated with the Catholic Church) have been able to work there but much assistance has been blocked. The motivation for this seems to have been political, aimed at keeping East Timor isolated and under tight control.

Hopefully this situation may be about to change. If the efforts to find a diplomatic solution can overcome the active obstruction of the Indonesian armed forces, East Timor may become more accessible and much needed international assistance may be forthcoming. But if the Indonesian army continues its murderous campaign to enforce continuing integration with Indonesia, the future for the people (at least in the short-term) will be very bleak.

April 1999
Population: Explosion or implosion?

John C. Caldwell, Emeritus Professor of Demography,
The Australian National University

The twentieth century has been the demographic century. Its like will not be seen again. After millions of years of slow growth, human numbers reached 1.5 billion at the beginning of the present century. By its end, that population will have quadrupled to 6 billion, most of the growth having occurred in the second part of the century. This phenomenon will not be repeated. It is becoming doubtful whether global population numbers will rise by more than a further one-third, or 2 billion people.

These numbers reflect enormous changes in the way we live. Now, in Australia, nearly all babies survive the first year of life and indeed continue living on average for another 75 years. The household full of children has largely disappeared and, indeed, most houses are empty for most daylight hours. This change to the nature of the family and the nature of national populations is one of the great events of history and has happened so recently that most people here have been alive through a significant part of this extraordinary change.

The change has had three major segments and we have only recently been in a position to see them all. Those three segments were:

• first, a rapid rate of population growth as mortality declined and human fertility proved surplus to the simple need of replacement;
• second, a battle to contain this vast population growth; and
• third, a success in this containment and an increasing probability that global population numbers will not only be brought to a stationary situation but will actually decline.

None of these events was predicted. All show the degree to which human beings can react to the unexpected and find commonsense solutions, even at the expense of major changes in their ways of life. Certainly the containment of the population explosion to the global total now expected was not inevitable. Yet, now that it has been achieved, we are in the extraordinary situation where some conservative publicists, especially in the United States, regard the control of numbers as having been inevitable. They imply that there was no need for the fuss or the organisation, and even that the making of contraception easily available and its use respectable was a mistake.

Rapid population growth

Populations began to grow as a result of probably the greatest achievement of civilisation – that is, the conquest of infectious disease and victory over premature death. This was achieved in a complex way, involving rises in living standards, changes in individual outlook especially promoted by mass education, public health initiatives, and, this century, the rise of modern medicine. What was unexpected was the ease after World War II with which these advances were made global. No one thought that death rates could be pushed down decisively in the poverty-stricken populations of Asia, Africa and Latin America. The leading demographic group in the world at the time—those at Princeton University’s Office of Population Research—forecast in the early stages of the mortality decline that human numbers might reach 3 billion by the end of the twentieth century. They underestimated the actual end-of-century population by one-half and the growth in the second half of the century by two-thirds.
This victory has been breathtaking. At mid-century, life expectancy in much of Sub-Saharan Africa was little more than 30 years and in the larger countries of Asia, 35 years. Now, life expectancy in Sub-Saharan Africa is close to 50 years, the level reached by Australia in 1900, and in Asia it is 65 years, the Australian level in the 1930s.

This victory was not solely the achievement of modern medicine or of a specific determination to drive down mortality. It was far more complex. Much was the result of the increasing globalisation of the economy. Even fewer people were subsistence farmers and most became part of an exchange economy which meant that they bought goods and visited market centres, all of which helped in the provision of health services. Equally important was the globalisation of society. There was an increasing push to get all children into school, and this has been one of the great success stories of the last half-century. In much of Asia and Africa, few boys and almost no girls went to school at the end of World War II. Now, most children receive at least some primary schooling in most countries of Asia and Africa. This has been an important factor in bringing down death rates, for research shows indisputably that it is schooling which promotes cooperation with modern health services, thus bringing down the death rates of both adults and their children.

**Containment**

By the early 1950s, it became apparent that a genie had been let out of the bottle. Fertility remained high and mortality tumbled. By 1955, the annual population growth rate had passed 2.5 per cent in Sri Lanka and 3 per cent in South Korea. Eventually, even Sub-Saharan Africa was to reach 3 per cent. These rates were that were unsustainable over the long run without bringing a return to Malthusian conditions of high mortality, because a 3 per cent rate of population growth means a doubling in 23 years and a multiplication by 16 in less than a century. This did not happen because there was a rational reaction to the threat. Western nations at that time still regarded contraception as hardly a respectable topic for conversation, let alone for foreign policy or university teaching. But there was a basis for changing outlooks because most couples in the industrialised world were by that time restricting their family sizes, and it was only a matter of time before they proclaimed this to be a rational and healthy thing for themselves and others to be doing. This legitimation was hastened by organised activity to that end.

There had been family planning activists since early in the nineteenth century, and organised family planning associations in the West between the wars. In 1951, independent India announced that it would be establishing a government family planning programme and asked for technical help. In the 1950s, the American foundations began to enter the field, followed by Scandinavian governments and, in 1963, the United States. The United Nations had included a Population Division from its beginning and by the late 1950s was starting to enter the fertility control field, although it was not until 1969 that the United Nations Fund for Population Activities was established.

The fundamental changes were those of private opinion and public outlook: the advocacy of fertility control became first respectable and then virtuous. This facilitated contraceptive development and contraceptive use not only in the Third World but also in developed countries.

Nevertheless, it was far from certain that any of these efforts would succeed. For 20 years after World War II, death rates fell without there being any sign at all that Third World birth rates would even decline. By 1950, world population had reached 2.5 billion and by 1965, 3.3 billion. Theories were promulgated that only industrialisation could promote fertility decline and that even that might not do so because the non-Western family was different and individual couples there were protected from feeling the full financial burden of the large family. Fertility was falling in Japan, but perhaps it was different.

By the 1970s, it was clear that fertility had begun to fall in many parts of Asia and Latin America in the mid to late 1960s. It would be the 1990s before we became aware that the process was also beginning in Sub-Saharan Africa. What we took less notice of at the time was the fact that fertility had already begun to fall again in the United States, and such falls would become general in Western countries in the 1970s. The West, too, had shared in the new respectability of fertility control and in access to the more efficient means invented to meet the Third World crisis: the pill and the IUD, as well as suction abortion.

The situation did not change overnight and is still very far from having wholly changed. In the 1970s, it was still possible to envisage population growth rates not becoming low before world population reached 15 billion and thereafter slowly continuing growth for the rest of time, yielding ever more dangerously high numbers. Although the global annual rate of population peaked around 1970, the annual addition of persons to the world's population has continued to rise until the present time. There was no sign of family size in Sub-Saharan Africa, averaging around seven live births per woman, falling at all. Slow fertility declines in much of Asia foretold the addition of many more billions. A measure of the average number of births per woman, the total fertility rate, in 1970 still stood at 6 in China and over 5.5 in India. No one knew whether the world ecosystem could indefinitely tolerate populations of 12–15 billion. We might be able to feed them for a transitional period but the global system might suffer irreparable damage.

**Population decline**

It is only recently that we have begun to foresee the probability of a very different scenario for the world. There are three main reasons. The first is that the older fertility transitions in Asia have not bottomed out as many had expected. The total fertility rate in both India and Bangladesh is at 3.3 and still going down. That of China is probably under 2. The second reason is that, in parts of Sub-Saharan Africa, fertility has begun to fall, and
where it has fallen it has done so substantially. The third reason may be the most significant in that it may foretell the long-term future for the whole world. In many parts of the world, fertility decline did not cease, as was widely expected, at replacement level (that is, at a total fertility rate of about 2.1).

Over the last 20 years, fertility has either continued to fall or has remained very low. Both Southern and Eastern Europe now have total fertility rates of 1.3 and Western Europe, 1.5. Even Australia is now dipping towards 1.7. Furthermore, this phenomenon is not restricted to the West: China's population is probably below long-term replacement level, while total fertility rates are 1.4 in Japan and 1.7 in South Korea, Taiwan and Singapore. Even Thailand has fallen below replacement level. Startlingly, 44 per cent of the world's population now live in countries with below replacement fertility.

This has forced us to reassess the situation. The United Nations has recently reduced its medium projection of the world's population size in the year 2050 by half a billion to 9.4 billion, with the possibility that it may never exceed 10 billion. Recent work we have done suggests that the maximum could be as low as 8 billion (Caldwell and Caldwell 1999). More surprisingly, it appears even more likely that, once global numbers peak, the world's population will not remain stationary but will slowly decline for all of history, perhaps passing our present level on the way down in little more than 100 years from now.

The basis for such projections depends on what has already happened and why it has happened. The most important point is the continued rise in female education and employment. Third World countries are following the lead of the West in educating their children and seeing to it that girls as well as boys remain at school. International organisations have pressed hard over the last half-century for universal and extended schooling. The women's movement has pressed for equal schooling for girls and the degree of convergence in the education of the sexes in much of the world is remarkable. In great swathes of Asia and Latin America, the extent of secondary schooling for girls is much above what it was in the West in the 1950s. Schooling, especially in the current climate of ideas, implies subsequent full-time employment. In every country in the world where the majority of women have at least three years' secondary education, most of them work and fertility is at replacement level or below. The means are clear enough: access to fairly reliable contraception, backed up by fairly safe abortion.

The reasons are not quite as clear. They seem to be mostly connected with the problems faced by working wives in both carrying out tasks in the home and rearing children. Women can most easily carry out all these tasks when their husbands go a significant distance towards sharing household tasks and childrearing. This in turn depends on not having a culture with too much emphasis on the gender division of responsibilities and on the impact of the women's movement. This argument has been used to explain why Northern Europe has a total fertility rate of 1.7, reaching 1.8 in Sweden, in contrast to one of 1.3 in Southern Europe, falling to 1.2 in Italy and Spain. In these countries, working women apparently find things getting out of hand if they add a second child to the family. There may also be an element of rebellion. It is likely that most of the rest of the world is closer to the situation in Southern Europe than that found in Northern Europe and possibly in the United States and other English-speaking countries of overseas European settlement. This is not all worked out beforehand, as is shown by surveys revealing higher desired family size among the young than among their sisters some years older. A 1986 national survey in Australia revealed that, tempered by job security and advancement as well as by plans to travel, Australian women postponed both marriage and child-bearing until it no longer seemed desirable or possible to have a number of children. Recent figures for Australia show that 22 per cent of women are now going through life without bearing a child (the majority never marrying) and 16 per cent are having only a single child (McDonald 1998). Thus, although the majority of women have two or three children, the average family size is only 1.77, which is far below replacement level. If one projects Third World female educational and occupational levels, nearly the whole world will reach contemporary Australian levels within 50 years. It is extremely difficult to see this as being a world with anything but below replacement level fertility.

Several questions might be raised. The first is whether we are seeing anything but transient fashion or ideology in these birth rates. After all, there was a baby boom from the late 1940s to the mid-1960s. The answer is that this is extremely unlikely to re-occur. It occurred at a time when women's education levels were lower and when there was a much stronger division of labour between men and women. In secure economic times, a record proportion of women married and had children. In many ways it was a marriage boom rather than a fertility boom. There have been other changes. The economic system has shown itself capable of employing a bigger fraction of the adult population than used to be the case. Factories produce goods, from finished clothes to cakes and prepared meals, that were once largely a domestic activity. The move towards equal pay for the sexes, at least for jobs at the same level, has made it difficult in a consumption economy for wives and mothers to do anything but work outside the home. In any case, staying at home is less attractive since women's move into the workforce has destroyed much of suburban women's camaraderie based on the common experiences of child-rearing and household production.

Another issue is the impact of the AIDS epidemic. The answer is that mortality will vie with reproduction in parts of Sub-Saharan Africa. Indeed, there are countries in Southern Africa where AIDS will result in declining population numbers in a few years' time. One reason for this is that AIDS reduces fertility as well as increasing mortality. But, for the world as a whole, the epidemic will hardly produce a ripple in population trends. Its real implication is that we may be exposed to similar
scourges which are more easily transmitted and more universal in their impact. Then, declining population numbers might easily be accelerated.

**Conclusion**

What, then, of the global future? My guess is that the world population will peak at about 8 billion around 2050 and will ultimately go below 6 billion or even 4 billion. This world would certainly be stable in terms of its environment and ecology for as long as we like to foresee. But, at some stage, our pride might be so affected that we will throw huge resources into persuading women to have children. This should not obscure the fact that the population explosion is far from over. Hundreds of millions are going to be added to the already dense populations of South Asia and Sub-Saharan Africa. In fact, population control has barely started in the latter region and we do not even understand the appropriate styles of national family planning programmes that will be needed. There will be a need for technical aid in the population field for decades to come.

In Australia, natural increase as a source of population growth is almost a thing of the past and will be down to 0.5 per cent in another decade. My guess is that we will raise immigration levels so as to sustain a modest level of population growth. Indeed, within three or four decades, immigration will be the only thing preventing population decline.

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Reproductive health education for female workers in the garment industry in Bangladesh

Shahjahan Hafez Bhuiyan, Islamic University at Kushtia, Bangladesh
Niaz Ahmed Khan, University of Chittagong, Bangladesh

Introduction

The decade of the 1980s witnessed a prolific growth in city-based export-oriented garment manufacturing industries in Bangladesh. The overwhelming majority of these industries are located in the principal cities of the country. Dhaka, the capital, in particular houses some 80 per cent of the total, employing an estimated two million female workers. Notwithstanding their substantial contribution to the national economy and society, the living and working conditions of these women are generally deplorable and they lack access to basic health care facilities.

In this context, the United Nations Population Fund (UNFPA), in association with the Bangladesh Garment Manufacturers and Exporters Association (BGMEA), has launched a project to provide family welfare and reproductive health education and services to the garment workers. The project commenced in 1998 and is expected to fulfil its objectives by the end of 2001. The four stated objectives of the project are:

• to widen accessibility to and utilisation of reproductive health services, especially for vulnerable and hard-to-reach population groups (within the garment industrial sector);
• to improve the quality of reproductive health services;
• to facilitate positive behaviour changes and create a supportive environment for improved reproductive health and family welfare; and
• to contribute to the enlargement of the national 'technical capacity' for the implementation of population policies and programmes.

In this brief article, we shed light on the performance of this important initiative to ameliorate the health educational status of the women workers.

Strategies of the project

One of the objectives of the BGMEA, which it hopes to realise through this project, is to contribute to the achievement of national population goals by making population and reproductive health education and services available to the garment workers. An integrated package of reproductive health education and services is being developed for use at the factory level. The project is designed to cover one 'industrial zone', with a total of 175 garment industries. The BGMEA is in the process of establishing seven industrial zones for Dhaka. The establishment of two other similar zones in the cities of Chittagong and Narayanganj is also underway. This pilot project has the following key strategic elements:

• development of an overall understanding of reproductive health issues, reproductive rights and gender equity among relevant planners and decision makers of the BGMEA;
• establishment of a women's welfare cell within the BGMEA to provide welfare services to garment workers on a regular and sustainable basis;
• establishment of four mobile 'medical services units' to provide door-to-door education, counselling and medical services to the workers;
• training of 175 workers and 175 employers' representatives to work as volunteer educators and advocates of reproductive health, reproductive rights and gender equity issues;
• formation of 'workers welfare committees' in 175 industrial units under the purview of the project; and
• provision of basic family welfare and reproductive health services to one million garment workers by the end of the estimated project period (year 2001).

As this is a new and experimental initiative, the BGMEA has recognised the necessity of a better understanding of the elementary issues of reproductive and family health care by all concerned, especially the central policy planners at the BGMEA, the project staff and the targeted beneficiaries (the female workers in the garment industries). To this end, the BGMEA has sponsored and organised a number of relevant seminars and symposia in cooperation with the Ministry of Health. Leading voluntary organisations (for example, the Bangladesh Rural Advancement Committee) have also been invited to share their experience of the field.

Performance of the project

In the first of the BGMEA's 'industrial zones', there is an experimental medical centre, which provides primary medical assistance to the women working in the zone. At present, there are two doctors and a number of nurses in the centre. The BGMEA intends to expand the centre by establishing a pathological laboratory unit and four mobile medical terms.
Three medical teams will provide medical services at the workplaces on designated date(s) and time(s), and one will remain at the centre to attend to emergency calls for services. In response to the expressed needs of the women workers, each mobile team will include a female medical doctor, one female nurse and an ambulance. They will visit the targeted factories on a regular basis to provide medical assistance, reproductive health education and counselling services. At the factory level, the welfare committees will be responsible for organising monthly meetings with the workers. Each committee will have a paramedic with first aid facilities, essential drugs and a supply of contraceptives. At the end of each month, the committee will submit a progress report to the project director appointed by the BGMEA. If the activity of the project proves to be successful in improving the reproductive health and educational status of women workers, the BGMEA may replicate and expand the project model to the remaining six industrial zones.

Conclusion

From the experience gained during the programme implementation process, a number of major problems have been identified which warrant immediate attention:

- It has been found that the female workers feel shy and uncomfortable about freely discussing reproductive health issues and problems with medical personnel. Some women are reluctant to use reproductive health counselling services as they consider family planning and population control as antithetical to their religious beliefs. One way to deal with this problem, as some of the project staff suggested, may be to organise, on a regular basis, informal motivational group meetings with the women as well as their husbands (partners).
- A considerable number of factory owners/employers are reluctant to release their workers to enable them to attend the educational programmes and to access the health care facilities. Some form of punitive measures, for example provisional dismissal from the BGMEA membership, may be considered to combat this problem, alongside motivational campaigns.
- Much needs to be done to increase the quality of the trainers and training equipment in order to maximise the potential of this project.

Despite these limitations, the project marks the long-awaited and refreshing beginning of a crucial service to the neglected female workers in the garment industries. Although this is a modest and small initiative, yet to produce any large scale impact on the mammoth problem of reproductive health care in Bangladesh, it seems to be a step in the right direction.
Analysis of the 1999–2000 Australian federal overseas aid budget

Australian Council for Overseas Aid

At a glance

- In comparison with our wealth the level of aid is falling. It currently stands at 0.25 per cent GNP – its lowest level ever – despite a huge government budget surplus.
- The total aid budget this year is $1.5b – up $22m on last year's budget, but only just the same in real terms compared to last year.
- The budget foreshadows an additional commitment of aid to East Timor at an appropriate time.
- The current average level of aid provided by OECD governments is 0.4 per cent GNP. Australia's current level is 0.26 per cent of GNP and next year this will fall even further below the average to 0.25 per cent.
- The aid budget is 9.7 per cent lower in real terms than it was 1995–96, the last budget of the previous government.

The main features

- There is a continued response to Asia's financial crisis – a doubling of the Asia Crisis Fund to $12m and a $6m increase to the country programme allocation for Indonesia (though total flows to Indonesia drop by $5.4m or 6 per cent).
- $670,000 for eradication of polio and iodine deficiency disorders.
- Real increases to South Pacific (2.1 per cent), South Asia (1.9 per cent) and Africa and Rest of the World (4.4 per cent) compared to last year.
- A new $3m initiative over three years for microfinance organisations.
- 30 per cent increase for the Human Rights Fund.
- $350,000 increase to Direct Aid Programmes.
- $900,000 additional for Palestinian Territories.
- $400,000 increase for public information and development education programmes.
- An additional $2m for demining.
- $2m increase for the Solomon Islands for economic reform.
- $1.8m increase for NGOs through AusAID–NGO Cooperation Programme (ANCP), although total funding to Australian NGOs is likely to drop.

The long-term trends

- Aid to Africa has fallen by 35 per cent in real terms and South Asia has fallen by 19 per cent in real terms since 1995–96.
- Assistance to East Asia has fallen by 15 per cent in real terms since 1995–96.
- Since 1995–96 assistance to PNG has fallen by 8 per cent in real terms.
- Funding to the priority sectors of governance, health, education, rural development and infrastructure will increase by 9 per cent next year and there has been a 22 per cent increase since 1995–96 in funding to the key basic social services.
Sectoral allocation

While ACFOA is deeply concerned about the low overall level of Australia's aid programme we are very supportive of AusAID's increased focus on quality programmes, human rights, civil society and programmes aimed at poverty alleviation and strengthening basic services.

Sectoral allocation is estimated from allocations made within country or regional programmes.

- **Education** is the main loser, with a 6.2 per cent reduction. However, the government is shifting assistance away from higher education scholarships in favour of technical and vocational education and basic and lower secondary education.
- **Health** has had a major increase of 24.8 per cent. HIV/AIDS, population and women's reproductive health activities remain priorities.
- **Governance** allocations have been bolstered overall. Human rights are a significant percentage of total governance sector expenditure (34 per cent), compared to economic management (31 per cent) and public sector reform (35 per cent).
- The government's current $6.5m on microfinance activities expenditure will double by 2002.
- There will be an increase of 30 per cent to $1m for the Human Rights Fund.
- **Agriculture and rural development** have increased.

Commentary on **Infrastructure and Environment** expenditure in the aid programme statement does not make it fully clear where the allocations have been spent. Some $360,000 is expected to be spent in 1999-2000 on Gender activities.

New initiatives

New initiatives include:

- A policy statement on private sector development in the aid programme.
- Practical guidance to support implementation of a human rights framework.
- A policy on protecting children from exploitation.
- A new rural development strategy, especially focusing on income generation.
- An evaluation of Australia's support to strengthen public sector institutions.
- An infrastructure policy designed to guide project development.
- An aid policy on climate change.
- A 'detailed analysis' of the aid programme's environmental portfolio.

Papua New Guinea

Total aid flows to PNG in 1999–2000 will be $328.9m of which $264.9m is programmed aid and $35.5m is budget support. The previously announced $100m for Bougainville will support reconstruction particularly focused on infrastructure, health, education and communications.

Sectoral priorities

- **Infrastructure** – will focus on aviation and communications including upgrading safety, quality and efficiency of airports and upgrading telecommunications infrastructure in Western Province.
- **Education** – assistance will be given with teacher training, curriculum reform, infrastructure and materials.
- **Governance** – will include providing assistance to the Ombudsman and judiciary reform.
- **Health** – the focus remains on health services, women's and children's health and HIV/AIDS.

South Pacific

Total aid to the Pacific Islands will be $136.9m in 1999–2000, an overall increase of 2.1 per cent in real terms compared to 1998–99.

Sectoral priorities

- Funding for **Policy and Management Reform** will be $14.1m in 1999–2000.
- **Education** accounts for nearly one-third of Australia's assistance to the Pacific.
- **Health** sector priorities include national policy development, disease prevention and control, women's and children's health and prevention of non-communicable diseases.
- **Resource management** – projects in forestry and fisheries management.

Country breakdown

Fiji ($21.6m – about same real level) – focus is on public sector reform, health and education.

Vanuatu ($17.7m – about same real level) – focusing on improvements to secondary education and health sector management.

Solomon Islands ($17.1m – 9.1 per cent increase in real terms) – focus is on structural reform, forestry, health and education.

Western Samoa ($14.5m – 5.5 per cent increase in real terms) – priority remains on public sector reform, health, education, water supply and environmental management.

Tonga ($13m – 9.1 per cent increase in real terms) – focus will be on promoting economic development, and strengthening social services and government capacity.

Australia will continue to provide modest assistance to Palau, the Marshall Islands, the Cook Islands, Niue, Nauru, the Federated States of Micronesia and the French Territories.
East Asia

Indonesia ($121m) – there is a $5.4m decrease on total flows (6 per cent decrease in real terms), but a $6m increase in country programme allocation compared to 1998–99, and a significant increase compared to the budget for last year. Support will continue for social safety net programmes, economic and social governance, human rights and health.

East Timor – in 1998–99 Australia will provide $7m to East Timor within the Indonesia programme, plus an additional $20m already committed for assistance to the UN consultation process. The Government has stated it will provide "substantial assistance" to an autonomous or independent East Timor, and decisions will be announced once the outcome is clearer.

Vietnam ($72.4) – will receive $72.4m over 1999–2000, a slight increase of 1.3 per cent in real terms. The focus is human resource development, poverty alleviation and governance.

Cambodia ($36.8m) – will receive $36.8m in 1999–2000, an increase of 11.6 per cent in real terms. The programme includes initiatives targeting rural health, education, agriculture, demining efforts and refugee resettlement and rehabilitation.

Thailand ($26.3m) – aid to Thailand for 1999–2000 has increased 4.3 per cent in real terms. However total aid flows to Thailand have dropped by approximately 33 per cent since the period 1995–96. The focus continues to be governance, poverty alleviation, education, the environment and HIV/AIDS.

Lao PDR ($20.8m) – will receive $20.8m for 1999–2000, an increase of 11.6 per cent, focusing on education, health and efforts to strengthen policy reform.

Burma ($5.1m) – bilateral aid remains suspended due to lack of progress on human rights, although Australian assistance continues to be provided through UN agencies and NGOs, focused in the area of basic health care and HIV/AIDS. Total aid for 1999–2000 is $5.1m, an 11.3 per cent increase in real terms.

The Philippines ($61.8m) – the focus continues to rural incomes, health, education and environment on the southern island of Mindanao.

China ($55.5m) – support will be given to good governance, education and health sector reform, provision of basic health services to the rural poor in areas such as Tibet, and environmental management.

Mongolia ($3m) – government aid continues to focus on institutional strengthening and human resources development. Assistance will also be provided to assist in the establishment of the Mongolian National Human Rights Commission.

South Asia

The government’s new regional strategy for South Asia is currently being finalised and will draw on existing priorities including HIV/AIDS and supporting activities that build peace, uphold human rights and reduce child labour. The budget estimates that aid flows to the region will total $82.4m compared with $79.6m in 1998–99 (a real increase of 1.9 per cent). However, since 1995–96 the region has suffered a 19 per cent drop in funds.

Bangladesh ($36.3m) – aid is directed to improvements in governance, social development and administration. Support will be given for development and consolidation of the peace process in the Chittagong Hill Tracts.

India ($18.7m) – the programme seeks to increase the income of the poor and strengthen government capacity in service delivery. A focus for the coming year is to increase access to primary education, particularly for females, and reducing the spread of HIV/AIDS.

Pakistan ($4.3m) – focus is on improved management of the environment and human resource development in agriculture, education and health.

Sri Lanka ($11.1m) – focus is on environmental management, community resettlement, human resource development. Continued assistance will be provided for the Community Resettlement activities.

Maldives ($3.5m) – the programme focus is on health and education. Sustainable development of natural marine resources will be a priority in 1999–2000.

Nepal ($7.3m) – aid concentrates on environmental management and human resource development through interventions in health, child labour, education and agriculture.

Bhutan ($0.7m) – support is for human resource development (scholarships) and primary health care in selected districts.

Africa and the Middle East

Total funding to Africa and the Middle East ($84.7m) has increased by 4.4 per cent since last year on 1998–99 expenditure but much less than the budget for 1998–99 as emergency funds were diverted to East Asia and PNG.

Africa ($75.4m) – this is a 6.9 per cent increase in real terms, but only two bilateral programmes in South Africa and Mozambique remain. The focus is food security, demining, water and sanitation, and HIV/AIDS prevention. The region has suffered a 35 per cent drop in funds since 1995–96.

Middle East ($9.2m) – this is a 14.4 per cent increase in real terms, with the Palestinian Territories allocated an extra $900,000 transferred from scholarship programmes winding down in the Seychelles and Mauritius.

Multilateral and humanitarian

Australia will provide 31 per cent of the total aid budget ($466.9m) to global programmes in 1999–2000. This represents a marginal decrease of 1.6 per cent in real terms from 1998–99 actual forecast.
Emergency and humanitarian programmes
A total allocation of $104.8m is an increase of 2 per cent, with humanitarian relief allocated $68.4m, and emergencies $36.5m.

International organisations
Multilateral banks
Total bank funding for 1998–99 will be $225.6m, a 4 per cent drop in real terms over the forecasted actual for 1998–99. However over a 5-year period there has been an overall increase of 13.1 per cent in real terms reflecting the commitment to IDA and increased support to the ADB fund.

The $225.6m budgeted for 1999–2000 is made up of:
- International Development Association $118m (constant in real terms).
- Asian Development Fund $106m (down 8.5 per cent).
- International Fund for Agricultural Development $1.5m (down 1.8 per cent).

Australia will participate in the forthcoming replenishment of the Asia Development Fund (ADF 8).

UN agencies
Total UN core contributions for 1999–2000 will be $59.3m, the same in real terms, and will be allocated as follows (increases/decreases in real terms):
- UNDP remains steady at $6.8m.
- UNICEF will increase marginally to $4.7m.
- UNFPA will decrease by 1.8 per cent to $2.1m.
- IAEA will increase by 13.3 per cent to $1.5m.
- UNDCP will increase by 12.3 per cent to $0.8m.
- UNEP will decrease by 1.8 per cent to $0.5m.
- UNIFEM will decrease by 1.8 per cent to $0.4m.
- World Food Programme remains steady at $42.5m.

International Environment Programmes will receive a total of $10.5m in 1999–2000. Australia will also allocate $5.1m to the Global Environment Facility (GEF) through bilateral programmes in the Asia-Pacific region.

The Commonwealth Development Agencies will receive a total of $10.1m, a small decrease of 2.7 per cent in real terms, to be spent on technical cooperation on public sector reform and economic management issues consistent with government commitments to APEC and the WTO.

International Health Programmes in 1999–2000 Australia is expected to contribute $10.8m, an increase of 6.1 per cent.

Non government organisations
Total official aid through NGOs in 1999–2000 is expected to be $105.4m, up by $2.6m on the estimated expenditure of $102.8m in 1998–99 – an increase of 0.6 per cent in real terms. However, total funding through Australian NGOs is set to decrease by $2.4m to $80.7m

The main trends in NGO funding for 1999–2000 include:
- increase of $1.8m in the ANCP;
- decrease of $4.9m of funding through Australian NGOs from AusAID Country Programme windows to $23.6m in 1999–2000;
- $9.3m increase in funding over the last four years through non Australian NGOs, from $15.4m in 1996–97 to $24.7m in 1999–2000; and
- funding through NGOs for emergency relief and refugees is at about the same level.

Funding for volunteer programmes is at about the same level ($12.1m in 1999–2000).

Microfinance Initiative Seed Fund
A $3m Microfinance Initiative Seed Fund is to be established in 1999–2000 to support capacity building and training for specialised microfinance organisations.

Public information, seminars and education
Expenditure on the Public Information and Development Education Programme for 1999–2000 is $1.8m, a welcome increase of $400,000.

ACIAR
Australian Centre for International Agricultural Research ($43.2m) – the same real as 1998–99. ACIAR's mandate is to mobilise Australian research capacity to help solve agricultural research problems in developing countries.
Wasting valuable time: The importation of hazardous waste into Thailand

Catherine Hesse-Swain, School of Social Sciences (Development Studies), Edith Cowan University

Introduction

Several serious chemical explosions and fires at Bangkok's main port, Klang Toey, in the early 1990s highlighted the dangers of stored hazardous waste being left unmonitored for long periods of time. The accidents also forced the government to publicly acknowledge that hazardous wastes may have been illegally shipped to Thailand and stored in dangerous conditions at the harbour (Ministry of Health 1992:25–7, Pollution Control Department 1993:9).

Information on the current situation regarding the import of hazardous waste has been very difficult to obtain. In its National hazardous waste management profile, the Pollution Control Department dedicates one paragraph on illegal shipments of hazardous waste to Thailand:

... more than 160 tonnes of chemicals have been shipped from other countries to the Bangkok Port since 1978. It is suspected that these chemicals were shipped to Thailand for disposal purposes. These unwanted chemicals create problems for the relevant authorities who have to dispose of them with limited available financial resources (1993:9).

This profile has not been updated since 1993. The paucity of data seems to be mainly the result of a lack of intersectoral integration. The Ministry of Public Health, National Environment Board (Pollution Control Department), Industrial Works Department, Port Authority of Thailand and Customs Department all appear to play a bureaucratic role in the issue, but lack a forum for integrated planning and management. In short, there is a general awareness of the problem by each authority but no concrete mechanisms or strategies in place to deal with it.

Despite this apparent absence of coordination, the Klang Toey incidents do appear to have galvanised the government into action and in November 1997 the Thai parliament ratified the country's signing of the international Basel Convention on the Control of Transboundary Movements of Hazardous Wastes and their Disposal (UNEP), with signing taking place in February 1998. The Industrial Works Department is the competent authority for the Basel Convention in Thailand. From a regional perspective, however, Thailand's commitment to the principles of the Basel Convention was slow to mature. All of the ASEAN members, except Laos and Burma, had signed the treaty by 1996. Indonesia, Malaysia and the Philippines led the way, signing in 1993. Even neighbouring Vietnam, one of the most recent ASEAN members, had developed a national response to the Basel Convention in 1995.

With government agencies either reluctant to research the issue of transboundary waste or lacking the finances and expertise to do so, it has been left to concerned independent environmental NGOs, academics and watchdogs to delve into the murky depths of this hidden trade. More than 200 NGOs are estimated to be working on issues of environment and development in Thailand and they have collectively played a major role in increasing popular environmental awareness among the public and the media. In 1995 the Project for Ecological Recovery (PER), a Bangkok-based NGO, described Thailand as a major 'dumping ground' for hazardous waste:

In the period 1990–1993, an estimated 4,446 tons of hazardous waste entered Thailand in the form of raw wastes such as solids, sludges and slag, and spent consumer products like batteries from Australia, UK, and the US with about 17.2 tons of plastic waste coming from the US. The import of asbestos, a highly toxic building material banned in most industrializing countries in the 1980s, has risen from 50,690 tons in 1978 to 128,126 tons in 1992 (PER 1995:36).

According to PER, Klang Toey is the centre for most illegal dumping of imported hazardous waste. This problem is compounded by the fact that the Port Authority of Thailand (PAT) only monitors two ports on the Chao Phraya River but is unable to track the movements of toxic waste entering Thailand through both private and public ports in and around Bangkok. Part of the difficulty facing the authorities is a lack of human and capital resources to monitor the situation.

Both NGOs and the local media have highlighted the fact that transboundary waste is not only being dumped in Thailand by industrialised countries of the West, but also by its neighbours in Southeast Asia such as Malaysia and Singapore. Singapore has been singled out by Greenpeace as a transit station for the distribution of exported waste (Chandrapanya 1993).

The social and health dimension

Most of the data on possible health and environmental consequences of transboundary waste in Thailand are connected with accidents at Klang Toey. The port is surrounded by Thailand's largest urban slum of the same name.

The social and health impact of the series of chemical fires and explosions in the early 1990s on the residents of Klang...
The continuing import of transboundary waste into Thailand was devastating. By far the worst incident was a massive explosion that rocked Klong Toey’s chemical port warehouse on 2 March 1991. Numerous other chemical containers exploded and the ensuing fire quickly spread into the overcrowded slum communities of Klong Toey. According to PER, the toxic fire destroyed hundreds of shanty houses in the adjacent Koh Lao community, killed ten people and left some 6,000 people homeless (1995:37). Estimates by NGO observers indicate that the death toll has risen to between 28-33 people since 1991, with another 37 people terminally ill as a result of inhaling toxic fumes (PER 1995:37). About 1,700 people suffered from toxic gas inhalation and 206 developed skin allergies. Hundreds of others continue to suffer skin rashes, nausea, swollen eyes, respiratory problems and psychological trauma.

The 1991 Klong Toey explosion drew the attention of the Thai public to the insidious dangers present in stored chemicals and other wastes in their country. More than 3,000 chemicals were estimated to be in storage at Klong Toey warehouses prior to the explosion (PER 1995:37). The Port Authority of Thailand later disclosed the name of 23 chemicals, including the extremely toxic formaldehyde and methyl bromide which cause long-term damage to the central nervous system often resulting in death (PER 1995:37). Hundreds of families affected by the disaster have been repeatedly refused any form of compensation for medical bills and loss of livelihood by the Port Authority (Thai Development Support Committee 1997:18-19).

Beyond the obvious physical suffering endured by the victims of the blast, lie a plethora of long-term social problems for people who have been deprived of their homes, employment potential and overall sense of security and well-being. Such a calamity compounds the burden of poverty already being suffered by this marginalised sector of Thai society. Concern for these issues should lie at the heart of public and official attitudes to the problem of transboundary waste. Unfortunately social and health considerations do not appear to be at the forefront of the legislating and policy making minds of those responsible for public welfare.

The political dimension

The continuing import of transboundary waste into Thailand is reliant on the government’s ‘incapacity’ to prevent this illegal trade. In 1994 Thailand amended the Hazardous Waste Act of 1967 to control the import and export of hazardous waste, banning 77 materials. Yet in 1997 the Bangkok Post reported that hazardous chemicals were again being stored in unsafe conditions at Klong Toey port. The depot under investigation was on Treasury Department land so the Port Authority was ‘powerless’ to resolve the situation. The toxic substances were in ‘transit’ for the US Dow Chemical company (Thai Development Support Committee 1997:18-19). This example of dysfunctional ‘management’ illustrates why the issue of transboundary waste is unavoidably political. The presence of multiple players necessarily politicises the analysis.

Managing an issue as complex and demanding as illegally imported waste requires a long-term commitment to sustainable environment principles from the government, as well as a political willingness to cooperate internationally by implementing the legal and procedural requirements of the Basel Convention. During Thailand’s three decades of rapid development, the government has based its decisions on five-year National Economic and Social Development Plans. From 1981 these plans began to finally acknowledge that depletion and degradation of the country’s environment and resource base ‘... required a total revision of the development perception to one in which the resource base acts as a constraint to economic development’ (Manopimoke 1997:48). In the Seventh Plan (1991-96) this focus was sharpened with a formulation based on broad-based participation – the cooperative effort of all sectors, including government agencies, state enterprises and universities, the private sector and NGOs. Supachit Manopimoke, however, points out that the rhetoric is not always matched by action, with the plan lacking a number of effective pollution control mechanisms (1997:51). For example, the ‘polluter-pays’ principle was adopted without a clear enforcement strategy. Although Manopimoke is not referring specifically to the problem of transboundary waste, her observations highlight the government’s record of failing to establish a systematic, integrated and rigorous framework of environmental policy, of which the elimination of transboundary waste must necessarily be an important focus.

An international perspective

Despite evolving support for the Basel Convention and the 1994 ban on export of hazardous waste from OECD countries to non-OECD countries (commonly known as the Basel Ban), Greenpeace claims that a small number of stakeholders (governments and international business organisations) are seeking to undermine the international community’s will for change (Greenpeace 1997). Greenpeace claims to have uncovered evidence that shows that the US and Australian Governments and a small sector of industry, comprised mainly of companies dealing in scrap metal, are lobbying non-OECD governments to break ranks with other non-OECD countries. Although Thailand was not named by Greenpeace as one of the countries being pressured by the anti­Basel brigade, they have yet to sign the Basel Ban, in spite of signing the Basel Convention in February 1998.

The environmental dimension

Following the chemical explosion at Klong Toey port, the government transported the toxic remains to an army facility in Kanchanaburi province and buried it there without informing the public of its actions. A women’s group identified the site...
and galvanised local organisations and villagers into protesting against its presence. Fearing that chemicals would leak into the local water sources, they called for the government to establish a secure disposal site.

Their fears were well-founded. In 1993, tests revealed that underground and surface water in areas surrounding the dump site was contaminated by heavy metals (Bangkok Post 8 August 1993). Villagers using underground water drawn from wells for bathing began to develop rashes (Bangkok Post 9 August 1993). Finally, in 1995, the Fort Authority of Thailand agreed to build a landfill within a military compound in Kanchanaburi (Bangkok Post 31 March 1995:1). As part of this new ‘secure’ process, phenol was burnt in a field close to three villages. At the time, the Pollution Control Department admitted that the best way to get rid of the chemical waste was to burn it in high-temperature incinerators which Thailand did not possess (The Nation 5 April 1995:A1).

Thailand has coped with a lack of toxic waste plants for much of its accelerated period of economic growth, leading to a range of serious problems. Thai Development Support Committee representative Wipaphan Korkeatkachorn (1997:57) cites the following concerns:

- A majority of toxic wastes are dumped in public places, ie canals, rivers or forest reserves.
- Toxic waste is mixed with community waste in the municipality’s landfill. Many factories hired private companies to treat their waste without any control.
- Often toxic waste is stored in factories waiting to be treated.

To remedy the situation, the government planned to build three toxic waste treatment plants in Chon Buri, Saraburi and Rayong provinces. A fury of protests, however, prevented the plan from going ahead. While the communities’ actions could be viewed just as a case of ‘not in my backyard’ (NIMBY) syndrome, they are also evidence of a growing public awareness of the issues of environmental health and a sense of ownership in participating in the democratic process.

In 1994, the government approved a joint venture between the General Environment Conservation Co (GENCO), GCN Holding Co, the US-based Waste Management Inc (WMI) and the Ministry of Industry to build four toxic waste plants in the provinces of Rayong, Chonburi, Ratchburi and Saraburi. Once again a series of protests ensued after the government failed to answer villagers’ enquiries about possible health and environmental problems. Following one public hearing in Pluak Daeng district in Rayong on 17 January 1996, one of the village leaders activating against the building of the plant was murdered. The villagers’ main concern was that toxic waste might leak into the main reservoir because the proposed site was only 500 metres from the main water source for two provinces (PER 1995:39). The GENCO joint venture not only reflected the problem of people’s lack of access to information which directly affects their lives, but also the lack of mechanisms in place to resolve issues of conflict and encourage community participation in what should be a process of public decision making.

Furthermore, there were major concerns with GENCO’s assurances that the waste would not leak. GENCO’s technology for treatment plants comes from WMI, the world’s largest waste-hauling and disposal firm, with total revenues exceeding six billion dollars in 1990. Greenpeace have argued that: ‘... the “state-of-the-art” waste disposal technology practiced by WMI does not work, and ... the history of waste disposal in the US reveals that wastes cannot be safely controlled after they are created’ (PER 1995:39). One might question the ethics and appropriateness of Western-based monopolies, whose economic success depends on the ongoing existence of hazardous waste; playing a major role in the clean-up of wastes in developing countries where these companies may very well be involved in contributing to transboundary waste movements into the countries they are ‘assisting’. Due to ongoing pressure from environmental and community groups, the government finally agreed in January 1997 to establish the toxic waste treatment plant and landfill in Mab Ta Phut Industrial Estate, not in Pluak Daeng district in Rayong as originally planned (Korkeatkachorn 1997:61).

The legal dimension

Environmental NGOs in Thailand have consistently pointed to the lack of integration in the country’s environmental protection framework. Despite having more than 70 laws and regulations in place which relate directly or indirectly to environmental and pollution issues, Thailand does not have an integrated legal framework for the control and prevention of pollution (PER 1995:41). The legislative framework for pollution control is covered by five main laws, all of which were enacted in 1992: Enhancement and Conservation of National Environmental Quality Act, Factory Act, Hazardous Substances Act, Public Health Act, and Cleanliness and Orderliness of the Country Act. Five different ministries have jurisdiction over these laws, including Industry, Public Health, Science, Technology and Environment, and Agriculture. The National Environment Board (NEB) was established in 1975 as the country’s first environmental agency and in 1992 was reorganised to fulfil the requirements of the Enhancement and Conservation of National Environmental Quality Act. The NEB was restructured into the Pollution Control Department, Office of Environmental Quality Promotion, and Office of Environmental Policy and Planning.

Thailand’s most recent significant step towards seriously dealing with the issue of transboundary waste was its signing of the Basel Convention in February 1998. The Convention is an evolving entity and subject to constant review by the Contracting Parties (UNEP). One of its shining achievements was the 1994 consensus by the 65 member countries of the Convention to ban all exports of hazardous waste from OECD to non-OECD countries by 1998 (Decision II/12 or the Basel Ban). Two aspects
regarding Thailand's commitment to prohibiting the import of hazardous waste need to be raised: the government did not sign Decision II/12 when they signed as members of the Convention; and Asia is the only region in the world which has not negotiated an agreement to limit the movement of hazardous wastes between its countries.

One of the obstacles to Thailand's full commitment to the objectives of the Basel Convention may lie in the ongoing controversy surrounding legal definitions in the Basel Convention. Until members of the Convention had agreed to Decision II/12, there was little concern about Basel definitions of hazardous waste. Since 1992, governments have been using the Basel definitions to implement the Convention in national law. The semantic wrangle is connected to the 'recycling' trade in hazardous wastes. Greenpeace claims that recycling has been used as a front for much of the illegal movements in hazardous waste. Decision II/12 threatens to end sham recycling operations in the less industrialised world, but representatives from the US and Australian Governments, the Bureau of International Recycling (BIR) and the ICC claim that the definitions are incoherent and unworkable. Greenpeace asserts that this is a beat up to stall the process of eliminating all trade in hazardous waste. As the discussion has so far revealed, Thailand is involved in importing hazardous wastes for recycling purposes. Because of this, the Thai Government may feel unready to yet commit to the full requirements of Decision II/12 which aims at eliminating this practice as far as possible.

One interesting development in Thailand's attitude towards transboundary waste is its recent decision to sign bilateral agreements to export hazardous waste to the OECD countries of France, Finland and England, which have better waste disposal facilities than Thailand. This move may reflect a positive shift in awareness by the Thai Government.

Possible future strategies for Thailand

Over recent years, Thailand has been faced with increasing quantities of hazardous wastes being imported by both industrialised countries of the West and regional neighbours such as Malaysia and Singapore. With only one online hazardous waste treatment plant, this waste often ends up stored at already over-taxcd production sites and ports or illegally dumped and burnt in provincial areas. As the quantity of this hazardous waste grows, the government is looking urgently for technological solutions. These technological approaches, however, are increasingly meeting with resistance from environmental groups and local communities (Korkeatkachorn 1997:59).

Furthermore, it is extremely unwise for developing countries to use the import of toxic waste as a pillar of economic development, it being an unsustainable economy and yet another form of indebtedness. Instead non-OECD countries should begin to see a huge economic gain in avoiding costs to human health and their own environment and resource base (Greenpeace 1997). The following is a list of possible broad-ranging strategies that could allow Thailand a future without suffering the environment and health-threatening consequences of other people’s waste.

Integrated planning and implementation of strategies

Thailand’s capacity to monitor and prevent the import of hazardous wastes is reliant on cooperative planning and action which is oriented to the ‘prevention’ of health and environmental problems and the involvement of all levels and sectors. Government should implement an integrated and coordinated approach to the problem, combining the forces of the public authorities concerned with health, environment, pollution control and industry.

Local and international cooperation

An integrated approach should take full advantage of the contributions of environmental NGOs and international organisations, such as Greenpeace, to resolving the issue. In signing the Basel Convention, the government has taken the first step in participating more fully within the international context, and it should take full advantage of the international forum provided by the Basel Convention for future management of the world’s environment. Thailand could take a lead role in encouraging its neighbours to become involved in a regional commitment to end the illegal trafficking of hazardous wastes.

Research and planning

Despite growing health concerns about hazardous waste, there has been very little in-depth research on the health and environmental impacts of toxic waste. Thailand should commit itself to seriously developing the specialised knowledge and expertise needed to effectively cope with the complexity of the transboundary waste problem. The government should fully utilise the massive research base already in existence internationally, as well as dedicate funding to educating professional personnel to specifically develop targeted strategies for eliminating illegal imports.

Public information

Blatant disregard for the public’s ‘right to know’ about potential dangers to their health, homes and livelihoods is perhaps the most glaring issue in the transboundary waste debate. In the Klong Toey incident, the residents of the adjacent slum communities were not informed of any possible dangers from the stored hazardous wastes at the port, even though authorities were well aware of the presence of these wastes for some time.

Situations such as these highlight a serious need for the Thai government to inform its citizens of what is being planned for, or already going on, in their neighbourhoods. In the wake of feisty community protests against the planned GENCO waste
treatment plant in Rayong, the company admitted that it should have concentrated on helping villagers understand the project before attempting to force their hand.

**Community organisation and participation**

There is a pressing need for the Thai Government to recognise the principle of community participation in their policy formulation and strategic planning for environmental and health issues. In the examples above we have seen how communities can collectively change government decisions through solidarity and awareness. Instead of this being a situation of 'them versus us', the government should proactively involve communities in the planning stage of any strategies which may affect them. The government should respect the rights of its people and utilise the process of constructive consultation and negotiation prior to making decisions regarding the health and environment. This attitude is the only way forward within a sustainable development framework.

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Beyond our borders

Rachel Sacks, Body Positive Inc.

In the USA, people living with HIV and AIDS face a host of new challenges to living successfully with their disease. These challenges arise in the medical, social, and political arenas alike: despite the promise of today's drug therapies, the price of HAART (Highly Active Antiretroviral Therapy), both financially and physically, is prohibitive to many Americans. Meanwhile, legal changes in state-level AIDS reporting threaten the collective sense of social and personal security. We watch our rights to privacy progressively slip away from us and into the jurisdiction of state governments only too eager to assume responsibility for notifying our 'contacts' of our serostatus.

But in the less developed countries of the world, where the vast majority of HIV infections are occurring, the perspective on 'living with HIV' is much different. HIV-positive people in less developed nations also face challenges from the medical, social, and political arenas, but these challenges are lumped together into one giant 'development' problem of macroeconomic proportions, to be addressed by archaic bureaucracies.

This idea may sound familiar to Americans with HIV and AIDS and to AIDS service providers who have been frustrated time and again by their dealings with federal and state governments, insurance companies, and hospital associations. But in the less developed world, the state of AIDS service delivery in the United States sounds like a dream come true. American 'problems' embody an enviable state of political and social development, never mind their indications for health service availability.

Abroad, the AIDS pandemic is causing such massive economic and social devastation that the 'hot issue' is not, for example, how to safeguard employment for people with the virus; rather, it is how to ensure that in ten years enough people will still be alive in a given country to fill the jobs available. HAART is utterly irrelevant in the three-quarters of the world where AZT represents the limits of sporadically available pharmaceutical innovation. And in countries where no legal protections ever existed for people with HIV and AIDS, a lack of privacy is assumed, not lamented.

Those frightening statistics: The Asian example

Meanwhile, in the West, we've heard statistics from around the world that are so shocking in their magnitude that we cannot even fathom them. In mid-1998, South Africa admitted that nearly one-quarter of its population is estimated to be HIV-positive, recalling the horrors of the earliest AIDS stories from the African continent. In January 1999, India heralded the advent of the nightmare proportions of HIV prevalence in Asia, estimating that up to four million Indian citizens were living with HIV.

The New York Times prints an occasional piece to illustrate these figures, but these numbers are simply incomprehensible. Reading a Times story in a Western urban reality, our collective perception is unavoidably skewed. Contrary to what we might think, the article about a Calcutta-based AIDS service organisation (ASO) does not indicate a strong presence of AIDS services in that mega-city; it indicates only the experience of one Indian ASO, with maybe one medical professional among nine staff members, serving Calcutta's 15 million residents.

And Calcutta represents the best case scenario: the majority of the developing world is rural, and poorly served by roads, telephone lines, and even post offices. Hospitals are spartan facilities, often depending on reusable syringes and offering only the most basic of medical services. Despite the skyrocketing numbers, there simply are no services developed specifically for people experiencing AIDS-related illnesses.

Extreme as this statement may seem, the experiences of HIV-positive people throughout the Asia-Pacific region only confirm its sad truth. The diversity of the region is fantastic, and its experiences with the AIDS pandemic are correspondingly varied. Yet one constant within all of this variety seems to be the lack of care for people with HIV and AIDS.

Thailand

Even in Thailand - the country so often touted as the AIDS 'success story' - facilities for people experiencing AIDS-related illnesses are so overrun with patients that no new cases can be accepted. According to Brother Richard Bunch, PhD, who directs a residential centre for people with HIV and AIDS in Bangkok, 'One of the largest medical facilities for people with HIV and AIDS in Thailand, located in Bangkok, serves 500 people every Friday in its outpatient clinic - but only 30 beds are designated for AIDS care on an in-patient basis.'

Now that scores of Thais who were infected with HIV in the early and mid-1990s are progressing to AIDS, where are they receiving care? 'Not at a hospital', Brother Richard responds simply. 'Despite the well-known fact that if opportunistic infections are treated early, people with HIV and AIDS will live longer and healthier lives, hospitals accept only the most serious of AIDS cases. Unless you are in the late stages of chronic illness,'
you must seek care elsewhere.'

And that care will almost certainly be on an extremely limited, outpatient basis. Even those who are lucky enough to live in Bangkok and can get to the capital’s AIDS clinics are normally sent home armed only with a bottle of penicillin to aid them in their fight against AIDS.

While Americans lobby for the development of pharmaceuticals with fewer side effects, Thais gasp at the boggling array of medicines available in the United States. The national organisation of Thai People Living With AIDS is indignant at the fact that American universities carry out research throughout Thailand, while no pharmaceuticals are regularly available from even the best Thai hospitals. For HIV-positive people who do not happen to be pregnant women involved in an AZT trial, access to even that archaic antiretroviral is an unattainable dream.

‘As a community health practitioner in Thailand, pharmaceuticals are irrelevant: to my work,’ agrees Brother Richard. ‘I’ve heard about “the new drugs”, but I don’t even really know what that term means, because we don’t have treatment information services or easy Internet access to web pages over here. Moreover, for the average Thai, those drugs are absolutely, categorically unattainable.’

Throughout Asia, including the vast majority of Thailand’s rural areas, the only ‘medicines’ that exist are found in the local AIDS service organisation’s herb garden. While an increasing number of Americans and Europeans with HIV and AIDS are turning to herbs and Eastern therapies as their Western medical regimens, this ‘alternative’ medicine is the only therapy to which most Asians have access.

Northern Thailand’s ACCESS, an ASO that has been active in the fight against AIDS since the Thai epidemic’s beginnings, has made a priority of training a cadre of Thai villagers to travel through the more remote areas of the North to teach people about herbs and home care for the HIV-positive. And spreading the knowledge isn’t easy: travel to these remote areas is often extremely difficult and can be totally impossible during Thailand’s three-month rainy season, when mud roads are washed away.

What’s more, the Asian financial crisis may be in the process of knocking Thailand’s fight against AIDS back to its pre-‘success story’ levels. When the Thai currency crashed in June 1997, international aid agencies had long since decided that Thailand was well on its road to development. Many agencies were in the process of dramatically curtailing their aid to Thailand, if not entirely closing their doors. By 1996, when mass prevention campaigns ensured that every Thai schoolchild had heard the word ‘AIDS’, and when infections suddenly dropped among male army conscripts, the battle was thought to be won.

For this reason, when the economic crash occurred, few emergency measures could be implemented to offset the damage to Thai development efforts. Decisions to pull out of the country had already been made. With the Thai baht devalued and industries folding by the dozen, the Thai Government lost any power it might have had to compensate for the closure of these agencies. Not only could the government not afford to fund new AIDS programmes, but it lost the ability to support existing ones. Now, in 1999, while Thailand is still reeling from a two-year-old financial crisis, the outlook is again dark.

India

On the other hand, the Indian Government suddenly seems to be receiving all of the attention and assistance that the Thai Government recently lost. Because AIDS is considered a development problem, HIV/AIDS-related programmes must submit to the volatile whims of politicians. Since the 1960s, voices from the health and social sectors have been raised against the capricious and unsustainable nature of bilateral and international economic development programmes, which can include initiatives sponsored by the United Nations, the United States Agency for International Development (USAID), Family Health International, and a huge array of other international players. Yet even in 1999, no significant structural changes in the disbursement of aid have been achieved; one country’s massive need for international aid must be served by the redirection of funds from another, ‘less needy’ country. Because the perception of need is relative, there is simply no absolute measure of progress or achievement.

India paved the way for the shipment of truckloads of international AIDS-designated money when Prime Minister Atal Vajpayee publicly admitted in late 1998 that India indeed has a massive AIDS problem. This public admission was the result of months (if not years) of behind-the-scenes work by UNAIDS, the United Nations Joint Programme on HIV/AIDS, whose charter is limited to the coordination of AIDS programmes being carried out by other UN agencies in the developing world.

‘Our role is often gravely misunderstood by local agencies and governments alike’, comments one Geneva-based member of the UNAIDS team. ‘We are mainly a coordinating body – we don’t allocate money or implement programmes, as our charter does not allow us to do so. Instead, we assist the programme–matic efforts our six member UN agencies: UNDP (United Nations Development Programme), UNICEF (United Nations International Children’s Fund), UNESCO (United Nations Educational and Scientific Organisation), the World Bank, UNFPA (United Nations Population Fund), and WHO (World Health Organisation).’

He goes on: ‘We sometimes sponsor a conference or a training session, but primarily we give needed support to these six “implementing” agencies. We advise governments, promote the sharing of information, and carry out advocacy efforts on their behalf.’

But in the field, UNAIDS’s role is indeed misunderstood. Asian ASOs expect some level of support from the principal UN body responsible for AIDS programmes, and are almost
universally frustrated by the perceived lack of involvement on the part of UNAIDS. Although UNDP and others are supposed to seize the 'AIDS mantle', the plethora of all types of international agencies working in the field leaves plenty of room for international workers to assume that somebody else is doing the funding and the programming for AIDS.

Most local ASOs have come to expect little from international funders. Even when money arrives, it is often severely restricted to direct programmatic costs—excluding even the salaries of core staff. 'General operating costs are virtually never covered', according to Dr Ramesh Goud, the founder and director of the SOS Medical and Educational Foundation in Nasik, India. 'On a line-by-line basis, we might ask for a reasonable salary for a staff member, or for funding to purchase the most basic computer. But if we do so, we can count on being grilled about these line items when the time comes for funding allocation.' To offset these costs, Dr Goud is currently pursuing a for-profit venture to produce money to support the activities of his ASO.

'The strategy is intended to supplement our international and national funding alike,' Dr Goud notes simply. 'Despite the efforts of the government and NACO (the National AIDS Control Organisation) there just isn't a lot of national money to access. The creation of a business venture, which feeds its profits directly into SOS Foundation, would provide us with a small but stable income to complement the money we receive from donor organisations. The need for new programmes and new sources of funding is constant.'

And the need is great, even in the richest areas of India. Nasik is a progressive city, a highly industrialised commercial centre, located four hours north of Mumbai (Bombay). Yet no hospital in this city of several million inhabitants will serve a person experiencing AIDS-related illnesses.

'We have been working with commercial sex workers, truckers, and many other groups for almost ten years,' says Dr Goud. 'Now we're training and sensitising police officers to the AIDS situation in classes at the police academy. But what do I tell them to do when people actually test positive and need help? Where do I tell them to go? I can counsel them about what it means to live with HIV, and I can tell them everything I know about the Western drug regimens. But, in reality, even the most basic medical care is financially and logistically unavailable to them.'

It is undeniable that local AIDS service organisations throughout Asia have created innovative care and support programmes in the most remote reaches of many countries, but their chronic lack of resources and high levels of staff burnout constantly threaten their very existence.

Is it worth fighting?

In between the extremes of Thailand and India lies a spectrum of Asian countries and Pacific Island nations whose diversity in sociocultural and economic terms is reflected in the variety of their experiences with the AIDS pandemic. To cite a few examples:

Vietnam's rapid economic development in the last decade was accompanied by the explosion of its commercial sex industry, which led to the quick entry of HIV and its spread throughout the general population. Today, transmission among Vietnamese youth is of primary concern. Bangladesh's huge population of overseas workers guaranteed the entry of HIV from neighbouring Thailand and Malaysia in the early 1990s. The primarily Muslim population of Bangladesh has struggled to come to terms with AIDS education and prevention. Care for AIDS-related illnesses has not yet been addressed on any significant scale. The Philippines benefited from its geographic isolation, which delayed the entry of HIV. However, the return of Filipino sailors and overseas contract workers brought HIV to the islands, and now the Catholic Church poses the biggest threat to AIDS-related service provision.

With such diverse problems to confront, the international AIDS scenario indeed seems a pessimistic one. But when appropriate allocation of funding is of such primary importance, Americans have a huge role to play in positively affecting AIDS abroad.

Western funding is critical to sustained AIDS prevention and support programmes throughout the entire world. Yet many Western funders are simply out of touch with the day-to-day realities faced by people with HIV and AIDS and by AIDS service organisations in developing nations. In the best case scenario, international funding agencies set their priorities according to the advice of Western researchers and academics—but these academics often possess little, if any, on-the-ground experience with AIDS abroad. Their advice is therefore biased toward a Western view of the pandemic.

Dr Ralph Frerichs, Chair of the Division of Epidemiology at University of California–Los Angelos's School of Public Health, represents an extreme version of this type of academic. He has tirelessly advocated for mass HIV testing in the Asia-Pacific region, bringing his viewpoint to settings as diverse as the Southeast Asia-based e-mail discussion forum on HIV/AIDS called SEA-AIDS, and a satellite session of the Fourth International Conference on AIDS in Asia and the Pacific held in 1997 in Manila.

Mass testing certainly assists researchers, and it can be argued that good statistics on HIV prevalence are a prerequisite to good HIV/AIDS-related programming. But in a situation of increasingly limited funding and dire need, is testing the most appropriate response? Individuals who test positive simply cannot live successfully with their disease if even the most basic medical services are not available to assist them. Is it worth spending millions of scarce international dollars to implement mass testing in the developing world, when no money will remain to fund those basic services?

There are notable exceptions to this bleak scenario of poor advocacy and bad funding decisions. The Ford Foundation, for
instance, has a long track record of appropriate, sustained funding to local organisations in countries throughout the world. Ford's tendency toward multiple-year grants and its technical assistance to grantees are especially laudable features of its efforts to make AIDS funding more sensible and more sustainable.

But often agencies that are making poor funding decisions are doing so in a vacuum, without any external eye surveying them. In America, our eyes glaze over at the idea of 'four million Indians infected', to the extent that we cannot even consider what a sensible approach to a problem of that magnitude would be. We assume, therefore, that someone more knowledgeable than we are is dealing with that problem.

Yet, while we stall, AIDS has already begun to force developing nations to forfeit all of the economic strides they have made in the last few decades. Without a doubt, this economic devastation and its accompanying political and social consequences will come back to haunt the Western world.

In the United States, the common perception seems to be that designating even one drop of funding to international AIDS will take away from America's own needs. But international aid and domestic health and human services come from entirely different budget lines. Giving to AIDS abroad does not automatically mean deduction from AIDS domestically.

Advocacy for this type of international funding, however, is sparse and sporadic. An organisation called GAAN, the Global AIDS Action Network, spearheads ongoing lobbying in Washington for increased international AIDS funding, but most advocacy occurs only in response to blatant attempts to cut foreign assistance.

In fact, USAID's overall budget of US$900 million represents less than three per cent of the entire national budget: the US allocates a smaller percentage of its budget to foreign aid than any other Western nation. In 1998, only about 12 per cent, or US$121 million, of this foreign assistance was designated specifically to AIDS control and care programmes.

USAID will actually receive a small US$4 million increase in its overall budget for 2000. Considering the state of emergency beyond our borders, however, this tiny increase seems almost more of an insult than a victory.

What a sharp contrast to America's domestic commitment. In this long and dramatic American AIDS epidemic, Americans have witnessed campaigns, speakers, and advocates of every background render domestic AIDS funding an absolutely integral part of our national budget and concerns. Of course, the money is never 'enough,' but the commitment is there. If there was even a fraction of that type of sustained dedication to AIDS abroad, the US would certainly contribute to a massive reduction in the impact of AIDS in the developing world.

This prediction can be substantiated by the fact that until very recently American foreign assistance funded only HIV-prevention efforts. AIDS-related care was categorically excluded from consideration. Yet, according to Paul Boneberg of GAAN, it was the National Association of People with AIDS, or NAPWA, that led efforts to put AIDS-related care on the foreign assistance agenda. NAPWA's leadership demonstrates the contribution that Americans can make to the international agenda simply by demonstrating interest and concern in their areas of expertise.

Funding is not the whole answer. Skills and experiences, so ordinary in the context of American life, can greatly aid workers and HIV-positive people abroad. American ASOs, people with HIV and AIDS, and universities have much to offer their international counterparts in terms of technical assistance, educational exchanges, and other types of non-monetary support. The National Minority AIDS Council, the Latino Commission on AIDS, and the Global Network of People Living with AIDS are all making strides in creating stronger cross-border partnerships.

Above all, it is our attention that is needed. Take a trip to a less developed country, and have a look around.

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Village-level development and the role of non government organisations

Colin Barlow, Department of Political and Social Change, The Australian National University

The role of NGOs

Government in Eastern Indonesia has performed well in establishing infrastructures and providing education, health and research services. Its record in technical extension and encouragement of micro-level social and economic development is less impressive, however. This is partly due to constrained development resources, where one extension officer without proper transport is often expected to cover 10–20,000 persons. This means rural dwellers have little access to officially provided information about improvements in agriculture, health or education.

Business people coming to the village can provide some new information, but experience shows they will not usually risk entering fresh ventures in places where they face several years with little if any profit. These traders concentrate on tried enterprises, rarely embarking on projects not previously pioneered by government or other bodies.

This leaves NGOs as the third major class of intervenors whose growing activities have served Eastern Indonesia well over the past three decades. Today 500–600 chiefly small village development-oriented NGOs operate in the region, with most involving up to five to ten staff who concentrate their work in a few localities. NGOs have indeed demonstrated special advantages over other intervenors in community-level interactions and activities, which is precisely where more intervention is needed. They seem with their characteristically prolonged local contacts to be good at harnessing community participation, involving especially management, labour and local materials. They have in many instances been able through this to assist in achieving long-run sustainability. The development approach of NGOs is relatively cheap, and its main reliance on contributed local resources means that costs are below one-quarter of government programmes with similar goals.

Some foreign NGOs also operate in Eastern Indonesia, having the advantage over local NGOs in greater access to funds and also being able to contribute useful technical ideas to projects. Some of these foreign entities engage directly with communities, but usually they act through intermediary local NGOs based in places they are targeting.

At least seven Australian NGOs work in Eastern Indonesia, with this number including the Nusatenggara Association (NTA), a Canberra-based body with an Australia-wide membership. The NTA focuses on the island of Timor just north of Australia, where it has around 100 small economic and social projects in selected districts. One of these districts is the kecamatan of Semau island in the Timor Sea, and there the NTA has been involved for over eight years in cooperative endeavours with a local NGO and the population of some 13,000 persons in 55 villages. Much of the NTA's experience in this and other targeted localities reflects that of other small to medium-sized NGOs, and some of its activities throw light on development through such organisations at the rural level.
The NTA's activities

These include assistance with economic projects such as building stone walls for better animal management, establishing nurseries producing improved animal forages, and promoting cash-earning activities including the distribution of cattle and goats for fattening, the cultivation of garlic for sale, the production of seaweed on offshore rafts, and the making of traditional cloths or ikat. The NTA's activities also entail social projects including digging wells, reticulating water from springs, constructing household toilets, providing special primary school facilities including water closets and wells, and training school teachers through short courses. Most activities have had good outcomes, although some have failed or fallen short of expectations for reasons discussed below.

Activities are all small, being deliberately dispersed amongst many villages with the idea that what is undertaken can then exercise maximum 'spread effects'. This hypothesis has been shown to have practical validity, and such a 'dispersal policy' is still being continued. So far as possible activities involve rotating credit, where the small local cooperatives or kelompok implementing activities in conjunction with the NTA and the associated local NGO subsequently collect back loaned money or the value of in-kind materials, passing such funds on to new participants. This too has assisted in promoting the spread of new techniques in given locations. Activities are only progressed after detailed discussions with local communities and leaders, with these preliminary explorations normally taking at least a year. The local parties include villagers elected as government officials under the standard Indonesian system, traditional leaders under adat, bodies such as parent-teachers association or cooperative, or clan groups, and ordinary families likely to become involved in projects being canvassed.

All activities are conducted through the traditional Indonesian organisational unit of a kelompok or cooperative group, where the 20 families undertaking, say, the construction of household toilets in a village band together with an elected leader and treasurer. The necessary materials are delivered by the NTA and its associated local NGO through the leader, and people make their repayments to the treasurer. Most activities have taken a long while to implement, with toilet ventures of the nature just mentioned probably taking a year to complete under most circumstances.

But it has also been noticeable that peoples' rates of learning perceptibly increase over time, and the last two years have seen the onset of what can be termed 'second-generation' activities. These are more sophisticated efforts which can now be undertaken and which build on earlier experience of villagers with simpler projects. They include, for example, projects to use generators and water pumps in conjunction with earlier established wells to water garlic, and the production of seaweed which not only involves quite sophisticated production technology but also arrangements to process, crop and market it overseas. Such second-generation activities are being financed through repayable loans rather than rotating credit, with the NTA operating partly as a loan agency in the absence of other credit-extending bodies.

Difficulties

There are many difficulties in such work, one of the most major being achieving effective monitoring and control of flows of funds in projects. Careful scrutiny is absolutely essential to avoid misuse, and involves frequent in-field inspections combined with accounts scrutiny independent parties. It further entails achieving transparency in operation, where one significant feature is trying to ensure that most involved villagers are aware of what should be happening. Funds misuse is in fact common amongst NGOs, and is often connected with corrupt staff who are the most frequent reason for the collapse and disappearance of such bodies. This problem accounts for the highly cynical view of NGOs commonly held by government officials, business persons and others outsiders. The NTA has tried to minimise such occurrences by actively implementing the above measures, which also entail regular inspection and checking visits to villages and projects by Australian and Indonesian members independent of other local NGOs and persons involved.

Another major difficulty arises from deficient technical knowledge and consequently poor arrangement and management of inputs leading to inferior project performance. This problem is essentially due to the small-scale nature of the NTA and other small to medium NGOs, which cannot afford good technical levels in their staff. The NTA has faced this problem in many activities where goat projects, for example, have experienced frequent disease and consequent high mortality. Combating such disease has proved very hard, with most treatments used turning out to be ineffective. The NTA has also had setbacks with forage and seaweed production activities, but has now largely overcome those by retaining rather expensive specialist expertise. NGOs can in fact usually get technical assistance from government and other outside bodies and persons, but apart from its considerable expense are reluctant to take advantage of it owing to a characteristic independence.

The final difficulty alluded to here is that of poor community leadership. When it exists it makes it hard if impossible to execute effective projects. The NTA and its cooperating local NGO has faced this problem in several villages on Semau island, and in each case elected officials have failed through leadership incapacity to keep communities together as viable groups. This has led to internecine rivalries, often also encouraging free-riding mavericks who act to further wreck community cohesion merely to secure personal gain. Under such circumstances it has proved wise to stop further projects until community difficulties are overcome; such places have been nicknamed 'recalcitrant' villages, where no effective progress can be made. There was one previously progressive and successful village on Semau where
corruption of a leading official some five years ago led to breakdown of the community and the gradual collapse of ventures previously launched. In practice little can be done about such circumstances by the NTA and other outsiders, with such deficiencies being really a matter for communities to resolve.

Conclusion

Eastern Indonesia with its poor facilities, far-flung communities and predominant rural economy based largely on subsistence agriculture is a region where development is difficult, although much has been done by government to improve infrastructures over the last few decades. Yet it has important potential which could improve incomes and welfare of communities.

Despite problems, NGOs have proved effective in village-level development, which is where government has found it especially hard to make progress. Australian development-oriented NGOs can assist as their participation is particularly appropriate given the proximity to this country of Eastern Indonesia.

Development through NGOs deserves more encouragement from both the Indonesian and other foreign governments, with the Australian Government too needing to give further consideration as to how to facilitate such low-cost improvements.

For more information about the Nusatenggara Association, contact PO Box 677, Jamison Centre, ACT 2614, Australia, Tel +61 2 6251 2507.
Being female in Melanesia today: Indigenous women’s voices 1998

Bronwen Douglas, State, Society and Governance in Melanesia Project, The Australian National University

This article samples contributions by Melanesian women to a State, Society and Governance in Melanesia (SSGM) Project workshop on ‘Women, Christians, citizens: Being female in Melanesia today’, held in Sorrento, Victoria, in November 1998.

It is a truism that Melanesia is strikingly diverse – in languages, cultures, social arrangements, and increasingly in socioeconomic circumstances, as class divisions overlay and complicate the fragmentation of indigenous social groupings. That diversity extends to the past and present situations of women. Most of the indigenous participants explicitly declined to speak in national or regional terms, limiting their orbit to their own island or district. An important implication of several contributions is that the gloomy scenarios sketched in some academic and much development literature are not all there is to female experience and self-representations in village contexts.

Diversity notwithstanding, some valid generalisations can be made about Melanesian women. The vast majority are rural dwellers, albeit in a wide range of ecological settings. Village women mostly work hard as small-scale subsistence horticulturalists and cash-croppers, are often pigkeepers, always handicraft makers, housekeepers, mothers, grandmothers, wives, sisters, nieces, aunts. Almost all Melanesians are practising, usually devout Christians, in a great and increasing range of denominations, including a recent, ongoing influx of evangelical and pentecostal groups. Women have very little presence in the clergy or formal decision making in Melanesian churches, apart from their women’s wings, but are highly active and significant at parish-level – in congregations and in local church women’s groups. Women in Melanesia are largely missing from the modern contexts of national and provincial politics, other than as voters who choose or are forced to ignore the few women candidates to offer themselves for public office. There is only a handful of women in the upper echelons of the bureaucracy – almost all in women’s affairs and health – or of national NGOs, apart from those dedicated to women’s issues.

The participants

There were about 50 participants in the workshop and 21 presentations, comprising 17 more or less formal papers, a panel on Bougainville, and a poetry-reading. Unusually in a quasi-academic setting, the dominant voices were of Melanesian women – 13 of the 14 Melanesian presenters were female. The non-indigenous academics, as one put it, ‘shut up and listened’, with rivetted interest. Two other unusual aspects were the identity of the invited women – they were not of the small coterie of ‘big women’ who normally speak for Melanesian women in international forums – and the focus on Christianity as a critical element in ‘being female in Melanesia today’.

Since the demands of effective communication made facility in English essential (because few Papuan and Kanak women speak Pidgin), it was impossible to invite mainly village women, as I had romantically hoped to do, because so few know English. A grass roots presence was nonetheless provided by a woman from Ambunti (PNG) and two Bougainvilleans, significant local actors during the war who had never previously left their island. Both ni-Vanuatu participants are in regular contact with rural women through their work on women’s kustom and women’s literacy. The Solomon Islanders, all university-educated, were closer to the ‘big women’ stereotype, but have strong village links: two senior bureaucrats and a former General Secretary of the local YWCA, one of the best poets in the region. The English language requirement made it difficult to find any qualified Kanak (New Caledonia) and meant they could hardly be typical. Both Kanak were educated in Australian universities: one is a pastor and academic theologian, the other a young community worker and a powerful speaker, though from a society which demands public silence of young people and women. The other three female Melanesian contributors were Australian National University graduate students who helped to plan and organise the workshop. The women’s presentations included remarkable stories of self-reliance, resourcefulness, resilience and fortitude in the face of severe hardships, deprivation and trauma.

Christianity

For most Melanesians, Christianity is a long-term and, according to several of the women, increasing focus for collective activities, identity construction, and ritual. Churches are institutionally dominated by men, but their women’s groups give women opportunities for solidarity, training, leadership, wider experience and networking. Pauline Boseto, a health bureaucrat from Solomon Islands, maintained: ‘Our God is a community-creating God’. She spoke of ‘the gospel elements of our cultural identity which under-guards Christian principles of sharing, caring, justice and cooperation’. Prayer routinely opens and closes daily activities, but is also mobilised pragmatically to public and private ends, and can be a key strategy in crisis situations. An organised prayer movement against corruption swept PNG before the last elections. ‘Many women suffer in
Melanesia', said Rona Nadile, a PhD student from Milne Bay Province in PNG, speaking on 'Prayer as Practical Action', 'but they go to some quiet place and they pray and somehow they find peace and comfort and strength'. Introducing her paper, she gave a practical demonstration of its theme, describing how she had intended to have the paper delivered in absentia, but that at the last moment God told her to attend the workshop. So at short notice she made her way alone from Canberra to Sorrento by public transport, praying for direction as she went, arriving on foot well after dark.

Whereas Melanesians take Christianity for granted, secular Western academics and non-church aid workers tend to ignore or be embarrassed by it, with mutual incomprehension. Framing the workshop squarely in terms of 'Christianity', rather than 'identity' or 'modernity' or 'human rights', made it particularly meaningful to Melanesian women and enabled them to set the agenda and control the discursive space.

Christianity, custom and violence

Two papers, written from evangelical perspectives, addressed the relationship of Christianity and custom in modern marriage in New Caledonia and Solomon Islands respectively. As a theologian, Tamara Wete from Kanaky/New Caledonia concluded with a critique of divorce and promiscuity as modern problems stemming from the decline of 'strong [Christian] Kanak cultural values' in the last 20 years 'due to the economic and Western influences', and from neglect of Biblical values. Such a collapse of Christianity and custom, bizarre to a romantically primitivist Western secularism, is typical in postcolonial Melanesia. 'Gospel and culture are intrinsically intertwined', claimed Pauline Boseto. Alice Aruheeta Pollard, head of women's affairs in Solomon Islands, problematised the relationship, asking rhetorically: 'when it comes to the crunch, who is to bow to who in terms of culture and the bible'.

Tamara Wete's criticism of divorce provoked spirited debate, including a defining moment of the workshop: Jully Makini passionately defended the right of battered wives to abandon violent husbands, and spoke of the difficulties women face when families, public opinion and the law condone or ignore domestic violence. Violence against women is normally a key issue in conferences on, or involving, Melanesian women, but only Theresia Hopkos from Ambunti had suggested domestic violence and 'human rights abuse' of women as appropriate themes for the workshop. I feared that violence might be suppressed as too hard or un-Christian a topic, but in no session was it shirked. Jully Makini's subsequent poetry reading included her poem 'Wife bashing'.

Bougainville

Political violence and the trauma it induces were central to the panel on Bougainville chaired by Ruth Saovana-Spriggs, a PhD student from Bougainville at present actively engaged in Bougainvillean reconciliation. I refer to the two invited women as 'Anna' and 'Maria', since for security reasons, they do not want to be identified. They told their stories quietly but with palpable emotion. Anna is a senior health worker who remained in the field throughout the war, maintaining a precarious neutrality in the face of threats from all sides and occasional bashing. Maria is a Catholic actively engaged in the reconciliation process as a member of the Women's Inter-Church Forum. Both women insisted that general health, including women's and children's, improved in Bougainville during the years of the blockade. They attribute this to prayer and a renewed reliance on a subsistence diet and indigenous remedies.

The surprising, perhaps nostalgic claim to better health as a spin-off of self-sufficiency no doubt serves as a token in the politics of reconciliation. It flies in the face of earlier reports of a sharp increase in maternal health problems and infant mortality during the blockade, mainly sourced from the Bougainville Revolutionary Army and humanitarian aid agencies, which had a stake in stressing the suffering inflicted by the PNG Defence Force (and their Australian collaborators). I have no basis for an informed critique of these seemingly opposed positions, neither of which is disinterested. But the women's stories ought not to be dismissed, given the personal histories from which they derive. The situations on the ground and people's experiences were no doubt complex, mixed and unstable, in health as in other respects.

Maria described, and Ruth Spriggs underlined, the critical practical role women play in bringing about peace in Bougainville, working through church organisations while men concentrate on government. They said that government hardly touches ordinary people's lives and the churches have filled the void. Ruth Spriggs worries that women's contributions are unrecognised at higher political levels and spoke of women's fears that they will not share political authority in the peace as they have shared the burdens of war - an experience all too familiar to women everywhere.

Women and strategies for self-empowerment in modernity

I deliberately inject a positive note into this report, to counterbalance the gloom and helpless victimage which are the leitmotif in much development literature on the undeniably harsh situations of most non-Western women. The nuanced, ironic, ambivalent stories told by Melanesian contributors to the workshop demand more subtle, multifaceted analysis, which takes account of possibilities and people's capabilities in difficult conditions, as well as very real constraints and disadvantages. Jean Tarisei, Women's Culture Project coordinator with the Vanuatu Cultural Centre, described the Project's work to 'revive, preserve and promote women's kastom ('custom') as enhancing their confidence, self-esteem and respect in their community. She worries about opposition to kastom from the newer evangelical and pentecostal churches: 'We believe that kastom
is a strong foundation of our identity. If we don't have kastom we are nobody, we don't know where we come from'. Patricia Goa, a community worker in Kanaky/New Caledonia, spoke of the dilemmas and paradoxes for Kanak in the encounter of tradition with modernity: while traditional names, links with land, and community obligations are crucial to modern Kanak identities, as a Kanak she can no longer 'live in a traditional way, closing my eyes towards that Western society next door to mine ... changes are necessary'. She concluded: 'Only women's organisations, properly controlled and properly trained, are able to make the bridge between the modern world and the traditional world. So that's why we have to be trained'.

The themes of the nature and potential of women's organisations and the ambiguous legacies of education ran through the final sessions of the workshop. Two women outlined modest programmes of action which tackle formidable tasks at the grass roots with minimal resources in the face of initial male incomprehension and at times violent opposition. Each said her programme effected marked changes in women's sense of self-worth, in men's attitudes, and in gender relations generally.

**Women's organisations**

Theresia Hopkos, President of the Ambunti District Council of Women (ADCOW), part of the East Sepik Provincial Council of Women in PNG, attributed such changes in this vast, rural, riverine district to the activities under ADCOW of a web of area associations and women's groups, financed, in the almost total absence of government or NGO funding, by the 'sacrificial services' of women themselves. She made a plea for 'allowances' to compensate organisers and for financial assistance to aid the implementation of programmes. She asked rhetorically, 'Where did she train to be a resourceful woman to coordinate that organisation?', and supplied her own answer: 'through church organisations ... Most of the services provided for women are from the churches'. She attributed the aim to 'train mothers for leadership' to her own Seventh Day Adventist Church. She acknowledged men's 'annoyance' at times, when ADCOW duties cause women to 'neglect our husbands and children'. Angela Mandie-Filer, a PhD student from Ambunti, said that 'the men actually are very supportive', and that when some men decide to back their wives, others get the courage to follow. Theresia Hopkos' husband is a respected community leader whose backing for his wife encouraged other men not to feel 'threatened ... by what the women are doing'. Now men cheerfully take women to meetings in their canoes.

**Education and literacy**

Theresia Hopkos stated that the training provided under ADCOW is necessarily verbal, 'because the women [in the villages] can read very little ... there is a need for adult literacy training to be conducted in the village, [but] I don't know when and who will do it'. Confirming the need, Enikelen Netine sketched a thoroughgoing social transformation in the wake of the World Vision-financed adult literacy programme in Bislama she coordinates for women in eight islands in Vanuatu. She cited women's testimonies about how literacy enhanced their access to information, provided confidence, financial and leadership skills, and enabled greater community participation. She herself has observed in some villages that 'before the men used to beat their wives but today, they have family worships together'.

This account contrasts with the more usual, justified pessimism about the dilemma and the paradox of formal education in much of Melanesia, where increasingly under-resourced public education systems inspire unfulfillable expectations in the young, alienate them from their villages and fit them only for unemployed life in squatter settlements. Angela Mandie-Filer deployed the impact of the enforced secularisation of schooling in PNG's rural areas, where the State and aid donors are 'non-visible', the 'vacuum being left by what the churches used to do' in education remains unfilled, and girls' participation has collapsed in an increasingly user-pays schooling system. Jean Mitchell, a Canadian anthropologist working with people in a settlement in Port Vila, described a tragic treadmill whereby people move to town to earn school fees, children feel an endemic sense of failure because they cannot find jobs to justify their parents' sacrifice, and the family cannot return home because they have nothing to show for years away. Enikelen Netine, Theresia Hopkos and the Bougainvilleans provided an additional vision of resourceful village communities where targeting moderate amounts of aid at women, their organisations and their basic training might offer a potential social return out of all proportion to expenditure.

**Conclusion**

Challenging stereotypes was a feature of this workshop. Alice Aruheeta Pollard cautioned against the easy middle class equation of the reality of hard work with the assumption that hardworking rural women are downtrodden. 'Our perception [is] of a woman's load as overburdened, we feel sorry for her, actually the way she perceives [herself] is quite different from our perception. For her that's her pride, that's her status. And that's who she is'. In a similar vein, Theresia Hopkos neatly pulled together the themes of the workshop. 'Being female in Melanesia and women in Papua New Guinea, especially in the rural remote [areas], we see ourselves first, then the churches and then citizens. We get less as citizens, and serve more as Christians and citizens, and get served as women the least'.

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Development Bulletin 48
Development, migration and HIV/AIDS

Jon Ungphakorn, AIDS Counselling Centres, Education and Support Services (ACCESS), Thailand

AIDS Counselling Centres, Education and Support Services (ACCESS) is a Thai NGO working on HIV/AIDS both in the field of prevention and in the field of care for people living with HIV/AIDS and their families. ACCESS operates in three areas of Thailand at the moment: Bangkok, Chiang Rai in northern Thailand, and in Kanchanaburi to the west of Bangkok. We put particular focus on empowering people, both in terms of prevention and in terms of coping with living with HIV and AIDS.

In our prevention work we emphasise peer-based sex education, for example, among factory workers and young people. Our care services include counselling services, home care support, supporting people with HIV/AIDS to form their own organisations and networks, and we have health clinics using both modern medicines and traditional medicines.

When ACCESS started, most of our staff came from other NGOs, and had backgrounds in development rather than health, so we wanted to find out as much as possible about the AIDS epidemic and how it related to various development issues in Thailand. We see that HIV/AIDS is really part of the same set of social, political, and economic issues associated with development. It is related to the problems of income disparity, forest issues, land issues and to migration from rural areas to urban areas. The figures show very clearly that HIV/AIDS is highest amongst the urban and rural working populations, and between the ages of about 20 and 35 years. It is very clearly linked to the separation of families, and people being separated from their communities.

In Asia the HIV epidemic is strongest in three or four countries, and Thailand at one point had the greatest numbers of people with HIV/AIDS. Probably India now has more in actual numbers. Usually people find it very difficult to answer the question why HIV/AIDS has spread so rapidly in Thailand. In India it has spread only in certain areas where there is a high use of injecting drugs, or a high level of prostitution, whereas in Thailand it has spread in all areas of the country.

Both prostitution and migration have created this pattern. In Thailand the rapid spread of HIV/AIDS is very much linked to the strategies and policies of economic growth in Thailand, and the booming sex industry and migration are both very much related to the economic boom.

Sex workers and HIV/AIDS

The sex industry is the most obvious reason for the spread of HIV/AIDS, as sex workers move from place to place. For example, there are probably two types of sex workers in Thailand: those that are serving the Thais, and those whose clients are foreigners. Those whose clients are Thais generally come from the north. They go all over the country to serve Thais. They also often provide services to Malaysian clients, moving to brothels in the south. Quite a few of them will go to Singapore and Japan. The second group would predominantly be from the northeast, working in the bars in Pat Pong, Phuket, Pattaya, and so on.

Generally sex workers are at the highest risk in the beginning when they start work in the sex industry because they usually start without any money, so they have to work through an agent who comes to recruit them from the village. At that time they are 'bonded': they have to pay back the money the agent has paid to them or their families. This means that they start in the brothel or in a place where they can't really refuse to have sex with the clients, and where in the past there was very little use of condoms, although that has changed. So just looking at the issue of prostitution, it is also linked to various issues such as debt and the separation of families which are both linked to the economic situation.

Development and migration

The spread of HIV/AIDS is not just related to the sex industry. Prostitution has been in Thailand for a very long time, but what has become clear in many rural areas of Thailand is that people are losing their land, and children are moving outside of the village and now they have a greater risk of exposure to HIV/AIDS. The small farmers who once formed the vast majority of the population, and still do form a sizeable majority, have found it impossible to live on the income from farming alone, so in the rural areas most families are split up. Many young people leave school at an early age and come and work in the urban areas in construction sites, factories, service industries. Alternatively, they work on the large plantations, such as sugar cane farms.

In many cases the environment in which these people end up working is very conducive to the spread of HIV/AIDS, and they have little education and support on prevention. Many will become sexually active at a young age, and then moving from factory to factory, moving from one place to another, they will have different relationships. In Bangkok, ACCESS has been working in a zip factory which has over 2,000 women workers. These women are coming from mainly rural areas to work in the factory. We have a team of four women who go into the factory and talk to them in the dormitories at night. We also do training for volunteers in the factory to act as peer educators.
Migration in the sense of the farm or the factory moving into the rural areas has a similar effect as people moving to the cities. An example of the move of modernisation and the move of big companies into rural areas was when I went to see our team work in some hill villages, but very near Chiang Rai, near the Boon Rawd Brewery plantation. Boon Rawd has a very large plantation in Chiang Rai, where they are producing fruit for canned drinks. We would show a feature film and materials about AIDS and then talk with people in the local language.

While we were there quite a few young men from the plantation came into the village and were very clearly looking for women who would go and sleep with them, and some of the women went off with them in their cars. You can see the effect of that sort of development. You could say, okay, the women are working on the farm, but at the same time they are being exploited by having sex with people who can pay them.

**HIV/AIDS in the region**

Thailand has also exported HIV/AIDS to neighbouring countries through migration of workers, both legal and illegal, particularly people coming from Cambodia, Burma, and Laos. We were taken to visit some villages in Laos, just across the border from Chingmek border pass, and in nearly all of those villages there were young people working in Thailand as illegal construction workers who would, just like people in the northeast, generally cross the border and then travel to Bangkok to work on construction and then go back to harvest and plant the rice. But already some people had died of AIDS there, just like the migrant workers from the northeast.

The officials in Pakse (Champassak Province, Lao PDR) estimated there were at least 20,000 to 30,000 village people regularly crossing the border to work in construction and other industries. Also, along the borders of Cambodia there are many brothels where Thai men will cross the border to have sex.

The very rapid spread of HIV/AIDS in Cambodia came about the same time as UNTAC, the UN forces who went into Cambodia to supervise the peace agreement and the elections. At that time there was a rapid spread of HIV in Cambodia. There are also a lot of brothels in various areas, and sex workers come from Vietnam as well as from Cambodia.

If there is resettlement as a result of development projects, and people are moved from one rural area to another, then that does not necessarily lead to HIV/AIDS or an increase, but if that resettlement means that people are moved to places where the land is less fertile, where they find it more difficult to make a living, that obviously leads to an increase in migration, which is linked to the spread of HIV/AIDS.

In the slum areas in Bangkok there is a very high incidence of HIV/AIDS, and there is not much of an incentive for prevention among communities that do not really have much to look for in the future. This might relate also to the other issues of resettlement, as prevention strategies for HIV/AIDS very much depend on people looking to the future.

The lowest income groups are not so much concerned with the fact that they have HIV/AIDS, but are much more concerned about the economic issues that affect them. For example, the main concern for an HIV-positive husband and wife was who was going to look after their baby. Very often the people who are hardest off take it easier when they know that they have HIV because, relative to all the problems that they already experience, HIV/AIDS is for them something less immediate than their other problems.

If you look at the closest causes of HIV/AIDS it is issues related to prostitution, large numbers of changes of partners, lack of sex education, and the working environment in which people live. But to me it is obvious that HIV/AIDS is part of the broader spectrum of social issues.

Conference reports

The role of NGOs in education

Addis Ababa, Ethiopia, 1 September 1998

This workshop was organised by the Christian Relief & Development Association (CRDA) in collaboration with the Ethiopian Ministry of Education. CRDA member agencies and various offices of the Ministry at different levels participated. It was opened by HE Dr Tekle Haimanot H/Selassie, Vice-Minister, Ministry of Education. The Vice-Minister stated that the contribution of the voluntary sector to the development of education has been significant especially with regard to human resource support and establishment of pre-primary, primary, secondary and vocational secondary training schools. However, NGO contribution has been limited due to the unenabling environment of past decades.

During the workshop it was stated that, even today, responding to the ever increasing educational needs is a pressing problem the government faces. Currently only about 30 per cent of the school aged population have access to education and from 85 per cent of the rural population only five per cent have the opportunity to reach higher education.

Discussions which followed revolved around the National Education and Training Policy and Education Sector Strategy, and the Education Sector Development Programme – the five year education plan.

In closing the workshop, participants forwarded some recommendations:

- Organise a follow-up workshop in order to build on future collaborative efforts between NGOs and the government and establish a network – possibly a working/interest group within CRDA.
- Set up a committee composed of the Ministry of Education and CRDA member NGOs and religious-based agencies to further facilitate the contribution of NGOs to the education sector.
- Organise a joint training programme on non formal education which is an issue demanding more emphasis since its contribution to the development of education is notable.

Reprinted from CRDA News, 9(9), September 1998, 7

Recovery from financial crisis: Macroeconomic policies for socially equitable growth

Ottawa, Canada, 28 September 1998

Over the past four or five decades, the Commonwealth has gained an enviable reputation as a forum more apt than other international ‘clubs’ to foster frank dialogue among its members who hail from the richest as well as the poorest countries, and from microstates as well as the world’s most populous nations. In other words, the Commonwealth affords its diverse members a chance to openly debate contentious policy issues.

As expected, the agenda of the 1998 Commonwealth Finance Ministers’ Meetings held in Ottawa, was dominated by the expanding international financial crisis and the challenge of preventing or containing such crises.

This seminar took a more forward looking approach. Reflecting a growing consensus that the wrong policies had been foisted on the countries in crisis, and that millions of
innocent people were paying the price, the seminar was intended to facilitate a discussion that would help policy makers, whether at a national level or in international agencies, assist crisis countries make a more socially equitable recovery.

The seminar brought together some well-known protagonists in the policy debate. Keynote speakers were Joseph Stiglitz, Senior Vice-President and Chief Economist of the World Bank; John T. Boorman, Director of the IMF’s Policy Development and Review Department; and the Honourable Trevor Manuel, Minister of Finance of South Africa.

The discussion generated both debate and a certain degree of convergence, if not consensus. Some of the principal points are summarised below.

**Distributional impact of adjustment policies**

If their impact is to be socially equitable, policies for economic recovery should be explicitly designed to protect the most vulnerable groups. This is hardly a new issue – the litmus test will come with the next crisis. Will draconian fiscal and monetary policies once again be imposed to restore 'confidence', or will macroeconomic policy be oriented to rapid recovery and safeguarding social development? Only time will tell.

**Better social safety nets**

No one disagreed that these are urgently needed in most developing countries, since it will be impossible to completely avoid crises. At the same time, there is scope for research on how to make safety nets affordable and feasible.

**Greater representativeness, participation, and democracy in economic decision making**

There is clearly a need for 'more voices at the table' – workers, small business, and women, not just the investment community or the 'experts', when discussing economic policy for crisis countries. Also needed is a broader spectrum of countries – not just the G-7 or a group hand-picked by the G-7 – in larger discussions about the international economic architecture.

**Capital account liberalisation**

By far the most contentious issue, there was support for the notion that developing countries needed to exercise considerable caution in opening their capital markets, and agreement that excessive short-term borrowing, in particular, could rapidly lead to instability.

**Better financial market regulation**

Although closely related to capital controls, market regulation generated considerably more agreement, albeit with differing viewpoints on the extent to which such regulation would actually protect developing countries from crisis.


**TeleHealth in the Pacific**

*Noumea, New Caledonia, 30 November – 3 December 1998*

Telehealth, public health networks, Internet use and distance education were the main topics addressed during the regional conference on telehealth in the Pacific. The conference was co-organised by the Secretariat of the Pacific Community (SPC) and the Pacific Basin Medical Association (PBMA). This event was the first meeting between two networks which had previously operated separately in the Pacific: PACNET, the electronic mail server of the Pacific Public Health Surveillance Network (PPHSN) and WPHNet, the telemedicine network of the PBMA. Some 80 participants attended the conference. They included representatives of SPC member countries, training institutions (University of Guam, University of Auckland, Fiji School of Medicine, The Australian National University and Communicable Disease Network, University of the South Pacific) and regional organisations (WHO, UNDP, SPC).

The conference aimed to improve communication and networking of health-related professionals working in SPC member countries and in PPHSN-allied associations. The objectives were to widen resources available through the PPHSN for health development, and to promote the use and development of new information technologies. The latter activity especially focused on the following areas: outbreaks prevention and control; public health surveillance and disease control; distance clinical, epidemiology and public health consultation; and distance education.

**Strategy: Networking of networks**

PACNET and WPHNet have served Pacific Island members of the PPHSN since April 1997. Both experienced fairly similar stages of development. They encountered the same encouraging rapid growth and improvement in membership and efficiency, and face currently similar bottlenecks in reaching out to more specific users and potential partners. Affordability of the technology, especially to health-related professionals, lack of appropriate training, and respective limited advocacy means, are common hindrances to their efficiency and to the expansion of their networking capabilities. A greater and well-thought integration of PACNET and WPHNet membership within the framework of the PPHSN should strengthen both networks and benefit their users.

Regional networks using new information technologies allow the sharing of experiences, management methods and tools. In addition, they minimise or avoid duplication of efforts and help bridge the gaps between various public health partners – North and South of the Pacific, doctors and non-doctors, clinicians...
and public health practitioners, English speaking and French speaking, and academic education and applied/learning by doing programmes (which implies a lot of distance education in Pacific settings). The ultimate objective remains the improvement of the management and delivery of health services in the Pacific Island countries and territories.

Achievements

Thirty-one quality papers were presented during the Pacific telehealth conference. They covered the themes of telehealth activities in the Pacific (including teledicine); information and communication technology in the development of Pacific health networks; and distance education and Pacific health networks.

The reflections initiated during the morning sessions were discussed in depth in panel discussions every afternoon. The proceedings of the conference will be published in a special bilingual issue (English and French) of the medical journal Pacific Health Dialog. Two training workshops were also organised for the participants – one on literature searching and document delivery by Internet, and the second on access to and use of distance clinical and public health consultation services.

At the end of these intensive discussions, four regional working groups were set up to continue the work started in the following areas:

- establishing medical associations, public health networks and the role of information and communication technologies;
- distance education, basic and continuous: how to deliver a curriculum;
- integrating methods and resources for distance consultation: development of a joint PACNET/WPHNNet Web site; and

Each of these groups now has a PACNET-appended discussion list to monitor progress on tasks defined according to their respective action plans.

Furthermore, attending members of the PPHSN Coordinating Body (CB) met for their fifth annual meeting. The agenda included the PPHSN operating framework, membership of the Co-ordinating Body, PACNET functions and the roles of the CB and PPHSN in the promotion of public health surveillance. Recommendations were drafted to seek confirmation of interest for associated members and for the nomination of official contact points (for all core members, Pacific Island countries and territories, and allied members).

Funding issues

The conference was supported by the French Government, in association with several partners including training institutions, aid development agencies, international organisations, private companies in the field of telecommunication, health maintenance organisations, and foundations. Financial support is actively sought for the following activities:

- publication of the proceedings in a special issue of Pacific Health Dialog;
- development of telehealth/telemedicine activities; and
- distance education, including distance library services.

Yvon Souares, Pacific Public Health Surveillance Network, Secretariat of the Pacific Community, Noumea

Strategic development planning for East Timor

Melbourne, Australia, 5–9 April 1999

The aim of this historic and unique conference was to plan for the development of what will, with continued international pressure and assistance, become the world's newest post-millennial nation. Delegates from all regions of East Timor were joined for a week in Melbourne by Timorese living in Australia, and non-Timorese from Australia, Portugal, Canada, Norway and Indonesia, to begin discussing and writing a strategic plan for the development of an independent East Timor. The goal was a plan which would address, in an integrated and meaningful way, development in the areas of: agriculture (including fisheries and animal husbandry); economy (including finance, currency, small business and industries, tourism, foreign investment, energy and natural resources); education (including language, human resources development, culture, arts and sports); environment; governance and public administration (including constitutional development, civil society and the role of NGOs); health (including public health and occupational health and safety); infrastructure; the judicial system; and mass communication (including information technology).

In bringing together East Timorese leaders, activists and NGO representatives and non-Timorese from NGOs, government organisations and international bodies, the conference became a forum for the building of opportunities, capacities and allegiances for sustainable development in East Timor. It was refreshing to be part of a process in which the actual strategic planning was predominantly undertaken by the Timorese participants of the conference, often in Tetun and Portuguese. Non-Timorese participants acted as 'resource people' who engaged in separate sessions in which the focus was on how collaborative and coordinated efforts could be undertaken to support the plans of the Timorese people in relation to their social, cultural, economic, political and technological development. I must, however, admit to an initial sense of disappointment that many of the keynote speakers on the (very public) first day of the conference were 'experts', although many, by their own admission, had no direct experience of the situation in East Timor, nor had ever visited the island. Though
presenting some interesting general points for consideration, I can only hope that this does not set a precedent for the valuing of decontextualized, 'expert' information which has, historically, led to so much misinformation and consequent maldevelopment in the South.

The broad goals set out at the conference should be applauded. Within a framework of a 'respect for human rights', the promotion of equality of rights and opportunities for all participants in Timorese society and within a context of 'defend(ing) the Timorese culture and identity' (Xanana Gusmão's opening address), the conference delegates sought to promote development of East Timor by working towards free and compulsory education; free health care; broad scale sanitation campaigns; agricultural diversity and focus on local self-sufficiency while encouraging investment in agribusiness and other means of building the food industry of the nation; a focus on ecotourism; building of possibilities for industry development and investment; and a commitment to environmentally sustainable development. The challenges which an independent East Timor faces in realising these goals are not, however, insignificant, and this was well recognised by both the Timorese and non-Timorese participants. The conference was by no means merely an idealist vision — indeed the happenings of that week with the Liquica massacre, and the uprising of ABRI-backed militias denied the participants any chance of imaginary idealism isolated from the daily realities of an Indonesian-controlled East Timor.

The first developmental task was identified as one of redefining 'development', for the Indonesian colonisers have often justified their actions as representing an effort to 'develop' the annexed East Timor. Although this may have led to some 'development' of infrastructure, this pales into insignificance when one considers the social, cultural and environmental damage which has been perpetrated by the Indonesian military over the past 23 years. Indeed the legacy of colonisation has led to much maldevelopment. There was a great deal of discussion of the hurdles which exist for the development of an independent East Timor — the 'smallness' of the economy; a GDP possibly lower than that of Mozambique (interestingly, another former Portuguese colony); few export commodities; high infant mortality; endemic malaria and tuberculosis; high levels of malnutrition; low per capita income; limited arable land and poor soils. Yet these barriers to development did not consume the participants. The focus was not limited to the capital, resource and technological visions of development, but was also centred on building up the human and cultural resources for creating sustainable, viable futures in East Timor.

For the Australian representatives of NGOs, the conference presented an opportunity to further coordinate and consolidate the variety of responses and actions which have been, and will continue to be, undertaken in East Timor. It was tragic indeed that the efforts of such coordination had first to be focused on drafting a response to the massacre in Liquica. Once again the focus of attention was drawn towards reacting to the violence perpetrated by the Indonesian army, ABRI, and the militias which they have so obviously supported (if not orchestrated), rather than wholeheartedly pursuing a futures oriented collaborative effort on the challenges which lie ahead for development cooperation in an independent East Timor. Amidst the hope and the spirit of cooperation which emerged from the conference, the Liquica massacre was a tragic reminder of past and present struggles which remain barriers to East Timor's independent development as a nation in its own right.

The challenge for myself and other non-Timorese participants was, in the short term, to be able to move into an advocacy role, by maintaining pressure on the international community to intervene in creating a situation on the ground which allows for the referendum to occur in August, and which focuses on building peace for a period after this time such that social development can once again come onto the agenda. Since the conference, the situation in East Timor has tragically deteriorated to the extent that talk of social or economic development has been relegated to the background. One hopes that the commitment of the international community will be strong enough to bring about the enactment of the peace which needs to form the foundation for such development in an independent East Timor.

Ingrid Burkett, Faculty of Social and Behavioural Sciences, University of Queensland
Conference calendar

Action on AIDS in Asia and Pacific communities: Current issues, ways forward

Sydney, Australia, 30 May – 1 June 1999

This conference will provide an overview of the AIDS epidemic in terms of global patterns of economics, security, international organisations and gender with special reference to the Asian economic crisis and the situation in the Pacific. Themes include developing options in treatment and care in resource-poor countries; the prevention care continuum; and developing options for community-based prevention strategies.

For more information contact:
Prue Borthwick
HIDNA Coordinator
c/- AFAO
Level 4, 74 Wentworth Ave
Darlinghurst NSW 2010
Australia
Tel +61 2 9281 1999
Fax +61 2 9281 1044
E-mail pborthwi@afao.org.au

The learning society and the water environment

Paris, France, 2–4 June 1999

Organised by the International Office for Water, UNESCO/International Hydrological Programme, and the European Thematic Network of Education and Training for Environment–Water, this conference will focus on trends and developments in all levels of education and training in the water sector. Themes include training needs analyses; quality assessment; continuing professional development and tailor-made training; open and distance learning; and interdisciplinary education and training.

For more information contact:
Pierre Hubert
Laboratoire de Géologie Appliquée
Université Pierre et Marie Curie
Case 123, 4 place Jussieu
75252 Paris cedex 05
France
Fax +33 1 4427 5125
E-mail hubert@cig.ensmp.fr
Web http://www.cig.ensmp.fr/~hubert/symposium.htm

Efficient water use in urban areas: Innovative ways of finding water for cities

Kobe, Japan, 8–10 June 1999

Organised by the United Nations Environment Programme's International Environmental Technology Centre, the symposium aims to increase awareness of needs for efficient water use in urban areas; increase awareness of benefits, including improved health, from efficient water use in urban areas; compile available technology options and sound practices for efficient water use to encourage the adoption of appropriate solutions; enhance the capacity of administrators and managers to understand and identify sustainable options in the water sector; and profile case studies where more efficient water use and water resource management practices have been applied. Topics include harvesting and utilisation of rainwater; water re-use for non-potable applications; leakage control; and water demand management.

For more information contact:
UNEP/IETC
2-110 Ryokuchi Koen
Tsurumachi-ku
Osaka 538-0036
Japan
Tel +81 6 6915 4587
Fax +81 6 6915 0304
E-mail ietc@unep.or.jp

Forecasting the future: Impact assessment for a new century

Glasgow, Scotland, 15–19 June 1999

Organised by the International Association for Impact Assessment, this conference will focus on strengthening and upgrading impact assessment as a mainstream tool for sustainable development planning and strategic policy appraisal. This latter aspect of forecasting the future will concentrate on the role of impact assessment in addressing big picture issues of socioeconomic development, population growth and technological change. Specific topics to be covered include green
plans and sustainability strategies, strategic environmental assessment of development policies and plans, environmental and resource accounting, capacity-based land use and resource planning, developments in environmental management systems, case studies of sound environmental impact assessment, social impact assessment and other domains of impact assessment, advances in geomatics, training and capacity building and framework and methods for evaluating the performance of impact assessment processes. Papers are invited.

For more information contact:
IAIA Executive Office
North Dakota State University
Hastings Hall, PO Box 5256
Fargo, North Dakota 58105-5256
USA
Fax +1 701 231 1007
E-mail rhamm@ndsuest.nodak.edu
Website http://iaiaext.nodak.edu/IAA/annual-meeting/iaia99/first-call.html

Nonviolence and 'Asian values'
Stockholm, Sweden, 16 June 1999

The surge of political conflict and violence in East Timor, Aceh, Tibet, East Turkistan (Zinjiang) and other areas in Asia over the past years has led to a questioning of the idea of Asian values. This conference aims to reconsider what are the actual cultural and historical roots and conditions of nonviolence in present day Asia.

For more information contact:
Center for Pacific Asia Studies
Stockholm University
S-106 91 Stockholm
Sweden
Fax +46 8 168 810
E-mail cpas@orient.su.se
Web http://www.cpas.su.se

Colonialism and public health in the tropics
Toronto, Canada, 18–19 June 1999

The aims of this conference are to contribute to the growing scholarly debate on the comparative history of colonialism and public health. It will explore the cultural and ideological dimensions of public health in Britain's tropical empire, examine the variation in public health systems within the empire, as well as issues such as the significance of metropolitan concepts of race, and the role of the metropole as the disseminator of policies and practitioners throughout the empire. Themes include indigenous healing systems and European health care; colonial mental health and the construction of race; public health, sanitation and urban spaces; gender and colonial health care policy; and public health in the age of empire. Papers are invited.

For more information contact:
Dawn Harris
Department of History
Faculty of Arts
York University
4700 Keele Street
Toronto
Canada M3J 1P3
Tel +1 416 736 5127
Fax +1 416 736 5904
E-mail dharris@yorku.ca

Women's worlds 99
Tromsø, Norway, 20–26 June 1999

Feminist research and interdisciplinary scholarship is the basis of the seventh International Interdisciplinary Congress on Women. Session themes will include genderations; new constructions of gender; women, power and politics; gendering work and the economy; gendering health; sexualised violence; gendering the past; gendering the future; peace, indigenous and human rights; culture, creativity and spirituality; gender, science and technology; the women's movement/feminist activism worldwide; and gendering men. Papers are invited.

For more information contact:
Women's Worlds 99
Kvinnforsk, University of Tromsø
N-9037 Tromsø
Norway
Tel +47 7764 5899
Fax +47 7764 6420
E-mail womens.worlds.99@skk.uit.no

Creating water for a sustainable future: A regional water forum
Amman, Jordan, June or July 1999

Organised by the Center for Middle East Peace and Economic Cooperation, International Arid Lands Consortium, Peres Center for Peace, and Green Cross International, topics will include fresh water demand projections for the next 20 years; demand management; desalination, private sector participation, and regional cooperation and education. Confirmed speakers include Yasser Arafat, Mikhail Gorbachev and Shimon Peres.

For more information contact:
Sahana Dharmapuri
Center for Middle East Peace and Economic Cooperation
633 Pennsylvania Avenue, NW
Washington, DC 20004
USA
Tel +1 202 624 0850
Fax +1 202 624 0855
E-mail sahana@centerpeace.org
Web http://www.centerpeace.org/water-forum2.htm
Health for all in the new millennium
Brisbane, Australia, 30 June – 2 July 1999

Topics in this year’s Australian Tropical Health and Nutrition conference include the latest research findings from the laboratory and the community on malaria, schistosomiasis, HIV/AIDS, water-borne diseases, scabies, streptococci, acute respiratory infections, nutrition, indigenous health, reproductive health, primary health care, and international health. These come under the broad headings of environment: the molecular interface; community; and management and service delivery.

For more information contact:
Administrative Officer
Australian Centre for International & Tropical Health & Nutrition
The University of Queensland Mayne Medical School
Herston Road, Herston QLD 4006
Australia
Tel +61 7 3365 5377
Fax +61 7 3365 5599
E-mail p.fraley@mailbox.uq.edu.au

Science for Pacific posterity: Environments, resources and the welfare of the Pacific peoples
Sydney, Australia, 4–9 July 1999

The XIX Pacific Science Congress will provide a multidisciplinary forum to examine several major themes relating to resource management and social welfare in the Pacific. Issues to be discussed include public health in the Asia-Pacific region; communications in the twenty-first century; urban development; Asia-Pacific ecosystems; women in science and development; water resources; and fisheries management.

For more information contact:
XIX Pacific Congress Secretariat
GPO Box 2609
Sydney NSW 2001
Australia
Tel +61 2 9241 1478
Fax +61 2 9251 3552
E-mail reply@icmsaust.com.au

Focus Africa: Networking transformation on the millennium continent
Windhoek, Namibia, 5–9 July 1999

The third biennial international conference of the Society of South African Geographers will allow physical and human geographers alike to present their findings in basic, applied and practice oriented research within the scope of four themes of study: processes of local transformation; participation in regional integration; understanding global interdependencies; and analysing and shaping space in the electronic age.

For more information contact:
Professor F. Becker
Department of Geography and Environmental Studies
University of Namibia
Private Bag 13301
Windhoek
Namibia
Tel +264 61 206 3780
Fax +264 61 206 38060
E-mail Fobecker@unam.na

1999 international symposium on society and resource management: Application of social science to resource management in the Asia-Pacific region
Brisbane, Australia, 7–10 July 1999

This interdisciplinary symposium will explore sustainable relationships between natural resources and society and discuss research and management strategies. Major themes will include social and environmental assessment; community participation in resource management; environmental interpretation; social science of parks and protected areas; human–wildlife interactions; integrated resource management; watershed management; and soil conservation; and indigenous land and resource management.

For more information contact:
Sally Brown
Conference Connections
PO Box 108
Kenmore QLD 4069
Australia
Tel +61 7 3201 2808
Fax +61 7 3201 2809
E-mail Sally.Brown@mailbox.uq.edu.au

Women's future: Health, rights and development
Sydney, Australia, 10–11 July 1999

The University of New South Wales International Symposium 1999 will be part of the University’s fiftieth anniversary celebrations. It will focus on women’s roles and rights in safeguarding their health, and that of their children and communities through knowledge, awareness and empowerment. The conference will cover key issues in women’s health in Asia and the Pacific including: population policies relating to reproductive rights, abortion, female genital mutilation and HIV/AIDS; women’s roles in social and economic development; and women’s education; status and earning capacity.
Women and health

Edinburgh, Scotland, 12–14 July 1999

Organised by the European Association for Research on Women and Health, the conference aims to stimulate communication and collaboration between researchers, clinicians and policy makers working in the area of women and health; bring critical contributions from theory and research into discussions of aetiology, clinical practice and health care systems; and identify priority areas for women's health research. Key themes are inequalities and human rights; delivering appropriate health care and health services for women; promoting women's health across cultures; and developing critical theories and methodologies.

For more information contact:
The Conference Office
The British Psychological Society
St Andrews House
48 Princess Road East
Leicester LE1 7DR
United Kingdom
Tel +44 116 252 9555
Fax +44 116 7123
E-mail conferences@bps.org.uk
Web http://www.ucs.ed.ac.uk/~pamew/ICWH2.htm

East Timor towards self-determination: The social and cultural questions

Sydney, Australia, 15–16 July 1999

To date, academic initiatives in the forms of conferences and publications have made important contributions to a better understanding of the political issues surrounding the East Timor question. The social and cultural questions, on the other hand, have tended to receive less attention from scholars. In view of current political processes leading to autonomy or full independence, the need for the international community to study and analyse the complex society of East Timor and its numerous current problems is crucial to the creation of a lasting peace, a stable social infrastructure and a healthy regional culture for the territory. This conference intends to add to the ongoing analysis and discussion.

For more information contact:
Geoffrey Hull
Language Acquisition Research Centre
Faculty of Education and Languages
University of Western Sydney Macarthur
PO Box 555
Campbelltown NSW 2560
Australia
Tel +61 2 9772 6446
Fax +61 2 9792 2924
E-mail g.hull@uws.edu.au

Global strategies for the prevention of HIV transmission from mothers to infants

Montréal, Canada, 1–5 September 1999

Transmission of HIV from mothers to infants can be prevented. While the use of drugs has reduced the number of newly infected infants to a few hundred per year in developed countries, each day, over 1,600 infants are infected in the developing world. A future generation of children could be protected from infection with the rapid implementation of more effective and economical treatment strategies. Cooperation between international public health agencies, health care workers, scientists, communities, governments, foundations and industries is essential. This conference will address prevention strategies. It aims to provide basic and clinical updates on current issues concerning prevention of mother-to-infant HIV transmission; identify effective and economical solutions to prevent primary infection in women and to end perinatal HIV transmission worldwide; and provide a forum for discussion of other HIV prevention issues.

For more information contact:
Feliciísimo & Associates, Inc.
Global Strategies Conference
205 Viger Avenue West, Suite 201
Montréal, Québec
Canada H2Z 1G2
Tel +1 514 874 1998
Fax +1 514 874 1580
E-mail globals@total.net
Web http://www.globalstrategies.org/conferences/mtreal/gen.html

Globalisation and tropical islands

St Denis, La Réunion, 5–14 September 1999

The eighth conference of tropical geography will aim to increase understanding of the reactions of island environments and societies, especially the tropical ones, to processes of globalisation. Five themes of globalisation will be examined: economic, geosocial, geopolitical, cultural and geoenvironmental. Case studies and general or comparative theme analyses, particularly significant references to non-tropical islands, are expected.
Global changes and protected areas
L'Aquila, Italy, 8–16 September 1999

It is important to find early signs of the effects of global change on the environment. Since plants, animals and their territories may be sensitive harbingers of these changes, the biosphere should be closely monitored. This conference will deal with climatic and environmental changes and their impact on the biosphere and hydrology. Part of the conference will examine the socioeconomic implications for protected areas.

For more information contact:
Guido Visconti
Dipartimento di Fisica
Università degli Studi di L'Aquila
Via Vetoio, Coppito
67010 L'Aquila
Italy
Fax: +39 862 433 089
E-mail global.change@aquila.infn.it
Web http://www.aquila.infn.it/gblch

Looking into the future: Setting priorities for HIV/AIDS in Africa
Lusaka, Zambia, 12–16 September 1999

Sub-Saharan Africa has the fastest growing HIV/AIDS epidemic in the world. Governments in Africa are still grappling with ways of preventing the further spread of HIV and continue to seek sustainable means with which to mitigate the impact of AIDS. The main purpose of the conference is to critically review the collective effort in understanding and responding to the complexities and challenges posed by the HIV/AIDS epidemic and its myriad impacts in Africa.

For more information contact:
XI-ICASA-99 Secretariat
Mulungushi International Conference Centre
Great East Road
PO Box 38718
Lusaka
Zambia
Tel +61 2 9351 2886
Fax +61 2 9351 3644
E-mail xi-icasa@zamnet.zm
Web http://www.xi-icasa.co.zm

Australian Indigenous Science Engineering and Architecture Network (AISEAN) workshop
Alice Springs, Australia, 25–26 September 1999

AISEAN is a national group of indigenous professionals and students in technical and scientific fields. As a first step in starting AISEAN, this workshop will be introduced by guest speakers from the Australian Indigenous Doctor’s Association and the American Indian Science and Engineering Society. General themes that will follow include future directions; defining AISEAN’s target group; AISEAN’s goals and purposes; and strategies, policies and guidelines.

For more information contact:
Margaret Ross-Kelly
Centre for Appropriate Technology
PO Box 6182
Cairns QLD 4870
Australia
Tel +61 4031 0505
Fax +61 4031 0431
E-mail catfnq@ozemail.com.au

Geography at the millennia
Sydney, Australia, 27 September – 1 October 1999

Details of the 1999 Institute of Australian Geographers conference are still being finalised, but the theme will allow sufficient scope to accommodate a wide range of papers from all aspects of geography.

For more information contact:
John Connell
Division of Geography
School of Geosciences
University of Sydney NSW 2006
Australia
Tel +61 2 9351 2886
Fax +61 2 9351 3644

Small and medium enterprises at the new crossroads: Challenges and prospects
Penang, Malaysia, 28–30 September 1999

Small and medium enterprises (SMEs) form the cornerstone of national economic development in developing countries. The objectives of the conference are to understand the problems, issues and challenges of SMEs in the current economic downturn; deliberate on the practical aspects of current and global experiences to enhance the development of SMEs; formulate strategies and measures that will enhance the growth
of SMEs in the Asia-Pacific region; and provide policy guidelines to help problematic SMEs.

For more information contact:
Secretariat, SMEs at the New Crossroads
Centre for Policy Research
Universiti Sains Malaysia
11800 Minden, Pulau Pinang
Malaysia
Tel +60 4 657 7888 ext. 3843, 3389, 3385, 2397
Fax +60 4 658 4820
E-mail moha@usm.my
Web http://www.usm.my/cpr/sme/index.htm

Out of Oceania: Diaspora, community and identity
Honolulu, Hawaii, 20–23 October 1999

An increasing number of Oceanians, especially from Polynesia and Micronesia, now live away from their island communities of origin. Although many may spend most of their lives in urban environments, the home place continues to be a focus of cultural identity and the locus of ongoing circuits of cultural and material exchange. The conference will examine the economic, cultural and social dynamics of the vibrant communities, paying special attention to capital, labour and class; culture, ideas and boundaries; and biography, representation and identity.

For more information contact:
Letitia Hickson
University of Hawaii at Manoa
Center for Pacific Islands Studies
1890 East-West Road, Moore 215
Honolulu, HI 96822
USA
Tel +808 956 2652
Fax +808 956 7053
E-mail chickson@hawaii.edu
Web http://www.hawaii.edu/cpis/conference/

The next millennium: Taking stock and moving forward
Kuala Lumpur, Malaysia, 23–27 October 1999

With the rapid spread of HIV in Asia and the economic problems that some countries are currently experiencing, the need for better policies and programmes is even more urgent. Organised by the Malaysian AIDS Council, the aims of the 5th International Congress on AIDS in Asia and the Pacific (ICAAP) are to create a higher degree of awareness about HIV/AIDS and its impact in Malaysia and the region; to create a catalytic effect for better management of HIV/AIDS in the Asia-Pacific region in view of the transnational nature of the epidemic; and to provide the best and latest information on HIV/AIDS research, both clinical and sociological, in order to assist the region in developing more effective intervention programmes.

For more information contact:
Irene Tan, Congress Coordinator
Malaysian AIDS Council
PO Box No. 11642
50752 Kuala Lumpur
Malaysia
Tel +603 445 1033
Fax +603 442 6133
E-mail icaap99@pd.jaring.my
Web http://www.icaap99.org.my

Governance of small jurisdictions
Valletta, Malta, 11–13 November 1999

The aim of this conference is to bring together scholars and practitioners from different parts of the world to discuss issues related to the governance of small jurisdictions; identify challenges and establish new directions for research; and promote networking between scholars and officials in the fields of politics, government and public administration. Sub-themes to be addressed include institutional development; efficiency limitations due to small size; women in public administration; the use of information technology; and aid administration.

For more information contact:
The Secretary, International Conference
Governance of Small Jurisdictions
Islands and Small States Institute
Foundation for International Studies
University Building, St Paul Street
Valletta
Malta
Tel +356 248 218
Fax +356 230 551
E-mail lbri@um.edu.mt

Asian nationalisms in an age of globalisation
Dunedin, New Zealand, 24–27 November 1999

The 1999 NZASIA conference will be hosted by the Board of Asian Studies and sponsored by the School of Languages and the Humanities Division. 'Nationalism' is understood in its widest sense: cultural, ethnic, religious, political, and economic. Papers relating to the conference theme will be considered for publication in a book on Asian nationalism to be submitted to a major international publisher. Papers are invited.

For further information and registration:
Dr Roy Starrs, Chair
Board of Asian Studies
School of Languages
University of Otago
PO Box 56
Dunedin
New Zealand
E-mail St011084@arwen.otago.ac.nz
Web http://www.otago.ac.nz/Japanese/NZASIA.html
New African perspectives: Africa, Australasia and the wider world at the end of the twentieth century

Perth, Australia, 26–28 November 1999

The 22nd conference of the African Studies Association of Australasia and the Pacific (AFSAAP) is a major Australian gathering that annually brings together Australians concerned with Africa and African affairs. Conference sessions and topics will include African religions, literature, art, and cinema; the political economy of mining in late twentieth century Africa; war and state formation; the history and politics of anti-apartheid movements; gender issues; and water resources in South Africa. Call for papers.

For more information contact:
Cherry Gertzel
School of Social Sciences and Asian Languages
Curtin University of Technology
GPO Box U1987
Perth WA 6845
Australia
Tel +61 8 9299 7418
Fax +61 8 9299 7418
E-mail gertzelc@spectrum.curtin.edu.au

Royal Geographical Society/Institute of British Geographers annual conference

Brighton, England, 4–6 January 2000

The Developing Areas Research Group (DARG) will run a session during this conference entitled 'Debt and the developing world in the new millennium'. Having joined the Jubilee 2000 coalition (a campaign to celebrate the new millennium by lifting the burden of unpayable debt from the world’s poorest countries), DARG’s session will ask whether debt cancellation is an idea ‘whose time has come’. Three main themes will be addressed: the impact of debt on populations and environments of developing countries; a critical examination of the claims and efforts of those promoting debt cancellation; and the question of how future loans arranged in the new millennium can be manageable, repayable and ensure increases in productivity. Call for papers.

For more information contact:
Elsbeth Robson
Department of Environmental Social Sciences
Keele University
Keele, Staffs., ST5 5BG

Advances in qualitative methods 2000: Creating possibilities

Auckland, New Zealand, 25–28 January 2000

The second in a series of international conferences held every two years under the auspices of the International Institute of Qualitative Methodology, this conference will examine qualitative approaches that are being developed in social anthropology, women’s/feminist studies, sociology, psychology, social geography, education, indigenous people’s studies, political science and history. The conference also hopes to explore issues such as the marginalisation processes – gatekeeping in funding and publication; and the decision making processes as to what and who is researched, and whose interest is being served. Call for papers.

For more information contact:
Jim Borrows/Janis Paterson
Faculty of Health Studies
Auckland Institute of Technology
Private Bag 92006
Auckland 1020
New Zealand
Tel +64 9 307 9999
Fax +64 9 307 9780
E-mail Qual2000@ait.ac.nz

Water, health and development

Noordwijkerhout, The Netherlands, 17 March 2000

SIMAVI is a charitable organisation which provides direct support to medical projects in developing countries. In the year 2000, SIMAVI will celebrate its 75th anniversary by hosting an international conference.

For more information contact:
Mr A. Koornneef, Head
Public Relations & External Communications
SIMAVI
Spruitenbosstraat 6
2012 LK Haarlem
The Netherlands
Tel +31 23 531 8055
Fax +31 23 532 8538
E-mail Simavi@pi.net.nl
Post-Soeharto Indonesia: Renewal or chaos?

Post-Soeharto Indonesia, the book derived from The Australian National University’s (ANU) Indonesia Update conference held in September 1998, is one of those unusual books which are simultaneously out of date by the time of their publication and yet destined to be of enduring value. That the papers given at the 1998 Indonesia Update, should so quickly be overtaken by events is hardly surprising. Even at the time of the conference it was clear that events were moving so quickly the contributors were hard pressed to stay ahead of the issues, and clearly a great deal has occurred in the months since then. Indeed the period from May 1998 to June 1999 is an extraordinary one by any standards in modern Indonesian history. Not since the fall of Sukarno has there been a period of such rapid, political and social change.

Even those articles which subsequent developments have arguably shown to have been mistaken in certain respects are likely nevertheless to be of enduring value because of a way in which they portray a snapshot of significant critical opinion at a crucial point in Indonesian history. Some of the book’s most outstanding articles, however, do much more than this in the way in which they neatly document and analyse the complex events of 1998. One such example is the contribution by John MacBeth, the Jakarta correspondent to the Far Eastern Economic Review. Despite MacBeth’s self-effacing unease at presenting his views at an academic forum, his writing stands up rather well nine months down the track and presents a useful summary of the main issues. The same can be said for what is arguably one of the book’s strongest contributions - both in terms of its considerable attention to detail and substantial length - the chapter entitled ‘From Soeharto to Habibie: Indonesian Armed Forces and political Islam during the transition’ by Marcus Mietzner. This paper details with great care the complex sequence of events that surrounded the collapse of the Soeharto regime, examining in particular the role of the military and Islamic groups in Soeharto’s denouement and in subsequent developments. The writer has clearly not wasted his opportunity to interrogate key figures ‘on the ground’ during this epochal period. Some may take issue with certain interpretations and points of emphasis in Mietzner’s paper but it is difficult to argue with the basic veracity of his account. Indeed, for this reason it is likely to prove to be a valuable reference for some time to come. Neatly balancing Mietzner’s article are the contributions by former Jakarta correspondent to the Australian, Patrick Walters, and Deputy Executive Director of Indonesia’s Centre for Strategic and International Studies, J. Kristiadi, both of which wrestle with the question of ABRI’s future and its current crisis of confidence.

Many of the other papers are likely to be of enduring value not so much because of the way in which they carefully chronicle events but because of the insight they provide into the thinking of key elements of the elite at this critical juncture in modern Indonesian history. Two such examples are the papers by PAN (Partai Amanat Nasional) leader Dr Amien Rais and personal adviser to the President, Dr Dewi Fortuna Anwar. This second paper is a masterful piece of apologia for Dr B.J. Habibie, Indonesia’s interim president. Whilst going a considerable way towards acknowledging many of Habibie’s clear failings, Anwar makes a strong argument for the need to recognise the magnitude of his achievements in the light of the very difficult circumstances under which he has had to operate. Consequently, the article serves as an important historical document, not so
much because of discrete items of data presented but rather
because of the insight that it offers into Habibie's
inner circle during the difficult months of late 1998. Similarly,
the paper by Amien Rais is of value for the way in which it
documents his public position shortly after the launching of
PAN. As a high profile and bold advocate for reform over the
past three years, and more recently Chairman of PAN, Rais is
indisputably one of Indonesia's main political players in 1998
and 1999. He is also a leader under a cloud of doubt, having
moved from a sectarian position in the early 1990s to taking on
the mantle of statesman and champion of the values of tolerance
and democracy espoused by PAN and set forth in his paper.

Jamie Mackie's chapter "Tackling "the Chinese problem",
is a much more straightforward academic article, one nonetheless
of significance on account of its addressing one of the key issues
facing post-Soeharto Indonesia. Like many of the contributions
to this book, this article makes the reader long for more as it
seems all too short given the serious interesting issues it addresses.
Nevertheless it succeeds in presenting a fair summary of those
issues. Neatly complementing Mackie's paper is the paper by
Sofyan Wanandi, one of Indonesia's leading Chinese
intellectuals. Wanandi cogently argues that the so called 'Chinese
problem', in the form of the alleged Chinese domination of the
Indonesian economy, represents a serious distortion of the basic
facts of the Indonesian economy. A quite different sort of article
is Franz Magnis-Suseno's 'Langsir Keprabon: New Order
leadership, Javanese culture and the prospects for democracy in
Indonesia'. Magnis-Suseno's insight into Javanese culture and a
way in which it has critically shaped the flow of events over the
last of months is interesting, engaging and persuasive.

Whilst 1998 is likely to be remembered mostly for political
change in Indonesia it is important to remember that the
Soeharto regime would not have collapsed in May 1998 were it
not for the deep economic crisis that ratcheted up social pressure.
One of this volume's strengths is the attention that it gives to
this issue in the form of the five chapters dealing with Indonesia's
troubled economy. Aside from Wanandi's article, there are
articles by Kevin Evans of ANZ Securities in Jakarta, Richard
Borsuk, Singapore correspondent for the Asian Wall Street
Journal, J. Soedradjad Djiwandono, Professor of Economics and
former Governor of Bank Indonesia, and Asep Suryahadi. This
illustrious list of contributors promises much and they do indeed
deliver, generally doing a very good job of making complex
economic data interesting and understandable. One only wishes
that their articles could be longer. Indeed, as already noted, this
is the main criticism to make of the book as a whole. But then
to be fair, this is a concomitant reality of having such an
impressive array of high level and well informed contributors.
In summary then, this is a book of its time, but certain to be of
enduring value for that reason. It is a volume that all students
of Indonesian affairs would be well advised to add to their
shelves.

Greg Barton, School of Social Inquiry, Deakin University

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Health management information systems in lower
income countries: An analysis of system design,
implementation and utilization in Ghana and Nepal

Bruce B. Campbell 1997, KIT Press, Royal Tropical Institute,
Amsterdam, ISBN 9 068 32113 7, 232 pp., Dfl.69

As far back as 1850, Lemuel Shattuck, a founder of the American
Statistical Association, provided recommendations for the
nomenclature of the causes of death and disease. Today, health
management information system (HMIS) needs are vastly more
sophisticated. However, even though well-informed decisions
ought to produce better outcomes, the link is often tenuous.
Finding a way to bridge this gap between policy making and
effective implementation was the task that led Bruce Campbell
in search of more workable systems for employing appropriate
statistical data in health planning.

The use of timely information to manage health systems is a
relatively new idea in developing countries. Monitoring and
evaluation techniques were initially developed through such
programmes as the child survival activities of the 1960s, the
primary health care movement initiated by the 1978 Declaration
of Alma Ata, and the district health strengthening activities of
the World Health Organisation. But only with the wider
application of computer technology has information
management become a more topical feature of health policy
discussions.

Conceptually, identifying the causal links between policy
formulation and eventual health outcomes is an extremely
difficult problem, one that is commonly addressed by measuring
intermediate indicators of service delivery. Practically, collecting
the right sort of information without spending inordinate time
on the task is commonly the major source of concern. Hence,
the 1993 World Development Report Investing in health, for
example, proposed that governments revamp their health
information systems.

Top-down or bottom-up, data-led or action-led information
retrieval – these choices are at the kernel of decisions about
choosing data collection methods that are effective and do not
pose a burden in terms of time and resources. Campbell argues
that action-led procedures – where first the decisions that need
to be taken are identified and then the data necessary to inform
those decisions collected – are best. This is in contrast to earlier
systems which indiscriminately pushed routine data (whether
they were used or not) up the management hierarchy.

The shortcomings of traditional information systems, and the
lack of any critical analysis of information needs, system
design, staff orientation or the pitfalls to be anticipated in the
implementation of an adequate health information system, was,
therefore, the focus for Campbell's doctoral research project
based on his work with the ministries of health in Ghana in
In Ghana, the problem was to improve the use of the health information system within the context of health sector reforms that focused on improved management and decentralisation of services. Measuring the coverage and continuity of care and monitoring the achievement of national goals and targets were the immediate needs. The approach taken was to reduce the number of reporting formats from 38 to four by eliminating the reporting of vertical programmes and replacing it with reporting between the four levels of service management, and by choosing the most appropriate indicators. In Nepal, changes were also implemented during the reorganisation of the Ministry of Health and the establishment of a new health information section as part of creating an integrated service delivery system in conditions where the health system had been dominated by a series of vertical programmes. An integrated HMIS was designed to support decentralised decision making, using the experience gained in Ghana.

Campbell’s study evaluated the use of routine data in improving health sector management in Ghana and Nepal, identifying the determinants of success or failure at each step in the HMIS process. He employed both a descriptive and an analytical methodology to develop procedures for successful information management and the use of appropriate data in decision making. His approach employed regional peer performance review workshops and district rapid appraisal through questionnaires and focus group discussions.

The result is a seven-step process for the introduction of an effective HMIS that involves situation analysis, system design, field testing, participatory revision, implementation, peer performance review and system evaluation. A detailed account of the application of these procedures in Ghana and Nepal is included. The overall result in Ghana was an increase in the level of correctly answered questions during interviews — from a 20 per cent baseline result to 48 per cent after 10 months, remaining at 44 per cent after four years. In Nepal, the correct response rate went from 31 per cent to 48 per cent eight months after the intervention.

Among the findings from the research were the understanding that HMIS can be used for sentinel surveillance, that inaccurate information is often the product of inadequate diagnostic skills, that situation analysis needs to be modest not elaborate, that trade-offs are involved in encouraging wide participation, that effective use of the health information system needs strong support from the highest official levels, that the best results were recorded at the level of district health management, and that the results of the interventions in each case in Ghana and Nepal justified the inputs.

The weakness, as Campbell points out, is in the lack of comparability between the research data collected in each country — due to a lack of consistency in research design. The two cases are therefore presented as independent studies from which useful propositions arise. Nonetheless, for developing country ministries and those charged with implementing effective health information management, this volume is informative and instructive. Campbell’s HMIS methodology deserves to be tested more broadly.

Peter Annear, Faculty of Health and Behavioural Sciences, Deakin University

Reference


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**Development and rights**


**Contested urban heritage: Voices from the periphery**


Development and rights and Contested urban heritage are two books that present a series of interesting contrasts with regard to content, input and cohesiveness. I would recommend both of them to anyone interested in development, but for very different reasons.

Those who study development issues would acknowledge the importance of individual rights within the development process. In a number of instances where the needs of the individual have been subjugated within this process, conflict has arisen and resentment fuelled towards development and those external actors involved in it. Indeed, when an organisation such as Oxfam, often regarded as one of the World Bank’s major critics, publishes a reader on the topic of individual rights and development, one starts reading with a sense of anticipation.

Development and rights is a powerful and involving read covering a wide variety of topics: from development issues, such as agrarian reform and the Indian anti-rape campaign, through to case studies regarding human rights in countries such as Guatemala. However, while the subject matter is quite intriguing, the actual execution of Development and rights leaves a lot to be desired.

The book itself has a somewhat disjointed feel. The uneven length of chapters heightens this impression, with those towards the beginning of the book being much longer and more involved than latter sections, which appear almost superficial. Further, the content of some of the chapters themselves seems lacking in cohesion and for best effect should possibly be read alone rather than as part of this collection. Miloon Kothari’s chapter, ‘The global struggle for the right to a place to live’, is perhaps the best example of this disjointedness.

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Contested urban heritage, on the other hand, is a well-written and structured piece which holds the attention of the reader. One's heritage and surroundings play a major part in how one defines oneself as a person. This is especially relevant in developing countries and their cities. As Shaw and Jones state:

Such cities share the characteristics of rapid growth, cultural pluralism and (post) colonialism, which can make for a potentially explosive mixture. Furthermore, this explosive potential is all the more dangerous in the periphery where small, remote cities, and even the nations which contain them, are far more vulnerable to shifts in capital and investment movements, or in tourist flows, than the cities and nations of the North Atlantic core.

Contested urban heritage is a study of the loss of urban heritage within such cities to the development process. The roots of this work can be traced back to the Ninth International Conference of Historical Geographers, held in Perth, Western Australia, in 1995. Since that conference, the scope of the work has broadened to include a number of cities and countries in both the developing and developed world.

The main focus of this book is very good and provides an absorbing read, a high point being Nigel Worden's study of Cape Town. However, I feel that the book is let down by its somewhat heavy-handed introduction, which tends to overstate the importance of Perth. Indeed, one could question what one of the latter sections, regarding Perth and the old Swan Brewery in particular, is doing in a book that is primarily about developing countries and the loss of urban heritage. Perhaps the preferences of the editors are apparent here. Overall, however, Contested urban heritage is well-written and wonderfully cohesive.

Kerrie Bock, School of Australian and International Studies, Deakin University

Project management: Getting the job done on time and in budget


Patrick Healy's book provides a useful addition to the literature on project management in that it emphasises the process of project management rather than simply describing the tools and techniques available for project managers to use. As the author emphasises throughout, projects are identified, designed, appraised and implemented within a political milieu, and are influenced by many environmental factors outside the project manager's control. Effective project management is thus not simply about applying the right technical tools, but also involves managing change, accommodating uncertainty and coordinating different stakeholder interests.

While the book is primarily addressed to project managers working in developed countries, a number of key points are made about the process of project management which are particularly relevant to those involved in managing the design and implementation of overseas development projects. These include:

- the need to identify and carefully define the 'right' problems to be addressed by the project, given that a focus on the 'wrong' problems will result in inappropriate/ineffective solutions;
- the dangers of project managers using project design documents as a blueprint for what needs to be done. As Healy points out, '... one needs to have a clear idea of where one is going, but be prepared to take different routes if necessary. To follow a set formula can put too much at risk and distracts the project manager from responding to an ever-changing environment'. Project managers are thus engaged in constantly balancing what is hoped can be achieved with what actually can be achieved. In this regard, project management is more about 'satisfying' than 'optimising';
- recognising that, during the project life cycle, different behaviours are required, ranging from a more open and flexible approach during the early stages (when concepts are being developed and tested), to more focused and controlling behaviours at the end of the cycle when the job needs to be completed and handed over to the 'owners';
- the need to develop quick, easy ways of documenting decisions which do not bog project managers down in unnecessary paperwork. Over-specified project management procedures and documentation requirements are therefore viewed with suspicion;
- understanding, and accepting, that the process of establishing a project's feasibility is not just a technical one but also involves political interests and value judgements. Linked to this point is the need to understand that the process of choosing a preferred implementation strategy (to meet a defined need) is not usually a logical step, but involves a 'leap' in thinking based more on creative innovation than on technical rationality;
- recognising that the power of project managers over other stakeholders is usually limited and, therefore, strategies need to be designed to influence and persuade the other parties to play their part in achieving the desired outcomes. Allied to this issue is the important point that different project participants have different project life cycles, given their different roles and interests in the project. This is a particularly pressing issue where there are often huge gaps in the understanding, culture, roles, interests and incentives between the managers (expatriate or local) and the clients; and
• recognition that ownership of the project has ‘an enormous impact on projects and their management’. Given that official aid projects are often designed and funded from the top down (despite the participatory rhetoric), lack of local ownership is a major reason for project failure, particularly in terms of effective handover at the end of the project’s life.

While this book brings out such useful insights and issues of broad relevance to all project managers, I suspect that some readers will nevertheless find it rather hard going. There are two main reasons for this. First, the book’s strength in focusing on process issues is also a weakness, at least if the reader is looking for some clear points of guidance about how to ‘do the job’. The book provides intellectual stimulation, but it is not always clear how the intellectual insight might be applied in practice. Second, the layout and design of the book leave a lot to be desired and make navigation around the text difficult. In particular, the hierarchy of headings within each chapter is confusing and there is a lack of appropriate graphics to help summarise and visualise ideas. Nevertheless, this book provides an interesting read and should be of particular interest to those undertaking further studies on project management issues.

Jonathan Hampshire, Project Design and Management Pty Ltd, Canberra

India: Sustainable development and good governance issues: A case for radical reassessment

Binyak Ray 1999, Atlantic Publishers, New Delhi, ISBN 8 171 56746 0, xx + 156 pp., A$28.95, distributed by Bibliotech, Canberra

The thesis of this book by Binayak Ray is that optimistic predictions about India’s future will not be realised in practice unless there are radical reforms to its political institutions and to its development policies. Few would argue with the need for reform in India but it is more difficult to locate rosy predictions of India’s future – and Ray does not identify or elaborate on such voices. He actually starts the book rather uncertainly by announcing that India is seen by many commentators as ‘being among the big five economies of the 21st century’ (p.1) but then naming the other four ‘projected’ big economies in a list which excludes the USA, Japan and European countries.

After this confusion Ray gets quickly into stride, first delineating his leading concepts – sustainable development and good governance – and then discussing India’s past economic performance and what we might expect in the future. The most distressing aspect of India’s past performance and future prospects is the persistence of poverty on a massive scale. Ray provides ample unpleasant evidence to demonstrate that between 1989–94 more than half the population were existing on an income of one dollar or less per day. There were 312 million people living below the poverty line, and, to make matters worse, anti-poverty programmes have often failed to reach their targets.

While Ray provides brief discussion or mention of many other economic issues, he selects three for special attention – population, human resources and energy. A fourth, land reform, is not discussed because ‘it is a totally political issue’ (p.30). But it is difficult to imagine that policies in the other areas will not be politically contested. For example, it is observed that India’s population has exploded in size from 442.3 million people in 1960 to 913.5 million in 1994, and even on a low growth scenario, there will be over one billion people in India to greet the new millennium. Bringing down the rate of population growth is not simply a technical matter. Just as important are the political battles which can arise, especially in the world’s largest democracy, over who has the right to determine family size.

Having completed his economic survey Ray moves on to governance issues, first citing a nationwide poll which demonstrates ‘people’s lack of confidence in the political process, politicians, police, administration and in those who are in positions of power or authority’ (p.48). These institutional issues are then pursued in critiques of the constitution, bureaucracy, political party system and judiciary, and in a commentary on corruption, ‘a major issue in India’ (p.66). The following chapter deals with the reforms which are necessary to overcome these institutional deficiencies. Ray has many ideas and suggestions ranging from standard to novel prescriptions, all of which make for interesting reading. However, the book would benefit by incorporating commentary on the technical and political feasibility of the proposed actions. The reader is provided with many statements on what should be done but much less on the how to do or why such policy choices are the best options.

In general the book provides a useful and concise introduction to some of the major developmental issues which confront India. The immense scale of the problems comes through clearly as does the importance of addressing fundamental institutional issues. But Ray does not simply critique India’s development record, he also provides plenty of suggestions about how to deal with them. However, in attempting to cover so much in such a short space there is a fragmentary character to some of the discussion, and in some passages assertion can substitute for demonstration. Nevertheless Binayak Ray has succeeded in alerting his readers to a range of fundamental development problems facing India and in making a significant contribution to the debate on how to address them.

Mark Turner, School of Administrative Studies, University of Canberra
New books

Post-Soeharto Indonesia: Renewal or chaos?

What are Indonesia's prospects over the next ten years? Its economy has been ravaged by the Asian economic crisis. Its leader for 32 years, President Soeharto, was forced from office in May 1998 amidst rioting and student demonstrations. This book brings together papers presented at the Indonesia Update 1998 conference held at The Australian National University, Canberra, with papers from other sources to give a comprehensive picture of Indonesia at this highly uncertain juncture in its history.

Indonesia assessment 1995: Eastern Indonesia
Colin Barlow and Joan Hardjono (eds) 1995, Institute of Southeast Asian Studies and RSPAS, The Australian National University, ISBN 9 813 05518 9, 317pp., A$15

This book contains two sections: one gives an overview of the Indonesian economic and political conditions of 1995, and the other examines economic and social developments in Eastern Indonesia, the Philippines and Australia. Topics covered include fishing resources and marine tenure; health and poverty; policy environment; and rural community development in Irian Jaya.

The above two publications are available from:
Department of Political and Social Change
Research School of Pacific and Asian Studies
The Australian National University
Canberra ACT 0200
Australia
Tel +61 2 6249 5915
Fax +61 2 6249 5523
E-mail bevley@coombs.anu.edu.au

Indonesia: The challenge of change

A team of Indonesian and American experts explore the impact of economic change on 12 major Indonesian institutions, including the armed forces, the bureaucracy, the media and political parties. The growing gap between a slow-to-change governing structure and the dynamism of the broader society poses dilemmas for the next generation of leaders and Indonesia's development.

Gender, education and development: Beyond access to empowerment

This book grounds the education of women and girls in the realities of their lives and experience in diverse areas of the developing world. Case studies are from the Arakambut of Peru to the changing experience of racialised education in South Africa. The contributors take issue with the World Bank's view that education for girls and women is important primarily as a cost-effective mechanism for making women more economically productive. Including an overview chapter on the impact of structural adjustment on education throughout Latin America and Africa, the book provides detailed information on Sri Lanka, Nepal, Pakistan, Malaysia, Papua New Guinea, Peru, Ethiopia, Tanzania, South Africa, Niger and Mauritius. It meets the urgent need to understand the education of women and girls in their economic, political and cultural contexts.

Impact assessment for development agencies: Learning to value change

This book considers the process of impact assessment and shows how and why it needs to be integrated into all stages of development programmes from planning to evaluation. Its basic premise is that impact assessment should refer not to the immediate outputs or effects of a project or programme, but to any lasting or significant changes that it brought about. The book moves on to discuss the design of impact assessment processes and a range of tools and methods, before illustrating its use in development, in emergencies, and in advocacy work. It ends by exploring ways in which different organisations have attempted to institutionalise impact assessment processes and the challenges they have faced in doing so. Country case studies include Bangladesh, El Salvador and Zimbabwe.
Information management for development organisations


Information flows are increasing at an exponential rate, and traditional methods of managing the flow no longer work. People often feel excluded from the complex exchanges of information or overwhelmed by the task of absorbing and reacting to it all. This book is designed for managers of non-government and community organisations. It aims to help them think critically about what kinds of information they, or their organisations, staff and project partners need. It discusses how they can access such information, manage it, and communicate it in the most effective and equitable way. Some practical tools are offered to help managers relate the ideas to their own situations.

Development and social action


Civil society organisations are playing an increasing role in promoting policy change on behalf of poor people, whether through advocacy or through direct action and popular mobilisation. The challenge is that of moving from protest and opposition to constructive forms of engagement with the state and the private sector. This collection draws on experiences of social action from countries such as Belgium and Brazil in areas such as new social movements, governance and the state of the law, North–South NGO relations, and the use of development theatre in working for social and political change.

Gender, religion and spirituality

Caroline Sweetman (series ed.) 1999, Oxfam Focus on Gender, Oxfam, ISBN 0 855 98426 0, 88pp., £7.95

Religion and spirituality are central to women's and men's lives across the world, yet mainstream development policy and practice rarely takes account of this. Articles here explore the complex links between social and economic development and religious and spiritual belief and assess the cost to development of ignoring these links. Writers explore the scope for promoting women's rights and needs offered by religious belief and practice, and analyse feminist responses to fundamentalist regimes which use religious doctrine to justify women's oppression.

Managing water supply and sanitation in emergencies


This book is based on a public health approach to the provision of water and sanitation in emergencies that is both information (drawing on reliable, relevant data) and people based (aiming for maximum impact on the health of the whole population, but sensitive to the needs of particularly vulnerable groups). It emphasises the need for a coordinated and phased response which adapts to meet constantly changing needs. Topics include site selection, disposal of solid waste, drainage and hygiene promotion.

Critical development theory: Contributions to a new paradigm


In recent years there has been considerable rethinking of the whole concept of development, including growing awareness of its gender, cultural and environmental dimensions, and the impact of globalisation. The contributors to this volume seek to extend these debates to a more fundamental level, tackling such issues as the crisis of development as a Eurocentric concept, and the viability of alternative, non-Western forms of development. This volume offers innovative ways of re-engaging with a reality that, despite globalisation, is very much still a dimension of our era.

The world guide 1999/2000: A view from the South


Published biennially, this is a reference book on all the countries and territories of the world, covering the history, politics and economics of development. It incorporates contributions from a worldwide network of journalists and researchers, and offers an alternative perspective from the South. Includes up to date information on 235 countries with maps, charts and statistics; profile of each country including its environment, history, politics, economics and social setting; key facts and indicators on literacy, trade, employment, schooling, health, communications and energy use; and analysis of key global issues such as debt, education, trade and social development.
The A to Z of world development


Provides an overview of the main ideas and issues in global development over the last 25 years. The book covers 624 different topics on aid, development, the environment, economics, international politics and figures. Includes photos, charts, graphs and illustrations.

Gender works: Oxfam experience in policy and practice


Aimed at development practitioners, researchers and policy makers, this book is a contribution to development debates on integrating gender issues into development organisations, focusing on Oxfam Great Britain's experience over the past 15 years. The articles chart the experience of Oxfam in its progress towards turning words into action on gender issues: combating women's poverty, and working to promote equality between women and men.

Violence against women

*Caroline Sweetman (series ed.)* 1998, *Oxfam Focus on Gender, Oxfam*, ISBN 0 855 98401 5, 80pp., £7.95

This collection of articles places violence against women in the context of development. Violence is both a human rights issue and an obstacle to women's participation in development. Writers focus on campaigning and advocacy, as well as work with women who have been sexually assaulted, and those who have undergone experiences of cultural practices such as female genital mutilation and early marriage.

Women's information services and networks: A global source book


This book discusses women's information services and networks and considers the impact of information technology and the potential of electronic networking. It is supplemented by a directory of information services, an annotated bibliography and a resource list.

Africa's valuable assets: A reader in natural resource management


Africa is perceived by many as war-torn and starvation-riddled. While problems abound, the continent also houses resources which, if wisely managed, can provide food, minerals and many other essentials of economic growth, and social and political stability. This collection of essays highlights problems and opportunities surrounding natural resource management in Africa and describes some of the more promising strategies for improvement. Covers environmental planning, forest and farms, the roles of civil and public analysts, resource managers, academics, and funders and investors already familiar with African issues.

Cut and run: Illegal logging and timber trade in the tropics


Illegal logging and trade in timber is a major cause of forest degradation in the world today. However, controlling this problem is not a simple matter of enacting new laws and enforcing new regulations: the rules already exist. If countries are to manage their forests in a sustainable way, they must implement existing laws effectively. This book examines how this might be done. It exposes and analyses illegal practices in the logging industry and timber trade of four tropical countries – Brazil, Paraguay, Ghana and Cameroon. The book also provides a global overview of the problem.

From defence to development: Redirecting military resources in South Africa


For South Africa's transition to democracy to be successful, there needs to be a process of demilitarisation that involves a shifting of power and resources away from the defence force and the military establishment. This process has been underway since 1994.
the early 1990s, but has been uneven and fragile. This book argues that it is time to focus instead on the redirection of military resources towards sustainable development and environmental restoration. This would require redefining the notion of security to take into account the threats to peace caused by poverty and social dislocation; converting the defence industry to civilian production; reallocating defence expenditure; redeploying troops in development projects; and redistributing land previously used as military bases.

**Knowledge shared: Participatory evaluation in development cooperation**


This book examines an approach to evaluation that enables citizens and professionals alike to jointly assess the extent to which the benefits of development are shared, and by whom. It analyses the theory and practice of participatory evaluation around the world.

**The cornerstone of development: Integrating environmental, social, and economic policies**


Profiles many of the first attempts to implement sustainable development initiatives worldwide. This book explores the challenges of conceptualising and practicing the integration of environmental, social, and economic policies towards sustainable development; addresses the types of process tools, methods and institutional arrangements necessary for successful solutions; and serves as a blueprint for other organisations and government agencies to carry out similar socioeconomic policies.

**Women coping with HIV/AIDS: We take it as it is**


HIV/AIDS is almost synonymous with stigma, which victims may perceive as even worse than the reality of being HIV-positive. Relationships often disintegrate and socioeconomic conditions worsen; uncertainty about the future grows. In these respects, women are apt to suffer even more than men. This medical anthropological study explores the coping strategies that women use in the face of their condition.

**Tourism, development and growth: The challenge of sustainability**


Distinguishing between sustainable development and sustainable tourism, the authors examine whether and in what form tourism can contribute to sustainable development and growth. Focusing on different types of tourism appropriate to particular situations, the contributors draw on examples from around the world to explore tourism's contribution to the economic, social, political and environmental advancement of developing countries.

**Bougainville 1988-98: Five searches for security in the North Solomons province of Papua New Guinea**


This volume examines the crisis in the North Solomons province of Papua New Guinea, more widely known as Bougainville, between 1988 and 1998. Its focus is theoretical. It addresses the questions of what political choices and underlying structural pressures have principally shaped the outbreak, subsequent intensification, and later de-escalation, of violent political conflict. The monograph is also intended to help inform understandings of other cases of violent political conflict in Melanesia.

**Women in the New Asia**

Yayori Matsui 1999, Spinifex Press, ISBN 1 875 55986 8, 224pp., A$27.95

What impact has the rapid economic development of Asia had on women? Why is Asia still home to the largest number of impoverished women? This book charts the effects of the economic boom on women across Asia. The author demonstrates how Asian women are confronting rapid economic development, which is accompanied by widespread infringement of human rights. Analysing the lives of women in Japan, Thailand, the Philippines, Taiwan, China, Nepal and Korea, Matsui explores the impact of globalisation, including the feminisation of migration and an increase in the trafficking in women; sexual violence, from the 'comfort' women to child prostitution; and development projects, the cause of mass deforestation and displacement of communities. She also
describes women's credit co-ops, democratisation movements and unionisation of women workers, finding the seeds of hope for a new Asia.

Town and hinterland in developing countries: Perspectives on rural–urban interaction and regional development


The purpose of this book is to shed more light on the role of small towns in regional development under various socio-spatial and political economic conditions. The book deals with a series of case studies and comparative analyses on the structure and role of small and intermediate urban centres in different regional settings in developing countries. It makes comparisons between Central Mali and Swaziland in Sub-Saharan Africa, northern Costa Rica and northern Mexico in Latin America, and central Java and Yogyakarta in Indonesia. Important focal points are the production and employment structures of the towns, the development level of their rural hinterland economies, the rural–urban and interurban patterns of interaction, and the role of government policy.

India: Sustainable development and good governance issues


India's economic progress since independence in 1947 is reflected in her spectacular success in the food production area from a food deficit country to a net exporter. Its democratic and secular form of government, in spite of many weaknesses, is the envy of many countries which are struggling to preserve an open democratic form of government. Although these successes are impressive, India's failures are also of great concern. The author argue that unless corrective measures are taken soon to overcome these deficiencies, the situation may become uncontrollable, and may threaten the foundation of the country's economic, social and political stability.

Natural resource management and institutional change


Using new evidence from a three year programme of research in developing countries in Asia, Latin America and Africa, the authors describe how government organisations have been privatised, decentralised or restructured while private sector organisations - both non-profit and commercial - have taken on increasingly important roles in resource management and service supply.

Development as process: Concepts and methods for working with complexity


'Process' approaches to economic and social development appear to be more flexible and offer greater prospects of success than traditional 'project' methods. This book addresses the questions raised by the different natures of the two approaches. The authors examine development projects through experience in water resources development in India and in organisational learning by a Bangladeshi NGO. Interagency settings are examined in the setting of an aquaculture project in Bangladesh and in the setting of agriculture and natural resources development in Rajasthan, India.
Indonesia: Human rights and pro-independence actions in Irian Jaya


In the aftermath of President Soeharto's resignation in May 1998, political tension in Irian Jaya, Indonesia's easternmost province, has increased. The province, called West Papua by supporters of independence, occupies the western half of the island of New Guinea. Unlike the rest of Indonesia which gained independence in 1949, Irian Jaya was under Dutch control until 1963 and only became part of Indonesia after a fraudulent, UN-supervised 'Act of Free Choice' in 1969. Over the last three decades, support for independence, fuelled by resentment of Indonesian rule, loss of ancestral land to development projects, and the influx of migrants from elsewhere in the country, has taken the form of both an armed guerrilla movement, the Free Papua Movement (Organisasi Papua Merdeka or OPM), and generally non-violent attempts to raise the West Papuan flag. Guerrilla activity has led in most cases to military operations in which civilians have suffered a wide range of abuses; flag-raising and other demonstrations have led to the arrests of those involved, often on charges of subversion or rebellion.

Academic freedom in Indonesia: Dismantling Soeharto-era barriers


A nationwide student protest movement played an instrumental role in forcing the resignation of President Soeharto on 21 May 1998 and in opening the door to democratic reform in Indonesia. Students and faculty emerged at the forefront of the reform movement in large measure because they publicly spoke their minds, courageously and consistently ignoring a variety of repressive laws, regulations, decrees, and abusive practices that have long limited political and intellectual freedom on Indonesia's campuses and in Indonesian society. Although the change of leadership in Indonesia has meant changes, significant barriers to citizens' exercise of basic rights continue to exist.

Communal violence in West Kalimantan


This report documents the conflict that erupted in late 1996 and early 1997 between indigenous Dayak people and immigrants from the island of Madura who settled in the province of West Kalimantan in Indonesian Borneo, site of the forest fires that caused environmental havoc across Southeast Asia. Based on investigations in the province in January and July, the report gives a lower death toll than most previous accounts, documenting about 500 deaths rather than 1,000 or higher as was initially reported. It notes that major questions remain unanswered almost a year later about how the conflict spread and about army and police actions that may have exacerbated the conflict. The report itself does not come to any conclusion about a central question: whether the worst of the violence was spontaneous or manipulated. Human Rights Watch does state, however, that in two short visits, it was unable to find any hard evidence of provocateurs.

Deteriorating human rights in East Timor


The months of May, June, and July 1997 seemed to mark an intensification of the conflict in East Timor, with guerrilla attacks on both Indonesian military targets and civilians in Dili, Baucau, Ermera, and Los Palos, and intensive operations by the Indonesian army to find and punish those responsible. The timing of the attacks was linked to the 29 May national elections in Indonesia in which Foreign Minister Ali Alatas ran representing East Timor on the list of the ruling party, GOLKAR. Both Alatas and Transmigration Minister Siswono Yudohusodo made highly publicised campaign visits to East Timor in mid-May, with Alatas challenged by students at the University of East Timor on Indonesia's refusal to hold a referendum on the territory and Siswono's presence serving to underscore the highly sensitive issue of how government-sponsored migration is changing the demographics of East
Timor. This report focuses on the period from May to July, but it also includes new information about earlier incidents. Outside human rights organisations are not allowed formal access to East Timor. The information presented here comes from a variety of sources, including interviews with East Timorese, trial documents of East Timorese convicted in Dili district court, eyewitness accounts compiled in East Timor and made available to Human Rights Watch, and articles from the local Dili newspaper, Suara Timor Timur (Voice of East Timor).

**Human Rights Watch world report 1999**


This report is Human Rights Watch's ninth annual review of human rights practices around the world. It covers developments in 68 countries from December 1997 until November 1998. Most chapters examine significant human rights developments in a particular country; the response of global actors such as the European Union, Japan, the United Nations, the USA and various regional organisations; and the freedom of local human rights defenders.

The above five reports are available from:

Publications Department
Human Rights Watch
350 Fifth Avenue 34th Floor
New York, NY 10118
USA
Tel +1 212 216 1813
Fax +1 212 736 1300
Web http://www.hrw.org

**Assessing aid: What works, what doesn't, and why**


Foreign aid has proved to be effective in increasing the rate of growth, reducing poverty and lowering infant mortality rates in many countries. Yet more than one billion people still live in extreme poverty on less than $1 per day. This report contends that aid effectiveness depends on the institutional and policy environment into which the aid flows. To make aid more effective, it recommends five main strategies: focus financial aid on poor countries with good policies and strong economic management; provide policy-based aid to demonstrated reformers; use simpler instruments to transfer resources to countries with sound management; focus projects on creating and transmitting knowledge and capacity; and rethink the internal incentives of aid agencies.
The financial crisis in emerging markets is likely to be more extensive and longer lasting than previously predicted. This annual report predicts that average GDP growth in developing and transition countries may fall to 1.5 per cent in 1999, making it the lowest growth since 1982, and projects a modest recovery in the range of 3.6 per cent by 2000. The report also shows how the crisis has severely reduced flows of international capital to developing countries, and how development aid has fallen to its lowest level in 50 years.

World development indicators 1999

The third annual edition of World development indicators covers six main areas: world view, states and markets, people, global links, economy and environment. It includes more than 800 indicators for 148 countries and regional and income groups, with basic indicators for a further 62 countries.

The above three reports are available from:
The World Bank
PO Box 960
Herndon, VA 20172-0960
USA
Tel +1 703 661 1580
Fax +1 703 661 1501
E-mail books@worldbank.org
Web http://www.worldbank.org/

Building on our strengths: Reflections from Australians in the field on our international response to HIV/AIDS

Deborah Boswell and Audrey Cornish 1998, HIV/AIDS
International Development Network of Australia, 29pp.

This report asks questions of Australians working in the field in a variety of developing countries in order to document issues and challenges concerning HIV/AIDS drawn from experience. The report is qualitative in nature and is primarily a collection of thoughts and suggestions for positive changes. Respondents indicated that Australia has much to offer to an international response to HIV/AIDS in several different areas. It has credibility based on experience and involvement at a national level, a progressive policy context and demonstrated support for community based action, and developed practical skills, resources and experiences. Constraints include a tendency to impose what is thought to be appropriate according to our own experience, inflexible funding arrangements, and in-country difficulties.

Available from:
Prue Borthwick
HIDNA Coordinator
c/- AFAO
Level 4, 74 Westworth Ave
Darlinghurst NSW 2010
Australia
Tel +61 2 9281 1999
Fax +61 2 9281 1044
E-mail pbonhwi@afao.org.au

Indonesia: Country report population and development


This report is intended to give a broad overview of the range of activities that have been initiated in Indonesia since the Fourth Asian and Pacific Population Conference 1992 and the International Conference on Population and Development 1994 were held. It focuses on efforts to integrate family planning information, education and services into reproductive health programmes; gender issues in reproductive health; and monitoring, evaluation and impact assessment, including development and utilisation of indicators.

An assault on poverty: Basic human needs, science, and technology

International Development Research Centre 1997, ISBN 0 889
36800 7, 327pp., C$30

Does science and technology (S&T) have a role to play in meeting basic human needs? Can S&T help the world's communities secure adequate nutrition, health care, water, sanitary facilities, and access to education and information? The role of S&T in development is one of the most complex issues facing policy makers and development practitioners. In this report, the Panel on Technology for Basic Needs of the United Nations Commission on Science and Technology for Development offers analyses of poverty eradication and the role of S&T with respect to sustainable human development,
technical and vocational education, health and small scale economic activities, among other issues.

Available from:
International Development Research Centre
PO Box 8500
Ottawa, Ontario K1G 3H9
Canada
Tel: +1 613 236 6163
E-mail: info@idrc.ca
Web: http://www.idrc.ca/

Getting ready: A guide for international NGO, permaculture and community development workers


Many people are looking for a way to make a difference in their lives. One way people choose is to volunteer overseas. This book helps tackle some issues that people volunteering overseas will face. Readers are reminded that it takes more than goodwill to do effective work overseas. It is necessary to have skills that are needed and the ability to be good at them while dealing with changes in living standards, culture and lack of contact with colleagues from the home country. Includes various 'tools' for the journey, such as books, contacts and courses.

Available from:
Action for World Development NSW
8th Floor/8-24 Kippax St
Surry Hills NSW 2010
Australia
Tel: +61 2 9212 5275
Fax: +61 2 9212 2468
E-mail: awdev@ozemail.com.au


This dialogue brought together business people and government officials to discuss possible needs and approaches to advancing public–private cooperation concerning infrastructure development in the Asia–Pacific region. It focused on how to develop the infrastructure and sustainable development initiatives that were endorsed by the Economic Leaders at Vancouver in November 1997.

Canadian Development Report 1999: Civil society and global change

Alison Van Rooy (ed.) 1999, North-South Institute, Ottawa, ISBN 1 896 77027 4, C$35

This report focuses on Canadian civil society organisations – NGOs, unions, churches and professional associations – that are undertaking innovative work with their counterparts in the South. Chapters cover women's equality, fighting hunger, environmental protection, preventing conflict, and human rights. Includes new data on Canadian civil society organisations, their spending, and comparisons with other countries.

Available from:
Renouf Publishing
5369 Caronk Road, Unit 1
Ottawa, Ontario K1J 9J3
Canada
Tel: +1 613 745 2665
Fax: +1 613 745 7660
E-mail: order.dept@renoufbooks.com

The human resource development dimension of the Asian financial crisis: Towards the definition of an APEC response


This report summarises a dimension of the work to date of the APEC task force on the human resource and social impacts of the Asian financial crisis. It is based on a paper by Nigel Haworth of the University of Auckland, which was then used as a basis for discussion at a meeting of experts in Jakarta in April 1998, and at a symposium in Taipei in June 1998.

The above two reports are available from:
Publications Manager
APEC Secretariat
438 Alexandra Road #14-01/04
Alexandra Point
Singapore
Tel: +65 276 1889
Fax: +65 276 1777
E-mail: jt@mail.apecsec.org.sg

April 1999
Newsletters and journals

Inside Indonesia

Published quarterly by the Indonesia Resources Information Program, this magazine provides a comprehensive coverage of news, opinion, background information, critical analysis and debate on social, political, cultural and environmental issues in contemporary Indonesia. Since its first issue in 1983, the magazine has gained a reputation for publishing incisive, accurate articles backgrounding current issues or breaking new stories. Articles include issues such as independence movements in East Timor, Aceh, West Papua, the economic and political crisis, worker struggles, human rights abuse, ecotourism, gender, Islam as well as fiction, book reviews and website information.

For more information contact:
Inside Indonesia
PO Box 1326
Collingwood VIC 3066
Australia
Tel +61 3 9419 4504
Fax +61 3 9419 4774
E-mail admin@insideindonesia.org
Web http://www.insideindonesia.org

SMERU – Social Monitoring and Early Response Unit Newsletter

Published monthly, the newsletter of SMERU aims to disseminate as widely as possible information about the social crisis in Indonesia. SMERU is supported and directed by the World Bank, with assistance from a number of donor agencies, particularly AusAID, ASEM and USAID. It has been established as a monitoring unit with the specific purpose of providing qualitative information about the social impacts of the current Indonesian crisis with accurate and up-to-date reports from a variety of sources. Emphasis is on field-based reports.

For more information contact:
SMERU
Jl. Subang No. 22
Jakarta 10310
Indonesia
Tel +62 21 390 9317
Fax +62 21 390 7818
E-mail smeru@smeru.or.id
Web http://www.smeru.or.id/

Inform’Action

Inform’Action is the quarterly bulletin of the Pacific Public Health Surveillance Network (PPHSN). It aims to give an overview of communicable diseases in the Pacific, and it contains news and information about public health surveillance activities in the Pacific Islands. Six diseases in particular are targeted: cholera, dengue, malaria, measles, influenza and acute haemorrhagic conjunctivitis. The bulletin is bilingual (English and French), and replaces the monthly South Pacific Epidemiological Health Information System (SPEHIS) newsletter.

For more information contact:
Mina Vilayleck, PHS and CDC Section
Secretariat of the Pacific Community
PO Box D5
Noumea
New Caledonia
Tel +687 26 2000
Fax +687 26 3818
E-mail spe@spc.org.nc
Web http://www.spc.org.nc/phs

Indigenous Affairs

Indigenous Affairs is a quarterly publication of the International Work Group for Indigenous Affairs (IWGIA), an independent international organisation which supports indigenous peoples in their struggles against oppression. Issues covered include the impact of tourism on indigenous populations in French Polynesia, logging and the Dayak women of Sarawak, and a proposed hydroelectric scheme on the Cunene River in Namibia.

For more information contact:
IWGIA
Fiolstrade 10
DK-1171 Copenhagen K
Denmark
Tel +45 33 124 724
Fax +45 33 147 749
E-mail iwgia@iwgia.org
Web http://www.login.dknet.dk/~iwgia/

Culture Health and Sexuality

Issues of culture, health and sexuality are of growing importance nationally and internationally, particularly in relation to social welfare and public health efforts to promote sexual and reproductive health. Gender stereotypes, cultural expectations and social, political and economic conditions impact significantly on women’s and men’s reproductive decision making, body integrity, and vulnerability to sexually transmitted infections including HIV/AIDS. This new journal offers an international environment for the publication of scholarly papers in the fields of culture, health, human reproduction and sexuality. Multidisciplinary in focus, the journal will contain papers that deal with methodological concerns as well as those that are
empirical and conceptual in nature. Current and forthcoming articles deal with the process of disclosing positive HIV status; female Indonesian sex workers’ relationships with men; and coming to terms with HIV in Laos PDR.

For more information contact:

Taylor & Francis
Customer Services Department
Rankine Road, Basingstoke
Hants RG24 8PR
United Kingdom
Fax +44 1256 330 245
E-mail info@tandf.co.uk
Web http://www.tandf.co.uk

The Prescriber

Published four times a year, this newsletter promotes rational drug use and correct case management in basic health services. Its main audience is front-line health staff in developing countries, both in the public and private sectors. As this audience lacks access to reliable and easily understood materials on important health and nutrition problems, The Prescriber’s emphasis is on conveying information of the highest technical quality in the most clear and practical way possible. Each issue of The Prescriber goes through a rigorous review process, in collaboration with the World Health Organisation and, in some cases, other international agencies.

For more information contact:

UNICEF
3 United Nations Plaza
New York, NY 10017
USA
Tel +1 212 326 7000
Fax +1 212 2887 7465
E-mail gedward-jenkins@unicef.org
Web http://www.unicef.org/prescriber/

Australian and New Zealand Journal of Public Health

The Australian and New Zealand Journal of Public Health (previously the Australian Journal of Public Health) is the journal of the Public Health Association of Australia Inc. The journal is concerned with public health issues. Reports of finished research projects are the journal’s staple diet, but reviews, methodological notes and brief research reports are also considered. Contributors come from almost all of the human, natural and social science disciplines. The research reported includes formal epidemiological inquiries into the correlates and causes of diseases and health-related behaviour, analyses of public policy affecting health and disease, and detailed studies of the cultures and social structures within which health and illness exist.

For more information contact:

Vicki Thompson, Subscriptions Coordinator
Public Health Association

The Courier Africa – Caribbean – Pacific (ACP)

The Courier ACP is a development magazine produced by a multicultural team of journalists within Directorate-General VIII of the European Commission. It is published every two months (in English and French) and has a circulation of approximately 80,000. The magazine has readers in more than 150 countries and territories. Each issue of The Courier ACP contains two principal features: ‘Country Reports’ which deal with the current economic and political outlook in specific Africa—Caribbean—Pacific states, and the ‘Dossier’ which generally covers a sector or theme of particular interest to developing countries. There is no charge for The Courier ACP, although heavy demand may limit its availability.

For more information contact:

Margriet Mahy-van der Werf,
G-12 0/111
European Commission
200 Rue de la Loi
B1049 Brussels
Belgium
Tel +32 2 299 3012
Fax +32 2 299 3002
E-mail info@dg8.ccc.be
Web http://europa.eu.int/comm/dg08/publicat/courier/index_en.htm

Development

Development is the journal of the Society for International Development. It aims to be a point of reference for the dialogue between activists and intellectuals committed to the search for alternative paths of social transformation to a more sustainable and just world. This quarterly journal links local experiences with innovative research in social sciences in order to elaborate credible new paths for political, economic, social and cultural change. It is a place for debate, dialogue, and interaction among the different worlds of the development community. Issues in 1999 will focus on reproductive rights and health: putting Cairo into action, environmental politics, the politics of AIDS in the age of globalisation, and public health and globalisation.

For more information contact:

SID Secretariat
Via Panisperna 207
00184 Rome
Italy
Tel +39 06 487 2172
Fax +39 06 487 2170
E-mail info@sidint.org
Web http://www.sidint.org
SME Newsletter

Some of the topics in the April 1999 issue of the School of Medical Education's newsletter include a review of indigenous health services, HIV/AIDS capacity building in Indonesia, reorienting medical education in Bangladesh, promoting health in the Pacific, and building regional relationships in Cambodia, Laos and Vietnam, along with information about short courses, staff news and abstracts of Masters candidates' research projects.

For more information contact:
Deborah Raphael
School of Medical Education
The University of New South Wales
Sydney NSW 2052
Australia
Tel +61 2 9385 3197
Fax +61 2 9385 1526
E-mail D.Raphael@unsw.edu.au
Web http://www.med.unsw.edu.au/meded

Review

Review is published three times a year by The North-South Institute. The North-South Institute carries out research on Canada's relations with developing countries. It is the only independent, non-governmental research institute in Canada focused on international development. The Institute's research supports global efforts to strengthen international development cooperation, improve governance in developing countries, enhance gender and social responsibility in globalising markets, and prevent ethnic and other conflict. Review is available free from the Institute.

For more information contact:
The North-South Institute
55 Murray Street, Suite 200
Ottawa, Ontario K1N 5M3
Canada
Tel +1 613 241 3535
Fax +1 613 241 7435
E-mail nsi@nsi-ins.ca
Web http://www.nsi-ins.ca

AHADG Newsletter

Published by the Australian Health and Development Group (NSW), the February 1999 issue discusses the 1999 UNICEF State of the world's children report, outlines details of the September 1998 meeting on aboriginal child health, examines a visit to the Minimbah aboriginal children's school in Armidale, and has some news on the International Year of the Older Person.

For more information contact:
John Hirshman
Australian Health and Development Group
212 Old South Head Road
Vaucluse NSW 2030
Australia
Tel +61 2 9337 5839
Fax +61 2 9313 6185
E-mail J.Hirshman@unsw.edu.au
Deakin University

Master of International and Community Development

This programme is aimed at people who work or aspire to work in development and community settings in Australia and overseas. The programme has been designed to enhance skills of analysis and interpretation of development and community issues. The emphasis is on practice and improved understanding of the complexities of the contemporary development experience. Units offered include Agriculture and Third World Development; Community Development Theory; Microfinance for Poverty Reduction; NGOs and Development; and Aid, Trade and Development.

For more information contact:
School of Australian and International Studies
Faculty of Arts
Postgraduate Office
Deakin University
Geelong VIC 3217
Australia
Tel +61 3 5227 2342
Fax +61 3 5227 2282
E-mail admissions@deakin.edu.au
Web http://www2.deakin.edu.au/Develop

Griffith University

Master of International Health

This course will address contemporary trends towards globalisation of international aid programmes. It is designed to produce graduates with the ability to plan, implement, and evaluate international and national public health programmes within the context of development policies, and to utilise the resources of international organisations for the purposes of national programmes. It will examine current practice in the areas of planning, implementation, and evaluation of public health programmes in the context of international development programmes by international and national governments and NGOs. The aim is to train professionals working in or with international organisations, emphasising intersectoral collaboration, drawing case studies from many countries.

For more information contact:
Eberhard Wenzel
School of Public Health
Griffith University
Nathan QLD 4111
Australia
Tel +61 7 3875 7103
Fax +61 7 3875 6709
E-mail e.wenzel@mailbox.gu.edu.au
Web http://www.ldb.org/index.htm

Avondale College

Bachelor of Arts – International Development Studies

This is a three-year cross-disciplinary programme commencing in 1999 and offering a major in International Development Studies in the BA degree. The course has been designed in consultation with the Adventist Development and Relief Agency (ADRA – one of the larger global network NGOs in Australia) who will contribute to the teaching of one of the units. Significant features of the Avondale programme include a required
field experience in a developing country, an emphasis on the role of NGOs, and a framework of Christian caring and service for the marginalised and powerless. The major can also form part of a double degree BA/BBus being combined with Management or Marketing or Accounting.

Avondale College is a small higher education institution which has been offering Christian education for over 100 years. Its bachelor and masters degrees are accredited by the NSW Department of Education and Training.

For more information contact:
Harwood Lockton
Faculty of Arts
Avondale College
PO Box 19
Cooranbong NSW 2265
Australia
Tel +61 2 4980 2191
Fax +61 2 4980 2118
E-mail harwood.lockton@avondale.edu.au
Web http://www.avondale.edu.au

ANUTECH Development International

Environmental Assessment for a Rapidly Changing Planet
1-26 November 1999
There is an increasing need amongst planning, resource management and rural development agencies to equip staff with the necessary management capabilities to tackle the complex issues of natural resource management and environmental protection. Most national and multilateral agencies require that development projects take environmental impacts into account. Consequently, planners and managers require skills in environmental assessment and monitoring.

This course aims to develop skills and examines techniques for environmental assessment at the global, national and local level. This is carried out by looking at a range of international treaties, national and local plans.

Integrated Forestry Planning – Community Needs and Sustainable Management
1 November – 10 December 1999
Today's forestry sector managers are being faced with the enormous challenge of two competing pressures: increasing expectations for sustainable, ecologically sound management, and escalating demands for a wide range of forest products from a declining resource. To help meet these challenges, this course provides forest sector managers with the skills needed to foster participatory forestry practices to help restore degraded land, protect valuable water catchments and species rich forests, and to ensure environmentally sustainable management; recognise the value of local rural knowledge and the contribution that user communities can make to the management of trees for the provision of small timber, fuelwood, food, fodder, medicinal needs and income; exploit the full potential of woodlots and plantations to relieve the pressures on natural forests; and develop a sound working knowledge of computer-based decision support systems for forest planning.

For more information contact:
Jenny Clement
Training Manager
ANUTECH Development International
GPO Box 4
Canberra ACT 2601
Australia
Tel +61 2 6249 5861
Fax +61 2 6249 5875
E-mail jenny.clement@anutech.anu.edu.au

School of Medical Education/WHO Regional Training Centre for Health Development

Learning Consulting Skills
19–22 July 1999
This course introduces the subject of consultancy skills for clinical educators. It deals with identification of consulting skills in communicating with patients, families and colleagues, clarifying illness problems, acquiring accurate information, interpreting evidence and diagnosing disease and handling ambiguity and uncertainty. Differences between generalist and specialist tasks and contexts will be explored.

Planning, Implementing and Evaluating Educational Programmes
16–23 August 1999
This course provides a framework for designing, implementing and evaluating effective educational programmes including analysing training needs and developing a coherent curriculum. Drawing on case studies, participants will be taught how to apply the framework in a range of educational settings including formal courses in medical and nursing schools and continuing educational programmes for practising health professionals.

Leadership for Educational Development
30 August – 10 September 1999
This two week course is designed to strengthen leadership in educational development for the health professions. The course will help clarify values and assumptions associated with planning and expand skills in the design and implementation of programmes. The course is designed for individuals who have or expect to have responsibility for planning, training and education programmes, improving courses and curricula, evaluating training and education programmes, developing and leading work teams and developing and coordinating collaborative activities across institutions.
Health Workforce Planning Workshop
11–22 October 1999
This is a 'hands-on' course. Participants will be using computer based planning tools to work through the process of producing a model health workforce development plan. This includes establishing the planning team, situation analysis, planning assumptions, projection of staffing requirements and personnel availability, scheduling of training intakes, estimation of future staffing and training costs, plan monitoring and review.

Meeting the Challenge of HIV/AIDS
11 October – 3 December 1999
Conducted in collaboration with the Albion Street Centre and the National Centre for HIV Epidemiology and Clinical Research at the University of NSW. An international training course in programme development, implementation and evaluation designed to strengthen participants' knowledge of HIV/AIDS and its epidemiology and expand their skills in planning, implementing, monitoring and evaluating programmes for prevention, care and support. There will be an emphasis throughout the course on strategies for working with limited resources.

For more information contact:
Deborah Raphael, Coordinator
Special Training Programmes
School of Medical Education/WHO Regional Training Centre for Health Development
The University of New South Wales
Sydney NSW 2052
Australia
Tel: +61 2 9385 3197
Fax: +61 2 9385 1526
E-mail d.raphael@unsw.edu.au
Web http://www.med.unsw.edu/meded

Australian Centre for Health Promotion

Quantitative Research Methods for Health Promotion
21–23 July 1999
The course is designed for health promotion practitioners who are required to conduct or to use the results of quantitative research in their work. The course will include a mixture of lectures and in-class work and will cover evaluation and an introduction to quantitative research methods; research design issues, different designs for different settings and purposes; health promotion measurement – developing measures and testing reliability and validity; use of theory in health promotion research; advanced quantitative methods and understanding statistical methods; population health surveys – design, analysis, and interpretation; reading the health promotion research literature critically; and grant writing, sample size and optimal design issues in the real world.

Health Promotion in Developing Countries
15 and 18 October 1999
This two-day course provides an overview of major health promotion issues and key methods applied in developing countries. Consideration is given to the special challenges associated with lower levels of literacy in many developing countries, together with the constraints of poor infrastructure and under-developed mass media. Special attention is given to health promotion methods based on community participation and community development, and to the issues of tobacco control and HIV prevention. Significant participation will be encouraged.

For more information contact:
Australian Centre for Health Promotion
Department of Public Health and Community Medicine
Building A27, University of Sydney
Sydney NSW 2006
Australia
Tel: +61 2 9351 5129
Fax: +61 2 9351 5205
E-mail healthpromotion@pub.health.usyd.edu.au

Asia-Pacific Development Communication Center

Management and Marketing of Training
7–25 June 1999
This is an intensive workshop covering a comprehensive range of major subjects related to strategic management and marketing of training programmes. Special attention is given to the development of effective tools in needs assessment, programme positioning, delivery and evaluation. Case analysis, group discussion and individual or group planning exercises are the main methods used.

IEC Materials Planning, Production and Use
2–20 August 1999
This course covers the design, development, production and use of information, education and communication materials using both print and electronic media. It involves needs analysis, planning activities, message design and development, pretesting and revision, distribution, use and evaluation of communication outputs.

Project and Programme Management
8–26 November 1999
The aim of this course is to enhance knowledge, attitude and skills necessary for project and programme managers in development activities. The area of focus for competency development ranges from formulation, implementation and monitoring to evaluation of projects and programmes by using a field-oriented or problem-oriented approach. At the end of
the course, each participant will complete a project plan with
implementation, monitoring and evaluation strategies.

For more information contact:

Cappia Taqueban, Director
Asia-Pacific Development Communication Center
Dhurakijpundit University
110/1-4 Prachachuen Road
Laksi, Bangkok 10210
Thailand
Fax +66 2 591 3154
E-mail adcc@dpu.ac.th

Public Health Institute International
Health Programmes (IHP)

Implementing AIDS Programmes
13 September – 8 October 1999
This workshop offers participants an opportunity to share
resources and strategies that have been demonstrated to be
effective in preventing HIV infection. Updated information on
HIV and STD epidemiology and clinical treatment is presented
using innovative adult learning strategies that are replicable in
the field. Participants apply newly acquired communication
skills, behavioural change theories and social marketing strategies
to identified HIV-related problems in their community.
Participants learn techniques for developing and evaluating
culturally appropriate AIDS educational materials. Participants
develop HIV intervention plans that respond to the particular
needs of their identified target population.

Building and Sustaining Reproductive Health
Services Programmes
18 October – 12 November 1999
This workshop has been enhanced to address the post-Cairo,
post-Beijing focus on reproductive health integrating
reproductive health services into primary health care delivery
systems. The workshop addresses the development and
sustainability of reproductive health services programmes. The
goal of the workshop is to provide programme managers from
public, private, NGO and community-based organisations with
the capacity to design, implement, evaluate and finance
sustainable reproductive health programmes.

HIV Antibody Test Counsellor Training
29 November – 17 December
This workshop provides participants with information and skills
to improve HIV pre/post test counselling services that are
culturally appropriate for their community. As members of a
small group, participants will receive individual attention.
Participants are trained in how to give negative, positive and
indeterminate test results to clients who demonstrate a variety
of risk behaviours. In addition to interactive learning at the
training centre, participants visit several HIV service agencies,
testing sites and laboratories, and will meet people living
positively with HIV.

For more information contact:

International Health Programmes
210 High Street
Santa Cruz, CA 95060-3713
USA
Tel +1 831 427 4965
Fax +1 831 458 3659
E-mail ihp@cruzio.com
Web http://www.ihp.org

Linköping University

Ecological Alternatives in Sanitation
26 July – 19 August 1999
Urbanisation and general population growth increase the stress
on natural resources. Most cities cannot rely on further
exploitation of virgin watersources. At the same time, more
people have to be fed, and the need for fertilisers increases.
Therefore, local groundwater need to be protected, and used
water, as well as nutrients from eaten food, have to be treated
and reused in order to obtain reasonable amounts of water and
food.

Ecological alternatives in sanitation have recently been given
prominence on the development agenda. SIDA (Swedish
International Development Cooperation Agency) supports a
number of projects, from no-mix toilets to using sanitised urine
in urban agriculture. This multidisciplinary field concerns
cultural and social desirability, hygiene risks, potential reuse of
nutrients from human excreta in agriculture, affordability,
technical construction and promotional issues.

The programme is designed for professionals engaged in
town planning, water supply, waste management, and
socioeconomic development; researchers and trainers in fields
of environmental sanitation; and key persons engaged in NGOs
with projects related to improved sanitation and water supply.

For more information contact:

Jan-Olof Drangert
Department of Water and Environmental Studies
Linköping University
SE-58 183 Linköping
Sweden
Tel +46 13 282 953
Fax +46 13 133 630
E-mail jandr@tema.liu.se
Web http://www.tema.liu.se/tema-v/Course/course.html
**Organisation profiles**

**Timor Aid and Yayasan Timor Aid**

Timor Aid is an Australian based aid organisation, focusing on the island of Timor and neighbouring islands to the immediate north of Australia. Based in Darwin, Timor Aid carries out the international liaison for Yayasan Timor Aid, an East Timor based foundation registered under Indonesian law. Yayasan Timor Aid (based in Dili) provides relief, reconstruction, and development aid to the people of Timor, engaging in local projects that broadly cover the fields of health, education, human resource development and income generation.

Timor Aid, incorporated in Victoria, Australia, was established in 1998 by long-term East Timor supporters. José Ramos-Horta is a patron of the organisation. Timor Aid is non-political, and works through Yayasan Timor Aid in collaboration with local partners in Timor. This ensures that aid provided is delivered on the ground by Timorese organisations.

Timor Aid and Yayasan Timor Aid support local Timorese projects in its main priority areas of activity. Timor Aid assists Yayasan Timor Aid in its links with international funding bodies and with overseas sources of technical expertise. Projects currently developed are in the areas of education, health and basic survival needs - scholarships for tertiary, vocational, secondary and primary students; provision of school facilities and libraries; provision of medical equipment, medical costs subsidies and medicines; and small enterprise development for unemployed village youths.

For more information contact:

Timor Aid  
PO Box 502  
Nugentville  
Darwin NT 0814  
Australia  
Tel +61 8 8985 5529  
Fax +61 8 8948 4498  
E-mail info@timoraid.org

**East Timor Relief Association (ETRA)**

ETRA is an East Timorese NGO working for peace, self determination, democracy and equitable democracy in East Timor, through relief and development work at the community level inside East Timor; and through education, community development and advocacy work internationally. The ETRA publishes a monthly newsletter, *Matebian News*, and broadcasts a weekly radio programme, Radio Timor Oan.

For more information contact:

ETRA  
PO Box 1102  
Parramatta NSW 2124  
Australia  
Tel +61 2 9891 5861  
Fax +61 2 9891 2876  
E-mail etra@pactok.net  
Web http://www.pactok.net.au/docs/et/
Mary McKillop Institute of East Timorese Studies

Established in 1994, the Institute aims to support the well-being of all East Timorese people, to promote their human dignity and freedom, their culture and religious traditions. This is achieved through a number of programmes. The literacy programme, Mai Hatene Tetun, is a graded school programme for the teaching of reading and writing in Tetum, the main local language of East Timor. Timorese teachers in 29 schools are currently teaching Years One and Two of the programme. The Institute also supports the personnel of the Motael Clinic by assisting them with equipment and medication, and by sponsoring a self-help medical education programme. Other activities include the publication of philological materials in Tetum and in the vernaculars of East Timor; the gathering and publication of Timorese literature; support of clinics and health care workers in East Timor; and support for the East Timorese refugees and asylum seekers in Australia.

For more information contact:
Mary McKillop Institute of East Timorese Studies
PO Box 299
St Marys NSW 1790
Australia
Tel +61 2 9623 2847
Fax +61 2 9623 1573
E-mail mmiets@nareg.com.au

AISEAN

The Australian Indigenous Science, Engineering and Architecture Network (AISEAN) is a proposed national network of indigenous professionals working in science, engineering and architecture. Its purpose is not only to provide professional and social networks for indigenous people in these fields, but also to encourage other indigenous people who want to undertake university studies in the above fields, and to develop links with government and private industry employers seeking to employ indigenous technical and professional staff. The Network hopes to establish an interactive website, hold an annual national conference, publish a regular newsletter or magazine, and contribute to the research and development of technologies appropriate to the needs of rural and remote indigenous communities in Australia.

For more information contact:
CAT Cairns
PO Box 6182
Cairns QLD 4870
Australia
Tel 1 800 500 954 (tollfree) or +61 7 4031 0505
Fax +61 7 4031 0431
E-mail catfnq@ozemail.com.au

East Timor Human Rights Centre

The Centre aims to protect and promote human rights of the people in East Timor; develop a human rights culture, including democratic processes amongst East Timorese people; and empower East Timorese people to better promote and protect their human rights. The Centre fulfills this role by reporting human rights abuses in East Timor and through training and educating East Timorese people both inside and outside East Timor. Other activities include publishing reports on human rights in East Timor; submitting reports to UN bodies; implementing and maintaining a database of all human rights abuses and of East Timorese prisoners; monitoring trials; reporting on East Timorese workers in Indonesia; and making submissions to governments, parliamentarians and inquiries.

For more information contact:
East Timor Human Rights Centre
PO Box 1413
Collingwood VIC 3066
Australia
Tel +61 3 9415 8225
Fax +61 3 9415 8218
E-mail ethrc@minihub.org

TAPOL

This Indonesian human rights organisation was founded by Carmel Budiardjom, who was imprisoned from 1965–71. After her release from prison, Budiardjom moved to London and in 1973 helped to establish TAPOL, a campaign for the release of the political prisoners (tapols) she left behind. TAPOL has evolved into a broader Indonesian human rights campaign that monitors and highlights the abuses of the Indonesian Government, particularly the plight of the people in East Timor and West Papua.

For more information contact:
TAPOL
111 Northwood Road
Thornton Heath
Surrey CR7 8HW
United Kingdom
Tel +44 181 771 2904
Fax +44 181 653 0322
E-mail tapol@gn.apc.org

Indonesia Canada Alliance

This organisation is a community-based international development organisation of Canadian and Indonesian NGOs. Its aim is to foster the social, cultural, economic and environmental well-being of marginalised communities in Indonesia and Canada by supporting and facilitating collaborative development efforts by local NGOs. Activities
include institution building (for example, training initiatives that have helped to increase the capacity of Indonesian AIDS service organisations to care for HIV-positive people) and education (for example, publishing a bilingual newsletter that covers issues related to economic development, gender and the environment).

For more information contact:
Carol Nielsen
Indonesia–Canada Forum
RR#1, Murray’s Site C21
Halfmoon Bay, British Columbia
Canada VON 1YO
Tel/Fax +1 604 885 9192
Web http://www.pat.bc.ca/ica/icainfo.htm

Survival International
Survival International is a worldwide organisation supporting tribal peoples through public campaigns. Founded in 1969, it works for tribal peoples’ rights through campaigns, education and funding. It works closely with local indigenous organisations. Campaigns are directed at governments, companies, banks and other organisations. Educational programmes promote respect for tribal peoples’ culture. Survival International also plays a role in ensuring that humanitarian, self-help, educational and medical projects with tribal peoples receive proper funding.

For more information contact:
Survival International
11–15 Emerald Street
London WCIN 3QL
United Kingdom
Tel +44 171 242 1441
Fax +44 171 242 1771
E-mail survival@gn.apc.org

International Alliance of Indigenous Tribal Peoples of the Tropical Forests
The Alliance is the worldwide network of the organisations of indigenous and tribal peoples living in tropical countries, namely in Africa, South Asia, Southeast Asia, the Pacific and Central and South America. Founded in 1992, the objectives of the Alliance are the full recognition of the rights of indigenous and tribal peoples, recognition of their territories, promotion of development and participation in decisions and policy making. Networks have been established which allow the exchange of information and experiences, in order to strengthen all Alliance members. International conferences are held every two years, as well as more frequent regional meetings. The Secretariat collects and distributes information, makes contact between and within indigenous and other organisations, participates and reports on relevant meetings, analyses important international processes and maintains the logistical activities of the Alliance. The Secretariat produces a quarterly bulletin with recent developments and background information about ongoing processes and agendas.

For more information contact:
The Technical Secretariat of the International Alliance of Indigenous Tribal Peoples of the Tropical Forests
14 Rudolf Place
Miles Street, Vauxhall
London SW8 1RP
United Kingdom
Tel. +44 171 587 3737
Fax +44 171 793 8686
E-mail morbeb@gn.apc.org

Last-First Networks
Last-First Networks is a non-profit organisation dedicated to advancing effective grassroots development. It raises awareness of proven practical approaches to working with the poorest and marginal groups of any society, and resources practitioners and organisations who work with these groups.

For more information contact:
Last-First Networks Pty Ltd
PO Box 1104
Armidale NSW 2350
Australia
Tel +61 2 6772 4247
Fax +61 2 6771 4560
E-mail info@lastfirst.net
Web http://www.lastfirst.net

HCWH–SOUTH
Following well-documented evidence of the dangers of incineration, a mass movement against medical and municipal waste incineration has developed over the last decade in the US and Europe. Investigating the migration of the medical waste incinerator industry from the US to the South, the Multinationals Resource Center (MRC) is a member of Health Care Without Harm (HCWH) and coordinates a project called HCWH–SOUTH to ensure that the victories in the US do not translate into additional toxic threats in the South. The MRC would like to create a network of people from all over the world to share information about the dangers of incineration, the advantages of alternatives, and details of specific incineration technologies and companies.

For more information contact:
The Multinationals Resource Center
PO Box 19405
Washington, DC 20036
USA
E-mail mrc@essential.org
Materials

Directory of Advanced Training Opportunities in ACP Countries

This 1998 Directory covers all the African, Caribbean and Pacific countries and all post-secondary study programmes (1477) given at all types of institutions (170) which are formally open to foreigners, are given in either English, French or Portuguese, and cover either rural development, human resource development, or transport and communications. Information is listed alphabetically by country, institution and programme. The Directory is aimed at donor agencies, project leaders, policy makers, post-secondary education staff and students.

Available from:
DTOACP Project
c/-IVO, Tilburg University
PO Box 90153
5000 LE Tilburg
The Netherlands
Tel +31 13 466 2576
Fax +31 13 466 3015
E-mail ewoldt@kub.nl
Web http://dtoaacp.kub.nl

Humanity Development Library Project

The objective of the Humanity Libraries Project is to distribute, in CD-ROM format, vast amounts of information that have been generated by development organisations, thus providing all persons involved in development, planetary well-being and basic needs, with access to a complete library of approximately 3,000 essential books. It is envisaged that this essential information ‘at one’s fingertips’ will help tackle poverty, help take better decisions and help solve local development and basic needs problems. Some of the cooperating organisations include the United Nations University Press, the World Health Organisation, the Peace Corps and Oxfam. The CD-Rom is fully indexed and searchable with Netscape, which is included on the disk itself. It has the capacity to be accessed over a network.

For more information contact:
Dr Michel Loots, Director
Humanity Libraries Project
Global Help Projects
Oosterveldlaan 196 B-2610 Antwerp
Belgium
Tel +32 3 448 0554
Fax +32 3 449 7574
E-mail humanity@globalprojects.org
Web http://www.oneworld.org/globalprojects/humcdrom

Micronesia Seminar Videos

After the compact, what then?
Discussion and interviews about the future of Micronesia after the end of the 15-year Compact of Free Association in the year 2001.

Owning your own health
Explores how Micronesians can get full benefits from their health care system and contribute to improve the delivery of services.

More than just doctors
Looks at the quality of health care in Micronesia and the problems facing the health care delivery system.

A matter of peace, a question of justice
Discusses two approaches to conflict resolution: the court system and the traditional Micronesian system.

Available from:
Micronesia Seminar
PO Box 160
Pohnpei
FM 96941
Tel +691 320 4067
Fax +691 320 6668
E-mail fxhezel@mail.fm

Sanitation Promotion Kit

Substantially revised since its first appearance at the end of 1997, this 277 page book is published jointly by the Water Supply and Sanitation Collaborative Council (WSSCC) and the World Health Organisation. It contains comprehensive guidelines and practical tools for promoting the sanitation cause, based on four years of analysis and discussions among scores of sanitation specialists.

Available from:
Water Supply and Sanitation Collaborative Council
c/-WHO (CCW)
20 Avenue Appia
CH-1211 Geneva 27
Switzerland
Tel +41 22 791 3685
Fax +41 22 791 4847
E-mail wsscc@who.ch
Women in a global economy: Challenge and opportunity in the current Asian economic crisis

This resource kit highlights women's pivotal economic role in the Asian economies, particularly in the context of the current economic crisis. It provides concrete data to show the importance of women's contributions to national economies. It also shows that women's contributions remain constrained by specific barriers and that the economic crisis affects women and men differently. It then provides practical suggestions for specific actions, especially recovery strategies, to address this issue. The suggestions target particular groups, including policy makers, employers and workers' organisations, cooperative groups and development agencies.

Available from:
UNIFEM East and Southeast Asia Regional Office
UN Building 12th Floor
Rajdamnern Ave
Bangkok 10200
Thailand
Tel +66 2 280 3810
Fax +66 2 280 6030
E-mail unifem-bkk@mozart.inet.co.th
Web http://www.undp.org/unifem/eesasia/

GARNET's Pit Latrine Network

The Global Applied Research Network (GARNET) is designed to facilitate the sharing of applied research information between researchers working in the water and sanitation sector throughout the world. GARNET is structured around a series of networks, which are either topic-based or geographically based. Each network is operated by a coordinator. One of these networks is the Pit Latrine Network, which currently has 150 members worldwide. The objective of the network is to enable members to exchange ideas about a wide variety of topics relating to pit latrines, including aspects such as design, construction, operation, maintenance, and emptying in rural, urban or peri-urban environments. Of particular interest are results of recently completed research, or interim findings from current projects. Other materials of interest include references to new publications, workshops or electronic sources of information.

For more information contact:
Darren Saywell
Pit Latrine Network Coordinator
Water, Engineering and Development Centre
Loughborough University
Leicestershire LE11 3TU
United Kingdom
Tel +44 1509 222 890
Fax +44 1509 211 079
E-mail d.l.saywell@lboro.ac.uk
Web http://info.lut.ac.uk/departments/cv/wedc/garnet/tncpitl.html

Behind the Smile: Developing Thailand

Behind the Smile documents the experiences of three Thai women. One, Arnoan, works in a textile factory while Laiad and Kham work in the building industry. The video presents the hardships and exploitation endured by these women as well as commenting on the social injustice suffered by the poor in developing economies such as Thailand. The programme shows how the lack of an organised labour force combined with the Buddhist beliefs of the Thai people contributes to the exploitation of these workers as cheap labour.

Half the Sky Series

Half the Sky is a series of nine original programmes on women throughout the world. Produced to coincide with the UN Fourth World Conference on Women, each episode has been produced by women, and represents women in their country of origin. These countries are: Tanzania, Jordan, Venezuela, Canada, Poland, The Philippines, Thailand, Portugal and India. Viewed as individual episodes or as an entire series, Half the Sky illustrates the richness and diversity of the lives of women around the world.

The above two videos are available from:
VEA Australia
111A Mitchell Street
Bendigo VIC 3550
Australia
Tel 1800 034 282 (tollfree); +61 3 5442 2433
Fax + 61 3 5441 1148
E-mail vea@vea.com.au
Web http://www.vea.com.au
The Development Studies Electronic Forum

This Forum was established by the Australian National University (ANU) to provide a world-wide communications vehicle and a central electronic archive for anyone working on, or interested in, the study of social and economic development, with a particular focus on Third World countries. It was established on the 7 July 1994 on the joint initiative of the Coombs Computing Unit, Research Schools of Social Sciences & Pacific and Asian Studies, Australian National University, and The Australian Development Studies Network, National Centre for Development Studies, RSPAS, ANU.

How to join

To join (subscribe to) the forum send e-mail

to: majordomo@coombs.anu.edu.au
message: subscribe Development-Studies-L your e-mail address
[eg: subscribe Development-Studies-L xyz@abacus.abc.edu.au]

To leave (unsubscribe) the forum send e-mail

to: majordomo@coombs.anu.edu.au
message: unsubscribe Development-Studies-L your e-mail address
[eg: unsubscribe Development-Studies-L xyz@abacus.abc.edu.au]

It will be helpful for all members of the Forum to provide a brief introductory note, as their first communication with the Forum: who you are, your institution or affiliation, your general and specific interests in development studies research. Such note should be labelled in the subject line: 'M.Y. Surname biographical details' (eg, A.B. Charles biographical details). Most email systems permit the appending of a signature block to a message; please use one if possible.

Participants are free to join and leave the Forum at any time. English is the preferred language of communication of this Forum.

Contributions

To contribute, you must have subscribed and been approved as a member of the list of contributors. Approval to join the Forum is a 'proforma' operation, but subscription does permit some basic control of the contents of submissions by the list owner. Any submission to the forum is immediately broadcast to all subscribed members, and a copy automatically archived.

Anyone, whether a registered member or not, can electronically view and retrieve the communications to the forum using a database 'ANU-Development-Studies-L' accessible through the standard WAIS software and through the ANU's COOMBSQUEST Social Sciences and Humanities Information Facility gopher running on the coombs.anu.edu.au as well as on the cheops.anu.edu.au machines.

To post your contribution to the forum send e-mail

to: Development-Studies-L@coombs.anu.edu.au
message: [the body of your contribution comes here]

If you are reporting findings or research results, treat the text as if it were a short note/abstract to professional journal. Bibliographic information is always welcome and such contributions, if submitted, will be archived on in the Coombspapers Social Sciences Research Data Bank at ANU available by ftp/gopher/www access on the coombs.anu.edu.au system.

If in doubt how to interact with any of the coombs.anu.edu.au lists, end a message 'help' to: majordomo@coombs.anu.edu.au
Electronic fora

Australia-Indonesia Development Area (AIDA)

This website has been established in response to the strong desire that many people have expressed for more information and a common means of communication about Indonesia. Whilst in the process of still being fully developed, the website contains background information on AIDA, details of contacts, dates of meetings, and listings of project proposals where businesses are looking for partners or local contracts.

Web http://www.nlcl.net.au/-aibclaida.htm

Republic of Indonesia

This website maintains pages on news, media and information; government, NGO and institutional sites; culture and art; and networking resources. There is a separate site devoted to East Timor.


LOCATORplus

This is the National Library of Medicine's (NLM) Web catalogue of the world's largest medical library, with over 5.3 million books and other materials. The site allows users to search by a variety of specific fields and then e-mail the results to themselves. LOCATORplus also offers tutorials on using the site, the NLM physical reading room, links to additional online catalogues, and a variety of other authoritative online medical resources.


HivNet.ch

This is the Swiss information and exchange site on HIV/AIDS, created by the Fondation du Présent, Geneva. The Fondation du Présent (Foundation of the Present) is a Swiss-based non-profit NGO. The Fondation acts in the realm of health in all its aspects, physical and mental as well as ethical, by promoting information, training and prevention. It takes part in the fight for human dignity using all means against suffering and exclusion, in particular publishing, training and electronic networking. The Fondation promotes greater participation of new parts of emerging civil societies in health related discussion at national, inter-country and international levels and aims to help people exchange information, discuss health issues and identify agents of change. As a witness of the increasing influence of the Internet on global health issues, it focuses on projects that are of direct benefit to individuals and groups working on HIV/AIDS and health in developing countries. Its essential strategy is life threatening situations remains solidarity which begins with communication and education.

Web http://www.hivnet.ch/

Jubilee 2000 Coalition

Over 50 countries in the world have debts that will never be paid. The debt burden of the poorest countries is 93 per cent of their income. Every year resources are diverted from health, education and sanitation towards unproductive debt service. Jubilee 2000 is an international movement in over 40 countries advocating a debt-free start to the millennium for one billion people. It is calling for a one-off cancellation of the unpayable debts of the world’s poorest countries by the year 2000 under a fair and transparent process.

Web http://www.jubilee2000uk.org/

West Bengal, India and Bangladesh Arsenic Crisis Information Centre

An environmental health disaster is unfolding in West Bengal and Bangladesh. Tens of millions of people in many districts are drinking ground water with arsenic concentrations far above acceptable levels. Thousands of people have already been diagnosed with poisoning symptoms, even though much of the at-risk population has not yet been assessed for arsenic-related health problems. Over the last two decades in Bengal, untreated tube well water was heavily promoted and developed as a safe and environmentally acceptable alternative to microbiologically unsafe untreated surface water. In the 1980s, scientists began finding evidence of arsenic contamination, but only very recently (mid-1990s) has the crisis emerged into broad public awareness. The origin of the arsenic pollution is geological in this case. Recent investigations indicate that the arsenic is released to groundwater under naturally occurring reducing conditions in aquifers associated with specific sedimentary materials. This website is an online focal point for the environmental health disaster in Bangladesh and West Bengal, India. The site includes an infobank of news articles, scientific papers, comprehensive links to other relevant sites, online forum, email newsletter, and local site search.

Web http://bicn.com/acic/
Welcome to the first edition of the Australian Council for Overseas Aid (ACFOA) section of the Development Bulletin. ACFOA is the peak council for 80 Australian non-government organisations (NGOs) working on overseas aid and international development.

Throughout 1999 there will be an ACFOA section in each Development Bulletin which will include a feature article providing an update and analysis on a contemporary development issue along with a notice board of publications and upcoming events we believe may be of interest to Development Bulletin readers.

This first edition features an update from our human rights desk on the current situation in East Timor with recommendations for appropriate responses from the Australian Government and from the NGO community. ACFOA trusts you will find our input of value and welcomes any feedback you may have. Any comments should be communicated to Jim Redden at ACFOA at acfoa@acfoa.asn.au.

East Timor in transition: Australia's role

Pat Walsh, Human Rights Coordinator, ACFOA

East Timor's political fortunes have recently taken a dramatic turn for the better. Following President Habibie's announcement on 27 January that Indonesia would consider independence for East Timor, most observers, including Australia's Foreign Minister, Mr Downer, and his predecessor, Gareth Evans, have concluded that East Timor is destined for a dramatic change in its political status, and most probably independence. This sudden development has taken everyone by surprise. Foreign Affairs, AusAID, Defence officials, political parties, NGOs and the East Timorese are all scrambling to develop appropriate responses as events move swiftly around them. What are the principal challenges ahead for East Timor and how should Australia respond?

Backtracking?

East Timor's future will be determined in Jakarta, not New York or Dili, so it is important to get a clear fix on Indonesia's plans for the territory. Further, different outcomes will require different responses. Independence, for example, will make substantially different aid and other demands on Australia than autonomy. It will also have a range of practical implications for NGOs; for example with those working through Indonesian staff in East Timor.

Concerns are being expressed that Indonesia will renege on its undertaking to let East Timor go. Sceptics point to the arming of the militias, Indonesia's reluctance to allow a referendum and its stalling on the finalisation of the autonomy package. There are also concerns that the new parliament and president to be elected this year will not honour the Habibie Government's policies.

In this writer's view, all the evidence is that Indonesia has decided to let East Timor go (though the manner of the separation will clearly not be straightforward or always transparent). This is clear from the overall progression of the policy shift since Soeharto's resignation in May 1998. It opened with President Habibie's offer of autonomy as 'the final solution', progressed to a readiness to consider independence and consult the Timorese, then to the quasi-release of Xanana Gusmao - not into exile, it should be noted, but to serve as Timor's chief negotiator - and most recently to agreement to a direct vote by the East Timorese people including those in the diaspora.
The view that Indonesia wants closure, that its change of heart is for real, is also supported by the reasons being given in Jakarta for the policy shift. They ring true. They include a frank admission that the Soeharto policy failed, that East Timor is a political and economic burden Indonesia cannot cope with in the current economic crisis, and acknowledgement that in a post-Cold War environment an independent East Timor poses no security threat to Indonesia. It might be added that Indonesia, whose international status has been diminished more by Timor than any other issue, stands to gain much needed international kudos from its decision. In public relations terms, it is a master stroke. Conversely, Indonesia stands to lose much if the decision is not carried through.

Indonesia has been difficult to follow. Unlike its predecessor, this is a weak government which has to negotiate and is in new and dangerous territory. Like a soldier in a minefield, it is picking its way forward cautiously, zig-zagging, and weighing up the implications of each step before moving on, not least the implications for other restless provinces and its national integrity.

It is suggested that Megawati Sukarnoputri would reverse President Habibie's decision were her PDI party to win a majority in parliament and she became President. Whether or not her views should be taken at face value, it is difficult to see how she could implement such a policy reversal. Turning back the clock would effectively require her to declare war again in East Timor, plunging Indonesia into another bitter and unwinnable conflict in Saddam Hussein-like defiance of the international community, at a time when Indonesia can least afford such adventures. Nevertheless, to preempt any such development, it is important that Indonesia be locked into its current policy before the national elections on 7 June and that Australia actively engages the PDI in dialogue on the issue.

In summary, Indonesia's new approach to East Timor should not be dismissed as the product of a deep, dark plot. It is not an easy or straightforward about turn for Indonesia to execute. We should take a positive, constructive approach and give strong support to the Indonesian policy makers who have acknowledged the failure of past policies and the need for change. Forward planning on East Timor should be premised on the assumption of independence.

**The paramilitaries**

The paramilitary issue is the most immediate and urgent humanitarian and political challenge facing East Timor. Tensions between pro and anti-integration East Timorese are at a dangerous level and have the potential to set back if not derail the current momentum towards a political settlement. Their activities are also creating serious humanitarian problems in the territory.

Some commentators emphasise what they claim are inherent fratricidal tendencies amongst the Timorese, virtually suggesting that civil war is genetically guaranteed. It is important to stress, however, that current tensions in East Timor are principally the outcome of the high degree of prevailing uncertainty about the future and are being fuelled by the Indonesian military's recruiting, arming and funding of paramilitaries.

Opinions vary on why the Indonesian military (ABRI), or a rogue element in its ranks, is arming the paramilitaries. Most probably it is an extension of ABRI's longstanding practice of 'Timorising' the war and equipping Timorese on its side to continue 'the good fight'. This in turn raises the worrying prospect of a contra-style proxy war against the incoming East Timorese government, operating from bases in Indonesian Timor. Whatever the case, the fact that they have guns and money gives the paramilitaries bargaining power to make up for their small numbers.

The Howard Government appears to have adopted a carrot and stick strategy on the issue. While opposing sending troops into such a volatile situation to enforce peace, it is putting pressure on the combatants by placing Australian troops on alert and simultaneously working behind the scenes to achieve dialogue and a ceasefire.

Three responses are required. First, it must be emphasised that the paramilitaries are first and foremost ABRI's creation and responsibility. Australia expects the Timorese negotiators to sort it out. But pressure must also be brought to bear on the Indonesian military and government to disband and disarm the paramilitaries, if necessary through weapons buy-back programmes or offers of resettlement outside East Timor.

Second, these groups can be expected to continue to thrive while the political situation remains confused and Jakarta continues to send mixed signals. Indonesia must be pressed to crystallise and communicate its intentions for East Timor transparently.

Third, the paramilitaries must be brought into the tent and assured of a place in the new East Timor. In this respect the current talks between Xanana Gusmao and the pro-integrationist leader, Joao Tavares, are encouraging. It is to be hoped they will lead to a ceasefire and disarmament and thereby clear the way for the introduction of a UN police force. It is also to be hoped that they will be the inspiration and forerunner for dialogue and reconciliation throughout East Timorese society at all levels and with all parties. The Australian Government and NGOs should consider how to support such a process.

**The threatening emergency**

There is a pronounced disconnection between the generally positive developments on the political future of East Timor and the situation on the ground.

East Timor is on the verge of a humanitarian crisis as a direct consequence of the unsettled political and military situation. Paramilitaries are roaming out of control, terrorising locals, issuing death threats and striking fear and panic into many. Hundreds of villagers have been displaced and forced to live in harsh conditions dependent on local aid agencies and there is a
steady exodus of non-Timorese to Indonesia. The loss of skilled people such as airline staff, small traders, teachers, doctors, engineers and expertise in other vital occupations is contributing to an impending collapse of essential services, and food and medical shortages. Imports have slowed, shops are running supplies down, 50 per cent of schools have closed, few hospitals are functioning and are short of doctors and medical supplies, and power utilities are breaking down as technicians have fled. Dili has only one surgeon who is based at the military hospital which few Timorese are prepared to use. Merpati airline has closed its office and flights and boats out of East Timor are fully booked. The army is buying up available food and drugs for its own stocks.

Immediate steps should be taken to assess both the humanitarian situation and available response mechanisms, focusing on food, medicine and fuel and canvass the need for capital, technical and personnel assistance. This assessment and any subsequent emergency response should be carried out in consultation and cooperation with local NGOs, and should address the situation in the countryside as well as the towns.

**Development principles**

At least three principles should guide responses to East Timor's future development. First, East Timor's development should be determined by the wishes of the East Timorese people to build a society based on respect for universal human rights. This has been spelled out in the Carta Magna promulgated by the National Council of East Timorese Resistance (CNRT) in April 1998. Development will involve operationalising this Charter by providing the institutions and programmes necessary for the realisation of civil, political, cultural, social and economic rights that, according to the International Bill of Rights, are the obligations of the modern state.

Second, East Timor's development should be directed by the East Timorese people themselves, in the framework of the Carta Magna, not external donors and policy makers. The right to self-determination will not end with the finalisation of East Timor's political status. It puts the East Timorese in the driver's seat in their own vehicle, for the first time. It is their prerogative now to determine the speed, direction and make of that vehicle and who accompanies and assists them on the journey.

Third, East Timor's development should take into account the need to build amicable, long-term relations with Indonesia. Given the history of the relationship, this will be difficult. But it is a geographic imperative and will become more feasible as Indonesia democratises. It will, for example, demand careful consideration of any proposal to establish a truth and reconciliation commission.

**Aid**

Portugal has confirmed that it will temporarily fill the $100 million hole left by Indonesia's expected withdrawal. A quick survey of the situation shows, however, that East Timor will require generous ongoing aid from the international community. East Timor is the poorest province in Indonesia. Poverty and unemployment levels are unacceptably high; health, agriculture and other priority sectors are weak in infrastructure and human resources. Civil society is weak. There is only a small indigenous economy; returns from oil and gas exploitation in the Timor Sea have so far been limited.

Aid will be essential to address basic needs, including trauma, strengthen civil society, develop human resources, safeguard human rights and assist with institution building, training and reconciliation. Assistance will also be required to develop a voter's register and to facilitate a free and fair ballot on Indonesia's autonomy package.

A comprehensive assessment of needs and priorities across all sectors is a prerequisite. This should include a human rights needs assessment, taking into account Amnesty International's recently published recommendations. But the absence of an international agreement is stalling this analysis and inhibiting existing aid efforts, including by AusAID and institutions such as the International Committee of the Red Cross whose President recently requested Jakarta to allow it to increase its activities.

Future planning should also address what role the private sector, both indigenous and foreign, will play in East Timor's development and the regulatory framework which will govern business investment and activity.

The National Council of East Timorese Resistance (CNRT) has made an important contribution to development planning through a conference on 'Strategic development planning for East Timor', held in Melbourne, 5–9 April 1999, in conjunction with the Victoria University of Technology. The conference brought together East Timorese researchers, experts and NGOs and a small number of invited non-Timorese resource people. The outcome was a strategic development plan on governance, economy, agriculture, health, education, environment, human rights (including the rights of women), media and the judiciary (see Conference reports).

Australia should encourage international donors to provide aid and itself contribute generously to this international package. Given the breadth of public sympathy for East Timor in Australia a significant long-term increase in Australia's aid to East Timor will be welcomed and supported by the Australian community.

**Coordination**

East Timor enjoys much good will in many countries and already donors are active in planning and delivering aid, though not always with reference to other donors or the East Timorese. To ensure that priority targets are met and to avoid duplication and mismanagement, it is essential that this response is coordinated and empowers the East Timorese.

Coordination is required on at least three levels – inside East Timor, within donor countries and internationally. In
organising this coordination, it will be useful to take account of the experience of countries like Cambodia, Eritrea, and Namibia.

In Australia ACFOA has established an East Timor Working Group. The Working Group meets regularly and comprises some 20 agencies and groups who have been quietly supporting projects in East Timor for some time or who are interested in providing support. In Melbourne, health, environment and other networks are being set up to bring East Timorese and non-East Timorese together to share information and develop analysis and strategies.

Long-term planning and coordination is necessary to ensure sustainability. Australia should encourage the convening of an international conference of donors – UN agencies, governments, multilaterals, NGOs and the private sector – together with East Timorese, to establish priorities and develop a coordinated, targeted response for all sectors.

Building and utilising East Timorese capacity

The following are some suggestions on ways to strengthen and utilise East Timorese capacity:

• support and work through the National Council of East Timorese Resistance (CNRT), the umbrella body headed by Xanana Gusmao;
• provide training in management, policy and programming for key East Timorese in key sectors;
• develop an inventory of skills, qualifications and experience available in the Australian East Timorese community;
• establish a scheme to assist expatriate East Timorese to return as volunteers or technical advisers for short or long-term placements or to migrate back to East Timor permanently;
• encourage Australian business, unions, the public sector, health system, media, parishes, schools and universities and others to offer exchanges and work placements for East Timorese to gain skills and experience for use in East Timor;
• encourage Australian municipalities to develop meaningful sister city/community relationships with East Timor; and
• encourage the Australian Church to consider ways of assisting the Church in East Timor to adjust to its new role in a changing environment.

Conclusion

Despite all the material shortcomings and other challenges it faces, East Timor is emerging from its baptism of fire with leaders of internationally recognised calibre, a strong Church, and a people who have demonstrated extraordinary resilience, creativity and character. These are great assets. East Timor looks like becoming the first new state of the third millennium. With appropriate assistance and good will, particularly from Australia and the region, there is no reason why it cannot also become a model society amongst the mini states of our region.

30 March 1999

Postscript

ACFOA is closely monitoring the outcomes of the Indonesian elections and has placed 11 NGO observers throughout Indonesia. An ACFOA delegation has also just completed a comprehensive first-hand assessment of the current situation in East Timor in the context of supporting the UN peace process. The delegation will be reporting back to ACFOA member agencies.

ACFOA Resources

Bridging the gap: A guide to monitoring and evaluating development projects

Bernard Broughton and Jonathon Hampshire 1997, ACFOA, Canberra, ISBN 0 909 83179 3, 174pp., A$40 plus A$5 postage and handling within Australia

A guide aimed at project managers to:

• provide appropriate technical advice and training to implementing partner agencies to help them develop monitoring, review and evaluation skills, procedures and systems;
• make the most of short ‘monitoring visits’ to project offices and sites;
• report more effectively to their funding agencies and be more broadly accountable; and
• develop an analytical approach to problem identification and solving.

Directory of ACFOA members

$10 plus $2 postage and handling within Australia

It includes contact details and information on members’ history and focus of work.

For more information contact:

ACFOA
Private Bag 3
Deakin ACT 2600
Tel +61 2 6285 1816
Fax +61 2 6285 1720
E-mail acfoa@asn.au
Web http://www.acfoa.asn.au

April 1999
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Notes

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Development Studies Network
Research School of Social Sciences
Australian National University
Canberra ACT 0200
Australia
Phone: +61 2 6249 2466 Facsimile: +61 2 6279 9785
E-mail: devnetwork@anu.edu.au
Website: http://devnet.anu.edu.au