

COMMUNITY MONITORING FOR ACCOUNTABILITY IN HEALTH: REVIEW OF LITERATURE

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**Accountability and Monitoring in Health Initiative
Public Health Program**



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Community monitoring for accountability in health: review of literature.

1. INTRODUCTION

This report was written as a background document for the convening: “Practitioners Convening on Community Monitoring for Accountability in Health”, which was held in Johannesburg, South Africa from 18th – 20th July 2011. The convening was organized by the Accountability and Monitoring in Health Initiative (AMHI) of the Open Society’s Public Health Program (PHP), in close collaboration with an advisory group¹ of four experienced practitioners from Guatemala, India and Zimbabwe.

The review included both indexed publications and grey literature. Documents were searched using the following key words:

- Community monitoring
- Social accountability
- Community monitoring AND social accountability
- Citizen monitoring AND public health policies
- Citizen participation AND social accountability

Indexed publications were identified through academic search engines (PUBMED, EBSCOhost). Grey literature were searched through “Google” and knowledge exchange website ELDIS (www.eldis.org). Books were identified through ELDIS and CEGSS’ library.

Team members at Centro de Estudios para la Equidad y Gobernanza en los Sistemas de Salud-CEGSS contributed during literature search. Identified materials were reviewed by Walter Flores, who also wrote the report. AMHI provided the financial support to produce this report.

This report is organized as follows: the initial section is a review of key concepts, which is followed by a summary and analysis of four conceptual frameworks related to community monitoring and social accountability. The next section reviews implementing approaches, followed by a section on impact and outcomes in community monitoring and social accountability. The last section sets the conclusions out of the literature review.

2. KEY CONCEPTS

2.1 Accountability

Accountability of public officials has been addressed for a long while, through state-centered mechanisms. The literature classifies the traditional accountability mechanisms as vertical (elections) and horizontal (internal checks and balances within government and state institutions).

¹ Advisory Group members included Abhijit Das (CHSJ, India), Abhay Shukla (SATHI, India), Rene Loewenson (TARSC, Zimbabwe) and Walter Flores (CEGSS, Guatemala)

Accountability is comprised of two distinct elements: a) Answerability: the need for descriptive account of and justification for public actions and b) enforcement: the need for mechanisms to sanction unsatisfactory actions or justifications of those actions (Schedler 1999). These two elements must go together because answerability without penalties for low performance or inadequate justifications leads to frustrations and citizens lose faith in the entire process (Joshi 2007).

Responsiveness should also be differentiated from accountability. Whereas accountability implies following rules and procedures and reaching certain goals, responsiveness requires that public officials should be responsive to the needs of ordinary people, to be fair and listen to divergent views and to follow a transparent process while deciding on competing claims (Goetz & Jenkins 2004).

Although state-centered accountability is present in most countries, there is a large body of literature describing the limitations and failures of traditional accountability. Sarker & Hassan (N.D.) summarized four problems with state-centered accountability: a) states are changing rapidly and non-state actors are more and more prominent, b) elections are held periodically and if citizens want to give their verdict on incapable or negligent authorities, they have to wait until the next election, c) because government operations are too many, it is difficult for those formal horizontal mechanisms of accountability to oversee all operations and d) the emergence of a market approach to accountability, in which public officials must be subjected to the pressures of the market or business principles to generate responsiveness and citizens are converted to “customers”.

Joshi (2007) analyzes accountability from a key question: How can those who exercise public authority be made accountable to the people who have granted them the power to act on their behalf? The author notes that responses to that question have emerged in the last decade from different perspectives. First, New Public Management (NPM) proposes the separation of policy-making and implementation functions and establishing performance contracts and customers service agencies as part of the formal accountability mechanisms. Secondly, the World Development Report 2004 provides as a central message that public services can be improved by accountability mechanisms between policy makers, providers and citizens. The third perspective promotes that accountability to services for marginalized populations can be improved through direct citizen’s participation in formal spaces. This participation deepens democracy and rationalizes the state.

2.2 Social Accountability

Due to the limitations and failures of state-centered methods of accountability, there has been, since the last decade, a call for the need of civic engagement in accountability processes. Social accountability is defined as “an approach towards building accountability that relies on civic engagement, i.e. in which it is ordinary citizens and/or civil society organizations who participate directly or indirectly in exacting accountability” (World Bank 2004, page 1).

Social accountability is now a prominent approach to different areas such as development effectiveness, improving governance and empowerment (Malena et al 2004). There are now theoretical frameworks, research, training manuals for practitioners and many other actions around social accountability. Although theorists and practitioners agree on the importance of civic engagement, the mechanisms of engagement and the wider goals of such engagement differ among them. These differences will be addressed under conceptual frameworks.

2.3 Accountability in the right to highest attainable standard of health

In the case of the right to the highest attainable standard of health, accountability is referred to as “the process, which requires government to show, explain and justify how it has discharged its obligations” (Potts (N.D), page 13). As part of such process, it is also important that if governments or their agents have failed to fulfill the obligations, rights-holders are entitled to effective remedies to redress failure.

2.4 Social mobilization

The collective action of citizens towards a common purpose or goal is referred as social mobilization. In many situations, social mobilizations by citizens are understood as a symptom of failure of democracy. However, there is empirical research demonstrating that social movements and social mobilization, in general, play a key role in building more responsive, accountable and pro-poor states (Thompson & Tapscott 2010). Human rights and democracy are made real by claims and the collective action of disenfranchised groups. Democratic practices are also strengthened when organized citizens demand the fulfillment of rights, mobilize pressure for policy change and monitor the performance of governments. In addition, the mobilization of citizens benefits the proper functioning of democratic institutions (Coelho & von Liers 2010).

Since social mobilization seeks to change the status quo by confronting powerful elites, there are risks for those citizens engaged in social movements. Citizens may be exposed to different type of repression, including physical violence. In many cases, social movements resort to civil and political rights and the alliance with the media to protect them against repression.

2.5 Invited spaces for citizen participation

Many countries, as part of decentralization and democratization processes, have created different spaces for citizens’ participation (such as participatory budgeting, local councils, and participatory consultations). All of these “spaces” have been created by state authorities and, in most cases, the state also sets the rules of the game for the participation, hence the name of “invited spaces”. Although these spaces are, in many instances, controlled by the state, they are an opportunity for poor and marginalized citizens to engage in policy-making and debating allocation of resources.

However, there is plenty of research demonstrating that such spaces do not reach its potential if additional measures to reduce “asymmetrical power” are not in place (Flores & Gómez 2010). Measures to reduce asymmetries in those social actors participating

include development of skills among citizens, the training of public officials who will lead and facilitate the work and resources to subsidize the participation of marginalized citizens (Cornwall & Coelho 2007). Without subsidies or resources to support the mobilization and actions of citizens, the high opportunity cost of participation for the poorest and marginalized puts them out of the participation. In such circumstances, spaces for debating public policy and deciding resource allocation might exacerbate inequity and legitimize social exclusion (Flores & Gomez 2010).

2.6 Community monitoring for accountability in health

The Accountability and Monitoring in Health Initiative (AMHI) from the Open Society's Public Health Program defines community monitoring in health as: "systematic documentation and review of the availability, accessibility and quality of health services against specific government commitments or standards by actual beneficiaries of services, for the purpose of doing advocacy with providers and policy makers to improve the services".

Community monitoring understood as above is a mechanism for ensuring greater government accountability and transparency in health care to its citizens at the local, national, regional and global levels.

2.7 Engaging with state officials and providers

Social change involves complex coalitions that include intellectuals, the media and other actors in addition to social movements (Fuentes 2010). In many cases, actors within the state become allies of social movements, opening opportunities for engagement and protecting the work of social movements. There is therefore a need to establish an alliance with actors within the state to bring about changes (Gaventa 2008; Borras & Franco 2010; Ilkkaracan 2010).

Joshi (2007) argues that many accountability initiatives that emphasize direct action by citizens, actively bypass political institutions and standard politics. It is true that, in many cases, political parties are not the champions on transparency and accountability; however, they are part of the formal political system that must generate the expected reform to achieve a sustainable and effective response to citizens' demands. In addition, the historical evidence of successful policy-reforms always shows an alliance between social movements and key politicians (Loewenson 2010). For sustainability of community monitoring processes and to advance the gains for citizens, there is a need to understand the process of political bargaining and dealing with politicians and political parties.

2.8 Rights based approach to community monitoring

The World Health Organization states that a human rights-based approach (HRBA) aims to support better and more sustainable development outcomes by analyzing and addressing the inequalities, discriminatory practices and unjust power relations which are at the heart of development problems.

Applying a human rights-based approach, specifically to health, aims at realizing the right to health and other health-related human rights. When a HRBA is applied, health policy making and programming are guided by human rights standards and principles and aim to develop capacity of duty bearers to meet their obligations and empowering rights-holders to effectively claim their health rights. Also, human rights standards and principles - such as participation, equality and non-discrimination, and accountability - are to be integrated into all stages of the health programming process: assessment and analysis, priority setting, programme planning and design, implementation, and monitoring and evaluation.

A human rights-based approach gives importance not only to outcomes, but also to the processes. It also focuses on capacity development, both of duty bearers to meet their obligations and of individuals to claim their rights. Capacities include skills, abilities, resources, responsibilities, authority and motivation.

Duty-bearers in relation to health include policy makers, hospital managers, health professionals, inspectors and parliamentarians, among others. The work with rights-holders seeks to empower individuals and communities, particularly marginalized groups, to understand and claim their rights. In order to effectively claim their rights, rights-holders must be able to access information, organize and participate, advocate for policy change and obtain redress.

2.9 Power and power relations

Power lies at the center of social relationships. However, there is no single concept of power that would capture its meaning and would have agreement among theorist and practitioners. Instead of attempting to present a definition of power, it is more useful to understand its attributes and why it is important for development work. For instance, power has the ability to produce changes in society. Those changes, nonetheless, can be either the product of conflict or consensus (Haugard 2002).

From the perspective of conflict, power is a determinist force “possessed” by an actor, and it can be taken away by another through struggles that may even be revolutionary processes (Poulantzas 1968). Actors can legitimize their power and dominance through social structures (religion, formal education, laws, economic system, stratifying social groups by caste, race and others) that reproduce their interests and create relations of dependence (Clegg et al 2007).

From another perspective, we can also create and multiply power through consensus. Power is based on the human capacity to act together. Therefore, power does not belong to only one actor but rather to a social group and is generated through the creation of agency (Arendt 1970). The idea of power through consensus and agency should not be confused with naïve perceptions about social relations. For instance, Flores et al (2009) argue that “the inclusion of traditionally excluded groups in decision-making processes does not create agency unless there are actions or policies that improve the material conditions of this population. Likewise, assigning resources to improve the status quo can generate opposition and conflict with those actors who

benefit from the existing power structure, which also interferes with creation of agency” (page 39).

A third perspective looks at power as a dynamic force and a capacity in latency (Morris 2002). Power is expressed as “influence” in decision-making. From this view, there are no powerless individuals but people who are yet to become conscious about and activate their latent power to exercise influence over issues of their concern. The above view of power as a “latent” force that becomes activated or released is useful to explain recent social changes in several South American countries. The “piqueteros” movement in Argentina (Benclowicz 2006), worker’s unions and peasants in Bolivia (Regalsky 2006) and the indigenous movements in Ecuador (Pachano 2005) are all examples of how traditionally social excluded groups became “conscious” of their latent power, and activated it to generate a shift of power resulting in a change of governments and social policies.

The recognition of social, economic and cultural rights by many nations provides a vehicle to address the redistribution of power. Socially excluded citizens must become aware of that power and activate it through executing the legal framework. Different strategies and actions must be implemented to activate the power of socially excluded citizens.

2.10 Empowerment

Empowerment is central among the concepts and frameworks of many organizations working in social accountability, community monitoring and human rights. Despite this, it is a highly contested concept and its interpretation reflects very different ideological stances that have direct implication on the praxis of those organizations.

The World Bank (N.D) defines empowerment as “the process of increasing the capacity of individuals or groups to make choices and to transform those choices into desired actions and outcomes”. De Vos et al (2009) argue that many definitions prior to the World Bank involvement with empowerment had, as a central feature, the struggle to change power relations in society and access and control over resources to overcome the marginalization of citizens. The authors note that those features “conspicuously” disappeared from the World Bank definition.

As stated earlier, the way one conceptualizes “empowerment” influences one’s practice. For many organizations, empowerment is reduced to use the current language in development work without changing the same interventions that they have been implementing for many years. For others, it means to have one or several meetings with “beneficiaries” to explain them the health project that is about to be implemented.

Other authors and practitioners argue that empowerment is not a component in health and development projects but it is the dynamic process that guides individual and collective action to challenge and change the status quo. This process requires an understanding of power relations in any given contexts and setting strategies to deal with conflict and to sustain collective gains (Flores et al 2009; De Vos et al 2009).

3. CONCEPTUAL FRAMEWORKS

3.1 Framework for Public Accountability (World Bank)

This framework was published in the World Development Report 2004: “Making Services Work for Poor People”. The basic argument of the framework is that despite all the efforts to finance and deliver services for the population, particularly the poor, there always are problems with leakage of beneficiaries, political clientelism, corruption, poor quality of services and other problems. Although countries have different mechanisms in place to avoid the above problems, those mechanisms are frequently slow and ineffective. Citizens can demand accountability to correct problems but this usually is a long process because after voicing concerns to state authorities, there should be actions from authorities to the compact (contract) with providers of services. In this traditional accountability mechanism, citizens communicate with public authorities and then authorities with service providers. The framework names the above process the “long route of accountability”.

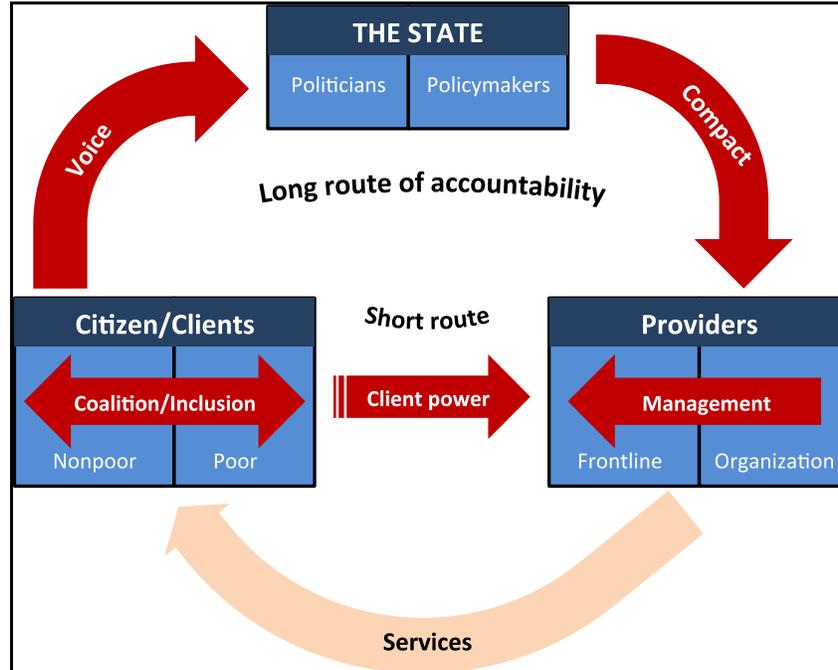
To deal with the above failures in accountability, the framework proposes a “short route” that puts citizens as clients in direct communication with service providers, particularly those at the frontline. Through this mechanism, the poor exercise “client power” to demand accountability from service providers. To carry out these demands, clients make use of participatory social accountability tools (participatory budgeting monitoring, citizens’ score cards, etc.). In addition, the quality of compact (contracts) also needs to be improved through clarity in delegation of tasks, monitoring of performance, including the introduction of incentives to outcome-oriented performance and effective and immediate sanctions for poor performance.

Since its publication, this framework has influenced a good deal of recent work on social accountability and community monitoring.

Despite its current popularity, several authors see major limitations in that framework. Joshi (2007) states that a framework such as the World Bank’s and others derived from it are appealing to a large sector of policy-makers, cooperation agencies and practitioners. This is so because it promotes formal accountability mechanisms and direct citizens’ actions. The framework also presents a simple way of thinking about accountability because it does not address issues of context. But this simplicity in the framework is a major weakness and risk because it does not address the fact that accountability occurs in complex political and social environments of developing countries.

Newell & Wheeler (2006) consider that the fact that the World Bank’s accountability model has been transplanted in many different settings with little regard for local context is problematic. They add that such frameworks as such motivate naïve ideas that implementing technocratic reform processes can generate pro-poor policies without challenging power inequities.

Figure 1. Long and Short route of Public Accountability



Source: World Bank (2003)

The World Bank framework has also been criticized for its emphasis on engaging formal procedures and methods to demand accountability from providers. Although this is important, there is a risk of creating an atmosphere of mistrust in public officials (Joshi 2007). In many cases, frontline providers have very little (if any) control on availability of resources and they also lack a continuous training that would improve quality of services. Exercising demands on a provider that does not have the power to respond can lead to frustration and demotivation.

In contexts in which frontline providers are disempowered, an over-emphasis on supervision and accountability demands may not be well received. There is a need to put trust on service providers, particularly those at the frontline (Joshi 2007).

3.2 Generic Framework for Social Accountability

The so called “Generic Framework for Social Accountability” was developed by the National Institute of Administrative Research, India (N.D.). The framework is an adaptation of the World Bank’s framework for public accountability described above. The adaptations in this framework have two main characteristics: a) it is simpler than the original World Bank’s framework and b) it puts emphasis on voice and compact, which are two components of the original framework.

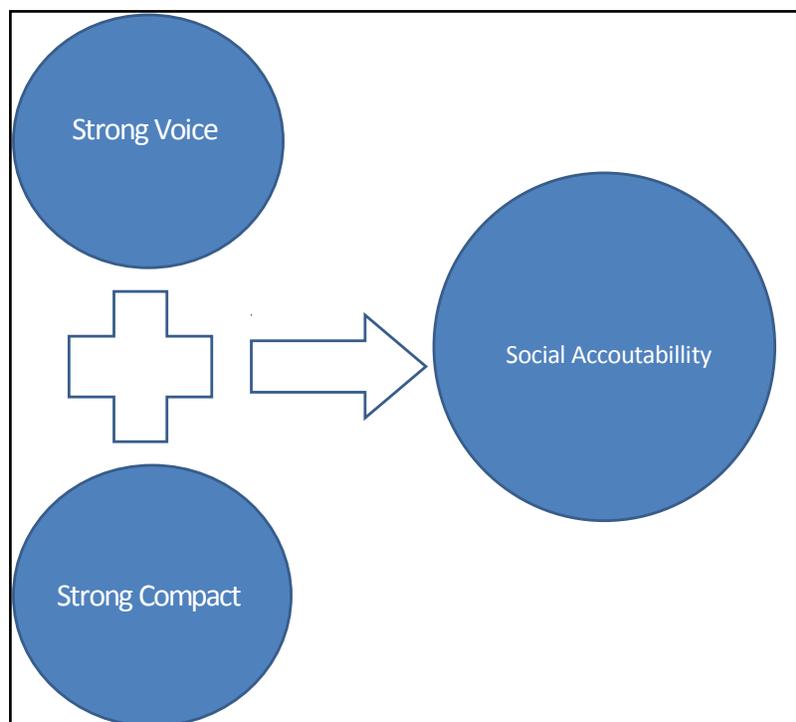
The Generic Framework has two components: strong voice and strong compact. The strong voice refers to facilitating and strengthening citizens’ voice. This entails “informed

and mobilized citizenry that can draw upon platforms for engagement to make accountability demands on the system” (page 6).

The strong compact refers to the use of traditional state-centered mechanisms to improve delegation of tasks and creation of adequate incentives structures to ensure that providers deliver services properly. In this sense, “strong compact is achieved when there is a system of institutions designed in a manner that makes accountability structurally possible” (page 6).

The framework makes explicit that the two components must work together to deliver effective social accountability.

Figure 2. Generic Framework for Social Accountability



Source: National Institute of Administrative Research, India (N.D.)

The Generic Framework for Social Accountability also addresses tools and mechanisms to strengthen voice and compact. For citizens’ voice, the framework does not present new tools but recommends the variety of tools already available (social audits, citizens’ score cards, participatory budget tracking, etc.). It does state, nonetheless, that there should be clarity about the strategic focus being pursued since available tools can be used for different purposes such as generating citizen participation, checking corruption, capacity building or generating information for policy lobbying and advocacy. So the most appropriate tool should be selected.

An important contribution of the framework is a list of preconditions to implement effective interventions to strengthen citizen's voice. These are presented in the table below.

Table 1. Preconditions for success of strengthening citizens' voice

Information generation, access and dissemination	Community mobilization and capacity building	Grievance redressal	Institutionalization
<ul style="list-style-type: none"> - Regular, reliable and relevant information. - Freely accessible in an easy to understand way. - Performance benchmarking to guide social accountability efforts by citizens, and also help in effective planning and management of the service. - Dissemination and awareness raising. 	<ul style="list-style-type: none"> - Mobilizing citizen action for accountability on the basis of the information. - Needs presence of NGOs, volunteers or state facilitation. - Building citizen capacity for accountability action. 	<ul style="list-style-type: none"> - State apparatus for grievance redressal and follow up action. - Citizens need to have the confidence that their action can lead to change. 	<ul style="list-style-type: none"> - Translating individual corrective efforts into sustained improvements in accountability. - Durable provisions that facilitate citizen action for accountability.

Source: National Institute of Administrative Research, India (N.D.)

It is clear that the above framework has an emphasis on citizens' voice. It is important to be aware of the challenges that it entails. Joshi (2007) argues that an over-emphasis on voices as the main mechanism to demand accountability imposes pressure on poorer or marginalized citizens since they are in the weakest position to challenge elites. In many situations, they have to openly confront actors holding public power. In addition, the poor and marginalized do not have the resources that can make their voice strong such as connections with the elite, education, time and money.

Initiatives promoting citizens' voice must be accompanied by interventions to support poorer and marginalized population groups and to monitor that they are effectively being empowered and not being put at risk.

3.3 Relationship between Rights, Resources and Accountability

This framework was developed by researchers at the Institute of Development Studies, Sussex University, UK. The authors present the framework as an effort to facilitate a grounded empirical assessment of which accountability strategies work, when and for whom. The framework has an emphasis on the analysis of relationships rather than prescriptive causalities. The authors also add that their framework is an antidote to the inappropriate export of accountability models from one setting to another without sufficient regard to key political, social and cultural differences (Newell & Wheeler 2006).

The framework addresses the relationship between rights, resources and accountability. Resources are understood as a generic term (natural resources, livelihood resources, etc.). Access to resources involves struggles to realize social and economic rights.

Resources are important to the livelihood of the poor. Issues of access and entitlement are therefore part of relationships of power and conflict. The framework states that the deprivation of resources is predominantly an economic issue. However, gaining the right to access those resources and the right to claim accountability is a political project centralized on the exercise of citizenship.

In this framework, citizenship relates to the claims that people believe they should be able to make of institutions, as well as their entitlements to access to material resources. Citizenship is also central to the framework because it confers material and political rights and access to resources and channels of representation in decision – making processes. Even with an increased awareness of rights, marginalized and excluded groups are unlikely to consider themselves as true citizens if they are unable to access key resources such as health care, adequate housing and clean water. Lack of access to resources denies substantive citizenship

The framework also presents rights as a tool of accountability. Disenfranchised and marginalized groups use rights claims around key resources in order to demand greater accountability from the state, private sector and civil society actors.

The framework states that rights are not *de facto* accountability tools. To make them tools for accountability, rights should be converted into a language and actions allowing implementation of processes of claiming, mobilization and struggle.

Another important feature of this framework is that it does not present relationships between rights, resources and accountability as static but highly dynamic. “Mobilization to claim rights can produce new forms of accountability, just as the ability to claim rights and have them realized assumes relations of accountability between the state and citizens” (Newell & Wheeler 2006, page 5).

This framework warns that there is a risk in carrying-out efforts to politicize claims by invoking right claims. In some cases, the attention of right violators is directed to vulnerable groups who suffer the recrimination of powerful actors. This issue is similar to that discussed earlier; promoting the voice of the poor may place the poorest and marginalized at risk while confronting power.

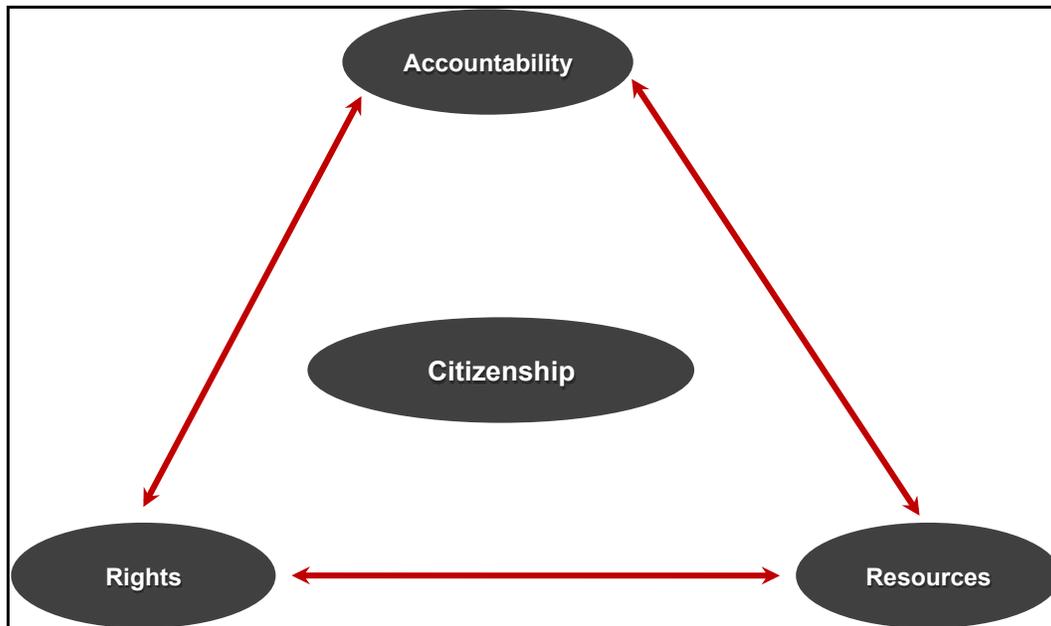
Since this framework is more analytical than implementing, it does not propose specific tools to carryout community monitoring or social accountability. However, the framework is applied to the analysis of different case studies that have used known approaches and tools such as social mobilization, participatory planning, monitoring and evaluation.

3. 4 Accountability and the Right to Health

This framework was developed by Helen Potts while she was at the Human Rights Centre, University of Essex, UK. It is based on four steps. The first one starts when governments implement accountability processes into all health policies. The second step is the continuous monitoring of the outcomes of policies being implemented. The third step is the actual implementation of mechanisms to analyze data to generate

explanations, justifications and the assessment of deficiencies and identifying ways to improve performance. These mechanisms can be formal or informal. The fourth step is the application of remedies if needed.

Figure 3. Relationship between Rights, Resources, Accountability and Citizenship at the center



Source: Newell & Wheeler (2006)

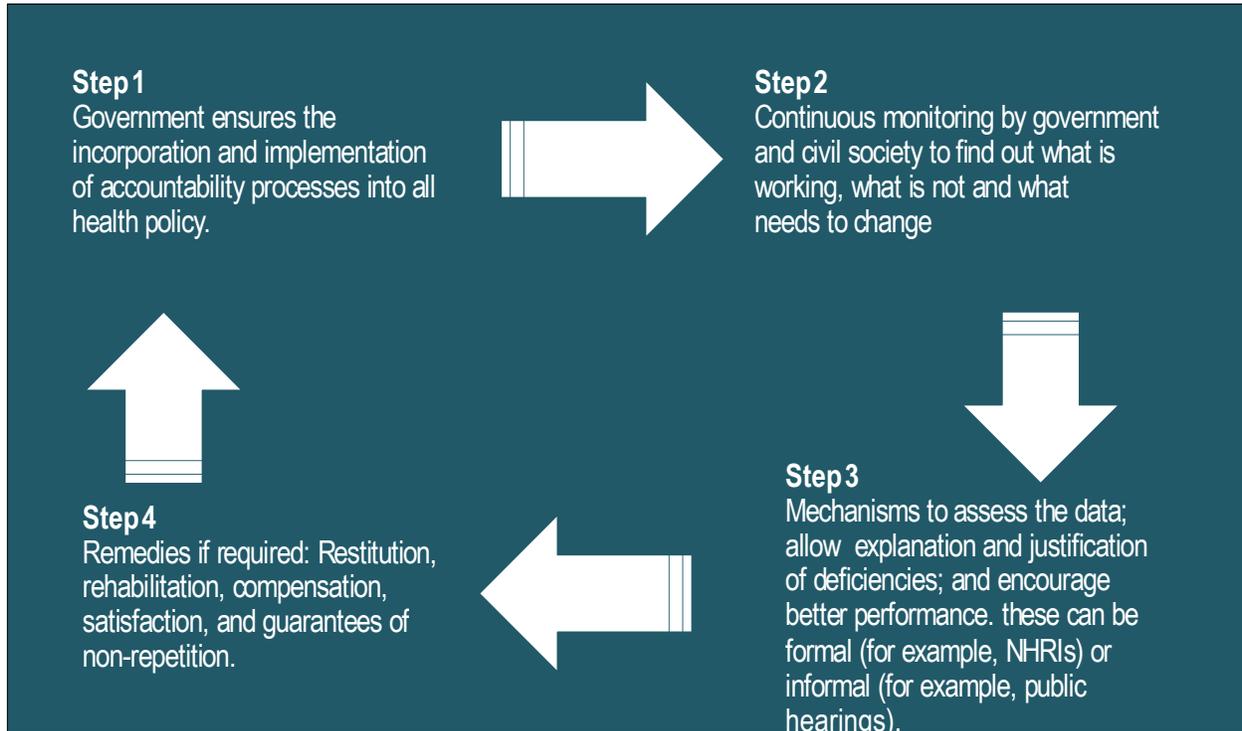
The framework states that in order to implement effective accountability processes for the right to health, there should be three essential elements: monitoring mechanisms, remedies and participation.

In other frameworks for accountability, responsiveness is either part of accountability or even considered as loosely synonymous. The right to health accountability framework explicitly states that concepts such as responsiveness, responsibility, answerability or evaluation are not the same or equivalent to accountability because none of these concepts include a legal mandate to explain and provide remedies.

The emphasis in this framework is on rights and obligations. Different from other frameworks, it accepts that the monitoring be carried-out by the government itself, civil society or a combination of both. Social accountability is one out five different accountability mechanisms; the others being judicial, quasi-judicial, administrative and political accountability.

In terms of tools, this approach does not present new or different tools than the well-known tools for community monitoring and social accountability. The framework bases its analysis on case studies that have applied community monitoring tools and other social accountability tools.

Figure 4. Right to Health Accountability Process



Source: (Potts, N.D.)

4. IMPLEMENTING APPROACHES

Implementing approaches refers to strategies, mechanisms or preconditions that researchers and practitioners recommend to enhance the potential of implementing successful community monitoring and social accountability initiatives. The review of the literature identified only one specific approach that was presented as such: citizen-centered approach. A second group identified was general recommendations on implementation. The third group identified was issues that authors are presenting as challenging situations to which there is still not a clear approach on how to address them. The specific approach and the two groups of general recommendations and emerging issues are presented below.

4.1 Implementing citizen-centered approach

Traditionally, development work has been implemented following the dichotomy of state and citizens. There are many parallel and separated interventions aimed to state institutions and others aimed to citizens. By implementing the intervention as above, there is a detrimental effect for the purpose of contributing to build the relation between states and its citizens. Having that relation is crucial, not only for development policy but also for social accountability and the delivery of effective and equitable public services (Gaventa & McGee 2010). This implies that social accountability cannot occur in a context of confrontation and polarization between citizens and the state.

Gaventa (forthcoming) states that many approaches to development and democracy understand citizens in a passive and responsive role that include being voters, beneficiaries, consumers, users and choosers of state services. He adds that although citizens can be all of the above, the most important fact is that citizens can be active agents of change deciding their own future in many different ways.

A citizen-centered approach puts people as right bearers at the center of development and state building processes. In such an approach, citizens are actors with knowledge, voice and capacity to mobilize to contribute to solving problems either in their own communities, together with their governments or in global affairs (Gaventa & Mayne 2008).

It has to be clear that citizenship is more than a legal process declaring people as bearer of rights. Citizens must become individuals with agency, capable of claiming their rights and acting for themselves. This goal is a major challenge because in most cases, poverty and social exclusion is accompanied by citizens unaware of rights that lack the knowledge to interact with the state. They frequently also feel a lack of capacity to act.

Because of the above, under a citizen-centered approach, a first step and a prerequisite for social participation is to gain political knowledge of rights and agency. From over a decade of researching and implementing interventions on citizenship (Friedman 2010; Cortes 2005; Houtzager et al. 2003), there are three lessons of relevance: a) citizenship is learned through action and it requires time and experience to be developed, b) benefits of citizen action is accumulated over time and enhancing the skills in one area strengthens the possibilities of success in others, and c) developing citizens' capabilities is an intermediate outcome that is often ignored. It should be an important milestone to measure in development work.

It is clear that the above is an aspiration that imposes challenges. It cannot be assumed that implementing a citizen-centered approach automatically leads to positive outcomes. An extensive review of case studies from 20 different countries revealed that for every 3 cases of successful outcomes related to citizens' engagement, there is one case in which outcomes were negative. Those outcomes ranged from feelings of disempowerment while dealing with bureaucratic and non-responsive states to extreme situations with violent reprisals against citizens that challenged the status quo (Gaventa y cols.-forthcoming).

4.2 General recommendations on implementation

Social accountability mechanisms should not work in isolation of other state-centered mechanisms and they should complement formal horizontal mechanisms (Sarker & Hassan, N.D).

There are many authors that stress the need for institutionalizing mechanisms for social accountability. Among them, Goetz & Jenkins (2001) have listed five institutional requirements that are needed for social accountability to work:

- a) legal basis of civic groups' participation within institutions of public sector oversight
- b) civic groups' continuous presence throughout the entire process
- c) well-defined procedures for the conduct of encounters between citizens and public sector officials
- d) civic groups' access to public information and
- e) civic groups' right to dissent and report directly to legislative bodies.

Other authors stress that this emphasis on formal procedures and institutionalization has some risk of over-seeing the relevance and influence of informal mechanisms of accountability. In many cases, the informal mechanisms (clientelism, capture by elites, etc.) are negative for accountability. However, there are also informal procedures (i.e. council of elders and other informal community authorities) that contribute to dialogue, trust and responsiveness, all of them centrally to social accountability (Hossain 2009; Pare & Robles 2006).

Civic organizations and the state must work together. "While it is erroneous to depend exclusively on state horizontal mechanisms as there could be instances of manipulation, it is equally not desirable to depend exclusively on civic organizations, as their efforts could be thwarted by the state "(Sarker & Hassan, page 390).

The possibility of civil organizations working together with the state will nonetheless, depend on specific contexts. The emphasis of many approaches on formal and state-centered procedures may not be motivating for some civil organizations since it may reinforce the reliance of the poor and marginalized on the very state institutions that have demonstrated to be ineffective and non-responsive to the needs of the poor (Newell & Wheeler 2006).

4.3 Emerging issues to be taken into account

4.3.1 Civil society as service providers

In most cases, community monitoring is aimed to demand accountability from state providers of services. However, as a result of privatization and other reforms, civil society themselves are also service providers in many countries. Jayal (2008) states that research on social accountability concentrates only on cases in which the state is the provider of services and excludes situations in which NGOs are service providers. He argues that since it is fairly common to have NGOs as providers in many developing countries, their exclusion from social accountability research is a major bias. If many citizens have NGOs as their providers of health services, can they also benefit of successful interventions, strategies and tools related to community monitoring for social accountability? Or even a more basic question: does tools and approaches for community monitoring work when the provider is a non-state party?

4.3.2 Multi-level demand for accountability

Jayal (2010) notes that most work around social accountability is restricted to the local level and in many cases to a single issue. It is clear that in order to generate a response from the state that is effective to improve living conditions, fulfilling rights and sustaining policies and programs in the long run, there is a need to work upwards and advocate for changes at the health system level. This implies a major challenge because it will require skills from citizens to deal with higher governmental levels and also resources to carry-out social mobilization actions. It will require, in addition, a strategic view of accountability actions that will certainly demand alliances with other social actors and specialized sectors of social movements.

4.3.3 Combining social accountability with legal empowerment

Maru (2010) states that many social accountability interventions are combined with social mobilization and other strategies that bring pressure to state parties. However, those strategies are not always sufficient or effective to generate response from providers or other public officials. In many cases of failed accountability interventions, the key obstacles have been a lack of remedy or mechanisms to redress the identified problems. The author argues that adding a legal component, such as “legal empowerment”, would substantially strengthen social accountability since it will address a legal course of action to enforce remedies from state institutions. Legal empowerment programs involve lawyers that train and advise a large frontline of community paralegals. Most of the work and relation with communities is carried-out by this group of paralegals.

5. IMPACT OF SOCIAL ACCOUNTABILITY AND COMMUNITY MONITORING

This review of the literature identified divergent positions and understanding about impact among authors. While some authors address impact in terms of efficiency gains, use of services and improved health status, others talk about outcomes in relation to citizens’ participation and gains in capabilities, democratic practices and trust.

There are also authors and organizations that explicitly or implicitly refer to social accountability and community monitoring as “development interventions”. By seeing them in this way, there is a tendency to carry-out evaluations to identify generalizable solutions that could be transferred to any context. There are other authors that their evaluation is more concerned with identifying contextual factors and examining relationships between key variables to explain why strategies and interventions succeed or fail in achieving improved equity, pro-poor policy reforms or fulfillment of rights.

During the review of the literature, three different groups of studies addressing impact and outcomes of social accountability and community monitoring were identified: a) small scale studies b) large scale and longitudinal case studies and c) field experiments. Each group is summarized below.

5.1 Evidence from small-scale interventions

The most common literature found is on small-scale studies and interventions. The majority is available as grey literature and the lesser as indexed publications. Most of these studies are based on anecdotal evidence presenting the positive effects of community monitoring and social accountability interventions. Effects reported range from improved use of services and beneficiaries' satisfaction to increased allocation of resources to public services. Most evidence is presented as life stories, results of health facility surveys and other descriptive approaches.

5.2 Evidence from large scale or longitudinal case studies

This evidence has been published by research organizations that have been working around these issues for many years. Studies come from large scale multi-country case studies or single longitudinal case studies (following the same case for about three years). Many of the published studies are based on participatory research and participatory-action research (DRC-Citizenship 2010; Loewenson et al 2011). Researchers from the Institute of Development Studies UK, applied meta-case study analysis to review over 100 case studies from 20 different countries (Gaventa et al forthcoming). Through this analysis, it was possible to identify that interventions that privilege citizen participation have outcomes that can be classified in a typology of four democratic outcomes: a) construction of citizenship b) practices of citizen participation c) responsive and accountable states and d) inclusive and cohesive societies.

In about 75% of all cases reviewed, there were positive outcomes within the categories described above. There were, nonetheless, also negative outcomes related to participation. Table 2 below summarizes both positive and negative outcomes of citizen engagement.

Table 2. Outcomes of Citizen Engagement

POSITIVE	NEGATIVE
CONSTRUCTION OF CITIZENSHIP	
-Increased civic and political knowledge -Greater sense of empowerment and agency	-Increased knowledge dependencies -Disempowerment and reduced sense of agency
PRACTICES OF CITIZEN PARTICIPATION	
-Increased capacities for collective action -New forms of participation -Deepening of networks and solidarities	-New capacities used for 'negative' purposes -Tokenistic or 'captured' forms of participation -Lack of accountability and representation in networks

RESPONSIVE AND ACCOUNTABLE STATES	
-Greater access to state services and resources -Greater realization of rights -Enhanced state responsiveness and accountability	-Denial of state services and resources -Social, economic and political reprisals -Violent or coercive state response
INCLUSIVE AND COHESIVE SOCIETIES	
-Inclusion of new actors and issues in public spaces -Greater social cohesion across groups	-Reinforcement of social hierarchies and exclusion -Increased horizontal conflict and violence

Source: (DRC-Citizenship 2010)

5.3 Evidence from field experiments

The most recent strand of literature is studies evaluating impact through field experiments applying randomized control trials designs.

Bjorkman & Svensson (2009) carried-out an evaluation of community monitoring through citizens report cards in Uganda. Eighteen community-based organizations (CBOs) in 50 health dispensaries across nine districts participated in the field experiment. Of the 50 facilities, 25 were randomly selected for “treatment” (citizens’ report card) and 25 were designated as control sites for the purpose of measuring impact.

Information for the report cards was gathered through household surveys. The information on the report cards were presented to communities in a two day meeting using a participatory approach and they were encouraged to develop a plan with steps that providers and communities should take to improve service provision. Providers and citizens got together in one day meeting to agree the plan of action. After 6 months, a midterm review was carried-out through a one-day meeting.

The evaluation was carried-out 12 months after. When compared with facilities in the control group, the treatment facilities experienced 19% less nurse absenteeism, between 7 and 10 % higher immunization rates, a 16% higher rate of facility utilization, and a 33% reduction in child mortality.

As it has been discussed in previous sections, contextual factors are crucial to understand how interventions work, for whom and under what conditions. These factors are not known in this study since ethnographic information or any other that would provide information on context was not collected.

Another field experiment available in the literature was carried out by Olken (2007). The experiment involved over 600 Indonesian village road projects and evaluated two

approaches to reduce corruption: top-down government audits and bottom-up participatory monitoring by grassroots organizations. The results of the experiment showed that increasing government audits from 4 percent of projects to 100 percent reduced missing expenditures by eight percentage points. By contrast, increasing grassroots participation in monitoring had little average impact, reducing missing expenditures only in some particular situations. The conclusion was that traditional top-down monitoring can play an important role in reducing corruption.

5.4 Current gaps and issues in measuring impact and outcomes

As stated earlier, most evidence available is from small scale studies relying on anecdotal evidence. It can be anticipated that many organizations and practitioners will continue implementing community monitoring and social accountability interventions. To strengthen the quality of evidence, it would be beneficial that many of those practitioners carry-out systematic data collection and analysis to produce rigorous or improved case studies. Depending on the quality of data and the case studies produced, it could be possible to carryout meta-case study analysis and meta-ethnography.

As stated earlier, many authors agree that citizens' capabilities are central for effective and sustainable community monitoring, social accountability and the strengthening of democracy. However, there is a major gap in relation to measuring those capabilities and the state of democracy. Traditional indicators include fair elections, the rule of law and open media. Researchers have recently proposed that there should be complementary indicators looking at the degree to which democracy fosters a sense of citizenship and how well citizenship is being developed. Those indicators should include awareness of rights, knowledge of legal and institutional procedures, disposition towards action, social organizing skills and the thickness of social networks (Kabeer et al 2010; Nyamu-Musembi 2010).

The growing interest on field experiments to evaluate impact of social accountability interventions is an issue of concern. While the application of rigorous methods to assess impact is a welcome development, there is a risk that complex social and political factors, which are central to accountability, may be overseen. The most cited field experiment on citizen score card (Bjorkman & Svensson 2009) did not include the collection and analysis of data that would provide information on key contextual factors.

Other concern related to field experiments is the interpretations that cooperation agencies, policy-makers and other key actors would make of the findings, particularly if a given study, as the example of the study on corruption in Indonesia described above, concludes that there is no impact in implementing a given social accountability approach. A bold interpretation that supporting social accountability is not worth it or not a priority, might be troublesome for the reasons described below.

In many developing countries (Latin America, South Africa, India and others), accountability and transparency is part of the legal framework. There are specific

provisions to implement transparency and accountability and different fora in which citizens take part. This means that social accountability is a right supported by the legal framework. Hence, evidence from experimental designs is not needed to demand the implementation of effective social accountability mechanisms. There is a need to understand which are the most adequate strategies for a given contexts and what mechanisms can enhance the possibility of success. For that, research that emphasizes process is of benefit. Evidence from experimental design could be beneficial if they are complemented and articulated with ethnographic designs that would provide explanations to the question of how, why and for whom social accountability interventions work.

Participatory-action research (PAR) is an approach that can contribute to the gaps identified above. This approach to knowledge generation emphasizes processes over results. It also involves citizens and health workers in production of evidence and learning. Different experiences on PAR have demonstrated the potential to organize community evidence, stimulate action and challenge the marginalization of citizens. In addition, there are already a considerable number of organizations and practitioners involved in both community monitoring and PAR (Loewenson et al 2011).

6. CONCLUSION OF LITERATURE REVIEW

Out of the four conceptual frameworks identified through the literature search and summarized in this report, there is a clear difference in understanding accountability under a human rights framework involving power relations (Rights, Resources and Accountability Framework) versus accountability as an approach to improve incentives, contracts and responsiveness between “clients” and “providers” (World Bank Framework). These two frameworks also differ on the relevance they put on contextual factors. Whereas the World Bank Framework does not address contextual issues, the Rights, Resources and Accountability Framework relies on context as key explanatory factor.

None of the framework analyzed is specifically on community monitoring for accountability in health. By adapting the strengths of the several frameworks, it would be possible to develop a specific framework.

In terms of tools, the frameworks analyzed do not differ on whether any tools is better than others and all of them recommend or use the existing tools for community monitoring and social accountability.

Many authors agree on the relevance of context. Some others have proposed preconditions that should be in place to ensure effective community monitoring and social accountability. However, a gap in this regard is an approach to assess and monitor contextual factors and to evaluate what types of preconditions are present in a given context. There are examples on how to study contextual factors from both IDS-UK and PAR work. Practitioners could benefit greatly by implementing systematic approaches to study contextual factors in their own settings.

This review identifies that many authors stress the importance of institutionalization. In many cases institutionalization is meant as legal frameworks or legal provisions. It is clear that a legal provision, although important, it is not sufficient or relevant in a context in which the political environment does not support the enforcement of those provisions. Institutionalization should therefore be seen in a wider context than the existence of legal regulations.

The skills and capacity of civic organizations is a determinant issue. To be effective in community monitoring and social accountability, civil society organizations need essential resources such as time, money (for mobilization and other activities), literacy and technical skills. All of these skills may not be available in all settings. Developing those skills takes time and may require a longer process of accompanying civic organizations.

Although it is clear that there should be a minimal set of preconditions towards community monitoring to demand social accountability, it should not be understood that unless there are all desired conditions in place, community monitoring is not worth it or ineffective. Demanding accountability through community monitoring can help to generate that conditions become in place. Putting pressure on the political system might force government and the political class to provide responses. These types of strategies should, nonetheless, be carefully addressed and contextualized, particularly in the context of some fragile states in which citizens' activism can result in security risks.

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