

*Social Accountability program Experiences*

*(2008- 2021)*

**1. Introduction**

The Federal Democratic Republic of Ethiopia has implemented the Protection of Basic Services (PBS) program collaborating with International Development Partners. The Social Accountability (SA) initiative is one of the essential components of the Protection of Basic Services program to which the Government of Ethiopia is highly committed. Social Accountability is a crucial method to solicit user perceptions on quality, efficiency, and transparency. It is also a process by which ordinary citizens, who are the users of public services, can voice their needs, preferences and demands regarding public services and hold policymakers and service providers accountable for any weak performances. The Social Accountability process consists of various tools to address the information gaps in the government's planning and budgeting processes. The tools include Community Score Cards, Citizens' Report Cards, Community Mapping, Participatory Planning and Budgeting, Gender Responsive Budgeting, and Social Auditing. These tools help gather information on citizens' perceptions, experiences, and views on the access to and quality of essential public services and the views of service providers.

The overall objective of the project is to enhance good governance and development effectiveness by promoting genuine citizen participation, transparency, downward accountability and responsiveness of public policymaking, public budgeting, and the delivery of public services both at regional and local levels across the health, agriculture, and water supply and sanitation sectors.

PADet is one of the Ethiopian resident charities that implemented the Ethiopian Social Accountability Program's first, second, and bridging phases, financed through a World Bank administered multi-donor trust fund. This project has been in operation from 2008 to 2021 in Wuchale, Degem and Jida woredas and Gimbi Town of West Wolega zone of Oromia region and Lideta and Chirkos sub-city of Addis Ababa city administration. PADet has been exercised all the SA tools to improve the performances of public services in the water, health, and agriculture sectors.

In the former Ethiopian Social Accountability Program (ESAP 1), PADet had implemented the project in partnership with Oromia Development Association (ODA) and applied the Community Score Card tool. The tool was successfully used to gather citizens' feedback on public services such as water, hygiene and sanitation, agriculture, and health.

ESAP 2 continues with the Phase 1 tools and introduces implementing partners to complimentary tools that could be applied in conjunction with the Phase 1 tools in the Ethiopian context. Additionally, in partnership with Safe Your Generation Ethiopia, PADet used Wuchale, Degem and Jida woredas and citizen report cards in Addis Ababa city administration for community scorecards.

PADet also had implemented Ethiopian Social Accountability Program<sup>2</sup> Bridging phase in partnership with Cheshire Foundation Action for Inclusion; its general objective is to consolidate and deepen SA in all ESAP2 Participating woredas. The main activities indicated for this priority are:

- Sustain implementation of SA in the ESAP2 Participating Woredas to consolidate achievements and document reasonable best practices.
- PSNSP Piloting continues with additional PSNP funding in Maximum to Woredas, including those where the PSNP pilot started under ESAP2
- Review Progress in implementing the SA-FTA linkages action plan scale-up implementation and initiate linkages with the Grievances Redress Mechanism (GRM) and Public Financial Management (PFM). They influence the planning, budgeting, and implementation cycles by directly collaborating with and supporting woredas administrations and councils.
- Facilitate a process to compile and discuss innovative experiences across regions and woredas.
- We are keeping SA on the local government Agenda through information, education, communication campaigns and awareness-raising.
- Sustain engagement with Regional Councils and Bureaus of Finance and Economic Development (BoFEDs)
- Preparing SAIPs for the follow-up program by building their capacity to take up more responsibilities

## **2. Implementation strategies**

In implementing this project, we used strategic tools like social inclusion, community scorecard, Citizen report card, capacity building/awareness creation/, focus group discussion, Community Mapping, Participatory Planning and Budgeting, Gender Responsive Budgeting, and Social Auditing.

## **3. Target population**

PADet has targeted the Northern Shoa Oromia region population, precisely three woredas-Wuchale, Degem and Jidda and West Wollega zone of Gimbi Woreda. Local sectors and service providers. The service providers include health workers, agriculture, water, sanitation, and gender. Local administrators, sector heads and experts, and community and opinion leaders are the decision-makers. On the other hand, the community groups encompass CBOs (like youth, women, and Farmers' associations) and the private sectors (indirect beneficiaries).

#### **4. Overall implementation process**

Before directly implementing the project, a launch-up workshop had been conducted at Regional, Zonal and woredas levels to present the overall objectives of the SA project. At the event, various people from higher to lower levels participated. Woredas and kebele level SAC were organized in their respective Woredas and kebeles, aiming to be responsible for continuing the program after the project ends. The committees' members were trained intensively on SA and SA tools. This training assisted them in cascading the training to citizens, service providers and government officials. Members of different citizen groups were also trained on the same concept.

**Social mapping** is one of the steps that we followed to identify the types of people pushed at the edges of the society due to their economic, social, religious, physical, mental and gender status in a particular district/locality. Social mapping helped us avoid the exclusion of most disadvantaged and vulnerable people and assured the participation of the most underprivileged people through the entire process.

**Service standard:** The preliminary task was to familiarize the service providers and citizens with the stated service standard. Without having service standards, it is unthinkable to apply social accountability through any SA tools to bring quality service delivery to any primary service delivery point. It used as a valuable method helped us to avoid the over expectation or ambition of citizens on the type of service rendered.

#### **Formulation of Focus Group Discussion (FGD)**

After we identified the types of community in a particular kebeles and district, we found it better to classify them into 5 FGD groups (Male, women, girls, boys and people with disability, and people who live with HIV/AIDS). During the process, each group has identified the issues related to service gaps in their respective service giving units. (Health, water and sanitation and Agriculture. After placing the problem, the group prioritized issues using pair-wise ranking. The process helped the participants to argue on each identified service gap by making a thorough discussion among the group members. They also make sure the issue raised is a common problem for all group members representing citizens. We were not following the voting method to identify gaps in service delivery. Instead, all must admit the service gaps through discussion and convince one another. Maybe sometimes it was difficult to reach on consensus on a particular issue. Still, the reason was being justified to persuade other members in a group and come to an agreement.

After identifying and prioritizing service issues, all FGD groups have changed all priority issues into indictors. Indictors help them give a score for each case stated under each indicator.

### **Consolidation of scores**

First, Kebele level consolidation has been done by bringing representatives of the five groups in each Kebeles and consolidating it. Then Woreda level consolidation (getting three Kebeles' scores into one) has been made using the same procedures mentioned above. By doing so, consolidated, or refined scores representing citizens have been produced for all three Woredas and one town (Wuchale, Jida and Degam woredas and Gimbi town).

### **Conducting service providers scorecard**

To make the self-assessment of service provider, the group has been established in Health, agriculture and water, and sanitation sectors in three Woredas and one town (Wuchale, Degam and Jida woredas and Gimbi town) respectively. With 6-8 members in each group, the service providers' representatives have made self-assessments to identify and prioritize gaps, set indicators, and finally provided scores under the sated hands.

### **Conducting interface meeting**

It is one of the sessions that brought together all stakeholders (citizen representative, service providers, administrators, Woreda, regional council members, sector office representatives, zonal office representative citizen groups, SAC members, and NGO representatives) in one platform to discuss the issues raised by citizen groups and service providers.

The moderators and facilitators have played a significant role in facilitating the interface meetings. During the sessions, service providers must pay attention to the voice and feelings of the citizen on the types, quality and satisfaction level of services given by service providers. Both presented the citizens' and service providers' scores on each identified indicator to the audience. There were disparities in scores on specific indicators. During this time, the facilitators have played a significant role in narrowing the score gaps among the two parties by making a thorough discussion among the service users and service providers. Finally, a consensus has been made on the issues that need further action and led to a reform agenda for improvement after a thorough discussion among service users and providers.

### **Joint Action Plan**

SAC members at each Woredas have prepared a Joint action plan session by inviting concerned Government bodies and citizen representatives. Some of the members who participated in this vital day were Zonal Administration, woreda administration, Woreda council members, citizen representative etc. A joint action plan has been made for each Woredas by focusing on the points set on the reform Agenda (issues that need action), responsible bodies for the action, the period when the action was completed, the budget source, and the required budget complete the activity.

## **5. Significant achievements of the project**

The SA project's various approaches and strategies, particularly the partnership approach, have enabled the project to support different categories of vulnerable groups. It was also found that the project has contributed to enhanced dialogue between service providers and service users, the government, and the community. This is particularly common and regular at the local levels. A wide range of meetings to exchange issues and priorities on the delivery of water, agriculture and water and sanitation services have been supported. Over the project periods, different Woreda and kebele level interface meetings were conducted, and citizen representatives, zonal officials, service providers, kebele and woreda officials participated in the interface meetings. Joint action plans were developed and distributed to the SA project participants, Woreda administration office, Woreda Health, agriculture and water offices, and Woreda SAC. Members of Idris, youth associations, and women associations were also trained on the concepts of SA. Woreda and kebele SACs regularly monitor improving health center water and agriculture services.

Project target groups agreed that the SA exercise has significantly improved delivering essential services. This has been possible due to the interface meetings, face-to-face relationships and joint planning established between service providers and users. For instance, Muketuri health center head emphasized that "before SA we tried to improve services, but it was not long-lasting and effective, however since the initiation of SA we had a series of meetings and joint planning with service users where we identified and prioritized the problems of the health center. Following the joint planning, we significantly improved the health centers' sanitation situation, the availability of supplies and drugs and the provision of shower service for the delivery room". Similar improvement has also been recorded in the provision of agricultural inputs. SA has made the timely provision of supplies to farmers possible.

The strong partnership established among communities, civil society and service providers has made it possible for citizens to have better access to information and for the government to be more responsive to citizen demands than before the intervention.

The social accountability project brought the service providers and users together and helped mobilize financial resources, material, and labour to complete the long-delayed water supply scheme. The awareness creation and training programs have changed the attitudes of service providers towards serving citizens.

Most of the population, in general, is satisfied with the performance and achievements of the project. The social accountability project has improved the quality of water, health, and agriculture services.

The project has been responsive to the community's needs and aligned with government policies, strategies, and programs. The project has also been consistent with the government's five-year Growth and Transformation Plan (GTP) and the

Millennium Development Goals. Government key informants believe that the project has been complementing the efforts being done by the Government to promote good governance, accountability, and transparency.

The project has been efficient in utilizing its human resources and allocated budget, the management system employed, and the participation of key stakeholders in the project planning, implementation, monitoring, and evaluation. The project has achieved its intended objectives and reached its target groups as planned.

The project has made substantial changes in service quality and accessibility and significant improvements in the behaviour and attitude of both service providers and service users. The project has put high emphasis on including vulnerable groups like women. Women's representations in various forums like training programs and SACs were adequate. Project activities are making a positive life-changing contribution. Evidence suggests that the project has progressed towards intended objectives and outcomes.

The SA project has increased service providers' responsiveness to service users' demands, empowered them to claim their rights, and held service providers accountable for their poor performances.

The project's design that chose strategies to address service providers and users has been highly influential in cultivating the desired change. The process of the task of working with and through partners is an effective tool for engaging communities and local government for change. Working with local partner CSOs and local government has proved ideal for engaging communities and is cost-effective.

The project target groups (women, youth, PLWHA, people with disabilities) have organized themselves and engaged in meaningful activities to change the behaviours of service providers and improve service quality and accessibility that have positive impacts on their livelihoods. Woreda councils have committed to increasing the budget for service improvements in the targeting sectors. Such participation and commitment by the local governments hold much potential for sustaining the achieved project benefits.

In general, the service provisions in the intervention areas in the agriculture, health and water and sanitation sectors witnessed significant improvements in quality and accessibility. And found that the project was relevant to the needs and priorities of the target groups and responsive to government policies and strategies related to good governance and the protection of essential services. It has also been confirmed that the project has been less costly and effective in delivering the desired outputs. Promising trends have also been observed in sustaining what has been gained from the SA project.

## **6. Impact**

The intended impacts of the project related to changes in the practice and behaviour of service providers and service can fully be observed and assessed in a longer time frame. On the service users' side, changes were expected in claiming their rights and holding service providers accountable for what they are doing. On the service providers' side, changes were expected to realize their duties and obligations and improve their behaviours when dealing with service users. During our assessment, clear trends towards the desired impacts have been identified. Effects that can already be observed include increased dialogue between service providers and service users; coordination and networking among the local government, PADet and SACs, increased capacity of service users and service providers; increased partnerships among CBOs, citizens group and the implementing organization and increased participation of vulnerable groups like the elderly, PLWHAs, people with disabilities, women, and the youth.

## **7. Sustainability**

Sustainability considerations have been incorporated in the project's design, emphasizing issues like building the capacity of service providers, government officials, women associations, youth forums and associations, farmers' associations, and other CBOs, by providing various training programs and facilitating meetings between stakeholders. It is also highlighted in the project document that the different actors involved in the planning, implementation and monitoring process of the project will develop ownership and capacity to pursue the accountability goals, they are expected to continue to implement the social accountability program in their respective communities including (a) continue the use of social accountability tools to assess the quality, access and equity of essential service delivery, and (b) conduct regular interface meetings between service users and service providers after the phasing out of the project.

Most of the sustainability issues above have been promoted in the project's implementation process, and it has been confirmed that the project has put an appropriate sustainability strategy in place. Besides, the sense of ownership among the citizen groups and government stakeholders that have been developed in the course of project implementation, the relevance and appropriateness of the project to the citizens' needs and government policies and strategies, the active involvement of citizens group and service providers in the joint planning, monitoring and evaluation of the project and the local institutional and human resource capacity building efforts being undertaken may help ensure the sustainability of the project. Most of the results achieved in terms of increased institutional capacity and improved coordination among stakeholders are likely to survive the phasing out of the project support.

In general, the SA project sustainability is highly promising. On the citizens' side, the project target groups (women, youth, PLWHA, people with disabilities) and the

community members have been receiving capacity building on social accountability and its tools. The training makes them an informed public capable of holding the government accountable. There is evidence that communities have formed SACs at woreda and kebele levels and developed them. The SACs have been trained on using accountability monitoring tools such as Community Scorecard (CSC) and Citizens Report Card (CRC). The councils have effectively carried out their roles of pressing for accountability of duty bearers from the grassroots to the woreda level. The knowledge gained by the communities, the formed SACs, and the ability to apply CS and CR Cards cannot be reversed in most areas where the project has been implemented.

Raising awareness and altering the mindset of communities is crucial for any significant changes to be sustained. In this respect, the project adequately addressed the issue of adequately informing the communities on the project funding cycle and preparing the communities and local government for taking over the project management. This has been confirmed because some of the targeted groups revealed that they had been informed about the exact time when this project expires and does know what sustainability and exit strategy is in place regarding the SA project.

## **8. Lessons learned**

### ***The primary lessons learnt from the project include:***

- The project introduced community contributions for improving water, agriculture, and health services, and it was found successful. This shows that if there is proper dialogue, transparency, and accountability, the community is willing and committed to participating in developing interventions to improve their lives.
- The project has engaged local institutions like Iddirs youth and women's associations in the efforts made to empower service users and hold service providers accountable. In addition, the project has established SACs in all project woredas and kebeles in which citizens groups and local government representatives are represented. These approaches have been instrumental in mobilizing the community towards the project goal and objectives.
- The project has been participatory with high levels of accountability and transparency. Government partners are actively involved in all stages of the project cycle: project planning, implementation, monitoring and evaluation, and capacity-building training programs. On top of these, service providers and service users had interface meetings and a series of dialogues on service improvements. This approach helped partners develop trust and confidence among themselves and the project to be cost-effective and sustainable.
- Empowering the grassroots community played a critical role in improving essential services more sustainably.
- The project was inclusive. Disadvantaged groups like PLWHAs, people with physical disabilities and women were engaged in the implementation and



decision-making processes of the project. This helped to identify the gaps and their unique needs and priorities.

- It has also been witnessed that the community members are responsive to meetings and eager to access information on matters that affect their livelihoods. Working with the local government systems from the grassroots level upwards to the woreda level is crucial for success and sustainability.
- The project developed the excellent practice of positing the Joint Action Plan and the project's gains in the service centers' [Health center, water and sanitation office and agricultural office] notice board. This practice helped promote empowerment, transparency, confidence, and eagerness among critical stakeholders. Due to this approach, citizens' capability of asking for service access, quality and keeping the service provider account has been increasing from time to time.
- The project is unique in bringing service users and service providers together, preparing action plans jointly and reviewing the action plans regularly. This made service users empowered, and service providers responded to the service users' demands.