

Research Programme Summary

Collective Action Around Service Delivery

‘How social accountability can improve service delivery for poor people’

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This research forms part of a ten year programme under the Centre for the Future State, based at the Institute of Development Studies. Below is a summary of principal findings. Further details are available at <http://www2.ids.ac.uk/futurestate/research/Phase2/prog2/phase2prog2.html>

Public services often fail poor people. Where formal systems of accountability are weak, organised groups of poor people or collective actors working on their behalf can sometimes play an important role in making service providers accountable using other, more informal channels. How and why does this happen? Research by the Centre for the Future State suggests that some reform processes provide better opportunities than others for collective action by groups working on behalf of poor communities. The capacity of such groups to organise effective, ongoing monitoring of public service delivery increases substantially when they have been a party to negotiating reforms, and when alliances have been formed between public sector and civil society actors.

Effective public services have a central role to play in poverty reduction, but in many poor countries both coverage and quality are inadequate. Lack of funding and trained personnel is only part of the problem. Politicians and service providers often have few incentives to improve performance, and potential beneficiaries are not organised to demand it.

Policymakers have responded with a variety of strategies. New Public Management approaches in the 1990s sought to change incentives of providers by giving service users more choice. There was a big expansion in the number and types of providers as services were decentralised, contracted out and privatised. By contrast, the 2004 World Development Report emphasised the importance of strengthening direct accountability of service providers to users through arrangements to encourage the participation of poor people, and to strengthen their "voice" through computerised complaints systems, citizen charters and other mechanisms. But these approaches, which focus on action by *individual* consumers, may do little to help poor people who have no access to services in the first place, and are too vulnerable to undertake the effort and risks involved.

When traditional forms of accountability -- through elections and institutional checks and balances -- fail, *collective* action by or on behalf of poor people may be an effective way of making policymakers and service providers more responsive and accountable. While such groups lack the ability to impose formal sanctions, they can have an impact by making the failures of government and service providers public, thus imposing reputational and political costs, and in some cases triggering formal accountability mechanisms (through the courts, or an ombudsman). To be effective such action (hereafter ‘social accountability’) needs to be targeted and sustained over a period of time, and groups need leverage (e.g. through access to information).

Box 1: What Is Social Accountability?

- Important where formal accountability is weak.
- Involves ongoing, collective action by civil society groups (neighbourhood associations, social movements, advocacy NGOs, the media) to hold public officials and service providers to account for the provision of public goods.
- Imposes reputational and political costs on providers by making state failures public (through the media, public meetings).
- Cannot enforce sanctions, but can trigger formal accountability mechanisms (through the courts, an ombudsman).
- Works for poor people, because collective action makes their numbers count, and accountability demands can be framed in terms of legal or moral rights.
- Offers a sharper, more targeted form of accountability than elections.

What stimulates collective action that leads to social accountability?

Collective action does not automatically follow from the creation of opportunities for people to participate. Moreover, collective actors do not necessarily engage in social accountability: they may simply organise protests, or self-help. So the critical question becomes: under what conditions are citizens likely to mobilise and make ongoing demands for accountability? Do different approaches to public sector reform increase or diminish the opportunities for collective action on behalf of poor people?

CFS research explores these questions, focusing on reforms of health care and social assistance programmes in large urban centres of Brazil, India and Mexico. It traces the impact of different types of reform on collective action, comparing patterns of relations between key stakeholders immediately prior to reforms, during policy negotiations, and in the post reform period. The objective is to identify and compare underlying *processes* at work in different contexts and sectors, and specifically changes in the interaction between state and society that result from different reform processes. Field work is still in progress, but some preliminary results are presented below.

Preliminary findings

i) *Different types of public sector reform can substantially influence the opportunities for collective actors to hold providers accountable.* The way services are reorganised or delivered can lead to the emergence of new actors and institutions, strengthen or weaken existing actors, and create opportunities for new alliances (between public and private actors, or across class divisions). For example, health reforms in Brazil created mechanisms to give collective actors a role in ongoing monitoring ('voice' reforms). By contrast, reforms of social assistance programmes in Brazil and Mexico aimed to provide poor people with more 'choice', by making direct cash transfers to families with 'obligations' or conditions attached. These different approaches had different implications for collective actors.

However, 'voice' reforms do not always operate in the wider public interest. Participatory mechanisms established under the 'Bhagidari' programme in Delhi were initially restricted to 'planned' areas. In a context of fiscal decentralization, they assisted Resident Welfare Associations in better-off areas to capture increased amounts of public spending, and to make demands based on narrow class interests that disadvantaged the urban poor.

Box 2: Impact of "Voice" and "Choice" Reforms on Collective Action

- Health reforms in São Paulo and Mexico sought to strengthen accountability through participatory mechanisms (health policy councils in São Paulo gave collective actors guaranteed seats, and the Inter-Institutional Group on Reproductive Health gave Mexico's women's movement privileged access to forums for policy design and monitoring).
- By contrast, cash transfer programmes for poor people (Renda Mínima in Brazil and Oportunidades in Mexico) were designed to bypass civil society groups that had become corrupted and politicised, by making payments direct to families. Both the nature of the programmes and arrangements for implementing them provided little opportunity for collective actors to mobilise or demand accountability (there are complaints mechanisms for individuals, but these are of limited use to poor people).
- These programmes have been successful in helping poor people, but excluding collective actors who could play a role in monitoring implementation and demanding improvements is problematic. In Mexico, the state was forced to create new intermediaries to facilitate effective local communication with beneficiaries: many of them reverted to being corrupt political operators.

ii) *If collective actors are involved in policy reform, this is likely to increase their ability to exercise accountability functions in the medium to longer term.* Specifically, if they are involved during significant moments of state reform, they are more likely to be able to influence the design of institutional mechanisms that will allow them to remain engaged in monitoring implementation. They can also facilitate social accountability action at a more local level. This finding is important because it is often assumed that involvement by collective actors in policy-making will result in their co-optation by the state.

Box 3: Involvement of Collective Actors in Policy Reform Can Strengthen Their Accountability Functions

- Actors involved at formative moments of reform are able to shape new institutions in ways that facilitate their longer term involvement.
- In Brazil, doctors from the Sanitarista public health movement pursued a long campaign for health sector reform, working with and within the public sector, and pushing for universal access, decentralization and community participation.
- In Mexico, the women's movement for reproductive health drove the reform process from the start, and was thus able to help shape participatory mechanisms.
- In Delhi, the advocacy NGO Parivatan was invited to take part in policy discussions as a result of its role in demanding accountability for failures of the Public Distribution System. It remains to be seen whether they will be able to play an effective ongoing role, given that they were not involved during the initial stages of programme design.
- Also in Delhi, NGOs involved in lobbying for the Right to Education were invited to participate in the design of a universal elementary education programme (SSA). This enabled them to play a role in implementation and monitoring, and gave them the detailed knowledge and legitimacy they needed to hold the government accountable.

iii) *The research highlights the importance of alliances between public and private sector actors (and across classes) both in promoting reform and in organising social accountability.* This is not straightforward: professional associations or trade unions representing public officials are often obstacles to reform; and the credibility of social accountability activities depends on maintaining some distance from the state. But cases from the research show how collective actors, technocrats in government and politicians can form alliances to promote reform; and how public sector alliances can give collective actors leverage (through access to information, and understanding of political and organisational dynamics) in framing social accountability demands.]

Box 4: Alliances across the Public-Private Divide

- Health sector reforms in Brazil were underpinned by common interests between the military (supporting expansion of social rights as a route to legitimisation); progressive technocrats in the bureaucracy (supporting rationalisation of services as a response to fiscal crisis); and the Sanitarista reform movement. The private sector remained an important service provider.
- In Delhi, the advocacy NGO Parivatan (demanding accountability for implementation of the Public Distribution System) found support from local bureaucrats (because their campaign targeted shop owners, not government officials). Elected representatives did not get involved, as the campaign did not threaten their political patronage networks.
- In Delhi the Right To Information campaign was led by reformists who had previously been well-connected bureaucrats, and who used those links to build strategic capacity to demand accountability.
- In Brazil societal actors gained leverage through a long term strategy of building public sector alliances, including taking up management positions in the health Ministry.

Questions for Ongoing and Future Research

The current research is deliberately restricted to two sectors within three large cities, employing a common analytical framework and methodology to allow a degree of comparability, on the basis of which some valid generalisations can be made. Further research would be needed to test whether the findings also hold in very different contexts – for example in rural areas, smaller cities, or in countries with lower levels of economic development and weaker political and institutional environments. Many of the case studies demonstrate the importance of political and institutional context: for example, electoral politics drove the introduction of social assistance programmes in São Paulo; social accountability actors in India often rely on judicial activism and the support of an effective media.

Other questions arise as a result of work so far, some of which may be addressed as fieldwork progresses. They include:

- How can civil society organisations that are party to policy negotiations also act as effective watchdogs of implementation? What stops them becoming co-opted by the state?
- Are the service delivery and social accountability roles of NGOs mutually reinforcing or, virtually by definition, mutually exclusive? Does contracting out create a new lobby of providers, with some interest in ensuring budgets and staff are available?

- To whom are civil society organisations engaging in social accountability themselves accountable? What stops them becoming corrupt, politicised, clientelist organisations?
- Has the move away from direct public provision of services and fragmentation of service provision made collective action more difficult?
- Does collective action by the middle-class risk crowding out poor people?
- Is collective action to hold providers accountable more important for some types of services than others? (The cash transfer programmes in Brazil and Mexico have benefited poor people, despite the lack of social accountability).
- Do reforms that establish legal rights help to enhance social accountability? And does involvement by collective actors in policy reform help to promote a rights based approach, as well as good institutional fit?
- Can collective action to demand social accountability help to change the basis of political competition? Does it strengthen or weaken clientelism.

Implications for policymakers

The research points to the importance of ongoing *collective* action to demand accountability on behalf of poor people where formal accountability mechanisms are weak. It is not sufficient to rely on arrangements that require direct action or participation by individuals. This suggests that policymakers need to pay more attention to the circumstances in which collective actors are likely to mobilise and make ongoing demands for accountability. This does not automatically follow from the creation of opportunities for people to participate.

Policymakers should reassess the importance of "autonomy" for civil society: the research suggests that organisations involved in policy reform are more likely to stay engaged in monitoring implementation and demanding improvements. This points to encouraging open public debate, and inclusion of a broad range of stakeholders in designing reform processes.

The focus should be on state-society interaction, not just on building state capacity on the one hand, and strengthening civil society "voice" on the other. It is through a political process that involves both state and society that common interests can be identified and pursued, and differences negotiated.

Effective collective action requires persistence, ongoing access (to information and policy processes) and alliances as well as resources. So donors might do well to take a more targeted and selective approach to support for civil society.

In considering different approaches to public sector reform it is worth taking account of the likely indirect impact on incentives and opportunities for collective action, not just the direct impact on service delivery.