Institutionalizing Social Accountability:
Considerations for Policy

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Abstract

Social accountability mechanisms can contribute to improved governance, increased development effectiveness through better service delivery, and citizen empowerment. However, critical to the success of Social Accountability initiatives is civil society and state capacities, and the synergy between the two. Ultimately, the effectiveness and sustainability of social accountability mechanisms is improved when they are “institutionalized”. This involves two things: first, the state as a ‘willing accomplice’ in the broader accountability project, needs to render its own “internal” mechanisms in a way that makes it structurally amenable to accountability, and second, the state needs to identify and adopt mechanisms to facilitate and strengthen civic engagement and citizen voice. In developing a framework for institutionalizing social accountability, therefore, this paper would stress on these two aspects. The empirical base for the policy recommendations in this paper is the study conducted by the National Institute of Administrative Research, Mussorie, which employed social accountability tools to understand the accountability failures in two of the flagship programs of the current government, namely Sarva Shiksha Abhiyan (SSA) and the National Rural Health Mission (NRHM).
1: Introduction

Social accountability has been defined as an approach towards ensuring accountability that relies on civic engagement, i.e., in which ordinary citizens and citizen groups participate directly or indirectly in exacting accountability\(^1\). In a public sector context, social accountability refers to a wide range of actions and mechanisms that citizens, communities, independent media and civil society organizations can use to hold public officials accountable. Evidence from around the world suggests that social accountability mechanisms can contribute to improved governance, increased development effectiveness through better service delivery, and citizen empowerment.

However, critical to the success of Social Accountability initiatives is civil society and state capacities, and the synergy between the two. Ultimately, the effectiveness and sustainability of social accountability mechanisms is improved when they are “institutionalized”. This involves two things: first, the state as a ‘willing accomplice’ in the broader accountability project, needs to render its own “internal” mechanisms in a way that makes it structurally amenable to accountability, and second, the state needs to identify and adopt mechanisms to facilitate and strengthen civic engagement and citizen voice. In developing a generic framework for social accountability, therefore, this paper would stress on these two aspects.

The paper progresses as follows:

In the rest of this chapter we work towards laying out a generic framework for Social Accountability. We start with defining accountability and situating public accountability in the social contract that citizens share with the state. We then use the conceptual framework for public accountability formulated in the World Development Report 2004\(^2\) to discuss the components of public accountability

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i.e., ‘voice’ and ‘compact’. Next we trace the evolution of thought and practice in efforts to improve public accountability till the current emphasis on citizen engagement and social accountability.

Drawing on the preceding discussion we then propose the framework for Social Accountability as consisting of strong voice in conjunction with strong compact.

In Chapter 2, we contextualize the discussion on social accountability by analyzing the findings of the survey by the National Institute of Administrative Research, Lal Bahadur Shastri National Academy of Administration\(^3\), which employed social accountability tools to understand the accountability failures in two of the flagship programs of the current government, namely Sarva Shiksha Abhiyan (SSA) and the National Rural Health Mission (NRHM). We argue that these failures represent shortcomings in the compact and voice components of public accountability that we introduced in the last chapter.

In the rest of the chapters we substantiate our framework for Social Accountability, and propose ways in which social accountability can be facilitated by state policy. In Chapter 3 we look at how to get the compact right: i.e., addressing institutional design within the state so that the system that obtains makes accountability structurally possible. In Chapter 4 we look at strengthening citizen voice: i.e., what can the state do to facilitate accountability efforts by the citizens. We then identify challenges and vulnerabilities inherent to social accountability efforts in Chapter 5, and propose some policy recommendations to overcome these challenges in Chapter 6.

**Accountability: Conceptual Underpinnings**

Accountability can broadly be defined as the obligation of those holding power to take responsibility for their behaviour and actions. This obligation might stem

\(^3\) See Appendix 2 for details of the survey and methodology
out of a moral-ethical need to account for one’s actions, or out of a legal requirement. It is a relational concept as it concerns the relationship between those that perform an action or deliver a service, i.e., the agent, and those on whom the action or service has an effect, i.e., the principal. In this sense, accountability is the leverage that the principal has over the agent. There are various elements that come together in the notion of accountability, including answerability – the need for justification of actions, enforcement – the sanctions that could be imposed if the actions or justification for the actions are found to be unsatisfactory, and responsiveness - the ability of those held accountable to respond to the demands made.

Public accountability i.e., the need for the state to be accountable to its citizens stems out of the ‘social contract’ that the citizens share with the state. In a democracy, this contract is operationalized when citizens elect a government and invest the elected representatives with the power to govern them. The representatives in their turn, acting themselves and through bureaucrats and administrators are obliged to perform their duties of governance in a manner that keeps the citizens’ interests at heart. There are institutional provisions to ensure that the government respects this contract. On the one hand there are mechanisms for external accountability, or accountability directly to the citizens. In a democracy, elections are the chief instrument through which this is achieved. Citizen consultations, and citizen participation in design, implementation and monitoring of state’s services, are also examples of this. Alongside, there are also provisions for internal accountability - institutional checks and balances like constitutional separation of powers into Judiciary, Executive and Legislature, rational delegation of tasks and responsibilities, internal performance monitoring, and official oversight including bodies like Auditor General, Anti Corruption Bureaus and Vigilance Commissions are some examples. Public accountability is ensured when these two aspects of accountability are realized together.

The following diagram illustrates this point using the framework of accountability proposed in World Development Report 2004. Ensuring
accountability in the public sector involves a two-step process or the ‘long route’ of accountability. First, the state needs to have a clear understanding of what its citizens want. For this to occur, citizens must be able to draw on the political process to hold the state (policy makers and politicians) to account. This relationship is referred to as ‘voice’. The state, in turn, acting as the representative of the people, must be able to transmit these demands to the actual provider of services and ensure that providers perform their functions effectively. This relationship is the ‘compact’.

Accountability is ensured when compact creates incentives such that the providers accurately and conscientiously follow the wishes of the policy makers, who, in turn, accurately reflect the voice of their constituents. By extension, this ‘long route’ of accountability fails when on the one hand, the state does not succeed in taking cognizance of its citizens’ needs and demands and citizens have no mechanisms through which to articulate their voice (failure of voice), and on the other, when the state is unable to create incentives such that providers accurately and conscientiously fulfill their duties (failure of compact).

![Figure 1: The ‘Long Route’ of Public Accountability](image)

**Figure 1: The ‘Long Route’ of Public Accountability**

**Addressing Accountability Failures:**

Traditionally, efforts to improve accountability proceeded along these two axes - internal and external - largely independent of one another. On the external front, there have been electoral reforms, voter-awareness initiatives and so on, and on
the internal front there have been efforts like reorganization of audit and account mechanisms. Important as they are, these efforts have had limited success in improving accountability in governance and service delivery. There are a number of reasons why.

Elections as an instrument of accountability have some well known limitations\(^4\), moreover, elections only hold elected officials accountable, whereas the vast majority of public officials are appointed bureaucrats and hence not subject to electoral processes. Reorganizing horizontal accountability channels on their part have limitations. It is impossible to monitor the almost infinite number of government actions (and inactions). Practices like bias and inefficient resource use lend themselves to investigation less easily than more express forms of corruption. Absence of second order accountability (who will watch the watchers?), lack of adequate funding and limited enforcement capacity all serve to further weaken these mechanisms.

In more recent years there has been an acknowledgement in the policy circles around the world, of these limitations in traditional accountability channels. Alongside was the recognition that citizen participation in state’s activities could play an important role in strengthening accountability and responsiveness in service delivery. An increasing body of literature from around the world documented how participation of citizens in planning, implementation and monitoring of projects not only increased the effectiveness of public service delivery and made it more appropriate, but also increased accountability and reduced corruption\(^5\).

\(^4\) Elections not just occur only once in every few years, but also force an incredible diversity of opinions and evaluations together into one single vote, which makes them a rather blunt instrument to convey accountability signals to individual office holders. Contextual realities in many developing countries weaken their potency even further. Both voters and political parties operate under severe informational constraints, and clientelism and patronage are rife. Voters are mobilized more on the basis of ascriptive identities like religion and caste, or by the lure of personalistic benefits rather than on the basis of accountable governance and initiatives that bring long-term benefits to the public as a whole.

Accordingly, societal participation in state’s development activities was no longer seen as a ‘bother’, but was instead actively encouraged as a means to ensure responsiveness and accountability. However, this participation by citizens was of a limited nature in that it was circumscribed to implementation of specific government projects. Measures for responsiveness were largely limited to citizen consultations, and those for accountability largely to monitoring of outputs. There was also a sense in which society was acting as a watchdog in ensuring government accountability. All of which underlined a certain “arms-length” relationship between the state and the society. Autonomy from the state was deemed as fundamentally important not just for legitimacy of civil society in its pro-accountability role, but also in the Weberian model of modern bureaucracies, which has been emulated in most developing countries, public-sector workers were as a principle to be insulated from citizens so as to maintain objectivity in public service – and this insulation was only sparingly conceded.

More recently, a ‘transgressive’ stream of research and practice has questioned this separation between the state and the society. Moving on from the circumscribed participation in co-production of specific services, and arms-length relationship in pressuring the government from outside, this current stream of research argues that accountability is best obtained in “co-governance” spaces which confuse the boundary between the state and the society. These writings draw on experiences from around the world where citizen groups have been experimenting with inserting themselves more and more directly into the state apparatus: into its core functions and everyday workings, monitoring its hitherto opaque operations, and influencing policy from the inside. Participatory Budgeting in Porto Allegre, Brazil was one of the early experiences in this stream where instead of externally influencing the policy, ordinary citizens were inside the governmental apparatus, involved directly in the planning and supervision of public spending - activities normally under the exclusive purview of public officials (see Box 1 in Appendix 1).

Some authors argue that this form of activism represents a ‘new accountability agenda’. A pioneering instance of this from India was the experience of Mazdoor

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6 Goetz, A. and Jenkins, R., 2001, 'Hybrid forms of accountability: citizen engagement in institutions of
Kisan Shakti Sangathan (MKSS) – a Rajasthan based grassroots organization where citizens (as external actors) directly engage with institutions of internal accountability. MKSS employed ‘social audits’ to empower ordinary citizens to turn into auditors, and obtain access to the hitherto privileged state documents such as muster rolls, in order to expose malfeasance. This form of accountability has been called ‘hybrid’ accountability, and is remarkable in that it breaks the state’s monopoly over official oversight and legitimizes citizen-inclusion into hitherto exclusive affairs of the state.

Thus, as we have traced, over the years there has been an evolution of ways in which societal actors have engaged with the state indirectly and, increasingly, directly, to improve accountability in governance and service delivery - a process that has come to be known as ‘social accountability’: an approach towards ensuring accountability that relies on civic engagement, i.e., in which ordinary citizens and citizen groups participate directly or indirectly in exacting accountability. Social Accountability encompasses a broad range of actions and mechanisms that citizens, communities, independent media, and civil society organizations use to hold public officials and public servants accountable. This involves deploying tools like participatory budgeting, public expenditure tracking, citizen report cards, community scorecards, social audits, citizen charters, and so forth. Two prominent characteristics stand out in these tools and mechanisms. First: social accountability efforts work to enhance and integrate citizen voice into the everyday workings and decision-making processes of the state. There has, in this sense, been a shift from ‘vote’ to ‘voice’ is the principal accountability tool in the hands of the citizens. Second: central to social accountability efforts is transparency in governance. The main channel through which citizens are being empowered to demand accountability is through creation of, and access to, more information. So the recurrent theme seems to be: more information means more empowerment, which in the context of greater participation means more voice, which means greater accountability.
Social Accountability is being increasingly recognized worldwide as a means of enhancing democratic governance, improving service delivery, and empowering citizens. Accordingly governments around the world - from US and Brazil, to Uganda and South Africa, to Sri Lanka and New Zealand - are finding ways to facilitate citizen engagement and foster social accountability.

Towards a generic framework for Social Accountability:

Drawing from the framework for public accountability and the subsequent discussion above, in this section we formulate a generic framework for Social Accountability. Social Accountability efforts work to enhance and integrate citizen *voice* into the everyday working and decision-making processes of the state. So any framework for Social Accountability should include ‘facilitating and strengthening citizen *voice*’ as its principal component. However, as we discussed in the preceding paragraphs accountability in public service delivery is ensured when *voice* and *compact* work *together*. That is, not only do the politicians and policy makers need to take cognizance of what the citizens want, they should also then be able to invoke the more traditional accountability relationships via a rational delegation of tasks, creation of the right incentive structures and so forth, so that the service providers deliver the service properly.

Thus for Social Accountability to be truly effective, the more traditional mechanisms to improve the *compact* must also be addressed. Addressing the compact involves getting the institutional design right, to make the system structurally and functionally built for accountability – a system where stronger voice can actually translate to better accountability.

In sum, Social Accountability in public service delivery is a product of two things working together: *a system of institutions designed in a manner that makes accountability structurally possible*, and *an informed and mobilized citizenry that can draw upon platforms for engagement to make accountability demands on the system*. That is, *strong voice*, in conjunction with *strong compact*. 
This framework is illustrated in the figure below.

In the rest of the document, we substantiate this framework and propose ways in which the state can address the two components in order to foster social accountability in its programs.
Chapter 2: Assessing accountability failures in Education and Health – The NAIR Survey

This chapter contextualizes the discussion on Social Accountability by analyzing the findings of the survey carried out by NIAR, LBSNAA, Mussoorie\(^7\) to understand the nature of accountability failures in India, and study potential ways of enhancing social accountability in two flagship schemes undertaken by the current government, namely the *Sarva Shiksha Abhiyan* (SSA) and the National Rural Health Mission (NRHM).

The focus of our analysis would be to situate these findings in the framework for accountability discussed in Chapter 1, with a view to underlining the basic point that although social accountability is about enhancing citizen *voice* and participation in service delivery, in order to realize it there are issues to be addressed within the *compact* – the institutional design itself - to make the system structurally and functionally built for accountability – a system where stronger voice can actually translate to better accountability. Through this analysis, we also hope to highlight weaknesses in the current system.

We begin by setting SSA and NRHM against the backdrop of general failures in education and health service delivery in India. We then look briefly at the important institutional features of each scheme; particularly those that help us understand the various accountability relationships that exist in the corresponding sector. Following that we will look at the way in which these *de jure* features actually play out in practice. Here we draw on the findings of the NIAR. LBSNAA, Survey We then step back and analyze these findings by situating them in failures of *voice* and *compact* in order to understand the more general failures in accountability in these two services.

The Context:

Between 2003-04 and 2006-07, the Central Government’s annual budgetary allocations for Education increased by nearly 50% from Rs. 89732 crore to Rs. 134274 crore. Despite this, the state of school education in India continues to

\(^7\) See Appendix 2 for a note on Research Methodology of the survey
remain poor. Although the enrolment rates have gone up, the learning levels at schools continue to remain very low. ASER 2008 estimates that 44% children in Std 5 cannot read a Std 2 text, whereas close to 40% of children in Standard 1 cannot recognize alphabets. 35.4% children in standard 2 cannot recognize numbers beyond 10. The fact that schools continue to receive funding and teachers access regular salaries despite this extremely poor performance is a clear indication the inability of the state and citizens to monitor performance and ensure enforceability on service providers. One of the most serious problem with schooling today is the rampant absenteeism among teachers: a national survey involving unannounced visits to measure teacher attendance revealed that 24% of teachers in India simply did not show up at school during class hours. Health tells a similar story. Central planned allocation to on the Ministry of Health and Family Welfare since it was launched in 2005 has increased from 7677 crore to 13810 crore in 2008-09. This represents an increase of 79.8% percent in the last four years. And yet there is a growing recognition that the system of public delivery of health services in India is in crisis. High absenteeism by doctors and health care staff, low quality in clinical care, low satisfaction levels, and rampant corruption are prevalent. A recent study by Das and Hammer on the quality of medical care in Delhi found that the competence levels of a public sector MBBS doctor in a PHC were so poor that there was as high as a 50:50 chance of the doctor recommending a seriously harmful therapy. Absenteeism rates among primary healthcare workers in India are the highest in the world at 40%, with Bihar topping the list at 60% (World Bank’s Global Monitoring Report 2008).

An important reason for these appalling scenarios in both health and education has been the lack of accountability in our public services.

Government of India’s flagship program in Education in which it aims to address these failures is the Sarva Shiksha Abhiyan (SSA). Launched in 2001, the programme aims to universalize elementary education (6-14 yrs of age) across the country by the year 2010. The National Rural Health Mission (NRHM) is the

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flagship program in the Health sector. Launched in 2005, NRHM aims to address the failures in health service delivery by carrying out “necessary architectural correction in the basic health care delivery system”. Both of these schemes were taken up in the context of decentralization of the service delivery, with the core strategy being empowerment of local governments and community based organizations to manage, control and ensure accountability in public health and education services.

**Institutional Features of SSA:**

The following diagram represents the institutional framework of SSA.

![Institutional Framework Diagram]

Briefly, the central government lays down the key guidelines for implementation including financial norms. It is also responsible for setting standards and goals for the program through curriculum design, monitoring and
evaluation. It contributes 50% of the funds in the SSA, and also runs revenue and financial sustainability assessments for the program.

Funds from the central government are devolved to the state government through state level implementation societies. The state society, is an autonomous society set up for the specific purpose of implementing SSA and works in collaboration with the relevant line department in the state. The state society is the primary implementation unit for the scheme. It has a wide range of policy and operational responsibilities including fund transfers, monitoring, setting performance standards, developing process and quality indicators to track implementation, developing a financial monitoring system, and allocation of funds across different levels of the service delivery chain. According to the guidelines, hiring of teachers is the responsibility of the state level societies. In many states (WB/Gujarat, Tamil Nadu) teachers are hired at the state level. However, in others (Orissa and Jharkhand for instance), these decisions have been devolved to the Block or Gram Panchayat.

Funds from the state government are in turn devolved to the district administration. It is incharge of certain operational activities such as capacity building, training and devolving funds to the schools based on norms determined by the central and state governments, setting up Cluster Resource Centres (CRCs) and Block Resource Centres (BRCs), setting up of DIETs (District Institute of Education and Training), as well as undertaking monitoring and evaluation of functionaries as prescribed by state governments.

The BRC is a resource center where books, discussion papers etc are available. It is highly involved in the planning and organizing of workshops, review meetings, training of teachers and various SSA functionaries, monitoring of CRC activities, schools visits, supervision of civil works etc.

One level down, the CRC has a more hands-on approach: from monitoring school activities, visiting primary schools regularly, observing students notebooks, monitoring exams, discussing the results in VEC/PTA meetings, sharing achievement levels and problems at the BRC etc.
At the village level, the Village Education Committee ‘s (VEC) have been set up. The VEC lies at the heart of the day to day implementation and monitoring operations of the school. It is responsible for the actual expenditure of funds available for maintenance, repair and teaching materials etc. It is also responsible for the monitoring of teachers’ and students’ performance. In many states, the VEC’s work in collaboration with the Gram Panchayat (GP). The GP is responsible for appointing the VEC and usually, the GP President is a key signatory for all the VEC’s financial transactions. Other GP responsibilities include hiring para-teachers. The VEC also develops village level plans and annual work plans on education to reflect local needs. These micro-plans are aggregated up at the district level and the state level where they are meant to provide the basis for expenditure assignments. In some states VECs are also responsible for monitoring the quality of the Mid-Day Meal Scheme in the school. The presence of VECs and their role in community mobilization, monitoring and information dissemination are crucial provisions towards a public accountability system inbuilt into the SSA norms.

**How it plays out in practice:**

De facto principles aside, the deplorable state of school education is testament to the fact that not everything is working the way it was meant to. Some of these are due largely to indifferent implementation of the guidelines set up in policy, but a deeper analysis reveals that there are also some issues in institutional design itself which breeds inefficiencies. We will analyse these failures after listing out the de facto state of SSA implementation as revealed by this survey and some other surveys.

1. **Awareness of the programmes components:** Although the district level officials were fairly well aware of the SSA scheme and its components, at the panchayat level officials were largely unaware of many aspects of program implementation. Information, when it was available was mostly available on infrastructural aspects of service delivery, such as civil works rather than, for
instance, quality of education. The communities themselves were largely ignorant about SSA, even of the existence of VECs.

In Bihar, fewer than 10% citizens interviewed had knowledge of the programs through the GPO, Gram Sabhas or GP members. Over 60% respondents did not know the objectives of the SSA in Uttarakhand and Bihar. However, over 70% respondents in Kerala, when asked if they had been informed of the benefits of the two programs, said yes. In Uttarakhand, though 53.3% GP members knew about the SSA, only 25.19% knew of the objectives of the program. Further, only 21.4% of GP members in Uttarakhand and 34% in Bihar actually knew when the program had been initiated in their jurisdictions.

The Kerala story is an interesting one, and needs to be understood in the broader context of Kerala's developmental history of greater participation of Panchayats and communities.

![Graph showing % of households aware about the program](image)

The awareness of implementing officials in being able to carry out the implementation of the program depends crucially on the training they receive at the Block level. However, as is evident from the table above, not all officials receive this training. What is perhaps more problematic is that even fewer find this training useful in carrying out their duties. Less than 30% officials in Uttarakhand and Kerala found the training received to be useful.
2. **VECs**: VECs, the cornerstone of decentralized model that SSA is based on, were on paper present everywhere, but in practice largely dysfunctional. In many cases the members did not know they were members of any committee. The meetings rarely happen, and when they do, hardly any constructive discussion about school quality takes place. As per the preliminary findings in nearly 60% of the study villages in both Uttarakhand and Bihar, the communities were not aware about VECs or its membership.

3. **High absenteeism and lack of effort from teachers**: As the statistics in the beginning of this section reveal, rampant absenteeism among teachers is a serious problem. Even when teachers are present, many of them are not engaged in teaching activities.

4. **Corruption and leakages**: The survey highlights that corruption continues to exist in the form of over-reporting of enrollment rates, leakages and over-claiming of budgeted meals in MDM-implementations, and politicization of teacher appointments.

5. **Monitoring failures**: A common underlying problem in most of these failures is the lack of effective monitoring of the programme. The VECs are the principal monitoring bodies at the local levels, but owing either to ignorance among its members of the roles and responsibilities, or to indifference, the VECs have in large part failed to deliver effectively. An important tool which monitoring authorities can use is the Social Audit, something which has been used in many
states. However, a majority of implementation officials in the 3 states revealed that no such audits have been conducted in the program at all.

6. Disconnect between needs and allocations: Although on paper the village-level plans are meant to ensure the local needs get reflected in the expenditure assignments, in practice, in the process of aggregation of plans from various villages at the district and then at the state levels, the actual allocations and the restrictive headings under which they are prescribed for use (tied funds) effectively disconnect resource allocations from local needs. This is made worse by the fact that there are delays in release of funds, ending in last quarter rushes in fund release and the resulting inefficiencies in spending rushes.

Source: Accountability Initiative Budget Briefs: Educational Sector 2008-09
7. Quality/satisfaction:
The data from the satisfaction survey among beneficiaries of the SSA provides us with a mixed picture of the final analysis of this program. A majority of beneficiaries are ‘somewhat satisfied’, but this could be a limitation of the survey in terms of the way questions were asked.
The National Rural Health Mission:

The institutional structure of NRHM can be captured in the following diagram:

![Institutional Structure of NRHM Diagram](image)

Briefly, NRHM decentralized health service delivery. The National Mission Steering Group at the MoHFW and the Empowered Programme Committee (implementing agency) serve the purpose of outlining the broad framework and policy decisions of the NRHM. At the State level, the State Health Missions have the responsibility of oversight, policy matters, review of the progress of implementation, approval of the state health plans, co-ordination with NGOs etc.

The district is the key institutional unit for planning, budgeting and implementation of health services. The key role articulated here is the development of cross-sectoral health plans that integrate health concerns with determinants of health such as hygiene, sanitation, nutrition and safe drinking water. The plans are an amalgamation of village health plans, state and national plans and priorities, as well as other centrally sponsored schemes.

The Primary Health Centre is directly responsible to the elected representative of the Gram Panchayat where it is located. NRHM introduces a new community-based functionary called Accredited Social Health Activist (ASHA). The ASHA must primarily be a woman resident of the village, between 25-45 years of age,
with formal education at least up to 8th class. She will be selected by the Village Health and Sanitation Committee (VHC) and the Gram Sabha. ASHA will coordinate with ANM (Auxiliary Nurse and Midwife) and AWW (Anganwadi Worker) and be accountable to the Gram Panchayat. ASHA’s role will be to promote good health practices and provide primary medical care for minor ailments. The government will provide a drug-kit to each ASHA to facilitate this new task. ASHA is not a paid employee, but will be compensated by the Panchayat on the basis of measurable outputs of services she performs.

NRHM mandates the creation of Village Health Committees that prepare health plans for the village which form a component of the district level health plan, and also have a direct role in monitoring of the service at local level.

Untied funds at all levels including local levels with flexibility for innovation. A system of periodic Jan Sunwais at various levels to empower community members to engage in giving direct feedback and suggestions for improvement in public health services has been set up. It is compulsory for all the health institutions to prominently display information regarding grants received, medicines and vaccines in stock, services provided to the patients, user charges to be paid etc, as envisaged in the Right to Information Act. The requirements of audit apply to all NRHM activities.

How it plays out in practice:

While the NRHM was ostensibly aimed at architectural corrections in addressing the failures in public health delivery, like in SSA, the findings of the study indicate that not everything is working. The following points highlight the main problems:

1. **Awareness of program components:** The survey revealed a worrying lack of awareness about NRHM and its components. This was true not only among villagers at large, but also among the functionaries from the block level downwards who were supposed to be implementing the program. In the PPMT exercise in Tehri district in Uttarakhand, for instance, the health supervisors
“categorically denied” any knowledge about the programme components. In Uttarakhand and Bihar, over 70% beneficiaries did not know the objectives of NRHM. In Uttarakhand, though 42.2% of GP members knew about the NRHM, only 17.78% knew of the objectives of the program. Further, only 21.4% of GP members in Uttarakhand and 27% in Bihar actually knew when the program had been initiated in their jurisdictions. On the one hand this was due to inadequate or absent attempts at training of the officials, or more worryingly lack of interest among those officials insulated by political connections.

2. VHCs: In many villages, the survey found that the VHCs were not even formed, and where formed its supposed members either did not know that they were members of any committee, or were woefully unaware of what their responsibilities were in that role.

3. Shortage of staff, high absenteeism, and lack of training: Shortage of staff, including doctors emerged as the major problem, compounded by high rates of absenteeism. The staff present were found to be inadequately trained. In the survey, 46% of implementing officials had not received any training in Uttarakhand and Bihar, and 61% of those who did felt it had not been useful.
On training, the story is similar to SSA, a large percentage of officials did not receive training to be able to carry out the effective implementation of the program. Also, over 60% of those who received training in Uttarakhand and Bihar did not think it was useful.

4. Service quality remains poor:

The survey found that although in infrastructure development has been relatively good, the quality of service remains very poor. More than 91% of all beneficiaries in all 3 states could not get their problems in either program resolved.
Once again, the results of the Citizen Satisfaction Report conducted in the survey leave an inconclusive picture in terms of the impact and implementation of the NRHM.

5. Corruption: The medicines prescribed were also ones that were not available in the hospital – the lack of transparency possibly hiding collusion between the medical officers and medical shops outside. Under the Janani Suraksha Yojana which gives cash incentives for women coming into the hospital for labour, bribes were being demanded by PHC officials handing out the cheques.

6. Failures of ASHA: the recruitment of ASHAs was politicized and far from transparent and consultative, further there was corruption among ASHAs forging addresses of pregnant women in order to capture the cash incentives.

7. Monitoring failures: a common underlying feature in most of these problems was a failure of monitoring mechanisms that are, ostensibly, present on paper. The VHCs in particular were entrusted with local community level monitoring and there were obvious failures in this due either to lack of participation by the members, or complete lack of responsibilities. Even the departmental monitoring was weak and ineffective, sometimes owing to a lack of coordination between project level staff and regular staff, sometimes to indifference and absenteeism by the concerned officials. Social Audit were not organized according to 76% of the NRHM program Officials. Over 68% of GP members in Uttarakhand and Bihar said that no independent appraisal of either scheme had been done.
Further issues in the two programs brought to light by the survey:

The survey also throws light on a variety of common problems shared by government programs. When asked if any PRI officials have made plans for the implementation of either the SSA or NRHM, 90 GP members (66.67%) in Uttarakhand and 59 respondents (64.84%) in Bihar said No. Over 96% PRI officials in Uttarakhand and over 90% in Bihar gave us no response to whether they even record the grievances of the people vis-à-vis the programs.

Another interesting finding is reflected in figure below. A large percentage of the Gram Panchayat members are in fact not involved in any significant activities related to service delivery.
Analysing the failures in SSA and NRHM:

The accountability failures that are at the heart of these problems in SSA and NRHM can be understood in the context of the *voice* and *compact* framework of public accountability discussed in Chapter 1. Such delineation would be a first step towards identifying specific ways of addressing specific problems.

*Failures in voice:*

The voice failures correspond to *lack of awareness* among the members of VECs and VHCs about their individual roles of responsibilities, and about the programme features. Information, awareness and community mobilization, as we will expand in the next chapter, are fundamental prerequisites for strengthening of citizen voice. Unless the citizens know what to expect, know what they are expected to do, and how to do what they are expected to do, and unless the citizens are mobilized to believe in their entitlements and power over the officials, and to act accordingly, it is futile to expect them to participate in any meaningful way in their pro-accountability role. The serious lack of monitoring and hence accountability is in large part due to lack of awareness or indifference among the community members. Effectiveness of voice is also contingent on the *information* on the basis of which the VECs and VHCs can make demands and propose changes. As is evident from the PPMT exercise in the survey, the groups are not informed of budgets, expenditures, and quality outcomes. Therefore there is no basis on which to plan efficiently.

Further, the easiest way to express voice is through the Gram Panchayat, as this is the level of government closest to the people. But, as the institutional design story tells us, the GP itself has limited powers and resources. So even if voice were to be expressed to the GP, the effect would be minimal.

*Failures in compact:*

The compact failures on the other hand correspond to the institutional design of the program that has failed to create optimal delegation and incentive structure in which accountability is possible.
For instance, take NRHM’s **reporting structures**. In the present system ASHA is accountable to both the GP, its parent department, the Department of Family Welfare and Women and Child. Functionaries at the district health mission are also required to report to multiple departments at state level. 23% of program officials did not play any role in the planning of the scheme in their jurisdiction A crucial principle of accountability is that there be as few lines of accountability as possible in order to prevent contradictory orders and create confusion on the part of the provider.

Another area in both SSA and NRHM where compact is failing is manifest in the rampant absenteeism among the teachers and doctors, an indication of underlying failures in incentive structures that allow such inefficiencies to persist. In many states, the GP in collaboration with the VECs has the power only to hire para- teachers, while the full-time teachers are still a state prerogative (In MP they have frozen the state cadre). Similarly, hiring and firing of the doctors is at the state level, and thus far removed from where the monitoring is occurring (at the village level).

Failures in compact also serve to seriously weaken **voice**, which is supposed to be at the heart of both the schemes. In SSA, this takes the form of local level village plans not getting reflected in earnest in expenditure assignments from the state, because despite the provisions for village level annual work plans to be taken into account, the central government has set fairly **rigid guidelines on the basis of which plans and expenditure assignments are actually made**. These decisions are made on the basis of formulae applicable across all schools in the state without any scope for addressing cost disabilities (such as transportation costs) in particular regions. School performance, teacher attendance, teacher availability or even infrastructure needs are not reflected in expenditure decisions. When funds reach the school, they mostly come tied to specific expenditure items. Schools have little internal flexibility to plan and align expenditures to felt needs. As a result, **financing rarely reflects realities on the ground.** This is on top of the **skewed pacing of fund release.**
Chapter 3. Towards a framework for social accountability – 1: Getting the compact right

As we discussed in the Chapter 1, Social Accountability in public service delivery is a product of two things working together: a system of institutions designed in a manner that makes accountability structurally possible, and an informed and mobilized citizenry that can draw upon platforms for engagement to make accountability demands on the system. The first of these is what we referred to as getting the compact right, and the second as enhancing citizen voice.

In this chapter we focus on addressing the compact by revisiting some of the first principles of institutional design. To be sure, under the decentralized model of service delivery of schemes like SSA and NRHM, the beginnings of an institutional framework within which such design issues can be addressed are in place. But the devil, as we will elaborate, is in the details. And meticulous attention to these details of institutional design can go a long way in overcoming such glaring accountability failures as those that emerged in Chapter 2, and importantly create a system which is structurally amenable to social accountability efforts by the citizens.

Getting the institutional design right: revisiting first principles

At their most fundamental level, institutions are ‘rules of the game’\(^9\). They are a system of norms that structure human interaction and organizational behaviour. Good institutions are characterized by well-defined rules, and create the right-incentive structures so that the ‘game is fair’. On the other hand, bad institutions are those with unclear rules and perverse incentives that allow some players to ‘capture the game’ for themselves.

To ensure accountability in a system, it is therefore fundamentally important that we first get the institutional design right: that is to ensure that the rules of the game are clear to all the players, the incentives are properly aligned and

sanctions unfailingly enforced so that the system that then obtains, structurally fosters accountable behaviour.

Policy analysts around the world have studied successful reforms in service delivery and identified five core ‘first principles’ of institutional design that make accountability structurally possible:\(^{10}\):

1. **Clear articulation of goals that focus on improved outcomes**: The first step towards creating an accountable system is the clear articulation of goals and objectives across the service delivery chain – goals that focus on improving outcomes. Such articulation provides the basis against which real performance can be measured, and accountability sought.

As Chapter 2 highlights, in India, as in much of the developing world, the primary goal for service delivery policies and programs has been to improve access. Performance therefore has traditionally been measured on the basis of inputs, or easily measurable outputs – the amount of money allocated, the numbers of schools and health centers built, the number of children enrolled or vaccinated, the length of the roads built, and so forth. But as is being increasingly recognized, simply having access to services is not enough, if the quality of the service remains poor. Take elementary education, for instance. As we saw in Chapter 2, on major indicators of access such as enrollment, India performs reasonably well. However, its poor performance on indicators for learning achievement and dropout rates indicate that access has not resulted in improvements in literacy levels, which is ultimately the longer-term objective. For service quality to improve, it is imperative that there be a shift in orientation from targets based on inputs and short term outputs, to a focus on outcomes. Outcome goals must not only be clearly identified, but also be made accessible to citizens across the service delivery chain. Only then will it be feasible for citizens to track progress on these outcomes and hold policy makers, line departments and service providers to account.
2. Clear lines of accountability and rational delegation of roles: Accountability requires that roles and responsibilities be delegated such that there is no overlap of administrative boundaries, and such that specific levels of government and specific service provider can be held accountable for performance of specific functions. As discussed in chapter 2, there currently exists a significant overlap of roles, responsibilities across functionaries, government departments and jurisdictions. The ASHA in NRHM, for instance, is accountable not just to the GP but also to the multiple line departments at the state government level. There is overlapping of jurisdictions in Education sector as well. In Madhya Pradesh and Chattisgarh elementary education is the responsibility of multiple departments, with schools being run by the Education Department, the SSA program, as well as the Tribal Welfare Department. In such an environment, lines of accountability are obfuscated and hence difficult to track, and there is tendency among governments and service providers to free ride. Citizens in this scenario are unable to demand accountability, as they simply do not know whom to hold responsible for the delivery of services.

For accountability to be feasible, therefore, roles and responsibilities themselves need to be unbundled, and clearly delineated. Further, an internal distinction could be enforced between the entity that sets goals, determines the finances, and monitors and evaluates outcomes and the entity that directly provides the service. Such a separation creates clearer lines of accountability and in so doing ensures that the incentives for performance are clearly aligned, and there is no conflict of interest between performance and monitoring.

Unbundling of roles and responsibilities can be done by breaking down sectors into detailed sub-sectors, and then sub-sectors into identifiable activities. There are, at a minimum six separate kind of activities within any given sub-sector\textsuperscript{11}. These include:

- Setting objectives and standards of service
- Planning
- Asset creation

\textsuperscript{11} World Bank, 2006, Development Policy Review
• Operation (non-staff)
• Operation (staff)
• Monitoring and Evaluation

Once unbundled, the key challenge then in the allocation of roles and responsibilities is the identification of a rational basis on which delegation is to be undertaken. There are three key points that could serve as guiding principles here:\[12\\]

\begin{itemize}
\item[a)] **Degree of discretion:** A discretionary activity is one in which the successful delivery of a service requires the provider to adapt to local conditions instead of providing the same thing every time. For instance, teaching in a classroom is a discretionary activity. The teacher has to continually adapt her teaching pace and methods, according to her observation of how much the students are able to grasp the concepts. An official sitting at the district or state level cannot determine these aspects, as he simply does not have the information necessary to do it. Curriculum design, on the other hand is not a discretionary activity, as it can be done by trained officials working within fairly set parameters. Similarly, curative health care in a doctor’s clinic is a discretionary activity, whereas vaccination is not.

Discretionary activities should be delegated to local level front-line staff as it is they who have the information to deliver it right. But in order for them to do their job properly, they need to be given enough powers and resources-including some flexibility over budgets so that the nature of the activity can be adjusted to adapt to local conditions. So for instance, if a teacher requires innovative learning materials to enhance the learning levels in the class, there should be enough leeway in the system for such discretion to be encouraged and accommodated.

\item[b)] **Degree of transaction intensity:** Transaction intensive activities require repeated transactions between the service provider and the citizens. Using the example as above, both teaching in a classroom and administering vaccinations

are transaction intensive activities. These activities are by nature devolved to local levels, and information at these levels is best observed by the citizens themselves – parents and patients are best placed to judge teachers and doctors by virtue of their proximity to and information about performance by teachers and doctors. The greater the transaction intensity, therefore, the greater the need for local monitoring and control.

c) Ability to observe performance: Where can performance be best monitored? If the activity requires technical expertise, performance is best judged by experts. But if the activity is simple and with easily identifiable performance indicators, local level monitoring is best. Continuing with the education example, curriculum development is a technical exercise and may require expert evaluation, but monitoring teacher presence and children’s learning achievement is best done locally by the parents. However, such monitoring is not always straightforward and information about performance needs me to be made available, and local capacities need to be built for it to be done effectively. We pick up on these points below.

The following table illustrates activities under different services according to transaction intensiveness and discretion involved in their delivery.

<table>
<thead>
<tr>
<th>Table 3.2</th>
<th>Examples of discretionary and transaction-intensive services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sector</td>
<td>Discretionary, not transaction-intensive</td>
</tr>
<tr>
<td>Commercial banking</td>
<td>Setting deposit rates</td>
</tr>
<tr>
<td>Social protection</td>
<td>Setting eligibility criteria</td>
</tr>
<tr>
<td>Policing</td>
<td>Lawmaking defining criminal behavior</td>
</tr>
<tr>
<td>Education</td>
<td>Curriculum</td>
</tr>
<tr>
<td>Health</td>
<td>Public information campaigns</td>
</tr>
<tr>
<td>Irrigation</td>
<td>Location of main canals</td>
</tr>
<tr>
<td>Central banks</td>
<td>Monetary policy</td>
</tr>
<tr>
<td>Agricultural extension</td>
<td>Research priorities</td>
</tr>
</tbody>
</table>

Source: *World Development Report 2004: Making Services Work for Poor People*
When applied, these principles will give different answers for different sectors and functions. This will ensure that there is a rational basis upon which roles and responsibilities are allocated and ensure that the level of government best suited to ensuring accountability for the production of a service, is responsible for that service.

3. **Autonomy of the service provider:** With clearly articulated roles and responsibilities and performance targets, front line service providers can be empowered to take decisions and innovate with mechanisms for the provision of services based on local conditions. As we noted above, the actual provision of services involves a number of discretionary and transaction intensive tasks that require local level decision-making and innovation. It is only when frontline service providers are given this autonomy that they will be in a position to effectively tailor resource allocations to suit citizen needs and preferences and hence be held accountable by them. For autonomy to be realized, service providers must have discretion over the utilization of funds transferred. In Chapter 2, we saw that typically funds come to the local governments and service provision units tied to specific norms and criterions determined by the central or state government. These are often at odds with local needs resulting in inefficiencies and wastage and accountability is severely compromised. Discretion or autonomy to determine resource allocation is an essential element of an accountable system.

4. **Generation of better quality information and performance benchmarking:** Information lies at the crux of an accountable system. Information performs two crucial functions: first, it facilitates citizen mobilization and engagement with the state, a point to which we shall return in greater detail in the discussion to follow. But second, and importantly from the perspective of institutional design, generation of reliable information on process, quality, and outcomes of service delivery helps strengthen accountability even within the system. Information on performance and outcomes and service quality levels enables policymakers to make effective plans, to link resource allocation with realities on the ground, to benchmark and monitor performance, and ensure that resources are being spent well, and hence ensure accountability.
Information vacuum in the Indian Water and Sanitation Utility Sector

Indian Water and Sanitation utilities are not required to report on their service quality levels to the public and so seldom do. Internal accountability works best when it is supplemented by external pressure to perform and be accountable. However, in the absence of any available reports in the public domain, citizens, although severely inconvenienced by poor service delivery, have little understanding of the reasons for this situation, and hence of the specific manner in which they might exert pressure on the utilities to improve performance. This effectively undermines public accountability of the utilities.

Perhaps more importantly, because neither the service providers nor the sectoral policymakers are required to report on efficiency and service levels, the utilities are failing to measure, record and analyse operational data that is crucial to understanding the quality, reach and efficiency of delivery at the local level. Benchmarking of performance levels is critical to micro-level management of the utilities, and reliable and comprehensive aggregate data enable policymakers to assess the performance and investment needs of the water and sanitation sector as a whole at regional and national levels. Absence of such data seriously hampers performance of the utilities, and the sector.

In sum, there is a major information vacuum in the Indian urban water and sanitation sector: the absence of relevant, reliable and regular information for performance benchmarking, and hence to guide improvement, and the lack of disclosure of such information, which could serve as basis for public accountability.

Internationally, on the other hand, a growing number of developed and developing countries require their UWSS utilities to regularly give a public account of how they are performing against statutory service standards, and/or the service levels and targets they have committed to in their operating licenses. In fact, mandatory reporting of a variety of financial, operational, service-quality and customer responsiveness indicators is the primary tool by which regulators in these countries have measured and compelled improvements in utility performance and financial efficiency. OFWAT in the United Kingdom, for example, has chosen to track seven ‘quality service’ indicators and uses this data to report annually to the public on the levels of service being delivered by the country’s water and sanitation utilities. It also reports on utilities’ performance on these indicators for the previous fifteen years, rating each as ‘Above Average’, ‘Average’, ‘Below Average’, or ‘Needs Improvement’. More recently, regulators abroad have also begun to include measures that gauge the efficiency with which utilities are drawing and distributing (scarce) water and treating/recycling wastewater, so as to ensure the sustainability of local sources by minimizing environmental damage. In water-short Australia, for instance, regulatory efforts now accord priority to nudging improvements in water efficiency, conservation, and re-use.

As a result of these measures, providers continually enhance performance to build credibility with customers, policy makers, and investors, and to win or sustain municipal operating licenses. On the other hand agglomeration and analysis of the information (whether by sector regulators, policy-makers, utility managers, or civil society groups) creates a detailed ‘map’ of utility assets, service levels, and performance on the ground. And this ‘map’ is as useful to policy-maker in assessing and improving sector performance, as it is to citizens in understanding the reasons behind specific service delivery shortcomings and in pressing targeted improvements and investments.

To address the problems with the Indian UWSS, therefore, it is vital that they too be encouraged to continually collect this essential data, and regularly report it to all stakeholders. In addition the reporting indicators need to be simple and impactful – so that utilities can comply, and citizens comprehend and act upon reported data. This will enable citizens and policymakers not only to better hold utilities to account, but also facilitate the development of more holistic, efficient, and sustainable solutions to current service shortcomings.

5. **Aligning incentives with performance:** Arguably, one of the biggest problems with much of our service delivery system is the disconnect between performance and pay. In many of the better performing systems around the world, money follows the service user, and hence the provider has an incentive to perform and keep the user happy. In India on the other hand, owing to bad policy and politicization of recruitment and management processes, the providers get their salaries regardless of their performance, leaving little incentive for them to perform. While solutions that entail creating market-like competition have their pros and cons, some form of alignment of incentives with performance is imperative if the problems like absenteeism, indifference and lack of effort by providers like doctors and teachers is to be addressed. Equally important is the will and ability of the state to effectively enforce sanctions on erring officials.

<table>
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<tr>
<th>Money follows the patient: linking pay to performance:</th>
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<tr>
<td>If pay if linked to performance, and if monitoring at local level is complemented by power to hire and fire the staff at local level, the incentive to show-up and perform can be expected to be radically improved. In the current system, this is either not happening, or happening on a very limited scale. In Education, for instance, in most states, the GP in collaboration with the VECs have the power only to hire para- teachers, while the full-time teachers are still a state prerogative. Similarly, hiring and firing of the doctors is at the state level, and thus far removed from where the monitoring is occurring (at the village level). This is in contrast to some of the better performing service delivery systems – like health systems in Western Europe: doctors are paid according to the number of patients they attract, which is a function of the quality of treatment they provide. The money, in other words, follows the patient. If the doctor performs poorly, or is even discourteous, patients do not come and hence the pay is affected. This turns the accountability structure on its head, and the doctor is compelled to perform his duties with the patients’ interest at heart. Having a fixed salary regardless of performance, in comparison, is predictably leading to much of the indifference and absenteeism among doctors and the staff.</td>
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**Decentralization: An opportunity to strengthen accountability**

Like we mentioned before, some aspects of institutional design that we raised above have been taken on board in the 73\textsuperscript{rd} and 74\textsuperscript{th} Amendments to the Indian Constitution that sought to strengthen accountability by decentralizing power to smaller, local units of government\textsuperscript{13}. The process of devolution of power, however, has proceeded unevenly with political decentralization (elections to local bodies) running far ahead of administrative decentralization- where

\textsuperscript{13} The emphasis in this note is on rural decentralization (Panchayati Raj) largely because of the rural focus of this paper. However, the same principals would apply to the urban sector as well.
functions, funds and functionaries (3Fs) are yet to be devolved adequately. The rationale for decentralization stems from the assumption that bringing governments closer to people, enhances accountability by more accurately reflecting citizen needs and preferences and crucially, making it easier for citizens to monitor performance and thereby demand accountability. Yet, all would agree, that decentralization is no panacea. After all, simply pumping greater resources into local governments without systematic reforms is unlikely to have an impact. Decentralization however, precisely because of its logic of bringing governments closer to people, offers an important opportunity for undertaking reforms for greater accountability to the people – provided the design is right.

So what are the features of a well-designed decentralized system of government?

Functions

The first step towards developing a well-designed decentralized system of government is the clear allocation of functional responsibilities across tiers of government or ‘activity mapping’. In 2004, the Government of India’s Ministry of Panchayati Raj attempted to push state governments to undertake this activity mapping. The activity mapping process has largely been unsatisfactory. Although most state have unbundled subjects in to activities, the assignment of these activities to tiers of government does not reflect any rational considerations. Consequently, it remains ad hoc at best.

Managing Elementary Education in the United States- Clear allocation of functional responsibilities

The 10th amendment of the US constitution mandated the evolution of a decentralized education system where the states and districts assume a primary role in the organization and operation of schools.

State governments: State governments have legislative and regulative responsibilities for the operation of schools. Each state has a department of education headed by the chief State School Officer who is responsible for all activities related to the provision of elementary education. The officers duties include, distributing state funds, interpreting laws, certifying teachers and maintaining standards.

Local Authorities: Each state is divided into local administrative districts with the authority to establish and regulate public schools. The school districts are governed by a board of education usually appointed by government officials or elected by citizens. The schools are operated by district staff. School board duties include preparing annual budgets, hiring teachers, purchasing equipment, monitoring process.

Federal Government: Provides broad leadership without undue control. The Federal Government has a legal responsibility to safeguard the rights of citizens to free public institutions and equal opportunity in the pursuit of learning. The federal government also
Funds

The first principles articulated above, offer one possible framework for developing a coherent, rational activity map for the devolution of roles and responsibilities such that accountability is strengthened. However, as the first principles themselves indicate, functions are the first step. For local bodies to perform their functions effectively, they must be allocated the relevant powers and resources. This involves systemic reforms in the manner of fiscal transfers from the central and state governments to local bodies. Key reforms could include:

- **Broaden the tax base and user charges levied by local bodies**: This would involve systemic changes in both policies and institutions to build capacities to design administer and enforce existing gram panchayat taxes. Specifically, there is a need to broaden the tax base by including more remunerative revenue sources such as land revenue; improve the policy environment for property taxes and improve the design of collection of property taxes as some of the key areas that could help towards strengthening the revenue raising capacities of PRIs.

- **Moving funding design from tied schemes to untied themes**: The Ministry of Panchayati Raj has long been pushing for a ‘Panchayat Sector’ budget line item into which funds transferred to Panchayats would be deposited. Funds allocated from different departments should be parked in the Panchayat sector budget through the finance departments. The Government of Kerala has successfully experimented with this. Kerala has developed a separate Panchayat budget annex in its annual state budget. Funds are released through the Finance department of the state. This ought to be scaled up all across the country.

  Such a system will ensure that funds are not received ‘schematically’. Rather they can be bundled together in themes, so that PRIs can allocate funds to their highest priority. The Government of Sikkim has experimented with this process to a considerable degree of success. In Sikkim, the Rural Development Department sends out Rs. 50 Lakh to Zilla
Parishads and Rs. 10 Lakh to Gram Panchayats and gives a broad indication of the various kinds of things on which the money could be spent on and an indicative list of the proportion in which these untied funds should be allocated in these broad categories, with the note that if the panchayat concerned wishes to vary the percentages it can do so in consultation with the state rural development departments.

- **Transparent and Accountable Information Systems:** Building a reliable information system is critical to designing an efficient and equalizing fiscal decentralized system. Steps in this direction could include redesigning the accounting and budgeting system; improving the management structure and ensuring the timely consolidation of accounts.

**Functionaries:**

The issue of functionaries is somewhat more complicated than that of functions and funds due to legal constraints.

*PRIs to be appointing authority:* PRIs ought to have their own cadre of employees with powers to hire and fire staff. To facilitate this process, the state government ought to create a list of empanelled officials from the central and state cadres from which PRIs can draw requisite staff. However, even in this case, the provisions of article 311 would extend to Panchayat employees creating conditions of weak incentives and poor performance, similar to those at the state and center. This brings us to our second recommendation.

*PRIs to hire employees on a contractual basis:* Such contracts would be renewable subject to satisfactory performance. In addition, PRIs should be able to outsource technical expertise on a needs basis (both from higher tiers of government and the private sector). This would allow PRIs to fulfill their administrative needs through a system that encourages accountability. Some states such as Karnataka where GPs are allowed to contract engineers from a district pool of engineers have experimented with this idea. These experiments have had some measure of success and could be extended to PRIs across the country.
One way of addressing the many failures of primary health care in India is to allow Gram Panchayat’s to enter into contracts with doctors—public or private— to make regular visits in the village. Under these contracts, payments are conditional on performance. So if the doctor doesn’t show up, he/she doesn’t get paid. Accountability is enforced annually by the conditional renewal of contracts and weekly by withheld pay if the doctor doesn’t show up. To ensure quality, the state government can develop a list of accredited doctors that the Panchayat can access.

The option of 'contracting up' has been experimented with some degree of success in the district of Rahim Yar Khan, Punjab, Pakistan. The main features of the program were that agreements were made with the doctors to serve three Basic Health Units and to visit each at specified times. Their pay was doubled but since they were covering more facilities, the program was cost-neutral at worst. Attendance was easily monitored since the designated day of the visit was clearly specified. The results appear to be quite impressive. Facility utilization increased dramatically. People were able to predict when centers would be open and not waste a day from work with the risky prospect that the doctor would not be there.

Source: Hammer, Aiyar, Samji 'Bottoms Up, to the role of Panchayati Raj in Health and Health Services', World Bank 2006

### Capacity Building

The problem of weak capacity amongst local PRI representatives is well recognized. Most PRI representatives (particularly women and SC/STs that are elected through the reservation policy) have little prior experience or understanding of the governance system. Since the ratification of the 73rd and 74th Amendments, both government and NGOs have been actively involved in addressing the capacity gap. Most states in India have established a State Institute of Rural Development (SIRD) with the specific mandate of training PRI representatives. This is complemented by the work of NGO’s that have developed innovative training methods, including the facilitation of networks of elected women representatives, to supplement government training inputs.

Despite these efforts, a consistent implementation and support plan for local governments is yet to evolve. Capacity inputs at present tend to focus on the sectoral capabilities rather than strengthening their capacities to perform functions generic to local governments. These include capacities for financial management (planning, budgeting, and accounting), procurement procedures, conflict resolution and performance monitoring. Training inputs in these more generic, multi-sectoral functions could help fill some of the key training gaps and allow local bodies to handle resources whatever their purpose.
However, capacity cannot be built in a vacuum. It is important to recognize that local governments lack capacity in part, because they lack the authority and autonomy to operate as autonomous units of government and hence are unable to fulfill their mandates. Recent analysis of local organizations suggests that financial assets are a necessary condition for good performance. Capacity is endogenous and resources are a necessary pre-requisite for strengthening local government performance. In order for capacity building initiatives to be successful therefore they need to be part of a carefully sequenced devolution process that strengthens power and resources available to local bodies alongside with strengthening their capability to manage these resources.

**Strengthening the role of community based organizations to improve accountability:**

The push toward decentralized government reform in India in the early 1990s was accompanied by a parallel movement that privileged another kind of local organization as a key actor in rural development: user and community groups. It is argued that the rural poor can be empowered both individually and collectively through the creation of social capital. User groups are typically formed vertically—i.e., they are sector specific (watershed development, rural water supply, education), often outside formal government structures, and part of a scheme- or project-specific design (created by a line agency or society). There are few serious links (often only a dotted line) between the user group and the local government. Thus two institutional arrangements (the PRIs, municipalities and the user groups) coexist, creating multiple institutional arrangements for service delivery at the village level. Most observers today believe that the two approaches to local governance need convergence, drawing on the strengths of both approaches while avoiding the weaknesses of each.

The strength of decentralization through PRIs lies in the fact that they are the legally grounded representative institution at the grassroots. However, in the absence of effective checks and balances, these institutions are susceptible to elite capture, political exclusion, and corruption. The user group approach is advantageous because it encourages an inclusive decision-making process at the
local level by directly targeting the poor. It enhances project effectiveness because it contributes to a greater sense of ownership and commitment to project objectives. Crucially, recent analysis suggests that membership in user groups contributes positively to participation in the Gram Sabha, thereby directly affecting the voice element of accountability relationships.

Strengthening user groups and converging them with the formal local government structures is an essential first step. In some states, in the SSA program, this is already being done and the Panchayat president is invariably a co-signatory on cheques and other financial decisions taken by the VEC. One draw back of this arrangement, as discussed, is that in many cases, the Panchayat president, lacks the incentives to involve the VECs in decision making related to the school. Moreover, in many instances, VEC members themselves remain unaware of their positions, roles and responsibilities and for all practical purposes, the VEC remains defunct and the Panchayat president and headmaster take all decisions. Capacity building of community groups such that CBOs, is essential. We discuss these in the next chapter.
Chapter 4. Towards a framework for social accountability – 2: strengthening citizen voice

In the last chapter, we discussed how to get the institutional design right, which addresses the *compact* part of the Social Accountability framework. In this chapter we discuss the other half of the framework, which is *strengthening citizen voice* so that the citizens can draw upon the system better to hold it accountable.

Social Accountability efforts by the citizens involve the use of a variety of tools. World over, there are a multitude of tools that citizen groups have been experimenting with to engage with the state and demand accountability. The strategic focus of these tools varies: some are aimed at improving citizen *participation* in decisions that affect their lives, some at ensuring *transparency* and *checking corruption*, some are geared towards *generating information for policy lobbying and advocacy*, and some focus on *capacity building* to create an enabling environment for citizen action. Social Accountability tools can also be implemented at different levels in the service delivery chain. For instance, some tools aim to strengthen citizen awareness and mobilize citizens to access information on various aspects of service delivery, others aim at monitoring procedural compliance while still others aim at monitoring outcomes. Tools can also be retrospective or prospective depending on whether they aim to enhancing accountability in process and outcomes versus accountability in planning. In this chapter we try and identify ways in which the state can facilitate such citizen action for accountability – i.e., the *voice* component of the social accountability. While for particular government programs there are particular ways in which this is to be done, from a general policy perspective, there are two aspects to addressing this question:

1. First is the question of what can the state do to institute mechanisms that facilitate the strengthening of citizen voice more generally

2. Second is to identify some parameters/guidelines about what kind of tool can be instituted where
4.1 Creating an enabling environment for strengthening citizen voice:

In this section we discuss the preconditions for successful deployment of social accountability tools by citizens, with a view to identifying what the state can do to facilitate these conditions. While specific tools can have specific requisites, the following four are necessary preconditions of most Social Accountability tools:

1. **Information generation, access and dissemination**

2. **Community mobilization and capacity building**

3. **Grievance redressal** and

4. **Institutionalization**

These are illustrated in the figure below:

**Fig: Preconditions and building blocks for success of social accountability efforts**

1. **Information Generation, Access and Dissemination:**

   As we have emphasized before, information lies at the heart of accountability. For citizen groups to effectively perform their pro-accountability functions, they first need to know what to expect from their government, as well as what service
quality levels are in practice, so that they can judge the performance for themselves and apply pressures in a targeted manner. On state’s part this requires, in the first instance, ascertaining and publishing target levels of service quality indicators in the form of – for instance – citizen charters, and then continually collecting data on performance along these indicators in practice. Crucially, the collected information has to be placed in the public domain with free access for interested citizens. It has to be in a demystified, easy-to-understand form so that non-specialist citizens can also make sense of it. The 3Rs of information are key: regular, reliable and relevant.

### Making the Right to Information Act work

The RTI Act provides the institutional framework that begins to address some of these requirements. Especially Section 4 of the RTI Act mandates that the governments proactively report information relevant to the public, including details on budgets, subsidies, key policy decisions, functions, duties and so on. Despite the fact that this is a mandatory requirement, few public authorities have followed it in the earnest. Further, access to complex budget documents or audit reports will play a limited role in strengthening accountability as they are barely comprehensible to an average citizen. If these reports are de-mystified, using a non-technical vocabulary, they can be made relevant to citizens who can then use it to enforce accountability better.

For information to be meaningful to citizens and lend itself towards accountability, steps can be taken to improve mechanisms for reporting information. For instance, information on service quality levels and citizen satisfaction levels are arguably more relevant forms of information for social accountability rather than, say, length of water pipes laid in a particular quarter. Stricter adherence to the requirements under the RTI Act could address the information problems substantially. Some steps to strengthening Section 4 of the RTI could include: making it mandatory for all government departments to appoint a public information officer with the exclusive charge of ensuring compliance with section 4 norms; creating a body of best practice on mechanisms for disclosure; incentivizing the system by instituting awards for best practice on section 4 compliance and lastly, Information Commissions could create a rating system for rating government departments on the basis of section 4 compliance and widely disseminating this information.

A related point is about information dissemination and citizen awareness. To elicit meaningful participation from the citizens, it is fundamental that they are first made aware of what they are entitled to under various government schemes and provisions. Lack of awareness as we saw in Chapter 2 is at the heart of so many accountability failures in service delivery. It is not enough then to formulate the schemes, the government has to proactively disseminate information about these schemes and raise local awareness on local issues. Community Radio is one innovative and cost effective way in which to do this.
Other solutions like citizen helplines, mass media campaigns, information kiosks, and other e-tools must be actively encouraged.

<table>
<thead>
<tr>
<th>Community Radio for Information Dissemination</th>
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<tbody>
<tr>
<td>Community radio is an interactive communication tool that uses the radio as a principle means to disseminate information about government schemes and programs to local audiences. It is an extremely useful mechanism to disseminate information to rural audiences as well as functioning as a platform for listeners to share their views and ideas. In many instances, community radio initiatives are owned and managed by particular communities wherein the content of radio programs is determined by the local community. Community radio initiatives can thus be useful in tackling local issues and problems that are relevant to the local community. The key objectives of community radio initiatives are as follows:</td>
</tr>
<tr>
<td>• To create awareness amongst local communities about different government schemes and programs;</td>
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<tr>
<td>• To use the awareness so generated to mobilise citizen action towards improving public service delivery;</td>
</tr>
<tr>
<td>• To create a platform for the listeners to share their views and that facilitates two way communications between citizens and service providers.</td>
</tr>
<tr>
<td>In 2001, Alternative for India Development (AID), an NGO working in Jharkhand launched a community radio program <em>Chala Ho Gaon Mein</em> (Let us go to the village). The program was launched to train the local community to develop radio programs on issues most relevant to them and has been airing through the radio (FM channel of AIR). The program has been running successfully on the AIR for the last 6 years. Issues related to the functioning of schools, health centres, PDS, Anganwadi (child care) centres are the focus of the discussion. The radio programs are backed on the ground with the formation of Village Listener’s clubs and Self Help Groups (SHGs) so that local communities can use the information being provided by the community radio to demand better services from local service providers. Anecdotal evidence suggests that the radio programs have catalysed the community to successfully get hold of job cards in NREGS, remove a school teacher who did not perform his duty and improving services in some PHC’s.</td>
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</table>

2. Citizen Mobilization and Capacity Building: Citizen mobilization lies at the heart of all social accountability initiatives. In its essence, social accountability is about citizens demanding and directly participating in exacting accountability. Most initiatives themselves are premised on the assumption that access to information and the creation of platforms for direct engagement with the state can catalyze mobilization and collective action for change. However, this does not occur automatically. Significant time and effort is required to facilitate mobilization. Mobilization itself can take different forms and has different entry points. In some instances it requires intensive work by NGOs and local organizations that work with communities. Alternatively, the presence of local level organization such as community based organizations (CBOs) could be mobilized to catalyze collective action. Crucially, the Gram Sabhas (GSs) and ward sabhas offer an important entry point for strengthening community
mobilization. As has been discussed earlier in the paper, the 73rd and 74th amendment mandate regular meetings of the gram sabha and ward sabhas. While at present both these forums are relatively weak, efforts can be undertaken to improve the quality of participation in the sabhas. Capacity building is crucial. This can be achieved through scaling up the role of state level training institutions such as SIRDs and NGOs by: (i) improving current training modules to focus on the issue of GS participation, (ii) raising awareness both at the Panchayat and citizen level on the need and importance of Gram Sabhas, and (iii) mobilizing CBOs around the issue of holding Gram Sabhas.

3. Grievance Redressal: One of the more crucial preconditions for accountability to obtain is the presence of state apparatus for redressal of grievances as gleaned from the use of social accountability tools. For collective action to emerge and sustain, citizens need to have the confidence in the state that the misdoings exposed, or the grievances emerging from their use of the social accountability tool will be followed up and acted upon by the state in the form of corrective action being taken, perpetrators being punished, or policy being amended, as the case maybe.

To inspire such confidence, it is imperative that the state invests in an effective grievance redressal apparatus to ensure citizen grievances are redressed in a timely and effective manner. This could take the form of an online grievance redressal mechanism of the Municipality to fix complaints about potholes, leaking sewerage pipes etc, or transparent, strict and unfailing sanctions against erring service providers, or for instance in the case of social audits, this could involve institutionalized mechanisms for faster justiciability of discrepancies brought to light at the public hearing, maybe exploring something along the lines of a Lok Adalat for Social Accountability cases, and so on.

Rajkot Municipal Corporation: On-line Grievance Redressal & Feedback

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<tr>
<th>Rajkot Municipal Corporation: On-line Grievance Redressal &amp; Feedback</th>
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<tbody>
<tr>
<td>Recently, a unique citizen-friendly SMS-based grievance redressal system for civic problems has been initiated in the city of Rajkot, Gujarat.</td>
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<tr>
<td>In this system, citizens can lodge complaints through a call centre, where they are logged into the Management Information System of the RMC. Engineers on the ground instantly get SMSs informing them of these complaints and once they are resolved, they can SMS this back to the Management system. This system does away with a lot of unnecessary paperwork and helps</td>
</tr>
</tbody>
</table>
engineers identify and tackle complaints efficiently. Complaints need to be resolved in a time bound manner, failing which SMSs are sent out to the immediate senior officials in-charge. The performance of each individual official in-charge of complaints can be viewed within the MIS (and is available to the Citizen’s via the RTI Act), in terms of the speed with which complaints are resolved. To promote feedback and ascertain citizen satisfaction with this service, the RMC website has a dedicated Citizen’s Forum where people can go and make complaints and suggestions for the website and other services. These are actually looked at on a bi-weekly basis and any novel ideas are adopted. Also, the call centre selects a few complainants and calls them to gauge their levels of satisfaction about the service provided by the RMC periodically.

4. Feedback and Institutionalization: For the individual corrective actions, and sporadic deployment of social accountability tools to result in sustainable improvements in accountability, there needs to be some form of institutional support that guarantees the deployment, and facilitates the process of the tools at regular intervals. Such institutional support, apart from signaling the state’s real commitment to citizen engagement, also bodes well for the long-term sustainability of the social accountability efforts, which are otherwise based solely on voluntary collective action by concerned citizens. The Andhra model of institutionalized Social Audits could be instructive here. We discuss this in greater detail in Chapter 6.

4.2 Social Accountability tools:

In this section we discuss how the state can begin to think about integrating into its programs, specific tools used by citizen groups in their social accountability efforts. As we noted before, there are a multitude of tools that citizen groups around the world have been employing in demanding accountability from the state. There are multiple ways in which to map this milieu of initiatives. Here we present one way of grouping them - according to the stage of service delivery that the efforts entailed in the tool are aimed at addressing. This of course risks oversimplifying what is often a complex and overlapping terrain, but our objective here is simply to try and give some sense of coherence to the range and variety of efforts. Importantly, this kind of classification also provides one way of thinking about what possible tools the government could incorporate into its programs according to the specific stage of service delivery in question.
The table below unbundles service delivery chain into different stages, and identifies some examples of SAc tools that can been used in these stages:

<table>
<thead>
<tr>
<th>Stage of Service Delivery</th>
<th>Some Examples of Social Accountability Tools Used</th>
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</thead>
<tbody>
<tr>
<td>Planning and Design</td>
<td>- Participatory Budgeting</td>
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<tr>
<td></td>
<td>- Participatory Planning</td>
</tr>
<tr>
<td>Implementation and Process Monitoring</td>
<td>- Public Expenditure Tracking Surveys (PETS)</td>
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<tr>
<td></td>
<td>- Social Audits</td>
</tr>
<tr>
<td>Outcome Evaluation</td>
<td>- Citizen Report Cards (CRCs)</td>
</tr>
<tr>
<td></td>
<td>- Participatory Research for Evaluating Outcomes</td>
</tr>
</tbody>
</table>

For the sake of continuity, we have put the discussion on the details of each tool in Appendix 1. There we provide a brief overview of each of these tools with their particular strengths, weaknesses for each tool, we also provide a short case study where it has been successfully deployed. In the rest of this section we take up the crucial exercise of articulating a framework on how to start thinking about what tool to apply where and when. Just to reiterate what we said in Chapter 1, inherent to such advice is the caveat that no one size fits all, and the choice of tool in a given context is entirely defined by the context itself. For instance, take the contrast between Public Distribution Systems (PDS) in Delhi and Tamil Nadu. In Delhi, the NGO Parivartan had to invoke RTI Act to expose the corruption and misappropriation of food meant for the poor, whereas in Tamil Nadu, NGOs did not have to resort to this strategy as political competition serves as the ‘instrument of accountability’ there, with PDS being an electorally sensitive issue\(^\text{14}\). An instructive example of fitting the context with the tool is the ‘adaptability/fit’ process that the Public Affairs Centre (PAC) in Bangalore follows to evaluate whether a given context warrants the Citizen Report Card approach. This evaluation is done along 8 critical factors - including political context, extent of decentralization of utilities, feasibility of seeking public feedback, presence or activist independent and non-partisan CSOs in the region,

survey and research competencies, quality of the media to publicize the findings, and ultimately responsiveness of service providers – all of which are crucial to determining the suitability, and chances of success, of the CRC methodology. Drawing on this process, we attempt here to identify some broad parameters that can act as guiding principles when thinking about applying accountability tools.

Which tool to apply where? Social Accountability Tools and Context Specificity

When designing a social accountability initiative, the following key principles can be kept in mind while identifying specific accountability tools:

1. **Identify the nature of the accountability problem:** As has been discussed and demonstrated in the previous sections, accountability failures are the product of a number of factors that have been broadly classified as *voice* and *compact*. The extent and nature of these problems varies across contexts, sectors and design strategies. For instance, in the case of education, while there are problems related to corruption and misuse of funds at the school level, the bigger factor responsible for accountability failures relates to poor teaching quality, problems in fund flows and poor planning, particularly at the school level. In such circumstances, social accountability efforts could focus on teacher accountability through outcome monitoring (learning levels) and tracking teacher presence. Additionally, efforts at strengthening local level planning through the VECs can go a long way in strengthening accountability. On the other hand, in the primary health sector corruption, particularly in procurement is rife. Procedural compliance is important in these cases to address the corruption problem. In such instances, social audits can go a long way in strengthening accountability. The same applies to public works programs such as the NREGA where lack of

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15 Thampi, G., 2008, Accountability Initiative Discussion Series, Engaging with Accountability: Session 2 – Scope and Challenges to assessing, replicating and scaling up accountability work.
transparency can result in serious corruption and malfeasance with labourers being denied their rightful wages. Here too, social audits are an important mechanism of strengthening accountability. An important point to remember is that tools are not exclusive. Often times, accountability failures are the result of a multiplicity of factors each of which requires a different strategy or a combination of strategies and tools. So, when analyzing the nature of the problem and trying to ‘fit’ a tool, it is important to think about what combinations of tools could come together to strengthen social accountability.

2. **Assess the level of community mobilization:** The social and political context of an area is also an important factor to consider when identifying accountability tools. In contexts such as Kerala where mobilization and awareness levels are high and there is a history of sustained interaction between citizens and government particularly at the local level, the nature of the tool and the method of implementation would be somewhat different from Bihar where awareness needs to be raised in the first place. In Kerala, for instance, capacity building on merely the use of a specific tool might be enough to generate the momentum necessary for the successful implementation of the tool. On the other hand, in Bihar or Uttrakhand where awareness levels are low and power dynamics heavily skewed in favour of the elite, intensive mobilization and support is crucial. In such an environment it is essential to take steps to create an atmosphere in which the poorest and most disempowered can participate and speak freely in public platforms. In such contexts, the presence of local level NGOs that work directly with people is a pre-requisite for the successful implementation of social accountability tools.

3. **Assess the extent of civil society presence:** As has already been discussed, civil society plays and important role in the implementation of social accountability tools. The presence of civil society is crucial both for mobilization as well as to ensure the objectivity and neutrality of the social accountability process. Social accountability initiatives are thus more likely to be successful in areas where there is a strong civil society
presence. The specific nature of the tool is also dependent on the presence of civil society in the area. Where civil society presence is weak, social accountability efforts can concentrate more on information generation and capacity building of local institutions be it the Gram Sabha, the VEC or the VHC to understand their roles and responsibilities, garner information of performance of local governments, schools and health centers and participate effectively in planning and monitoring. This could be the first step towards catalyzing mobilization for greater accountability.

4. **Assess the skills required and skills available for the implementation of a specific tool:** Different tools require different skill sets. For instance, expenditure tracking and satisfaction surveys require high level statistical skills that is often beyond the capacity both of community based organizations and local civil society groups as these skill sets tend to remain concentrated in research organizations of urban NGOs. Thus the implementation of tools that require these skills necessitates support and intervention by external, facilitating NGOs. The feasibility of these interventions are often context driven and will need to be assessed prior to determining the specific nature of the accountability tool.

The table below illustrates how these general points of consideration translate to prerequisites and building blocks for the successful deployment of specific social accountability tools (that are described in Appendix 1.)

<table>
<thead>
<tr>
<th>Social Accountability Tools</th>
<th>Pre-requisites for successful implementation</th>
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<tbody>
<tr>
<td>Participatory Planning, Participatory Budgeting</td>
<td>• Bureaucratic buy-in, and government commitment that village level plans are reflected in district level plans</td>
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<tr>
<td></td>
<td>• Strong local governments with access to funds and functionaries</td>
</tr>
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<td></td>
<td>• Presence of platforms for participation, such as Gram Sabha and CBOs</td>
</tr>
<tr>
<td></td>
<td>• Mobilization of citizens to facilitate informed and meaningful participation</td>
</tr>
<tr>
<td></td>
<td>• Access to information on funds available and expenditure patterns at local government level and service</td>
</tr>
<tr>
<td></td>
<td>delivery units across financial years</td>
</tr>
</tbody>
</table>
| **Public Expenditure Tracking Surveys (PETS)** | • Access to expenditure data  
• Access to government records including vouchers, audit reports, utilization certificates and so on  
• Adequate funding and technical support including statistical skills  
• Sound understanding of public expenditure management systems |
| **Social Audits** | • Access to government records including vouchers, muster rolls  
• Bureaucratic buy-in to facilitate easy information access and ensure grievance redressal  
• Strong presence of civil society to facilitate mobilization of citizens to participate, and interact with government officials |
| **Citizen Report Cards (CRCs)** | • Technical expertise to design, execute and analyze the survey  
• Independent media and civil society organizations to disseminate findings  
• Effective feedback mechanisms to ensure follow-up of findings |
| **Participatory Research for Tracking Outcomes** | • Developing simple, relevant and quantifiable indicators against which outcomes can be measured  
• Technical expertise to design and analyze the survey  
• Presence of local level civil society organizations to conduct the surveys  
• Independent media and civil society organizations to disseminate findings |
Chapter 5. Social Accountability Initiatives: Challenges and Vulnerabilities

In opening up spaces for the poorest and most disempowered to participate in governance processes to demand answers and claim their rights, Social Accountability initiatives present an inherent challenge to deeply entrenched power relations in the system. For this reason they are subject to many vulnerabilities and challenges. Some of these include:

**Resistance to reform, risk of collusion and co-option:** Since Social Accountability initiatives upset the vested interests who have an incentive to maintain the status quo, there is much resistance to reform, and always a risk of collusion between various actors that can reduce the initiative to a fraudulent, ghost exercise. One glaring form of this collusion is falsely claiming on paper that an initiative has been conducted without actually conducting it. Other more subtle forms of collusion include data manipulation and deliberate dereliction of duties. Resistance to reform can result in vested interests withholding crucial information or providing inadequate information – such as budget documents, procurement vouchers and other records – necessary for the conduct of many Social Accountability initiatives. One example of this is the case of efforts by Rozgaar Evum Soochna Abhiyaan, a network of NGOs in Rajasthan that attempted to conduct a social audit on the NREGA project in Jhalawar and Banswara districts in Rajasthan in December 2007 and January 2008. There was much internal resistance within the local bureaucracy and panchayats preventing them from accessing information necessary to conduct that audit. In Banswara district the Social Audit had to be aborted, while in Jhalawar information was provided only after weeks of sustained protest.

Often times, citizens are themselves co-opted by those from whom accountability is demanded. This kind of complicity can result in citizens not speak up against corruption, and refusing to co-operate in Social Accountability efforts. This usually happens either when powerful members of the community are co-opted into the system, or in rare cases where an entire community stands to benefit from the spoils of corruption and malfeasance.
**Disruption by powerful vested interests:** Apart from the risks of collusion, citizens engaged in Social Accountability initiatives risk being threatened and coerced by entrenched vested interests, particularly local power blocks that have benefitted from the lack of accountability in government systems. Threats and coercion can result in communities becoming hesitant to directly participate and speak up in Social Accountability initiatives. Such lack of participation can severely undermine the effectiveness of Social Accountability. After all, it is only if communities are willing to mobilize around information generated from Social Accountability initiatives, and through this mobilization publicly demand answerability and action, that Social Accountability initiatives can have an impact.

**Lack of support from government agencies, and lack of effective grievance redressal:** As has been discussed, bureaucratic buy-in and timely, strict and unfailing follow-up action on Social Accountability findings through effective grievance redressal mechanisms is crucial to the success of Social Accountability initiatives. If citizens are to be expected to challenge entrenched power dynamics and place themselves at risk, they also need to be assured that governments will respond and address their grievances. The current lack of buy-in among the street-level bureaucrats, and the ineffective state apparatus for grievance redressal can serve to dissipate the strength of collective action needed for Social Accountability.
Chapter 6. Institutionalizing Social Accountability: some policy considerations to overcome the challenges and vulnerabilities

From a policy perspective, there are some important steps that government can take to overcome the challenges and vulnerabilities associated with undertaking Social Accountability initiatives. These include:

1. **Making Social Accountability mandatory in policy design:** Reforms of the state can have a significant impact on the incentives faced by citizens in their action for accountability. In particular, participation and collective action by the citizens is especially forthcoming when people have a *legal* right to participate. This is because legal rights create collective interests that cut across social divisions, hence making it possible for larger collectives to form and mobilize\(^{16}\). Legal rights also provide a degree of legitimacy – the rightfulness of one’s claims – that facilitates alliance building with other groups, and, importantly, this acknowledgement of legitimacy of actions by the citizens, plus state policies like ‘whistle blower’ protection, also gives them the confidence to overcome possible fears of repression by powerful vested interests both within and outside the state apparatus.

There are many examples where citizen participation has been successful when mandated in policy. The success of People’s Campaign for Decentralized Planning in Kerala has been attributed, among other things, to the significant financial and functional devolution and the *institutional incentives* for participation which led to increased representation of hitherto marginalised voices like those of SCs, STs and women. Decentralization brings the state closer to the people, and institutionalized participation creates ‘invited spaces’ for citizens to come together and participate in articulation of their voices. Another example of good policy in this respect is the NREGA, which in its guidelines, lays down in some length the details of how exactly social accountability is to be ensured in the program.

Laying down in law: Social Accountability in NREGA

To address the problems of corruption and mismanagement that have plagued earlier wage employment the NREGA sets in place mechanisms to promote accountability and transparency in implementation of the scheme – notably, by empowering panchayats to conduct regular social audits of all projects being undertaken under the scheme. The Central government has developed a set of Operational Guidelines that facilitate the implementation of the Act. The Guidelines are unique in that they require implementing authorities to comply with a set of transparency and accountability provisions at every level of the programme. The NREGA Operational Guidelines have a dedicated chapter on accountability and spell out detailed guidelines on transparency for implementing authorities.

As per the guidelines, implementing authorities at various levels must ensure strict compliance with the provisions of the RTI Act which include ensuring that:

- Requests for copies of documents under NREGA are complied with in 7 days;
- All NREGA-related information are in the public domain;
- Proactive disclosure of key information and documents under NREGA;
- Public access to key documents, records and information about the scheme at all levels. i.e. updated data on registration, number of job cards issued, list of beneficiaries, funds received and spent, works sanctioned etc to be displayed outside the offices of all implementing agencies;
- Public display of names and contact information for key persons;
- Key information is made available on the internet;
- Gram Panchayat accounts are proactively displayed and updated twice a year;
- Report cards on local works, employment and funds are posted outside the offices of implementing authorities at various levels.

In addition to these there are other guidelines for accountability including:

- Preparation of Annual Reports by Central and State Governments
- Conduct of financial audit by each district;
- Conduct of physical audit to verify the quality of work;
- Provision of action on audit reports by the State Government;
- Development of a model Citizens Charter;
- Setting up of Vigilance and Monitoring Committees;
- Setting up of a Grievance Redressal System;
- Regular conduct of Social Audits

In this way, the NREGA Guidelines clearly spell out not only the institutional provisions for social accountability under the program but also clearly define and outline the roles and responsibilities of different implementing authorities in this process.

In practice, the accountability provisions of the NREGA Guidelines have, admittedly, been implemented with varying degrees of seriousness, with some states such as Rajasthan and Andhra Pradesh doing better than others. However, as the box below elaborates, the unique efforts by Government of Andhra Pradesh to institutionalize the conduct of social audits into existing machinery of the NREGA have had considerable success, which presents a model worth replicating.
### Institutionalized Social Audits: NREGA in Andhra Pradesh

With built-in features like decentralized planning and implementation, proactive disclosures, and mandatory social audits on its projects, the National Rural Employment Guarantee Act (NREGA) provides the catalyst for activist governments and civil society organizations to institutionalize accountability tools in governance system. A remarkable instance of one such activist government is Andhra Pradesh which has since the inception of the program in 2006 been conducting systematic and regular social audits on its NREGA works across the state.

A strong political will and committed top-level bureaucracy provided the impetus for this venture. The institutional space for developing a team and managing the social audits was found in the Strategy and Performance Innovation Unit (SPIU) of the Department of Rural Development. Between March and July 2006, the Department collaborated with MKSS, the civic group in Rajasthan that pioneered social auditing in India, to hold training sessions for officials and interested civil society activists, and to help with the design and conduct of pilot social audits. These trainings culminated in the setting up of strong cadre of 25-member state resource persons, drawn exclusively from the civil society, which is crucial to ensuring a high degree of autonomy and objectivity in the exercise. In addition, 260 district-level resource persons have also since been trained. The actual audit is conducted by educated youth volunteers in the village, who are identified and trained by this pool of resource persons. The first social audit was conducted in July 2006. Since then, an average of 54 social audits are conducted every month across all 13 NREGA districts.

This is a unique instance in that nowhere else in India have social audits taken place on such a large scale with such frequency. And although research needs to address whether such deep institutionalization of accountability mechanisms has indeed resulted in improved accountability in service delivery, emerging evidence points to significant and lasting improvements in citizens’ awareness levels, their confidence and self-respect, and importantly their ability to engage with local officials.

### 2. Developing and monitoring norms and guidelines on what constitutes a Social Accountability initiative:

Clear and precise norms and guidelines on the steps involved and mechanisms in conducting Social Accountability initiatives can go a long way in preventing ghost initiatives and minimizing collusion. However, experience shows that norms and rules only work if there is effective monitoring. This could possibly explain why such detailed guidelines for ensuring accountability in NREGA have been taken up with varying degree of seriousness across the states.

One way to ensure that principles are practiced could be through the involvement of independent agencies or NGOs that undertake random checks to ensure that norms and guidelines are being adhered to. The state and district administration could also set up helplines and other grievance redressal cells where citizens who have suffered threats or coercion from vested interests can safely report their grievances.
3. **Strengthening section 4 of the RTI:** As has been stressed repeatedly through this paper, access to information is a critical precondition for any Social Accountability initiative to be successful. Resistance to disclosure, and insufficient information can seriously hamper the initiatives. Section 4 of the RTI Act that mandates proactive disclosure of information can go a long way in addressing this vulnerability. However, compliance on Section 4 among government departments is found to be very poor. In addition to incentivizing greater compliance through rankings and making funds contingent on compliance, perhaps the CAG could take up auditing of Section 4 Compliance as part of its regular financial audit of the departments. In addition, the quality of information reported also needs to be improved so that it is relevant and reliable to those that use it to seek accountability from the government. Here again, departmental rankings could be used to incentivize better quality reporting.

4. **Capacity Building:** Collective action is crucial to social accountability efforts, and creation of CBOs entrusted with various aspects of decentralized service delivery is a good first step. But as we have noted throughout this paper, capacity building and awareness raising among these CBOs is critical for their effective functioning, and the state can do a lot more to ensure that they perform well in the pro-accountability functions expected of them. Regular training of the members in VECs and VHCs, creating incentives for participation in the meetings and Gram Sabhas need to be taken up much more seriously.
Appendix 1: Social Accountability Tools

In this appendix we give a brief overview of some selected social accountability tools, grouped according to the stage of service delivery that they are employed in. For each of these tools we look at its particular strengths, weaknesses and pre-requisites, and also provide a short case study of where it has been successfully deployed.

Planning and Design

Engaging local communities in the design and development of government programs is widely recognized as an important way in which to facilitate citizen voice and participation at the local level. The focus on citizen participation in the planning and implementation of government programs is also out of concerns about the lack of transparency and accountability in the local allocation of funds and resources. The 73rd and 74th Constitutional Amendments, provide a framework for decentralized planning at the local level through the devolution of powers to Gram Sabhas and district planning committees. However, in practice, there is need to focus on ways to strengthen these exercises at the local level. In this context, accountability tools such as participatory planning and participatory budgeting can be effective instruments to facilitate citizen engagement in the planning process of government schemes and programmes.

i) Participatory Budgeting: Participatory Budgeting (PB) is a tool that engages citizens in negotiations with public authorities over the distribution of public resources. PB provides citizens with an opportunity to decide how and where public resources are spent. Most citizens who participate in PB are low-income and have low levels of formal education. These groups have usually been excluded from making budget decisions but PB programs enable them to make choices that affect how their government acts. By engaging citizens in the budgeting process, PB programs help promote greater transparency and also help reduce the scope for corruption and mismanagement. PB was developed in Porto Alegre, Brazil in the late 1980s (see Box 1) and has since been applied in
countries across the world facilitate people’s participation in planning processes.

**ii) Participatory Planning:** Is a process whereby beneficiaries of government programs are involved in the planning and design of programme components. The aim of the participatory planning is to determine local problems, priorities and solutions by involving local communities in the planning process. Participatory planning at the local level involves a number of steps including appraisal, needs identification, restitution, organization, planning, implementation and evaluation. Participatory Rural Appraisal and Rapid Rural Appraisal are often used as tools to engage with local communities in this process.

Together, participatory budgeting and planning tools create opportunities for engaging, educating, and empowering citizens, which can foster a more vibrant civil society. In India, participatory budgeting and planning has been initiated in Kerala through a government led initiative. Under the Kerala People’s Campaign for Decentralized Planning, launched in 1996, the national government transferred certain budget functions that had been controlled by state-level ministries to municipalities (in urban areas) and village councils (in rural areas) (see Box 2).

**Strengths**

- Participatory budgeting and planning exercises help create local level partnerships between communities, elected representatives and government officials;
- These tools help determine local needs and priorities and thereby facilitates the adaptation of government programs to specific local contexts;
- They builds platforms for citizen engagement and participation in state processes;
- They promote transparency and accountability by fostering an immediate and continuous information flow between the citizens and service providers;
• They help determine local needs, priorities and solutions to difficult development problems.

**Weaknesses**

• Participatory budgeting and planning exercises require the presence of a trained cadre of experts and officials which is often lacking at the local level
• Large-scale application of the tool can be resource and labour intensive

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<th>Participatory Budgeting in Porto Alegre, Brazil</th>
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<td>Participatory Budgeting was pioneered in the late 1980s in the Brazilian city of Porto Alegre. The Municipal Government in Porto Alegre developed an innovative model of budget formulation which involved the active participation of citizens and local communities. Under this model, the municipality of Porto Alegre has been divided into 16 districts and each district acts as a unit of distribution for public resources and is allocated a budget in proportion to its population. The priorities of each of the districts i.e. in terms of health, education, sanitation etc are decided in district public assemblies. Notably, the municipal government is closely involved in the process providing technical inputs and spelling out its priorities. The proposals developed by citizens through these assemblies are combined with technical assessments and are debated again to determine the final budget allocations. The approach has proved to be very successful in terms of improving the delivery of key services. According to the World Bank, there have been dramatic improvements in access to water and sewage services since the launch of the participatory budget exercise. The Porto Alegre model has been replicated in hundreds of municipalities across the world and is a good example of how people's participation in budgeting and planning can improve accountability in service delivery.</td>
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<tr>
<th>Kerala People's Campaign for Decentralised Planning</th>
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<td>In 1996, the Kerala Government launched the &quot;People's Campaign for Decentralised Planning&quot; under the Ninth Five Year Plan with the objective of empowering and strengthening local elected bodies through the devolution of administrative and financial powers. Under the program, Government devolved between 35-40% of the state plan budget for preparation of development projects formulated by the local governments at the village, block and district levels. In conjunction with this, the People’s Plan Campaign was launched to facilitate socio-political mobilisation and people’s participation in planning processes. To facilitate this process resource persons were recruited at the state, district and local level to take a lead in training programs and to spearhead the Plan Campaign. As a part of the campaign, local needs were assessed through meetings of the Gram Sabhas, these were developed into a plan by the village panchayat in coordination with Block and District level officials. Every village council was required to organize an open village assembly twice a year to give citizens an opportunity to express their priorities and plan projects (IBP). The plans were then approved at the district level by a District Planning Committee constituted to assist the panchayats. The campaign focused heavily on training local representatives as well as rallying support for local elected bodies from local officials, experts and volunteers to try and remove some of the problems within the planning process. Moreover, the campaign stressed people’s participation in the process with the overall objective of facilitating a democratic culture at the local level as well as creating a demand for reforms driven from below.</td>
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**Implementation and Process Monitoring:**

Process monitoring or the regular tracking of progress under government programs and schemes is a crucial step in the accountability chain. Citizens must
be able to monitor and track how resources are being spent and allocated in order to hold government officials and service providers to account. Community based monitoring tools and mechanisms engage citizens in the process of tracking and monitoring how governments spend public resources. Tools such as public expenditure tracking surveys, social audits and satisfaction surveys have been developed and widely used to monitor the implementation of government programs. Each of these tools has specific aims, methods and outcomes as we illustrate with the examples of Public Expenditure Tracking Surveys (PETS) and Social Audits.

i) Public Expenditure Tracking Surveys (PETS): PETS are quantitative surveys that track fund flows to determine how governments use public funds and whether resources actually reach the target beneficiaries. The process involves securing information on budgets and expenditures across central, state, district and local governments. The allocations at each level are compared with the actual release of funds and expenditures Designing and implementing a PETS involves the following stages i) Organising consultations with key stakeholders to determine the scope of the study; ii) Determining the sampling strategy; iii) Designing questionnaires; iv) Training of staff to carry out the survey; v) Field testing of survey instruments; vi) Actual implementation of the PETS followed by vii) Monitoring and evaluation, cleaning up data and finally analysis and dissemination of the data. Expenditure tracking surveys help in identifying any leakages and misuse and also gives insight into cost efficiency and decentralization in the management of government programs. The practical use of the participatory budget expenditure tracking is examined in the case study below where a civil society organisation tracked down the expenditure for a large government program, the Mid-day meal scheme in Rajasthan India (Box 2).

Strengths:

• PETS are means of collecting and compiling micro-level data;
• They serve as diagnostic tools in the absence of reliable financial and administrative data;
• PETS help highlight and track highlighting the use and abuse of public resources;
• They can help to identify specific gaps and problems in fund allocations.
• PETS facilitate an atmosphere of transparency through the collection and dissemination of information.
• The surveys help strengthen the capacities of local communities to hold officials and service providers accountable;

**Weaknesses:**

• Participatory expenditure tracking surveys require high quality financial data which can often be difficult to collect particularly at the village level;
• Technical expertise is required to carry out the surveys and process the information gathered, such expertise is often lacking at local level;
• As it is a technical tool, problems can occur in determining sample size, computing input costs and dealing with difficult samples.
• Lack of participation and or uncooperative respondents can be a major problem.
• PETS are time consuming and resource exercises. A lack of funds can affect efforts to monitor the PETS

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**PETS and the Consumer Unity and Trust Society, Rajasthan**

The Consumer Unity and Trust Society (CUTS), an NGO based in Rajasthan conducted a PETS study on the Mid-Day Meal Scheme (MDMS) of the state government in one district of Rajasthan. The study covered 211 schools in 14 blocks of one district, and tracked expenditures incurred in the program and verified the quality of food provided to children. As part of the exercise budget allocations at the state level, the release of funds and food grains across various tiers i.e. the state, district, block and village level was tracked along with the timeliness and quality of such releases. 2,110 students, 2,110 parents, 422 teachers and 211 cooks in the Chittorgarh district of Rajasthan were interviewed to ascertain their opinion and satisfaction level about the implementation of the MDMS. The data obtained from the tracking exercise and the survey results were disseminated to the community and to the government officials at various levels. The process highlighted the fact that there were delays in the release of the funds to the schools, and problems with the quality of grains that are transferred to the schools. As a result of the process they could ensure timely transfer of funds, improvement in food grain quality, improvement in basic infrastructure required for meal preparation and, importantly, could increase the involvement of parents in the management of the program.

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**ii. Social Audits** – A social audit is process whereby a government program is audited with the active participation of the intended beneficiaries of the program. As compared to other accountability tools, a social audit is quite
complex and involves a number of stages. Pioneered by NGO, Mazdoor Kisan Shakti Sangathan (MKSS) in Rajasthan, a social audit involves obtaining information on government expenditure specifically on budgets, allotments, estimates of works, payments etc pertaining to the program. Once obtained, official information and records on expenditures and entitlements are verified against the testimonies of beneficiaries. The process culminates with the organization of public hearings where the findings are discussed and discrepancies are exposed in the presence of service providers, officials and beneficiaries. This process enables citizens to not only obtain information on government programmes but also use this information to “enforce” accountability of public officials. Inspired by MKSS, a number of civil society organizations have begun using social audits and public hearings as tools to audit the performance of different government services and programs. (see Box 3).

**Strengths:**

- The strong focus on access to information within the social audit process helps facilitate better information access, transparency and accountability at the local level
- Social audits are useful as a tools to identify gaps and leakages in program implementation
- The ‘jan sunwais’ and public hearings provide local communities with a platform to express their ideas, views and grievances
- The training and capacity building of communities in the audit process, has spill over effects in terms of empowering beneficiaries to better engage with the service providers
- Social audit exercises can foster stronger linkages between local communities, elected representatives and officials - as all stakeholders are engaged in the audit process.
**Weaknesses:**

- The sophisticated nature of this tool can make it difficult to apply in situations where there is limited capacity on the part of local communities, civil society organisations and government.
- Social audits are resource and labour intensive tools – finding sufficient funds to support the audit exercise can be a problem.
- A social audit is necessarily a lengthy process and is thus not suited to contexts and situations where quick results are needed.
- Technical expertise and training is required to interpret information gathered through the audit exercise such expertise is often lacking at local levels.
- Community mobilisation is critical to the success of any social audit exercise. In the absence of a strong civil society presence, social audits may not be feasible.

**Social Audit by the Centre for Health and Social Justice**

In 2007, the Centre for Health and Social Justice (CHSJ), an NGO set up to strengthen citizen claims to health related fundamental rights, carried out a community feedback survey on National Rural Health Mission (NRHM) in 5 districts of Uttar Pradesh and 3 districts in Uttarakhand. The objective of the exercise was to determine whether in practice, citizens had access to the various provisions made on paper under the scheme. CHSJ conducted inspections of existing health infrastructure including the Sub-centres, Primary Health Centres (PHC’s) and CHC’s and interviewed local service providers employed in these facilities. Interviews were also held with the local community and specifically beneficiaries of the program to find out what their experiences were. The interviews addressed crucial issues under NRHM such as the functioning of ASHA (Accredited Social Health Activist) volunteers, the facilities available at the Sub-centres, PHC’s and CHC’s and nature of services provided for child birth, Pre and post natal care. The social audit revealed considerable disparity in what was envisaged under the scheme and the actual situation on the ground. The functionaries at the village and block level were not clear about their roles and were not carrying out the functions they were supposed to do. The community did not have awareness about what they are supposed to get as the provisions of the scheme. These findings were made known to the community as well as both the district level officials and the state level officials. The findings were also widely disseminated in the media. The organisation provides anecdotal evidence to show that the process in itself helped in increasing awareness levels of the community about NRHM. It has also implanted in them the idea of interacting with the government service providers to demand for their rights.

**Outcome Evaluation:**

Monitoring access to and quality of services is a central concern for most social sector programmes. Outcome and performance monitoring tools such as
community score cards, public opinion surveys and citizen report cards can help develop and benchmark indicators against which performance of service providers can be monitored and evaluated. Outcome evaluation tools engage citizen groups or communities in the monitoring and evaluating the implementation and performance of public services or projects, on the basis of performance indicators and benchmarks they have selected.

i) Citizen Report Cards: The Citizen Report Cards (CRCs) are commonly used tools for participatory impact evaluation. CRC’s are participatory surveys that provide quantitative feedback to service delivery providers on the satisfaction levels amongst citizens on the quality of public services in a particular geographical area. The survey results generated through CRC’s are generally shared with the concerned service providers, policymakers and are also widely disseminated in the media. The objective of CRCs is to use the survey results to exert pressure on the policymakers and service providers to improve public service provision. CRC’s involve three basic steps: i) the selection of agencies or sectors for analysis; ii) the collection and analysis of data on users’ satisfaction and iii) dissemination of findings. CRC’s were first developed and used by the Public Affairs Centre (PAC), a Bangalore based NGO, and have since been used by many other NGOs in India and other countries (see Box 4).

**Strengths:**

- CRC’s are easier to use and administer as compared to other more complex tools such as social audits;
- CRC’s help enhance the accountability of the public sector by supplying systematic feedback from users of services to the service providers;
- They provide a platform for communities and CSOs to engage in dialogue with service providers to improve the quality of public services;
- By engaging with the media and policy makers, CRC’s take the accountability debate to the next level.

**Weaknesses:**

- CRC’s require a high degree of technical expertise which can be difficult to come by in a local context;
The process is resource intensive and requires considerable funds.

### CRCs and the Public Affairs Centre in Bangalore

Community Report Cards (CRCs) were first developed by the Public Affairs Centre (PAC), a Bangalore based ngo, working to improve the quality of governance in India through the strengthening of civil society institutions. PAC published its first report card in 1994 ranking several municipal and other city-level service providers in Bangalore according to public perceptions of their efficiency. At the start of the exercise, focus group discussions were held to aid in the design of the questionnaire. Thereafter, questionnaires were designed to capture the satisfaction levels of the citizens regarding the public services that mattered most to them including specific aspects of their working which they were satisfied or dissatisfied with, the direct and indirect costs of these services to their users. The surveys were then conducted separately for the general and slum households. The results showed that the citizens were uniformly dissatisfied with almost of the services being provided. Specific aspects about which the citizens were dissatisfied were also brought out. The dissemination of information on the Bangalore report card was undertaken in three parts: First of all, the report was made available to the heads of all the public agencies covered by the study and to the Chief Minister and Chief Secretary of Karnataka. Secondly, the findings of the study were made known to the press through a mini- seminar. Thirdly, workshops on the report card were held in Bangalore specifically for dissemination of findings to interested citizen groups and other non-governmental organisations. This was followed by similar meetings in New Delhi and Mumbai. The publicity provided by PAC to the results from the report card contributed, in part, to improvements in the quality of services provided by these agencies. Since then, PAC has compiled report cards for many other cities in India and around the world.

### ii) Participatory Research for Tracking Outcomes:

The application of participatory research methods to track outcomes and monitor the impact of public services is a growing area of interest in the accountability space in India. Outcome monitoring involves the development of simple, relevant, quantifiable indicators against which performance of different programs or services is tracked on a regular basis. An example of an outcome monitoring tool is the Learning Outcome Survey developed by the NGO *Pratham*, which assesses and tracks the quality of education in India against key indicators (see Box 5). Tools such as this help in shifting the focus of service delivery evaluations from simply measuring inputs to measuring outcomes.

**Strengths**

- Participatory outcome monitoring help focus attention on tracking the impact of different service delivery initiatives as opposed to merely the inputs;
- Such tools engage with local communities and civil society organisations to identify the issues and problems that affect them;
Weaknesses

- Participatory outcome tracking exercises and studies can be extremely costly and labour intensive;
- Such exercises require the presence of civil society groups and NGOs to help galvanize local communities to participate.

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<tr>
<th>ASER: The Annual Survey of Education Report</th>
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<td>In 2005, Pratham, an NGO working on elementary education in India, spearheaded an initiative to track learning achievement levels amongst primary school children. The survey entitled Annual Survey of Education Report (ASER) was a country-wide effort, involving the participation of a wide variety of CSOs that collected data from every district in the country. To assess learning quality, ASER developed a simple tool – the Learning Outcome Survey - that tests learning levels of school children across key indicators of reading, comprehension and arithmetic. ASER has been conducted every year since 2005. Consequent to this regular tracking of learning outcomes, it is now possible to track yearly progress of learning levels across states, draw inter-state comparisons and most importantly hold policy makers to account for the large quantum of funds currently being spent on primary education.</td>
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Appendix 2: Research Methodology of NIAR Study

The primary purpose of the empirical study was to use various instruments to identify and analyze the state of social accountability in the implementation of SSA and NRHM.

**Scope:** The study was conducted in 81 villages spread across 27 developmental blocks. These developmental blocks were spread across 9 districts from 3 different states - Bihar, Kerala and Uttarakhand.

The three states were chosen on the basis of performance on key indicators pertaining to NRHM and SSA. Kerala (above par), Uttarakhand (intermediate) and Bihar (below par) were selected. For the selection of districts within each state, indicators like Gross Enrolment Ratio, Net Enrolment Ratio, Pupil Teacher Ratio, Student Classroom Ratio, deprivation indicators etc were used. The districts selected were the ones which ranked on top and bottom, and one which was on par with the state average according to these measures. The selection of blocks within each district was done similarly. One village having a hospital and a school from each block was selected on the basis of systematic random sampling.

**Research Design:** The sampling process adopted in the study considered factors affecting the health and primary schooling system and their accountability. In both SSA and NRHM, common indicators identified were:

- Awareness about Programme Components: PRIs, Officials and Communities
- Role of Committees under both the Programs
- Involvement of PRIs & Community
- Quality Issues
- Social Inclusion
- Transparency; Effective Fund Utilization; Accountability.
- Monitoring role
- Grievances & Corruption.
The survey interviewed 35 village members in each village as well as members of the Gram Panchayat, along with officials in the health and education sectors; in case of SSA- State project Director, District Project Officer, Block Resource Coordinator & Cluster Resource Coordinators; in the case of NRHM- the State Mission Director, Deputy Chief Medical Officer/ District Project Manager In-charge of Community & Primary Health Centre. The following instruments were used:

1. **Community Score Card** – this enables the community to assess the responsiveness of service providers and also provides instant feedback on all aspects of service delivery.
   - Citizen report card for Beneficiaries
   - Citizen report card for the Implementing officials
   - Citizen report card for the public representatives

2. **Participatory Performance Monitoring Tools (PPMT):** to record users’ perceptions on quality, efficiency and transparency and generate direct feedback mechanisms between providers and users, building local capacity, and strengthening citizen voice and community empowerment.

3. **Participatory Expenditure Input Tracking Format (PETIF)** - to monitor the flow of financial and physical resources and identify leakages or bottlenecks in the system.
The Accountability Initiative

The Accountability Initiative is an independent effort to strengthen state accountability in India by undertaking policy research, creating networks of stakeholders, exploring new areas and ways to collect and disseminate information on the quality of public services in India. The initiative's work is collaborative. It seeks to strengthen current accountability efforts by government, civil society, research institutes and the media.

Specifically, the initiative aims to:

- Undertake policy research on the mechanisms of accountability in India’s governance institutions
- Develop new areas and innovations to enhance accountability
- Support the creation of better quality data on basic public services
- Seek innovative ways to disseminate this data to the public
- Encourage an informed, evidence-based debate on accountability and improved service delivery outcomes in India

The Center for Policy Research, New Delhi is the institutional anchor for the initiative.

Visit us at: www.accountabilityindia.org

Accountable Government: Policy Research Series

Accountability plays a central role in determining the impact of services delivered through public institutions. Therefore a crucial reference point for analyzing the strengths and weaknesses of service delivery policy would be to assess how best it addresses the accountability question. The aim of our Policy Research Series is to contribute to debates on administrative reforms in India from the perspective of ensuring accountability.