What works for Social Accountability? Findings from DFID's Macro Evaluation

A wide-ranging evaluation of the UK Department for International Development's (DFID) support to **social accountability initiatives** has found that service delivery is improved when local citizens are informed and learn about their rights and entitlements and have the opportunity to engage in dialogue with service providers. In this briefing, we summarise the main findings from the evaluation which looks at what works best and highlights key lessons learned.

Key findings

DFID supports social accountability across many countries and contexts. Social accountability processes are supported either as standalone projects or as components of broader sector or governance reform projects. In 2016, DFID commissioned a macro evaluation of its social accountability portfolio looking at evidence across 50 different projects. This evaluation tested a number of hypotheses and generated key findings about **what works in social accountability, for whom and in what contexts.** The evaluation was designed primarily to inform policy and practice within DFID and secondarily to contribute to the debate on social accountability with other development actors.

What works?

- **Social accountability processes lead to better services.** The macro evaluation found compelling evidence that supporting local social accountability processes almost always resulted in improved service delivery. In 46 out of the 50 sampled cases, project support to strengthen citizen engagement with service providers contributed to service delivery improvements. Procedures at facilities became more efficient, open and equitable. Staff attitude and behaviour improved, with improved attendance by health professionals

What is social accountability?

Social accountability is a process in which informed citizens hold governments to account for delivering quality public services and resources. Social accountability refers specifically to the relationship between those who manage and provide public services (for example, health or education) and citizens who use these services. Social accountability is different from what are defined as 'higher level' accountability relationships that focus on national level policy making or election cycles. Social accountability is therefore locally experienced: it is a relationship that is most relevant to the daily life of citizens at the community level who are concerned with getting access to local government officials, monitoring local budget spending and discussing the quality of services.

Those supporting social accountability believe that when citizens **engage** with service providers – for example, through participating in planning local services, attending public meetings to improve quality or involvement in oversight bodies – their views are more likely to be **heard** and to **influence** government policy and practice leading to better quality services. Critics of social accountability however point to an 'accountability trap' in which the contribution to improved services remains localised and short-lived if social accountability initiatives are not part of a more strategic intervention in policy making.

and teachers. Targeted resources reached their intended beneficiaries and discretionary local budgets were allocated transparently and according to local demand. Services became more accessible to a wider range of people.

- **Local actors (facilitators and networks) are critical at building citizen engagement with service providers.** Projects building citizen awareness and capacity, and supporting dialogue between citizens and service

providers, were particularly effective when steered by skilled facilitators with on the ground presence and close community links. Strengthening local networks sustained and increased the impact of dialogue.

- **Dialogue between citizens and service providers works best when backed up by locally-generated evidence.** Discussions between citizens and service providers was more focussed and people were more motivated when they had access to citizen-generated data that monitored service quality and user satisfaction. For example, a social accountability programme in Bangladesh provided grants to local civil society actors which promoted public dialogue with service providers, backed by systematic user feedback gathered through tools like scorecards. As a result, safety net provisions became more transparent and were no longer captured by those who were not entitled.

- **Social accountability support works through both formal (state-led) and informal (citizen-led) channels.** Formal channels were those that were designed for citizen engagement by government authorities or service providers. Many DFID-supported projects focussed on formal spaces for dialogue, such as user committees. Informal channels were those instigated and pursued by citizens outside of formal (state-led) governance processes. Although less well evaluated in project reports, support to various informal processes also proved effective given the right circumstances. These citizen-led initiatives typically worked through civil society, social mobilisation and citizen-led advocacy campaigns, in some instances involving local or national media. The Bangladesh programme, for example, mixed formal and informal channels of citizen action (see box 1).

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In addition to formal dialogue, the programme allocated grants to social campaigns using public meetings, poster and brochure distribution and social marketing tools.

Box 1: Expanding entitlement for social accountability in Bangladesh

The Rights and Governance Challenge Fund (RGCF) / Creating Opportunities for the Poor and Excluded (COPE) programme targeted a number of high-level legislative and policy change processes in Bangladesh. This high-level policy advocacy expanded entitlements for poor and marginalised citizens to access a range of public services and resources. Social accountability processes around these entitlements were made more transparent by the programme management organisation's (PMO) ongoing advocacy for a *Right to Information Act* that would increase transparency and responsiveness among service providers.

Programme evaluations confirmed that linking social accountability to policy and legislation worked. Marginalised citizens were able to access services across a range of sectors:

• PMO advocacy on land law, for instance, involved drafting a single, harmonised land law that strengthened landless citizens' rights to government-owned *khas* land. This extended *khas* land titles, and land titling services, to thousands of previously landless households. Programme grantees then worked on social accountability processes, supporting landless groups to engage with land titling service providers while at the same time assisting those authorities with local listings of eligible landless households.

• The PMO's Dalit programme engaged policymakers through a network of partners to increase awareness and action around Dalit rights. The PMO engaged in the drafting of an *Anti-Discrimination Act* that included every marginalised group. At the same time its advocacy on Dalits resulted in the very first budget allocations for social welfare provisions for Dalits and housing for Harijon (cleaners' caste). To encourage social change, the PMO also funded national and local advocacy campaigns, involving the media, to protest acts of discrimination and rights violations against Dalits. Programme grantees also worked on local level social accountability processes, on the supply-side assisting district and sub-district offices to identify and list Dalit beneficiaries for social welfare transfers, and on the demand-side to assist Dalit communities to raise rights awareness and to mobilise them to claim their rights to these transfers as well as to equitable access to health and education services.

In what contexts?

- **Support to social accountability works particularly well when there is a strong 'social contract' between the state and its citizens.** DFID support to a rural livelihoods programme in Madhya Pradesh state in India, for instance, took place in a context where there exists a sense of a strong social contract and where local governance processes are designed to enable citizen engagement. By working through skilled local facilitators with village councils, the project raised awareness and promoted formal participation amongst the poorest, backed by evidence gathering for local planning. The project enabled the village committee to improve pro-poor budget allocations and services.

- **Support to social accountability <u>can</u> work even in contexts where there is a weak social contract although the challenges and constraints tend to be amplified in these contexts.** There was evidence that greater local-level state responsiveness was achieved in some instances via informal citizen action and media oversight. Or, where states closed down freedom of expression, formal channels of dialogue were often still effective in weak social contract contexts. A civil society advocacy programme in Rwanda, for instance, supported community scorecards and related dialogue meetings between citizens and local government officials or service providers, resulting in improvements in service delivery (see box 2).

- **When the social contract is weak, projects are most effective when citizens are supported to understand what services they are entitled to.** In one example, in Sierra Leone, a DFID health sector programme included parallel support to the establishment of a network of volunteer citizen monitors, backed by rights awareness raising. These monitors – one stationed at each government health facility – collected information both from patients and from the health facility itself, and provided regular monitoring information both 'upwards' and 'downwards'. This was seen as an effective way in increasing citizen engagement with the health providers.

- **Social accountability is more effective when it is designed to adapt and be flexible to changing contexts – including making use of new media.** The macro evaluation found cases where programme design responded strategically to changing contexts. On occasion, this notably involved opportunities to utilise new forms of digital technology and social media. These can be shown in two examples. First, an accountability programme in Kenya (see box 5) was implemented in a dynamic civil society context, with sophisticated information and communication technology (ICT) capacity to expand citizen action though social media, and respond to a growing demand among citizens to curb endemic and systemic corruption. Second, a civil society strengthening project in Tanzania adapted strategically to a fast-growing urban population and utilised radio programming, texting and social media platforms to take advantage of the opening up of space for public discussion in the country (see box 3).

Box 2: Supporting social accountability in a context of a weak social contract in Rwanda

DFID's Rwanda Public Policy Information Monitoring and Advocacy (PPIMA) programme operated in a context where there was a weak social contract between the state and its citizens. Space for citizen engagement on politically-sensitive issues remained limited, despite a progressive policy environment of decentralisation. The PPIMA programme supported civil society organisations (CSOs) at national and local level to hold government to account and influence the formulation and implementation of policies and plans.

Given Rwanda's restricted civil society space and the weak social contract, the PPIMA programme primarily focused on formal, mandated, citizen engagement, most successfully through implementing a community scorecard and related dialogue meetings between citizens and local government or service providers. With government backing and approval, a collaborative arrangement between state and citizen, informed by the scorecard process, was evaluated as both viable and effective. Documented improvements in service delivery included better distribution of seeds and fertiliser as well as improved attendance at health centres by specialists. Purposeful support to independent media oversight was included in the PPIMA programme's second phase. This was pursued at national and district levels. Such media engagement included radio call-ins on public services. At the district level, 16 radio call-in talk shows were rolled out where citizens could air their views on local government and service provider performance. The DFID mid-term review 2015 found: *"The inclusion of a media partner in Phase II has heightened awareness of communication as a development tool and appears to be particularly useful at keeping issues on the agenda".*

For whom?

- **Social accountability can channel resources to marginalised groups.** The macro evaluation found that social accountability processes can improve services for marginalised citizens if 'platforms' (for example, village committees) for engagement with service providers are inclusive of all groups. For example, a successful DFID health programme in Nigeria (see box 4) formed Facility Health Committees (FHCs) of 12 to 15 people to represent communities and work with facility staff to improve service delivery. To ensure social inclusion, at least four of the members were required to be female. There were also systematic efforts to include other marginalised groups. Thanks to these efforts, it was reported that 35 per cent of all trained and active FHC members were women.

- **Awareness raising contributed to improving services for marginalised groups, demonstrating the value of promoting social inclusion within local structures and platforms.** The macro evaluation found evidence that socially inclusive committees could play a stronger outreach role in raising awareness and increasing access amongst marginalised groups. As in the above example, in Nigeria, the FHCs worked to increase access to services for everyone, including the disadvantaged (see box 4). FHC members actively identified marginalised groups in their communities, encouraged them to use health facilities and investigated barriers that prevented them from using health services.

- **Social accountability was particularly effective when integrated with supply-side support for services that targeted a vulnerable group.** This was most evident in maternal and child health programmes. In other cases, progressive spending of local authority budgets was achieved through structured dialogue between the local authority and citizens that included representatives of marginalised groups. In the best cases, such as the social accountability project in Bangladesh (see box 1), social accountability processes led to higher-level (macro-level) policy support which expanded and improved entitlements for marginalised groups at a larger scale.

Box 3: Supporting social accountability in a changing social context in Tanzania

DFID funded the Foundation for Civil Society Programme (FCSP), a civil society strengthening initiative in Tanzania, a country with a rapidly growing population where the youth are increasingly expecting and demanding more from the state than in the past. DFID's reporting noted that *"a fast-growing young and urban population and widening access to media through expansion of local FM radio and use of mobile devices are increasingly contributing towards making populations in Tanzania better informed. Local CSOs are positively utilising these opportunities to better organise citizens and ensure their demands are heard by the state."*

An important contribution of the programme in this changing social context was to focus on awareness raising and the construction of citizenship among populations reached by the programme. The programme made widespread use of media for this type of outreach, including radio, newspapers, television and the dissemination of large numbers of printed materials. DFID's case for extending the programme beyond 2011 rested on its recognition of the need to keep strengthening civil society to engage with the state to overcome challenges of the weak social contract.

What needs to work better?

- **Social accountability processes which lead to improvements in service delivery are difficult to sustain due to supply-side constraints.** While social accountability initiatives at the local-level tend to be effective, their achievements are usually limited and difficult to sustain. This is usually linked to a range of factors that undermine the social accountability process, for example scarce resources, high staff turnover and low levels of budget authority.

- **Social accountability processes are difficult to take to scale.** Translating local social accountability successes into improved services at scale requires a focus on institutionalising processes at a higher-level that can be difficult to achieve and maintain without sufficient support by the state.

- **Weak civil society capacity can also undermine social accountability sustainability.** Project support can energise civil society groups and networks to engage with service providers, but this energy can be difficult to sustain, particularly in contexts with

a limited experience of local civil society activism or where civil society space is restricted by the state.

Policy lessons

- **Apply a strategic approach to social accountability; move beyond tactical approaches to achieve success at scale. Social accountability approaches should ensure local citizen actions are relevant and integrated to higher, more strategic, interventions.** For example, the DFID devolution support programme in Kenya (see box 5) ensured that, from the outset, social accountability elements were integrated with broader programme support to devolved service delivery, including support for transparent and accountable governance systems at the county level. One of the implementers of this programme, the World Bank, decided that future loans would be disbursed under conditionalities that incentivised counties to strengthen participatory governance.

- **Target marginalised groups directly to leave 'no one behind'.** This means getting better at identifying and designing interventions that strengthen engagement by marginalised citizens. This appears to be particularly effective in broader service delivery initiatives where social inclusion can be built into service delivery reforms on the supply-side as in the case of DFID's health systems programme in Nigeria (see box 4). In addition, one of the grantees of a DFID Kenya accountability programme targeted women and youth, successfully building their capacity to participate in devolved local assemblies. Another grantee took advantage of the new Kenya constitution's gender quota for county assemblies to further women's participation in planning and budgeting in devolved governance.

- **Invest in civil society networks.** Support to networks of civil society groups can strengthen and sustain the effectiveness of citizens as they engage with government officials and service providers. Project-supported civil society activities can all too often wither away without an institutional presence built at grassroots level. As illustrated by DFID's health sector support in Nigeria (box 4), with sustained investment in network building as a goal in its own right, these networks can be

institutionalised and even integrated into higher levels of decision making.

- **Consider the context, and think and work politically.** Project context influences the effectiveness of social accountability initiatives; this means that careful context / political economy analysis is crucial when designing a social accountability initiative and that implementation also requires thinking and working politically to adapt to contexts which change.

Box 4: Supporting civil society networks in Nigeria

The Partnership for Transforming Health Systems (PATHS) 2 project in Nigeria improved health delivery at scale. This led to significant increases in the number of skilled attendants present at births, the percentage of children with diarrhoea receiving oral rehydration solution, and levels of client satisfaction. In pursuit of these improvements, the programme included support to civil society networking. It established over 2,000 FHCs across five states in Nigeria. The FHCs then established 'FHC alliances' with local CSOs to strengthen and sustain 'horizontal networks' of citizen participation in local government authorities' health facility decision-making. An evaluation found that building partnerships between FHCs and CSOs was a very effective approach, essential for providing FHCs with the necessary weight to influence decision-making. The programme also supported citizen groups to introduce evidence and participate in state medium-term sector strategy discussions, with impressive outcomes in free healthcare provision described above.

Significantly, the establishment of the FHCs was coordinated out of 'institutional homes' in state governments. Specifically, during year five of the programme, a sustainability focus increased emphasis on improving Community Participation in Health (CPH) Policy Guidelines and a FHC Institutionalisation Framework. In its Annual Report, the programme reported that two of the five states had developed specific policy guidelines that institutionalised FHCs. The programme identified working with officials in these two states during its extension phase to 'further equip them to take over the institutionalisation process of FHCs in the states'.

Box 5: Strategic investment in social accountability in Kenya

The Kenya Accountable Devolution Programme has integrated social accountability processes into Kenya's implementation of its devolution policy. Under its new constitution, authority is devolved to county-level governance, along with legal backing and incentives for transparent and accountable governance. The programme support focused first on policy frameworks for transparent and accountable governance. These centred on improving the level and quality of engagement of citizens with county governments through county performance management systems that included public participation and access to information, backed by legislative review of the minimum legal standards for public participation, accountability and transparency. At county-level, the programme then provided continuing support to county administrations to make information available and encourage participation. The next step for the programme is to provide demand-side support for citizen's groups to monitor and evaluate their county's performance and benchmark cross-county performances.

Image © PATHS2 Ask Nigeria Dialogue

WHAT IS THE MACRO EVALUATION?

The main focus of the macro evaluation was to analyse the portfolio of DFID social accountability projects supported during the life of the policy frame to understand what works, for whom, in what contexts and why.

The macro evaluation applied a mixed-method design. It analysed reports from a sample of 50 DFID social accountability projects to test hypotheses about project contribution to change. It primarily used secondary data held in DFID's management information system as its main source, such as evaluation reports, project reports and business cases. The methodology combined Qualitative Comparative Analysis with narrative analysis, to identify what works in different contexts and why.

FURTHER READING AND RESOURCES

The full macro evaluation report can be found at: itad.com/reports/empowerment-accountability-annual-technical-report-2016-works-social-accountability/

To read more about the 'accountability trap' see Fox, J. (2014), 'Social Accountability: What does the evidence really say?' GPSA Global Forum PowerPoint Presentation. Available at http://issuu.com/thegpsa/docs/social-accountability-04-13

For more information about the macro evaluation methodology see: www.itad.com/methodology/

CREDITS

This summary was written by Jeremy Holland, Principal Investigator for DFID's Empowerment and Accountability Macro Evaluation, with contributions from Claire Hughes, the Macro Evaluation Project Director and Richard Burge, Itad Associate Director. The macro evaluation was carried out by Itad on behalf of e-Pact as part of the Macro Evaluation of the Strategic Vision for Girls and Women supported with UK Aid from the UK Department for International Development. e-Pact is a consortium led by Oxford Policy Management and co-managed with Itad working to strengthen evaluation effectiveness and impact.

The opinions expressed here are based on the findings from the macro evaluation and do not necessarily reflect the opinions of the UK Department for International Development.

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