

MAP TOOLKIT SERIES

2

The MAP Process

2

TOOLKIT 2: The MAP Process

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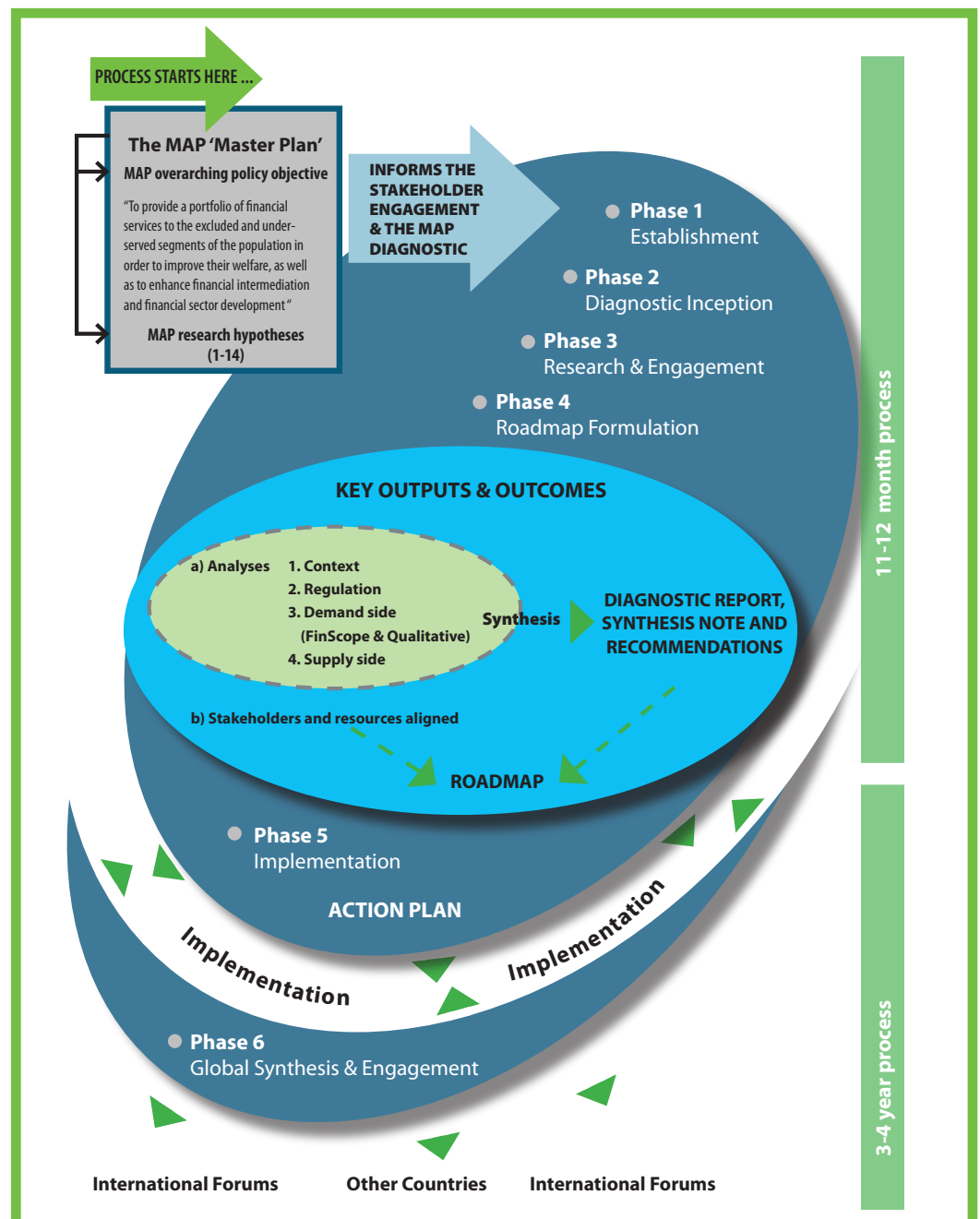
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THE MAP PROCESS

CONCEPTUAL OVERVIEW OF THE MAP PROCESS

1. Conceptual overview of the MAP process

The diagram below provides an overview of the MAP process, which comprises two main elements: stakeholder engagement and the roll-out of the diagnostic. **Toolkit 2** explains the process by unpacking the phases and steps relating to each of those two components.



THE AIMS OF TOOLKIT 2

INTRODUCTION

2. Introduction

As explained in Toolkit 1 (the overview toolkit), the MAP in-country process comprises the roll-out of the diagnostic exercise, as well as a stakeholder engagement process.

Summing up the MAP approach:

- Integrated.
- Holistic.
- Demand-side perspective at the core.
- Emphasises identifying and overcoming barriers and obstacles.
- Focuses on offering value.
- Aims to generate buy-in and catalyse practical action.
- Engages a wider set of stakeholders than traditionally.

The stakeholder engagement process is started before the diagnostic exercise is initiated, is ongoing throughout the diagnostic process and then continues after the diagnostic is completed to translate the diagnostic recommendations into an actionable roadmap. The stakeholder engagement process shares the same values and commitments as the diagnostic.

The stakeholder engagement process is fundamental to any MAP project as it is integral to achieving the MAP overarching policy objective, which is:

To provide a portfolio of financial services to the excluded and underserved segments of the population in order to improve their welfare, as well as to enhance financial intermediation and financial sector development.

3. What are the aims of Toolkit 2?

Working through this toolkit should enable you to:

- Understand the phases, activities and outcomes of the in-country **stakeholder engagement process**, and how they overlap and interact with the diagnostic exercise;
- Understand the phases, activities and outputs of the **diagnostic**, and how they relate to the stakeholder engagement process;
- Get a sense of the different parties that are responsible for the different phases, activities and outputs;
- Understand the intentions behind and the logic of the different phases and activities – thus allowing you, where necessary, to modify the processes appropriately to suit the particular country context; and
- Start looking ahead to the requirements of the final diagnostic report – and ensure that the stakeholder engagement process and diagnostic exercise respectively are conducted so as to align stakeholders and resources around agreed priorities.

See Toolkit 1:

for an outline of the research hypotheses that flow from the MAP overarching policy objective and drive the diagnostic exercise.

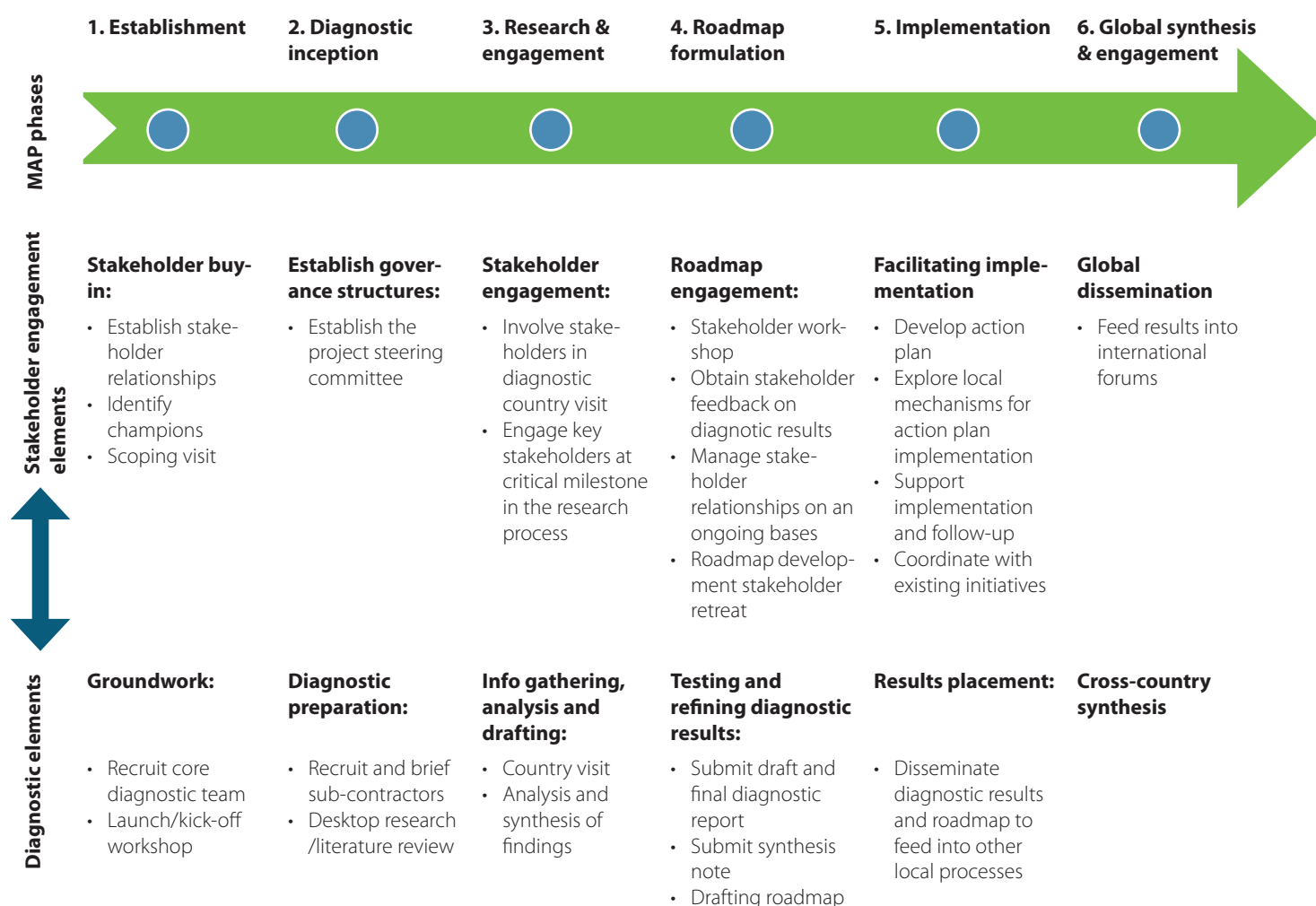
WHAT IS MAP?

INTERACTION BETWEEN PROCESSES

4. Interaction between the MAP diagnostic and the stakeholder engagement process

It is important to establish how the stakeholder engagement process and the diagnostic exercise fit into each other across each of the MAP phases, as they are strongly interlinked. **Figure 1** (below) shows how the diagnostic exercise is *embedded* in the wider stakeholder process.

Figure 1. The MAP stakeholder engagement process and the MAP diagnostic exercise: how they interact



WHAT IS MAP?

INTERACTION BETWEEN PROCESSES

It is critically important to focus on stakeholder engagement from the outset, even before the diagnostic exercise kicks off, and stakeholder engagement is central to setting up the diagnostic and governing its roll-out. While information-gathering, analysis and drafting of the diagnostic are taking place, stakeholder engagement is ongoing to feed into the diagnostic results, as well as to ensure continued buy-in. Likewise, once the draft diagnostic results are available, these are tested with stakeholders and the stakeholder process is leveraged to agree on the elements of the implementation roadmap. After the diagnostic is completed, the main country-level momentum shifts to the roadmap implementation process. In parallel, the diagnostic results are locally and globally disseminated and are incorporated in the MAP cross-country synthesis in order to multiply the impact.



Something to think about

Widespread impact is fundamental to the dissemination phases of MAP. The diagnostic dissemination phase is used to inform the implementation of the stakeholder process. The results and lessons of this process at national level are, in turn, integrated and feed into dissemination and synthesis at global level. These phases highlight how critical stakeholder engagement is to ensuring that the outputs of the diagnostic exercise are put to their best use – both in terms of supporting implementation at the local level and feeding the results into global engagement on financial inclusion.

Thus the two sets of processes – stakeholder engagement and conducting the diagnostic – are iterative and symbiotic, and it is important that they inform each other and that appropriate feedback loops be built in between the two: the stakeholder engagement process provides inputs on the various diagnostic components; likewise, preliminary insights or challenges highlighted by the diagnostic exercise can inform the nature of the stakeholder process and the diagnostic exercise can be leveraged for stakeholder engagement and buy-in.

In terms of **timing**: the diagnostic process generally takes about 11–12 months, whereas the ongoing stakeholder engagement and roadmap implementation process takes three to four years, depending on the specific country:

- **Phases 1 and 2: three months.** Generally, about two to three months are required for Phases 1 and 2, although initial stakeholder contact and the appointment of the local coordinator may take longer, depending on the country situation.
- **Phase 3: five months.** In Phase 3, about a month is needed to prepare for the country visit and schedule the in-country consultations, after which four months are generally required for the analysis and drafting process, meaning that, realistically, five months are needed from the commencement of information gathering until the completion of the bulk of the analysis.

GETTING GOING

STEPS FOR EACH PHASE

See also **Diagnostic Resource D: Roles and responsibilities** for MAP diagnostic outputs.

Something to think about

The steps and activities discussed in this section should not be considered a checklist, but should rather be pursued as relevant to the particular country. Flexibility, judgment and customisation are required in this regard on the part of the country coordinator, stakeholders at country level, the wider MAP team and the MAP hub members.

- **Phase 4: four months.** Phase 4 likewise spans a minimum of four months: normally, about a month is needed to organise and prepare for the stakeholder workshop, another month is needed after the workshop to update and submit the draft report, and at least a further month is required for report finalisation, subject to timely feedback by stakeholders. Thereafter, at least a further month is required for the development of the roadmap.
- **Phase 5: two to three years.** The implementation phase spans at least an additional two to three years, or more, depending on the contents of the roadmap and action plan and the mode of implementation.
- **Phase 6 is ongoing** in parallel to in-country implementation.

5. Getting going: steps for each phase

In this section, we take a detailed look at the different phases of engagement. For each phase, we outline a set of stakeholder process and diagnostic steps, actions, roles and responsibilities, with tips for each phase. At the end of the discussion for each phase, the main expected outputs for the phase are summarised.

5.1. Phase 1: Establishment

Phase 1 entails the establishment of MAP in the country in question. This preparatory phase is crucial to introduce MAP to country-level stakeholders, obtain stakeholder buy-in for the roadmap process, and lay the groundwork for the inception of the diagnostic project. This is needed in order to ensure an efficient process that enjoys the support of local stakeholders and maintains a focus that is appropriate to the unique country context. It will also assist in ensuring eventual implementation of the roadmap – post the diagnostic exercise.

1. Establishment 2. Diagnostic inception 3. Research & engagement 4. Roadmap formulation 5. Implementation 6. Global synthesis & engagement



GETTING GOING

STEPS FOR EACH PHASE

Stakeholder relationships are established by conducting a scoping visit (see more information on this below) and nurtured through the appointment of a local stakeholder coordinator. The establishment of MAP in a country and buy-in for the diagnostic are formalised through the stakeholder kick-off workshop.

So, **Phase 1: Establishment** comprises the following activities:

- Appoint a country coordinator to take responsibility for generating MAP buy-in and driving the stakeholder engagement process and the MAP diagnostic;
- Establish stakeholder relationships and obtain buy-in;
- Set up and conduct a scoping visit;
- Identify a local champion/s as contact point for the stakeholder process;
- Recruit the core diagnostic team; and
- Formally launch the MAP process via a kick-off workshop/meeting.

These activities are discussed in detail below, with an indication in each case of the responsible party/parties.

- **Appoint a country coordinator to take responsibility for generating MAP buy-in and driving the stakeholder engagement process and the MAP diagnostic**

The country coordinator is ideally someone who is knowledgeable about financial inclusion and has a range of donor, private sector and government contacts in-country. The coordinator will be responsible for liaising with government, obtaining the necessary agreements to proceed with the MAP in-country initiative and providing feedback from the in-country engagement to the diagnostic team. Additionally, the local coordinator is integrally involved with the diagnostic team through conducting some of the desktop research, setting up meetings and generally being the 'face' of the programme in-country. The programme needs to be owned at the country level and the coordinator is the main driver for this at the country level.

WHO? The MAP hub or key implementation partner will delegate an in-country funder representative or appoint the country coordinator.

GETTING GOING

STEPS FOR EACH PHASE

Tips for the scoping visit

Remember that the scoping visit takes place before the diagnostic exercise gets under way, and is valuable in setting the tone of and the scene for the ongoing stakeholder engagement and the diagnostic.

After the scoping visit, it should be possible to answer the following questions:

- **Status:** What is the current state of financial inclusion in the country, and what current or planned processes are targeting financial access?
- **Feasibility:** Is this the right time to be starting the in-country MAP process (i.e. is this process likely to be successful)?
- **Buy-in/demand:** Is there sufficient demand/support from stakeholders for the diagnostic?

It is worth organising a separate meeting with local donors/funders to determine their appetite for and buy-in into the diagnostic exercise and, particularly, their willingness to co-fund the implementation of the roadmap and its detailed action plan activities, which will flow from the diagnostic.

- **Establish stakeholder relationships and obtain buy-in**

The purpose of this activity is to establish initial contact with key government and other stakeholders (including donors) to explore existing financial inclusion activities and build buy-in for the MAP project. This activity forms the basis of the establishment of the steering committee and engagement of key stakeholders later on in the MAP project.

Note: Buy-in can take different shapes depending on government requirements. Generally, a commitment from government to take part in the process is desirable (e.g. in the form of a letter officially requesting a MAP project). Formal endorsement may not be required, as it risks delaying the process.

WHO? This role is led by the country coordinator, with the support of the MAP hub.

- **Set up and conduct a scoping visit**

The purpose of the scoping visit is to further identify and engage with the key public and private sector stakeholders relevant for the financial inclusion discussion in the country.

The scoping visit can also be used as a scoping mission for the FinScope Consumer Survey (see more on the *FinScope Consumer Survey* under 5.2 of the current toolkit, and in **Toolkit 5**).

WHO? The scoping visit is undertaken by the country coordinator and MAP hub representatives/MAP implementation partner.

Key outputs from the scoping visit should be to start identifying the members of the steering committee, agree on the host/chair of the steering committee, and share the draft project terms of reference.

- **Identify a local champion/s**

A local champion is invaluable in ensuring that on-the-ground momentum is maintained. A local champion is an influential representative, preferably from government – either the Ministry of Finance or the central bank – that understands the local context, has bought into the need for and use of a MAP project and actively advocates for it among other stakeholders.

GETTING GOING

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TIP: The champion should be a stakeholder that will have continuity along the process and a strong stake in the success of the eventual outcome – e.g. a representative from the Ministry of Finance.

WHO? Similar to the above, identifying and bringing on board the champion will be the task of the country coordinator and the MAP hub.

- **Recruit the core diagnostic team**

The establishment phase should also be used to put in place the diagnostic team. The core diagnostic team is the team of consultants that will handle the bulk of the research and will be responsible for the creation of the diagnostic deliverables.

WHO? The MAP hub will hold the primary responsibility for consultant recruitment, but could be assisted by government counterparties and country coordinators.

Remember: In reality there will be overlap between the different phases. Phases 1 and 2 are a case in point, as the inception of the diagnostic exercise is kick-started with the kick-off workshop.

- **Formally launch the MAP process via the kick-off workshop/meeting**

The purpose of the kick-off workshop is to bring together all the key stakeholders identified during the initial contact and scoping visit to continue the dialogue on financial inclusion. Importantly, the discussion at the kick-off workshop will serve to cement stakeholders' support for the in-country diagnostic exercise and the stakeholder engagement process. The kick-off workshop signifies the formal launching of MAP in the particular country.

WHO? The kick-off workshop involves a number of stakeholders, including key government counterparties. It is organised by the MAP hub and/or country coordinator. If the diagnostic consultants are already in place, they could participate in the workshop.

Notes on the kick-off workshop

- Central to the project kick-off workshop is a presentation that outlines the MAP approach and methodology. The kick-off workshop presentation can also include a component on the FinScope methodology.
- Government counterparties that have been identified as key stakeholders should be invited to make an introductory presentation.
- If it has not already been set up, the MAP steering committee can be formally established during the kick-off workshop.

PHASE 1: Establishment

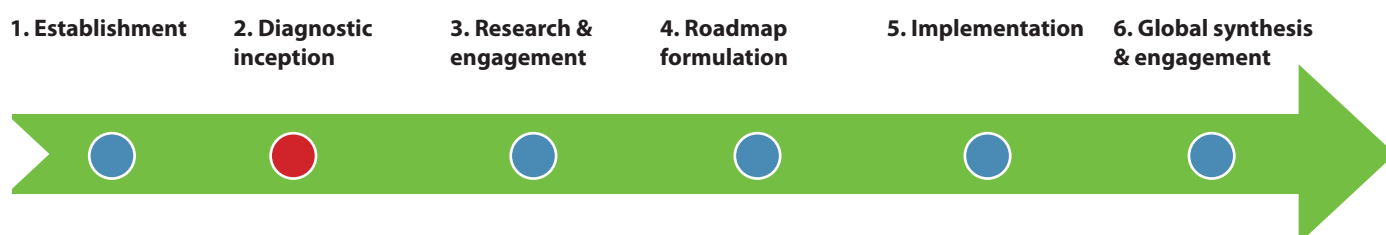
Summary of expected outputs

- Letter of request received from government
- Country coordinator appointed
- Diagnostic consultants appointed
- Scoping visit completed
- Kick-off workshop held to launch the MAP process
- Key stakeholders engaged, necessary buy-in generated and champion/s identified

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5.2. Phase 2: Diagnostic inception



On the stakeholder engagement front, **Phase 2: Diagnostic inception** focuses on establishing the governance and project management structures for the diagnostic. As part of this, it establishes the necessary committees. On the part of the diagnostic consultants, **Phase 2** entails preliminary desktop research and sub-contracting as required to prepare for the roll-out of the diagnostic. The following activities are included in this phase:

- Establish the project steering committee;
- Undertake the literature review (i.e. desktop research); and
- Recruit and brief sub-contractors.

These activities are discussed in detail below, along with an indication of the responsible parties.

Stakeholder engagement activities

- **Establish the project steering committee**

The steering committee will provide oversight of the MAP project, and the committee members will be engaged throughout the programme: to discuss and review outputs during the diagnostic and, beyond the diagnostic, to guide the process of developing the roadmap and action plan. The committee should be relatively small and consist of key government and funder stakeholders, as well as, where relevant, private sector representatives. Government stakeholders should include the Ministry of Finance, the central bank and the national statistics office (the latter particularly where MAP entails the roll-out of a FinScope Consumer Survey).

The FinScope Consumer Survey is conducted as part of the demand-side research in the diagnostic exercise. (In countries where there is an existing, recent FinScope Consumer Survey dataset, this function will not be required.) The steering committee will be responsible for oversight with regard to the development of the FinScope Consumer

GETTING GOING

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Checklist for establishing the MAP project steering committee

- Create a list of potential steering committee members.
- Extend an invitation to potential steering committee members, with an upfront summary of responsibilities.
- Obtain agreement from steering committee members.
- Finalise the steering committee composition and governing terms of reference.

Survey questionnaire and for appointing the specialist research agency responsible for FinScope roll-out. The group of people who directly oversee the FinScope Consumer Survey work can consist of the statistics office, government representatives from the central bank and Ministry of Finance, funders, and NGOs in the financial sector.

WHO? Setting up the steering committee is the responsibility of the MAP hub and country coordinator, with inputs provided by the diagnostic team where appropriate.

Remember: The steering committee will have a lifetime of several years – that is, the full lifetime of the MAP in-country process. It is envisaged that the steering committee will eventually transition to a more formal structure that monitors and oversees the development and implementation of the roadmap and action plan on financial inclusion.

Diagnostic activities

- **Undertake the literature review (i.e. desktop research)**

The literature review allows for the identification of existing information and datasets on the financial sector as a starting point for dialogue and analysis. This document is a preliminary assessment from desktop research and is shared between the diagnostic team and the country coordinator.

WHO? The diagnostic team is responsible for producing this output with the help of the country coordinator. It is not an external deliverable, but is an internal exercise to kick off the research process.

Note: In reality there will be overlap between the different phases. The literature review is a case in point: if the diagnostic consultants are already in place at the time of the scoping mission and kick-off workshop, conducting a preliminary literature review as part of Phase 1 can be a key input into getting the stakeholder engagement process going. In addition to providing valuable data, it can assist with establishing relationships with stakeholders.

- **Recruit and brief sub-contractors**

The purpose of this step is to develop terms of reference for, recruit, and brief additional members of the diagnostic team. These will be consultants outside of the core diagnostic team that are sub-contracted to provide inputs, such as market research service providers for the

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qualitative demand-side research, and the specialist research agency responsible for undertaking the FinScope Consumer Survey (see also [Toolkit 5](#)). The needs in terms of sub-contractors will vary per country context. For example, in some instances it may also be necessary to recruit a local consultant as part of the diagnostic team (e.g. where no country coordinator is in place, or to supplement the role of the country coordinator).

PHASE 2: Diagnostic inception

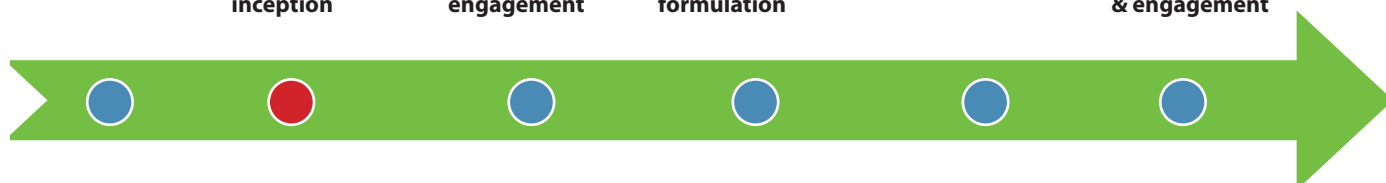
Summary of expected outputs

- MAP project steering committee set up
- Literature review (desktop research) undertaken
- Sub-contractors in place

WHO? Recruiting and briefing sub-contractors is the responsibility of the country coordinator, MAP hub and/or diagnostic team, depending on the specific country set-up.

5.3. Phase 3: Research and engagement

- | | | | | | |
|------------------|-------------------------|--------------------------|------------------------|-------------------|----------------------------------|
| 1. Establishment | 2. Diagnostic inception | 3. Research & engagement | 4. Roadmap formulation | 5. Implementation | 6. Global synthesis & engagement |
|------------------|-------------------------|--------------------------|------------------------|-------------------|----------------------------------|



Phase 3: Research and engagement entails the following activities:

- Involve stakeholders in the diagnostic mission and research;
- Manage stakeholder relationships at key milestones in the diagnostic and beyond;
- Conduct the country visit; and
- Conduct diagnostic analysis and synthesis of findings.

These activities are discussed in detail below, along with an indication in each case of the responsible parties.

Stakeholder engagement activities

- **Involve stakeholders in the diagnostic mission and research**

The more involved stakeholders are in the diagnostic process, the truer their commitment to the overall MAP project is likely to be. Ways of involving stakeholders in the research process include inviting key stakeholders to observe qualitative market research, and starting and closing the diagnostic mission with briefing and debriefing meetings with regulators (*for more on regulators, see [Toolkit 4](#)*).

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WHO? The country coordinator is primarily responsible for the stakeholder engagement role, with assistance and input from the diagnostic team and the MAP hub.

- **Manage stakeholder relationships at key milestones in the diagnostic and beyond**

Stakeholder engagement is a natural function of much of the information-gathering phase of the diagnostic, but managing stakeholder relationships happens *throughout* the MAP process and requires ongoing discussions and meetings with key stakeholders, including once the diagnostic has been concluded.

During **Phase 3** of the diagnostic, targeted engagement of key stakeholders is pursued to (i) test early findings and (ii) evaluate the interest and appetite of key stakeholders for pursuing strategies. Providing key stakeholders with the opportunity to shape the outcome of the MAP process aids in managing expectations and ensuring buy-in. In practice, this could entail setting up meetings with the regulator and/or steering committee to discuss preliminary findings and potential strategies and processes beyond the diagnostic (including the establishment of a local working group).

WHO? While the diagnostic team will support the country coordinator during the diagnostic, responsibility for subsequent engagement strategies sits with the country coordinator as well as the main donor or MAP hub partner.

Diagnostic activities

- **Conduct the country visit**

The country visit (normally 10 days to two weeks, depending on the country) is the heart of the information-gathering component of the diagnostic and forms the basis for the analysis and synthesis phase.

A diagnostic country visit is conducted for two main reasons. Firstly, it aims to gather data at the country level on financial inclusion to inform the diagnostic analysis and roadmap recommendations. Secondly, the information-gathering interviews and discussions with stakeholders are also critical for generating support for the market development activities that will follow and for placing financial inclusion considerations on the agendas of those consulted. In this way the diagnostic mission provides

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Detailed guidance on how to go about organising the country visit, whom to meet with and what information to gather is contained in the rest of the toolkit series, specifically **Toolkits 4** (regulation), **4** (supply-side analysis) and **8** (diagnostic resources).

an opportunity to familiarise stakeholders with the MAP project and to invite them to participate in the subsequent implementation process.

WHO? The core diagnostic team conducts the country visit and advises the country coordinator on the desired meeting list. The country coordinator schedules the meetings for the country visit and, where possible, attends the meetings with the consultant team to facilitate ongoing stakeholder relationship management, provide local context to the consultant team and build his/her own knowledge of the issues at stake.

- **Conduct diagnostic analysis and synthesis of findings**

After the completion of the country visit, the consultant team embarks on an intensive analysis and synthesis phase. This entails building the information gathered during the country visit into the analytical framework for each of the core diagnostic components that are the topic of **Toolkits 3** (context), **4** (regulation), **5** (demand side), **6** (supply side) and **7** (synthesis), respectively.

During this phase, the respective outputs from the qualitative and quantitative demand-side research (see **Toolkit 4**) should become available and must be integrated into the overall diagnostic analysis and findings.

The ongoing support of the country coordinator is crucial during the analysis phase to: provide a sounding board for emerging insights; provide additional contextual data; source relevant legislation, annual reports and other documents; compile product and institutional information; conduct mystery shopping to obtain further product details; and follow up on data gaps identified by the consultant team.

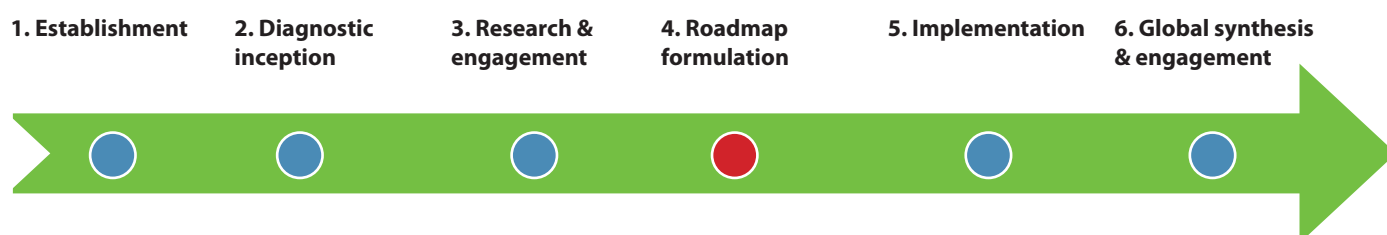
WHO? The core diagnostic team is responsible for the analysis and synthesis phase. The diagnostic team members will incorporate the findings from the qualitative and quantitative demand-side research produced by the relevant contractors where relevant in each component of the analysis. The country coordinator must produce the inputs listed above in discussion with the consultant team and as per the terms of reference for the particular diagnostic.

PHASE 3: Research and engagement	Summary of expected outputs
	<ul style="list-style-type: none">• Country visit conducted• Stakeholder engagement schedule devised• Stakeholder/champion feedback sessions scheduled for key moments of analysis

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5.4. Phase 4: Roadmap formulation



At the end of the research process, MAP changes gear to focus on inputting the diagnostic results into the development of a roadmap to achieve the public policy objective in the country.

As a first step, the findings are presented and discussed at a stakeholder workshop. Thereafter, the diagnostic analysis and recommendations are refined, a final report is produced and a synthesis note is developed to summarise the key findings and recommendations. Drawing on the diagnostic recommendations, the ongoing stakeholder engagement process is leveraged to develop and adopt a financial inclusion roadmap.

Phase 4: Roadmap formulation entails the following specific activities:

- Conduct a stakeholder workshop and obtain stakeholder feedback on diagnostic results;
- Manage stakeholder relationships on an ongoing basis;
- Submit draft and final versions of the diagnostic report;
- Submit the synthesis note;
- Conduct a roadmap-development workshop/retreat; and
- Develop and adopt the financial inclusion roadmap.

These activities, and the parties responsible for their implementation, are discussed in detail below.

- **Conduct a stakeholder workshop**

The workshop should include a broad spectrum of stakeholders from across government departments and the financial sector, as well as from other areas relevant to financial services distribution. The workshop serves two main purposes: it allows the diagnostic team to test and refine the analysis, leading to the production of the diagnostic report and roadmap recommendations; and it provides a *neutral platform* for debate and plays an important role in the broader stakeholder engagement process leading up to the development and implementation of the roadmap based on the diagnostic findings.

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Tips for facilitation

The facilitator should:

- Ensure fair representation;
- Ensure a sufficient number of interested and passionate representatives in discussions;
- Facilitate stakeholder discussion with the aim of informing roadmap activities; and
- Represent the demand-side perspective – the angle of the target market (low-income individuals excluded from the financial sector) – in the conversation if necessary.

WHO? The workshop is organised by the country coordinator, who needs to ensure a representative invitation list and a feasible timeline for scheduling the workshop. The diagnostic consultants have primary responsibility for delivering the workshop content. Either a government champion or the country coordinator can play a facilitation role.

- **Manage stakeholder relationships on an ongoing basis**

Stakeholder management in this phase will build upon the previous phases and will include the following:

- o Meeting with the steering committee and/or regulators before the stakeholder workshop to discuss key findings in order to test their reaction prior to presenting to a broader group of stakeholders. This should be done with sufficient time to incorporate suggestions prior to the workshop;
- o Facilitating engagement during the workshop to inform the roadmap recommendations;
- o Exploring the need for/feasibility of establishing a broader, local working group to take identified strategies forward;
- o Meeting with the steering committee after the workshop to discuss a way forward; and
- o Meeting with local funders after the workshop to discuss a way forward.

WHO? The MAP hub, country coordinator and diagnostic team should play a role in stakeholder management in this phase. The country coordinator and any identified champions should take the lead in driving this process.

- **Submit the draft and final version of the diagnostic report**

As discussed above, the draft analysis will be shared with the steering committee for initial feedback before the stakeholder workshop. This can take the form of a telephonic/in-person briefing or pre-draft report, depending on the specific study. The feedback is taken on board in preparing the stakeholder workshop presentation. Based on feedback received during the stakeholder workshop, the draft diagnostic report is finalised and submitted to the steering committee for review. After steering committee feedback has been received, a final diagnostic report is created.

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Something to think about

At this point it might be helpful to take a quick look at **Toolkit 7**, which focuses on the diagnostic report (into which the draft analyses discussed here will feed), for a reminder of how the data could be presented for publication.

RECAP

REMEMBER THE FOUR FOCUS AREAS

The diagnostic report identifies opportunities for and constraints on financial inclusion in terms of the four focus areas (as introduced in **Toolkit 1**):

- **Context analysis** (as discussed in **Toolkit 3**): the elements relating to the macroeconomic and socio-economic country context, political economy and state of infrastructure that will be relevant in determining the financial inclusion status and trends;
- **Regulatory analysis** (as discussed in **Toolkit 4**): providing an integrated overview of the regulatory framework impacting on financial inclusion across product markets, as well as the key regulatory issues or constraints arising in each product market;
- **Demand-side analysis** (as discussed in **Toolkit 5**): detailed demand-side analysis cutting across product markets and covering both quantitative and qualitative demand-side information, based on a target market segmentation analysis. The intention of the demand-side analysis is to inform focused recommendations based on disaggregated target market needs across product areas; and
- **Supply-side analysis** (as discussed in **Toolkit 6**): covering providers, products and distribution channels across four product markets: savings, payments, credit and insurance.

Note: For each of the product areas in the supply-side analysis, the draft report will include a summary of the regulatory issues as well as demand-side considerations where relevant (thus bringing home the point, once again, that the different focus areas are interrelated and intersecting).

The diagnostic report is the culmination of the diagnostic exercise. The report draws together the overall findings of the diagnostic to conclude on key opportunities and challenges for financial inclusion and to make corresponding recommendations, which will be key to the subsequent development of the roadmap.

WHO? The diagnostic team/consultants will hold final responsibility for the diagnostic report, with review and inputs, as relevant, by the MAP hub, government counterparties, country coordinator and the steering committee.

• Submit the synthesis note

As the MAP methodology typically produces a long and detailed diagnostic report, it is necessary to draw out the key findings and recommendations as a basis for the development of the roadmap. This takes the form of a succinct synthesis note that outlines core evidence on the current state of the market and the drivers of financial inclusion in the country, as well as the conclusions and recommendations.

WHO? The MAP hub is responsible for drafting the synthesis note, drawing directly on the findings in the diagnostic report. Depending on the terms of reference for the specific country, this role could also be fulfilled by the diagnostic consultants.

• Conduct a roadmap-development workshop/retreat

After the finalisation of the roadmap recommendations as contained in the diagnostic report and synthesis note, intensive engagement is needed by the steering committee to develop the recommendations into a set of strategic priorities and implementable activities. This typically calls for a dedicated roadmap-development retreat. The retreat should lead to a final set of agreed activities that can then be drafted into the roadmap.

WHO? The retreat is organised by the country coordinator. The steering committee and other select stakeholders participate in the retreat. The diagnostic consultants and/or MAP hub partners present the key findings and recommended roadmap activities as input. Depending on the specific project, an external facilitator/roadmap consultant may be hired. If not, the MAP hub partners are responsible for facilitation.

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- **Develop and adopt the financial inclusion roadmap**

This phase culminates in the drafting of the financial inclusion roadmap, which forms the basis for a detailed action plan to be implemented in **Phase 5**.

PHASE 4: Roadmap formulation

Summary of expected outputs

- Appropriately facilitated stakeholder workshop and follow-up engagements
- Diagnostic report and synthesis note published
- Roadmap-development retreat hosted
- Roadmap document developed and adopted

WHO? The diagnostic consultants or a dedicated roadmap consultant draft the roadmap based on the outcomes of the roadmap retreat, depending on the terms of reference for the specific study. The steering committee adopts the roadmap.

5.5. Phase 5: Implementation

1. Establishment 2. Diagnostic inception 3. Research & engagement 4. Roadmap formulation 5. Implementation 6. Global synthesis & engagement



Following agreement on the roadmap components, the implementation phase kicks in. At this time, if it is feasible and helpful, a **broader local working group or technical committee** (with sub-committees if required) can be established consisting of parties interested in developing the detailed action plan and implementing actions emerging from the diagnostic exercise.

Specific tasks in this phase include the following:

- Develop the action plan;
- Explore local mechanisms to facilitate implementation;
- Support implementation and follow-up; and
- Coordinate with other local processes (where relevant).

These activities and the corresponding responsibilities are discussed in detail below.

- **Develop the action plan**

At the start of the implementation process the MAP project steering committee and the newly formed working group (if applicable)

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See Toolkit 7:
for tips on developing the
roadmap and the action
plan.

Questions to ask at this stage

- Does the existing MAP country coordinator have the availability/capacity to coordinate the process of developing the roadmap and its associated action plan?
- Is this process too resource-intensive for the main diagnostic funder to support on its own?
- If so, what funding commitments can be secured from local stakeholders to ensure the action plan activities will be supported financially?
- Does a dedicated roadmap coordinator post need to be created and filled?
- If so, does this need to be a part-time or a full-time position?

collaborate to assign responsibilities, timelines and budget to key activities in the roadmap. Thus a detailed, implementable action plan is developed on the back of the roadmap; the action plan flows directly from the roadmap, being a detailed document formulating specific actions, responsibilities and timelines based on the priorities identified in the roadmap.

WHO? The action plan is the responsibility of the steering committee and/or working group, with coordination by the country coordinator and inputs by the MAP hub or (where applicable) the external roadmap consultant.

• Explore local mechanisms to facilitate implementation

The roadmap and action plan are the main inputs for MAP implementation – a process that takes several years. Implementation cannot be imposed from the outside: local implementation mechanisms need to be leveraged. This requires ensuring the continued involvement of the steering committee and/or working group. Ensuring implementation also requires dedicated coordination of stakeholders and project management of activities under the action plan. To achieve this, it may be necessary to designate one of the stakeholders to fulfil a coordination function, or it may be necessary to appoint a dedicated resource to this position (as a part- or full-time position).

WHO? The country coordinator and MAP hub are responsible for ensuring that local mechanisms for implementation work effectively. The steering committee/working group is responsible for either designating a coordinator or recruiting somebody to this position.

• Support implementation and follow-up

Once the appropriate implementation structures have been set in place, the roll-out of action plan activities can begin.

WHO? Local stakeholders, through the steering committee and/or working group structures, should lead the process of implementation. This reconfirms the importance of getting stakeholders 'on board' through the prior engagement stages. By the implementation stage, stakeholders should already have bought into the rationale for a roadmap and action plan and be fully committed to the process. The country coordinator and MAP hub fulfil a supporting/coordination

GETTING GOING

STEPS FOR EACH PHASE

role and are required to periodically check on progress. The MAP hub may furthermore contribute funding to some action plan activities and may, as appropriate, assist the steering committee in sourcing additional funding.

- **Feed results into other domestic processes**

MAP is not implemented in isolation. There will be other, ongoing policy, regulatory reform and development processes in the country in question: for example, a World Bank Financial Sector Assessment Program (FSAP) leading to a Financial Sector Development Plan. Where relevant, the diagnostic results and roadmap process should also be

used to inform and coordinate with these processes. The primary purpose of this step is to create a feedback loop to feed MAP experiences into other such relevant processes. Creating buy-in among those not directly tied to the process supports the implementation of the MAP roadmap and action plan.

PHASE 5: Implementation

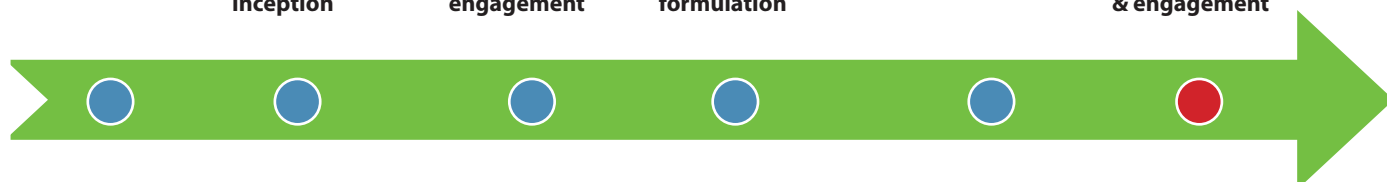
Summary of expected outputs

- Action plan developed
- Implementation of the roadmap and action plan supported
- Coordination with existing initiatives where relevant

WHO? This is the role of the MAP hub and country coordinator.

5.6. Phase 6: Global synthesis and engagement

1. Establishment 2. Diagnostic inception 3. Research & engagement 4. Roadmap formulation 5. Implementation 6. Global synthesis & engagement



Phase 6 brings the country-level findings to a global set of indirect stakeholders and makes the national results available to an international audience.

The two main aspects of the dissemination element of the stakeholder process are:

- Inform cross-country synthesis; and
- Feed results into international forums.

- **Inform cross-country synthesis**

It is important to extract insights from the country-level MAP diagnostics to feed into cross-country lessons and synthesised findings. Cross-country thematic findings can, in turn, inform key themes for further/new research in the country in question.

PHASE 6
Global synthesis
and engagement

Summary of expected outputs

- Produce cross-country synthesis outputs (e.g. thematic focus notes)
- Devise a global dissemination strategy

WHO? Cross-country synthesis is the responsibility of the MAP hub partners.

- **Feed results into international forums**

The primary purpose of this step is to feed the country results into relevant global discussions, in order to influence the financial inclusion agendas of global standard-setting bodies and multilateral technical assistance providers, as well as to provide inputs to existing topic-specific information platforms.



Ideas for dissemination of MAP findings

The MAP hub partners – working with country coordinators, where appropriate – could consider the following dissemination strategies, among others:

- Identify country-level and multilateral entities to target and channels for doing so;
- Create both hard- and electronic-copy dissemination strategies;
- Engage working groups of key international networks;
- Create a global platform for participating countries as well as other interested countries to share learning; and
- Leverage and/or create annual conference platforms – both globally and on a country basis – to disseminate MAP findings to a wider audience

WHO? Once again, this is the responsibility of the MAP hub partners.

6. Conclusion

Toolkit 2 has provided an overview of the MAP in-country stakeholder engagement and diagnostic processes. It has emphasised the phases, activities and outcomes of the stakeholder engagement process, and how the activities and outputs of the diagnostic fit into this process.

It aimed to provide a clear sense of how the MAP diagnostic ‘typically’ unfolds in-country but also how – in dialogue with stakeholders – the project can and indeed must be tailored as it progresses, to take into account the specific needs and realities of the country in question.



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