



What did we learn and how will we move forward together with mainstreaming CARE's Inclusive Governance approach?

FINAL REPORT

May 2015

GLOSSARY OF TERMS

Accountability: Power-holders are accountable when they have the obligation to reveal, explain and justify their actions and face the threat of sanction for any failures in fulfilling their duties. (Schedler, 1999).

Civil Society: The multitude of associations, movements and groups, formal and informal, in which citizens organize to pursue shared objectives or common interests. These institutions exist beyond the individual or household level, but outside of formal state institutions. Civil society can play an important role in facilitating citizen's opportunities to engage with each other and exercise their voice to the state (CARE UK Governance Strategy 2008-2013).

Collective Action: Where a group or category of actors cooperate to achieve an objective they agree on. Collective action problems exist where a group of actors fail to cooperate because the first-movers would incur costs or risks and they have no assurance that the other beneficiaries will compensate them, rather than 'free-riding'. The problem is more likely to arise when the group in question is large and the potential benefits are non-excludable. Solutions to collective action problems involve enforceable rules ('institutions') to restrict free-riding and thereby motivate actors to act in their collective interest (Booth, 2012).

Forward Accountability: The accountability of CARE towards its beneficiaries and communities that are directly affected by our interventions (CARE Governance Wiki).

Fragile State: This is a state 'unable to meet [their] population's expectations or manage changes in expectations and capacity through the political process' (OECD, 2008).'

Governance: The exercise of power in the management of public affairs. It is a dynamic, political process through which decisions are made, conflicts are resolved and diverse interests are negotiated. The process can be influenced by formal written codes, informal but broadly accepted cultural norms, the charismatic leadership of an individual or individuals, the use of force, coercion or patronage, or, often, a combination of these means (CARE International UK, 2011).

Good Governance: The effective, participatory, transparent, equitable and accountable management of public affairs guided by agreed procedures and principles, to achieve the goals of sustainable poverty reduction and social justice (CARE International UK, 2011).

Institutions: The societal "rules of the game" that shape and constrain human interaction and individual choices. Institutions can be a formal set of rules such as a constitution, a political regime, executive judicial relations or elections. Institutions can also be informal rules — the

norms, cultural practices or habitual ways of doing things that frame social behaviour and interaction and that encompass social hierarchies, patron client relations, and various forms of rent-seeking (World Bank, 2008: 11).'

Citizen Participation: The redistribution of power that enables the have-not citizens, presently excluded from the political and economic processes, to be deliberately included in the future (Arnstein, 1969).

Political Economy Analysis (PEA): Concerned with the interaction of political and economic processes in a society: the distribution of power and wealth between different groups and individuals, and the processes that create, sustain and transform these relationships over time (OECD-DAC in DFID 2009: 4).

Responsiveness: Being responsive to the views of stakeholders in decision making. This implies meaningful participation (stakeholder engagement) at all stages of the decision making cycle - in planning, implementing and judging policies and programmes for their impact (on the lives of people and the planet (CARE UK Governance Strategy 2008-2013).

Social Accountability: Defined as an approach towards building accountability that relies on civic engagement, i.e., in which it is ordinary citizens and/or civil society organizations who participate directly or indirectly in exacting accountability (World Bank, 2004).

State: The state plays a central role in the development process. A state has obligations to its citizens, whose rights are enshrined in the constitution and legal codes. As the legal sovereign, the state is the only guarantor of universal access to public good. The state often underperforms or fails to exercise its responsibilities. The replacement of state provision of services by non-state actors is only a temporary solution to the underlying issue of institutional weakness (Adapted from Alfred Stepan, CARE UK Governance Strategy 2008-2013)."

State Capability: Public authorities are responsible for ensuring citizens' political, social and economic rights, and in order to achieve outcomes that ensure social justice it is imperative that public authorities and other power-holders have the capacity to uphold these rights and deliver public goods. State capability means that state agencies and public authorities have both the *capacity* (technical and administrative) and *ability* (political and institutional) to deliver public goods (CARE Governance Wiki).

Strong/Capable State: In general, capable states are able to formulate policies effectively (reconciling political and technical trade-offs between policies and technocrats) and to implement policies effectively (in terms of coordination, organisation, administration and

accountability). To strengthen state capability means to respond to address these issues throughout the policy cycle, from design to delivery (CARE Governance Wiki).

Weak States. These are poor states suffering from significant "gaps" in security, performance and legitimacy. They lack control over certain areas of their territory, and therefore (critically from an international security perspective) the capacity to combat internal threats of terrorism, or insurgency. (Brookings Institution). From a service delivery perspective, a weak state is without the capability (technocratic, bureaucratic, and financial) to formulate and implement policies. If a state is 'strong' from the perspective of security (strong armies that could deal with internal insurgencies), they could be weak in terms of delivering on education or healthcare or basic services

EXECUTIVE SUMMARY

CARE's Governance Africa Learning Event was held in Nairobi between the 28th April and the 1st May 2015 for our governance practitioners in Africa. This was a crucial juncture at which country offices were able to engage with CARE International's (CI's) 2020 Programme Strategy, understand inclusive governance as a non-negotiable core approach and exchange learning to improve country office programming, particularly capitalizing on recent multi-country research on the use of community scorecards in different contexts.

The learning event had 36 participants from 15 country offices across the continent (Ghana, Zambia, Somalia, DR Congo, Togo/Benin, Malawi, Cote d'Ivoire, Madagascar, Uganda, Egypt, Burundi, Tanzania, Morocco, Kenya, and Rwanda). Participants shared learning on inclusive governance, social accountability and organisational accountability. The event also included external participants from TWaweza, Keystone Accountability, Ushahidi, Article 19, Viwango, FIDA Kenya, and SEND Ghana. The external stakeholders presented on inclusive governance programming in different contexts of Africa, the use of Information Communication Technology (ICT) in social accountability, current trends on development agencies accountability to their constituencies and developing a framework for implementing and measuring organisational accountability.

One area of discussion was framed around **how CARE can expand its engagement beyond the community and district level to working with partners at the national level**. This upstream governance and policy work is what we are most afraid of and consequently lacking. Conversations were had around how CARE needs to adopt a local problem-driven and politically sensitive approach when engaging at this higher level. CARE needs to apply sound political analysis (PEA) to understand the context and socio-political system. CARE needs to be more deliberate and aim to institutionalize PEA in all our programmes. We are still at the beginning and are taking baby steps. Adopting PEA more systematically involves a big effort, as it requires a shift in the way of working, a different skill set and hence possibly different staff. CARE also needs to facilitate building pro-accountability coalitions between state and non-state institutions to form cross state-society agendas. CARE's entry point into further engaging politically is likely through CARE's strength in the area of governance in service provision.

To engage in upstream policy work, CARE could consider undertaking monitoring and evaluation of direct service provision. Civil society's ability to monitor governance programs, collect the evidence and make evidence part of the policy setting agenda is helping in policy revision and more inclusive policy reform. CARE may also engage in activism and mobilization of civil society; build alliances with media to spread evidence and remain non-partisan, yet political; engage with and build capacity of existing institutions such as making elections more credible and accountable

and supporting partners to be part of systems who are responsible for electing duty bearers; align with government agendas such as national level flagship programmes and include women 'leaders' in the political process at national level.

Second, **country offices shared programming examples and highlighted projects with national level change.** Findings from the ODI Community Score Card report reflected country office's thinking and learning concerning higher level influence. This being that at the participatory planning phase, it is necessary to involve partners that are connected to regional levels and national levels and also be aware of government officials' incentives at all levels. CARE-ODI research has shown how linking to the national level can be easier in strong, states, i.e. those able to formulate and implement policies, as defined in our glossary above. In this context, aligning programmes to national priorities and linking to existing mechanisms for national dialogue may be crucial. Country offices did however voice their concerns about the feasibility to scale and sustain projects after donor funding runs out. Scaling up the model remains a challenge due to lack of funds for the implementation process.

Third, **participants actively engaged in designing a mechanism for rolling out the inclusive governance approach.** This mechanism signifies a move away from the north creating knowledge and the south implementing knowledge and towards creating a platform to mutually showcase and share knowledge. The mechanism agreed upon (summarised at the end of the Day 1 section of this report) would largely consist of cross-country visits and peer training between COs; facilitating connections and partnerships with academic think-tanks; sharing case studies of CO programmes and learnings through webinars and providing guidance for funding proposals and M&E. This exchange would be led by CIUK, co-leaders (CARE Nederland, Denmark) and a focal person in each CO.

The second day encouraged **discussions around social accountability impact.** Participants engaged with notions of instrumental vs. institutional changes. A general understanding is that **Instrumental change** is for instance: changes within current capacities of that operating agency e.g. existing health centre, parent education committee. Decisions are made based on current resources and current facilities. **Institutional change** is for instance: changes that require people going beyond their government level, e.g. local to district and being able to lobby for additional resources beyond the power of district officials (as described in the ODI-CARE Community Score Card report). Introduced next were the conceptual approaches 'tactical vs strategic' put forth by Jonathan Fox whereby Fox describes tactical approaches (information and voice led based on optimistic assumptions that with this information, people will transform the public sector) as 'naïve' because information alone is not power, rather information needs to be in an enabling environment for the state to be responsive (strategic approach). Consequently, implications for CARE were raised including issues around how CARE can escape the lower accountability trap where we are there at the local level, happy to work in school and health facilities but we are stuck there due to district level bottlenecks. Another concern raised was how CARE's projects are not

long enough in duration to deliver this institutional change. This long term commitment is a key issue. An implication for the donors, and something CARE must challenge, is around how donors are going to start funding long-term, flexible projects.

The final part of the second day looked at **how Information and Communication Technology (ICT) can impact social accountability** and we heard experiences from guests TWaweza and Ushahidi. We learnt of the benefits but also challenges of using technology. Reiterating Fox (2014), this panel confirmed that information alone is not sufficient to hold authorities to account. Knowledge is about being able to spread the information (message) effectively. Technology only allows the spread of this information if it is applied bearing in mind the specific contextual situation (e.g. there is no point giving a mobile phone to a household to record whether waterholes are working if the men get the phone but the women collect the water). The data collected also needs to be presented in an easily accessible and useful format.

The final day **explored CARE's organisational accountability**. Guest speaker Viwango spoke of establishing standards for regulating Civil Society and thus provided information that has implications on the sorts of partners that CI can go for and the instruments to use to ensure accountability in partnerships. Keystone Accountability highlighted how, standards, logical models and checklists alone are not enough, arguing that feedback was increasingly becoming an important determinant of development outcomes. CARE Rwanda showcased their management scorecard and highlighted how, despite initial hesitations over the approach, the SMT-Staff interface meeting was extremely open, fair and transparent resulting in constructive actions to address staffs' concerns, which enhanced the CO's internal accountability. CARE Ghana presented the Governance and Accountability Learning Initiative (GALI) and its impact on strengthening accountability relations with beneficiaries (Cocoa Life communities). The approach led to strengthened stakeholder involvement and collaboration and an increased drive by communities in demanding accountability from duty bearers.

In summary, CARE's Governance Africa Learning Event has allowed us to share views and experiences so that we can collectively build a common approach to CARE's governance programming work and better understand what mechanism we want to lay down to put this common approach into practice. The event has been highly successful in accomplishing what it set out to achieve and positive participant feedback resonates with this success. Some emergent final action points were as follows:

CARE's Culture: Overcoming CARE's restrictive organisational culture when acting in a 'political' environment. **Partnerships:** Working in partnerships with a third party who does not share the same vision is a challenge. When working with strategic partners, how do we get partners on board to accept our values? How will we engage with new partners? **Leadership:** Getting buy-in from leadership, strong support from CARE UK and CO champions. **Sharing information:** How will case studies be shared and how will cross-country visits and training be funded? **Innovation:**

There is an over emphasis on community score cards. The CSC is not the silver bullet, we need new innovative approaches. **Acting and putting into practice:** How are we going to put all we have talked about into practice and who is going to be leading this? **Measuring our impact:** Becoming better at M&E so that we can have demonstrable impact.

Due to the nature of the event, these issues could not be immediately addressed with actionable solutions. Instead an agreement was made for CARE UK to take these questions back with us for further reflection so that we can provide country programmes with clarification and guidance on them moving forward.

INTRODUCTION

CARE's Africa Governance Learning event could not have been timelier. With the international development community pushing inclusive governance and social accountability to the forefront of the development agenda, coupled with CARE International's (CI's) 2020 programme strategy to build a 'One CARE' that adopts a single mainstreamed approach to governance, this learning event has laid the foundations for our new way of thinking and implementation of governance programming. The event intended to provide a platform to CARE governance practitioners to discuss what we mean by inclusive governance and how it currently looks in CARE's governance programming in Africa (**stocktaking**); to share and learn about promising governance models/practices/thinking in and outside the CARE world (**showcasing and learning**); and to network with peers inside and outside CARE and start establishing a network of governance specialists in Africa (**networking**).

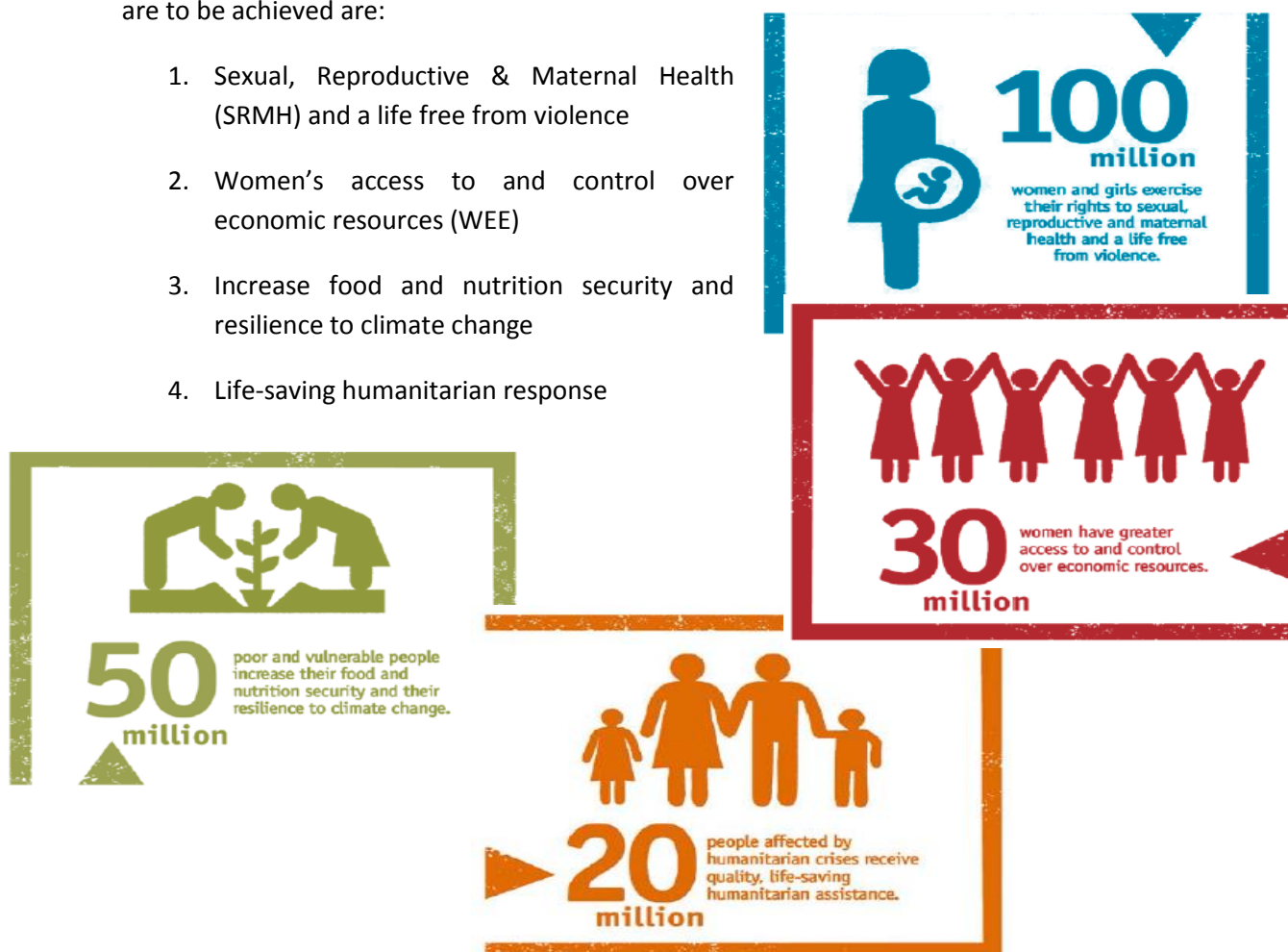
Over the course of the event, these key objectives were achieved by: collectively discussing through break-out groups, the deep changes that may need to occur in the way that we currently work and how best to engage with partners and move beyond CARE's 'comfort zone'; panel discussions with external speakers challenged our current way of thinking and helped raise questions about where we shift in this new 'inclusive governance' direction and how to build something together under a single approach; collectively designing what mechanism we want to lay down that will allow us to realistically put our approach into practice.

DAY 1: Inclusive Governance approach in CARE programming

Introduction to CARE International's 2020 Vision

CARE's Vision is to achieve **impact**, clearer **identity** and **relevance**, by focusing on a) putting women at the centre of development b) seeing **inclusive governance as a non-negotiable approach**, and c) building resilience. CARE's global outcome areas through which these impacts are to be achieved are:

1. Sexual, Reproductive & Maternal Health (SRMH) and a life free from violence
2. Women's access to and control over economic resources (WEE)
3. Increase food and nutrition security and resilience to climate change
4. Life-saving humanitarian response



CARE's Governance Programming Framework (GPF)- CARE's Governance Theory of Change

CARE promotes good governance in three key areas of change (as demonstrated by the triangle domains):

- a) **empowering poor people** to know and act on their rights and represent their interests;

- b) **influencing those in power**, such as governments, traditional leaders and the private sector, **to be more responsible, responsive and accountable**; and
- c) **brokering linkages and convening spaces** which enable effective and inclusive relations and negotiation between the two.

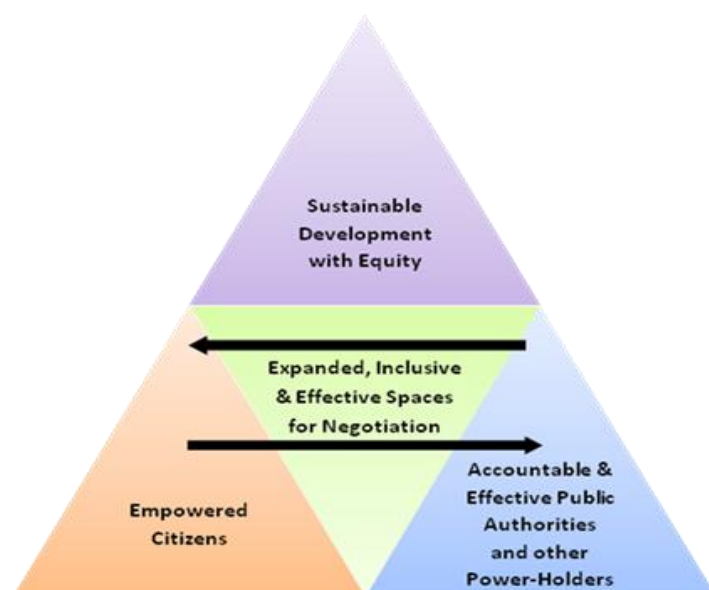


Figure 1: Governance Programming Framework

A look at Inclusive Governance and how it feeds into CARE International's 2020 Vision

[CI 2020 Vision presentation on Inclusive Governance](#)



CI 2020 Vision

Supply side vs. demand side

Reviewing the Governance Programming Framework (see above) and re-iterating the importance of Governance Programming to work across all domains of the GPF, the key message is how vital it is to push ourselves as CARE, out of our comfort zone in the demand domain of 'citizen empowerment'. CARE's focus has been predominately in the domain of 'citizen empowerment' (mainly voice work).

However, this voice work (demand work) is not enough on its own. It does not work if citizens are shouting out but power holders including local leaders and government, (supply side) are not listening to them. This does not mean CARE has to work in all the 3 domains alone, but to bring in partners to help ensure working and promoting change in all domains.

Emerging thinking on governance programming

Reviewing the emergent trends on governance (see CI 2020 Vision presentation above), it becomes clear that the external development community beyond CARE sees governance as a complex problem with political roots. People who have power want to hold on to it. Therefore there cannot be pure technical fixes. Governance is equally a socio-political issue as it is a technical issue. Therefore we need our analyses to be more problem-driven and politically sensitive. Further, there is a need to push beyond the dichotomy between demand and supply side. Finally adopting a citizen-centric approach and locally driven solutions is vital. Pro- accountability coalitions (dependent on mutually reinforcing interactions between state and non-state institutions working together to limit political power and to sanction its abuse e.g. through state-society bargaining and interaction; negotiating changes with anti-change actors; changing governing elite incentives and challenging the primary/secondary political settlement (See [Joshi, \(2014\)](#)) will allow for the formation of cross state-society agendas and multi-stakeholder platforms. Locally driven solutions are needed since blue print 'best practice' is not necessarily a best fit for any particular context. We need to adapt, modify and tailor solutions to the local context and grow organically in those power constellations. Many of the solutions we design need to be understood and owned by actors, we cannot simply impose an agenda on them.

[Anu Joshi \(2014\) Context Matters: A Casual Chain Approach to Unpacking Social Accountability Interventions \(IDS\)](#)



Context Matters
Joshi (2014)

Adapting Development Overview: Emergent trends on governance and social accountability

- ☒ Start with problems, not ready-made solutions.
- ☒ Understand and engage with the politics.
- ☒ Support locally-led reform.
- ☒ Don't be afraid to try, fail and try again.
- ☒ Think like an entrepreneur: take risks, make small bets.

From reviewing this external thinking questions emerged for CARE:

- ***What do we mean by politics and is CARE acting politically?***
- ***Power, politics and corruption, how do we label our work around these?***

- ***We need to step out of our comfort zone. There is a clash between CARE's more reserved organisational culture and speaking out politically, how do we overcome this?***

A clear consensus could not be made on these questions and so an agreement was made for CARE UK to take these questions back with us for further reflection so that we can then provide country programmes with clarification and guidance on them. However a summary of the discussions is provided below.

What do we mean by politics and is CARE acting politically?

Questions around what 'politics' means for CARE and whether CARE is acting politically did not gain a clear consensus. We discussed how CARE is a political actor. Governance is about working in systems where there are power holders and an unequal distribution of opportunities and services. Simply questioning unequal power relations is unavoidably political. CARE's governance work involves engaging in political processes and acting politically, making CARE a non-neutral actor by nature, thus acting politically. In essence, our governance work is inherently political, but not partisan.

Do we always know we are acting politically, how are we labelling our work?

Confusion over whether we are acting politically or not may have stemmed from a mislabelling of some of our work. We may be acting politically in programming but just not realising it. Projects addressing leakages of resources (i.e. corruption) and challenging power structures are all political at the core but we may just be overlooking this. Moving forward, it is necessary to be critical and give credit to ourselves where we are in fact working politically.

To act politically effectively however does involve sound political analysis (PEA), involving understanding of the context, the socio-political system, who are the decision makers and how to navigate this system to find the best entry point for CARE's governance work. This is something all CARE's programming needs to consider moving forward because firstly, acting politically addresses the root causes of the problem and secondly, donors such as DFID and USAID are promoting this.

We need to step out of our comfort zone, but how do we do this?

In terms of concerns around CARE's ability to act politically, the majority of participants agreed that CARE takes a 'timid' approach to engaging with politics. One reason being how we perceive ourselves as having less legitimacy engaging in party politics compared to other actors. CARE is for instance not known for being out there and taking risks that could potentially jeopardise our relationship with the government and donors. Secondly, CARE's own organisational culture is restricting an engagement in politics; CARE seems to take a backseat when there is heat.

Solutions to overcoming the organisational culture has much to do with convincing leadership and Country Directors as it does convincing different levels to push this agenda and change CARE's

DNA. Practical actions towards transitioning CARE's culture could include a) the publication of documents to help people know what to do b) development of internal policies which clearly express the dos and the don'ts c) begin to deny certain kinds of funding that does not align with CARE's overall strategy and instead being more selective and focused and begin pushing towards the different kinds of funding that is most relevant for CARE.



Guideline on Civil
Society Collaboration

In summary, we need to recognise that acting politically is crucial however CARE's ability to act politically is somewhat restricted at present. Therefore we need to re-think what our added value is as an organisation and what our role is. CARE's [Guideline on Civil Society Collaboration](#) details CARE's 2020 strategy for supporting organised civil society and describes the new role CARE can play. CARE's entry point into further engaging politically is likely through CARE's strength in the area of Governance in service provision. This route is less political in the sense that we do not need to hit the street, but political in respect to the power structures and negotiations for change we are engaging. However, for CARE to achieve higher level impact, we need to move beyond downstream governance at the point of service use and towards upstream policy work. This upstream governance is what we are most afraid of and consequently lacking.

Exploring inclusive governance programming in different contexts

(Panel discussion with Henry Maina – Article 19, George Bimpeh – SEND Ghana, Christine Ochieng – FIDA Kenya)

[Article 19 presentation](#) | [SEND Ghana presentation](#) | [FIDA Kenya presentation](#)



Article 19
presentation



SEND Ghana
presentation



FIDA Kenya
presentation

Defining contexts is a thorny affair. For instance, what do fragile state, restrictive state, less coordinated state, strong state, actually mean? Is a state strong if it has grown to shape governance systems that have improved growth in education and health sectors, yet suppresses the space for citizen voice to gain responsibility from duty bearers? There are no conclusive definitions and classification cannot be stratified, making it difficult to identify what context we are working and therefore which approach to apply. Action research is a one way to better understand this complex, multi-polar world. [Article 19](#). To enhance CARE's own practice, we need to provide clarity on certain terms to help define our work – we need to have a working definition of terms like 'strong', 'weak' and 'fragile'.

Key topics of discussion during the panel on contexts

Listening to how different organisations are working in different contexts offers useful insights for CARE's future work.

- **Inclusive Governance achieved through two channels: elections and collective action**

Role of elections: The power of the 'thumb'. There is evidence that elections play a role in promoting the responsiveness of elected officials, especially in terms of delivery of basic services like education and health. Governments are accountable to the people who put them in power. They are increasingly aware that people are looking at them and if they do not provide public services then they will not get re-elected. For instance, increasingly, voters in Ghana seem to be displaying a clear pattern of 'mature' democratic accountability. They collectively evaluate and throw the elected out of office and this is not just accidental. Gradual constructions of accountability mechanisms over the long term create the learning mechanisms that encourage politicians to behave, consequently contributing to a stronger focus on health and education policy in Ghana. [SEND Ghana](#).

- **Role of civil society**

Mobilization and activism

Civil society activism has given birth to inclusive governance. There has been a dramatic increase in the engagement of NGOs in both priority-setting and policy influence around basic services and the monitoring and scrutiny of government performance. NGOs are undertaking monitoring, evaluation, direct service provision, lobbying and policy engagement. Civil society's ability to monitor governance programs, collect the evidence and make evidence part of the policy setting agenda is helping in policy revision and more inclusive policy reform.

Further, activism and mobilization of civil society around issues of corruption have proven instrumental in raising awareness about the threat that corruption poses to democratic governance and has increased the pressure on government officials and elected politicians to become more accountable and transparent. CSO mobilization has contributed to the development of independent governance institutions to monitor corruption and provide checks on the executive. [SEND Ghana](#).

Alliances with media to spread evidence

Civil society can partner with media organisations to get citizens involved directly. Civil society provides the media with information and once the media starts to talk about it, then responsiveness from duty bearers is guaranteed. Local radio stations are particularly engaging and have the ability to instigate change in local politics. They act as vehicles for interaction between citizens and their local government representatives where duty bearers at the local level publically

answer questions. Information presented should be in various languages and in a format understandable to the poorest and most marginalised. [SEND Ghana](#).

Including women in the political process

Civil society can work to challenge the status quo and build the capacity of women community leaders to be advocates of change at local and national level. A challenge is selecting women who are 'leaders' and can represent others most effectively. At the national level, these 'leaders' need partners at the higher government levels so they can push an agenda and make lots of noise at different levels and be part of the decision making and policy drafting discussions. Adopting a rights-based approach and pushing for women's rights to be recognised e.g. property rights and inheritance, is crucial. Building regional partnerships with police and land ministries can also be important. [FIDA Kenya](#).

Neutralizing the gate keeper system.

Community elders have power and need to be engaged with. We can understand what they are saying and what they mean and inform them of issues around human rights and social accountability. However, gate keeper systems are best avoided and instead put the citizens and most marginalised at the forefront by empowering them to speak for themselves. Supporting 'swing voters' who are aware of accountability issues and look at how responsive governments are, may encourage a pattern of 'mature' democratic accountability, whereby citizens can evaluate and throw the elected out of office if they do not deliver on their service provision promises. [SEND Ghana](#).

- **Moving Forward: What is CARE's point of leverage?**

Do we know the structures and spaces where CARE has more leverage? How do we engage with the decision making structures and with those capable to exert pressure?

Being part of the system and engaging with and building capacity of existing institutions. In governance programming, the first issue is around how we contribute to building strong governance institutions. CARE could be looking at its involvement in elections, and making them more credible and accountable. This could involve supporting partners to be part of systems who are responsible for electing duty bearers. [SEND Ghana](#).

Choosing partners. Supra-National engagement support in different platforms that enhance direct engagement with citizen but are less confrontational –UN-UPR, treaty bodies, special mandate holders, ACHPR, Commonwealth Secretariat/Foundation. [Article 19](#).

Aligning with government agendas. Buying into government agendas such as national level flagship programmes or sub-national level agendas such as agriculture, health and water policies, will help align incentives and push for reforms. When engaging government, start with a strong

partnership building agenda, state understanding in an MOU, not legally binding but encouraging us to work together. It is not about naming and shaming (media can do this) but how to reform the agenda. [Article 19](#).

Working with media so can remain non-partisan, yet political. It is important that CARE remains seen as “non-partisan” (not affiliated with a political party), given the importance of us having constructive relations with all MPs and political parties. CARE may talk to MPs/government officials and engage them in local planning and community budgeting, however CARE will not support their political parties. [SEND Ghana](#).

Work with insiders. Pro-accountability champions exist in the state apparatus; it is always worth looking to work with them however junior. [Article 19](#).

Learning and questions raised from CARE's Inclusive Governance programming

- **Linking community level plans to national level.** At the participatory planning phase, involve partners that are connected to regional levels and national levels at the beginning and also be aware of government officials' incentives at all levels.
- **Participation and empowerment of women.** Participation of women increased based on programmes that they were more personally interested, such as education and healthcare. Although concerns were raised over trying to avoid reinforcing traditional gender roles onto women through programmes. Secondly, Village Savings and Loans Associations (VSLA's) can be used as an entry point to achieve women's participation, and act as a platform for doing accountability programming beyond financial inclusion work. Thirdly, it is important to recognise that we cannot make the assumption that women feel comfortable and are able to speak up in discussions and give presentations, they may need training first. Finally, working with men, women and family to influence gender roles is important. For instance, engaging men in the protection of women's rights – ‘secret men’ groups from MHAP is a good example.
- **Sustainable and scalable.** Funding projects after donor money runs out is a common challenge for projects. For instance, using media in DRC but how are the FM stations funded after donor money runs dry affects the projects ability to reach scale. Similarly with Ghana's CAP model, scaling up the model is a challenge due to lack of funds for the implementation process. Further, in order to make citizens accountability sustainable it is important to engage citizens in monitoring not just the planning phase.



Rolling out the inclusive governance approach



Rolling out the IG Approach presentation DAY 1 | The mechanism DAY 3 presentation



Rolling out the IG Approach presentation



The mechanism DAY 3 presentation

What does the mechanism look like?

- CIUK Lead
- With other co-leaders (CARE Nederland, Denmark)
- CIUK, CIMs, COs, Regions
- Some COs more experienced than others...
- Focal Person in each CO, but also governance task team
- Thematic clusters (Learn from PECCN, CEG, CIGN)

What support and services does the mechanism offer?

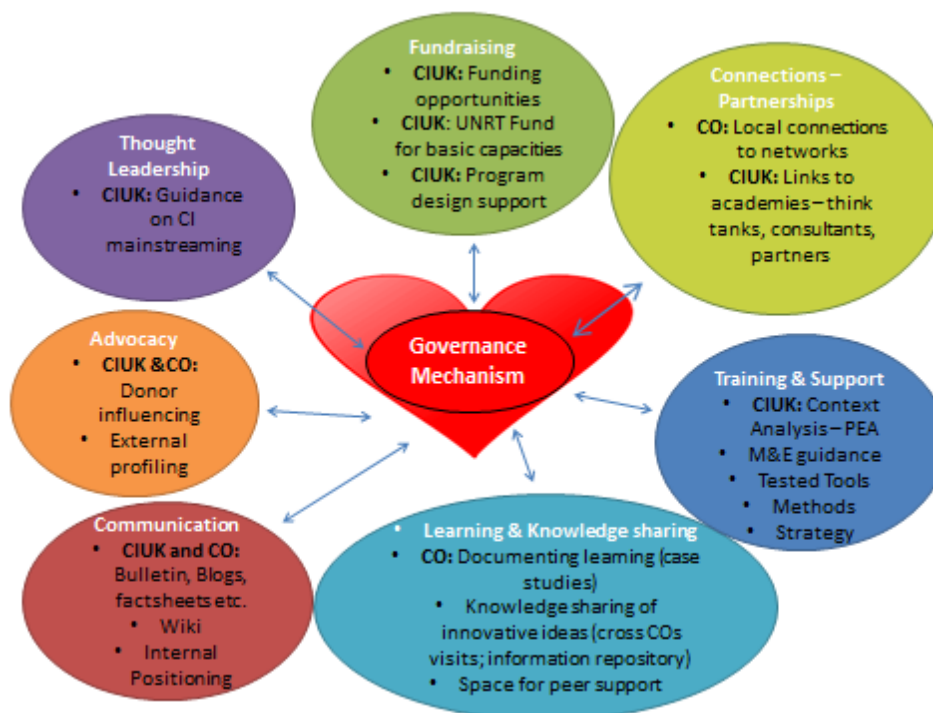


Figure 2: The Inclusive Governance Mechanism

DAY 2: Showcasing – measuring and telling the story of Social Accountability impact

Social Accountability Programming: What does it mean for CARE?

CARE's approach to social accountability is non-confrontational. It involves negotiating change through dialogue:

- Brokering citizen-power holder engagement to **increase responsiveness**
- Facilitating collective problem solving on an issue to **increase civic participation**
- Enabling community monitoring of services and commitments to **increase transparency and quality**

The Community Score Card (CSC) is an approach or model used in CARE's social accountability programming. However, the CSC is not the silver bullet. While there is a CSC toolkit, the CSC is a blending of approaches and tools that phases into this, depending on the specific context needs. See *Appendix A* for World Bank definitions of social accountability tools.

Social Accountability Programming: What impact are we really having?



MHAP presentation

- *Impact of CSC in Malawi – trends and qualitative findings of Maternal Health Alliance Project (MHAP) evaluation*

The scorecard approach used was as follows:

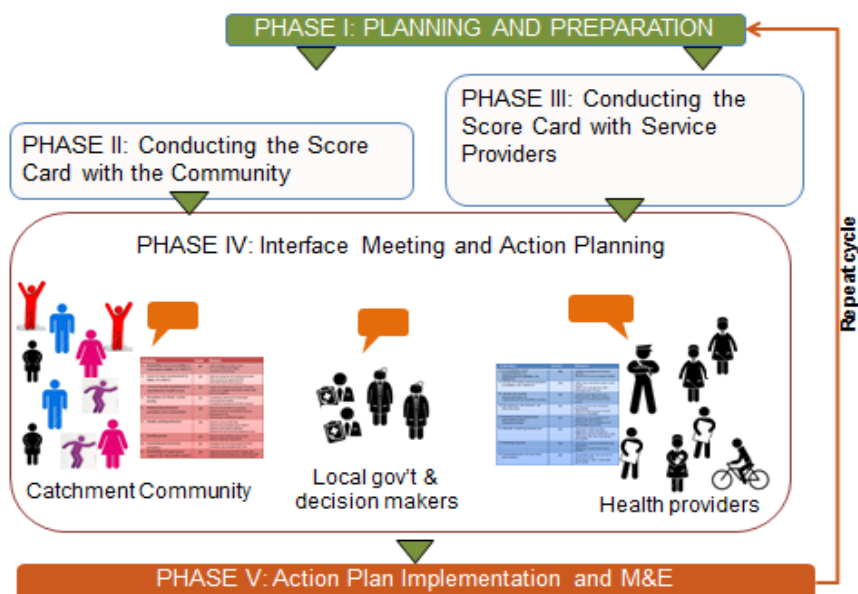
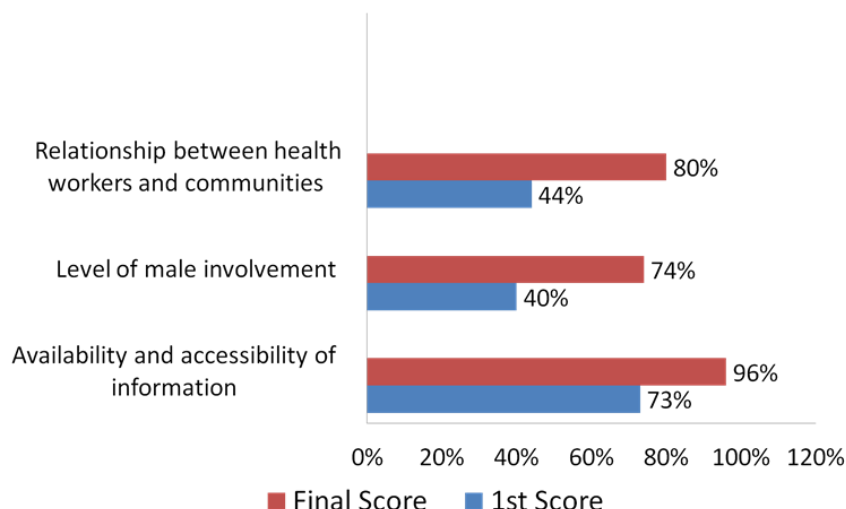


Figure 3: Community Score Card approach

Illustrative changes evidenced from the MHAP evaluation included:

**Figure 4:** Changes evidenced by MHAP evaluation

- **ODI-CARE comparative research on impact of CSC in 4 African Countries (Malawi, Tanzania, Rwanda and Ethiopia)**



The aim of this CARE-ODI research was to understand a) how we adapt the CSC approach and steps involved in the approach to different contexts and b) how the impacts vary in these different contexts due to differing political and power constellations.

For instance, in Ethiopia, the state directs the nature of accountability and took ownership of the accountability system, where as in Tanzania for instance, CARE had to direct actions more in this context. Contextually similar to Ethiopia, Rwanda's state took ownership of the accountability system. As a result Rwanda, showed signs of more **institutional changes**, more so than the others. In Ethiopia and Rwanda, it was possible to reach a higher level of government commitment as interface meetings allowed these discussions. Thus important to understand the political mechanics at this middle level of government.

Documented Impacts across the 4 countries

See Slide 5 for documented impacts instrumental and institutional.



Common 'Mid-Point' instrumental-institutional elements:

- Improvements in trust & mutual respect
- Improvements in resource allocation
- Infrastructure construction and rehabilitation

CARE's experience with community score cards: What worked and why?



ODI What Worked
and Why?

1. *Working with and through the state (identifying champions of change in state and plugging into existing accountability systems)*

There is increasing recognition that building coalitions across state and non-state actors is key (Fox – “sandwich strategy”). Where the state is strong and coherent a wider range of outcomes were achieved and programmes were more sustainable. Where state capacity is weaker, outcomes tend to come from informal processes outside state structures, but still involving state actors. For instance in Ethiopia the programme was implemented by the state. Local government and service providers played the key roles in implementing solutions in both Ethiopia and Rwanda.

2. *Solving internal collective action problems (Move beyond supply and demand)*

Attempts to “move beyond supply and demand” tend to assume that there are cohesive interests that can be brought together. However, problems of free-riding and moral hazard exist within groups e.g. water point maintenance duties within communities, ability to admit problems and short-comings in service providers. In practice, collective action problems can be solved by building coalitions at the local level by a variety of groups agreeing to change their actions or contributing resources. Impacts in Malawi and Tanzania involved a range of local actors (councillors, traditional chiefs, local government officials etc.) solving collective action problems.

3. *Creating a space for co-operation (Build coalitions with local actors)*

In strong cohesive states – Aligning with national targets and priorities improves engagements and outcomes (for instance CSC approach in Ethiopia and Rwanda). In less cohesive states – Alliances must be built across a range of groups, often at the very local level, and programmes must be flexible enough to adapt to changing circumstances (e.g. elections and new funds).

4. Linking the local to the national (*Vertical integration is needed if we want to achieve systemic reform*)

Using local level mechanisms to link to national level changes in policy or conditions is hard. Only a single case was documented in this study (Rwanda and health insurance fee classifications). Linking to the national level will be easier in strong, coherent states. In this context, aligning programmes to national priorities and linking to existing mechanisms for national dialogue may be key.

Defining Instrumental vs. Institutional Changes

Defining instrumental and institutional changes is complex and there is no agreement. CARE even disagreed on how ODI defined them which is based on a World Bank framework, see *figure 5* below. However a general understanding is that **Instrumental change** is for instance: changes within current capacities of that operating agency e.g. existing health centre, parent education committee. Decisions are made based on current resources and current facilities. **Institutional change** is for instance: changes that require people going beyond their government level, e.g. local to district and being able to lobby for additional resources beyond the power of district officials.

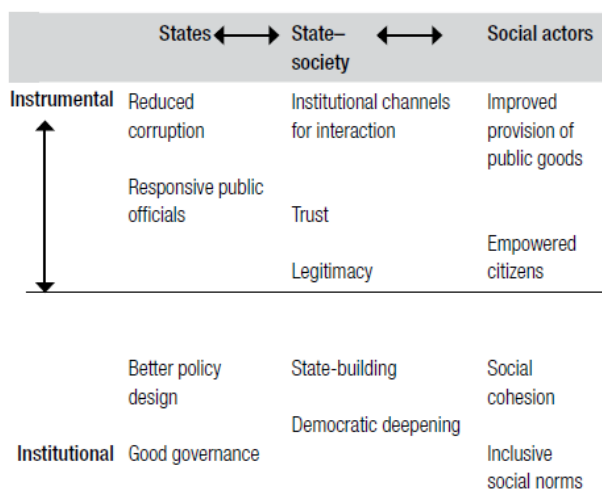


Figure 5: Types of Social Accountability impact. Source: ‘Opening the Black Box: Contextual Drivers of Social Accountability Effectiveness’ (World Bank, 2014).

What Does Evidence Really Say? Jonathon Fox (2014) [Click here for working paper](#)

Jonathon Fox’s video introduced more definitions. Under the umbrella of social accountability he spoke about **Tactical (naïve) approaches** and **Strategic approaches**.

1. **Tactical:** bounded tools strictly information and voice led based on optimistic assumptions that with this information, people will transform the public sector. Believing information is power.

2. **Strategic:** lots of tactics articulated into a campaign, producing an enabling environment, and reducing risks and threats. Also citizen voice initiatives are coordinated so that voice leads to government response- thus increasing incentives for more people to respond to voice (creating a mutually reinforcing process). Does not believe information is power but rather: **information needs to be in an enabling environment.**

Fox's Approach

1. **Need a fresh conceptual framework (Problem driven and transforming information into useful information that is actionable)**
2. **Voice needs representation as well as aggregation (thinking about who represents who)**
3. **Voice can be constrained by the 'fear factor' (whistle blower protections therefore required when increasing voice and participation)**
4. **Build in teeth (shorthand for institutional capacity to respond to voice). Whose job is it to listen and respond to complaints and identification of problems?**
5. **Break out of 'lower accountability traps' bring vertical accountability back in.**

The lower accountability trap means we are there at the local level, happy to work in school and health facilities but we are stuck there due to district level bottlenecks.

Implications for CARE

Fox informs us of the challenges we have been facing. CARE's projects are not long enough to deliver this institutional change. Depending on context, not enough time. Maybe we should start to think about how our SA approaches currently reach the top.

Long term commitment is a key issue. An implication for the donors is around how they are going to start funding long-term, flexible projects. CARE must challenge the counter-productive way donors like DfID are approaching funding projects, where payment is by results. The challenge is convincing donor community that there is a different way to work.

Final questions and thoughts:

- Are we getting too cosy with the government? If we have spaces for dialogue we are not always focusing on confrontation.
- So where do we sit as CARE? If government doesn't want to engage with us then what do we do? What action is more effective in triggering state engagement? How are we going to get more teeth? What will our strategy be?

- Making ourselves positively irrelevant. How do we make sure communities are embedded in the cycle? When is our exit stage?
- Community Score Card is being overemphasised and oversold and is not the silver bullet. The CSC should not be seen as a tool kit, but rather a blending of other approaches and tools that can be adapted to different contexts. How can we be innovative and start developing more social accountability models and tools?

Information and Communication Technology (ICT) and Social Accountability: Impact and lessons learned from our panel.

(Panel discussion with Angela Oduor Lungati – Ushahidi and Mushi Elvis Leonard – Twaweza)

[Ushahidi presentation](#) | [Twaweza presentation](#)



Reiterating Fox (2014), this panel confirmed that information alone is not sufficient to hold authorities to account. Data is not knowledge, information is not knowledge. Knowledge is about being able to spread the information/ message. Technology allows the spread of this information by making data accessible. This data needs to be presented in a digestible and useful format.

Challenges

- **There is a data gap.** Policy makers are making decisions based on 'old data', for instance 2013 data for 2015 decisions. Citizens don't have data, let alone current data, meaning citizens can't compare their lives with others to undertake individual or collection action. Further, media generally lacks high quality data contents.
- **Government suspicious of data. How do we deal with censorship?** For instance in Tanzania, the Government wants to stamp reports before the information is published.
- **How inclusive is a technological medium?** Technology often excludes the most marginalized such as women. Also, just dropping a phone in a household without understanding the household dynamics will not work. If for instance the men get the phones and the women collect the water, then projects designed to feed back water system quality will not be effective as the women who goes to collect the water does not have the phone to report back!
- **REMEMBERING Technology is not a solution and that just having a cell phone does not make you a more active citizen.** We need to know what incentives citizens have to

actively engage and what tools they have at their disposal. It is vital to be aware of what is going on in the background.

Benefits of ICT when all factors are considered

- **Creating a platform.** The Pothole Theory is the basic idea that we find it easier to care about what is closer to us. ICT can help people to self-organise around issues affecting them.
- **Closing the feedback loop.** Using technology to make citizens visible to decision makers and then to feedback actions taken by decision makers to the citizens. This feedback allows citizens to know that they can have an impact and to encourage further engagement.

Participant questions and reflections following the panel discussion

- **How do we avoid fatigue when using technology?** We need to understand the context, including the incentives people have to actively engage, what tools they have at their disposal and the relationships they have to being able to use technology e.g. is it the man or woman of the house who uses the mobile phone when it is handed out? Having feedback loops that inform citizens using the technology that their efforts have resulted in change will sustain motivation and reduce fatigue.
- **ICT allows us to see problems. However, how reliable and credible is the information response from the supply side?** Biases will exist, so checks and balances need to be in place. For instance a verification mechanism that is context specific can be used to check the information provided meets requirements. Second, identify who the stakeholders will be and establish expectations on how that information will be passed along before the project begins. Finally, Elvis suggested how Twaweza benchmarks studies against those done at the same time (have fresh sample of citizens then map against the original sample and verify information).
- **How can you control the impartiality of information you get back, keeping it credible and neutral?** The challenges you face are the same as carrying out a survey. You can mitigate the impartiality by carrying out a large enough sample. Second, the more you build a rapport with those you are collecting data from, the better the data you will get. You could also consider crowdsourcing or using heat maps. It is also important to consider how we are working with illiterate people; communicating through community based meetings would be most appropriate in this instant.

DAY 3: Learning – getting better at organizational accountability

CARE's experience with organizational accountability: Understanding the concept; its value; and options for action.

[Link to presentation on Organizational Accountability](#)



CARE Organizational
Accountability Presen

CARE's rationale for organizational accountability is as follows:

- Accountability as a core value: The obligation of an individual or organisation to **account** for its activities, accept **responsibility** for them, and to disclose the results in a **transparent** manner.
- The responsible use of (our) power
- The means by which we enable our 'stakeholders' to understand and influence our work



Accountability serves to balance power

For CARE, different organizational accountability types exist. These include upward accountability, internal accountability, forward accountability and lateral accountability as shown in *Figure 4*.

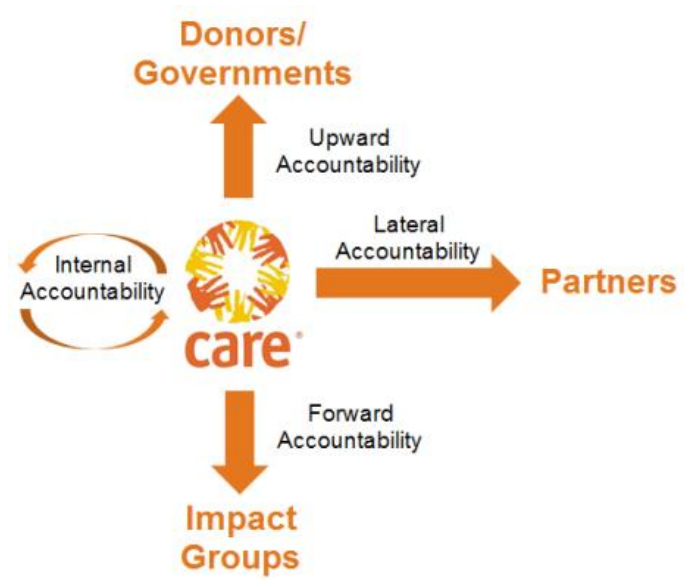
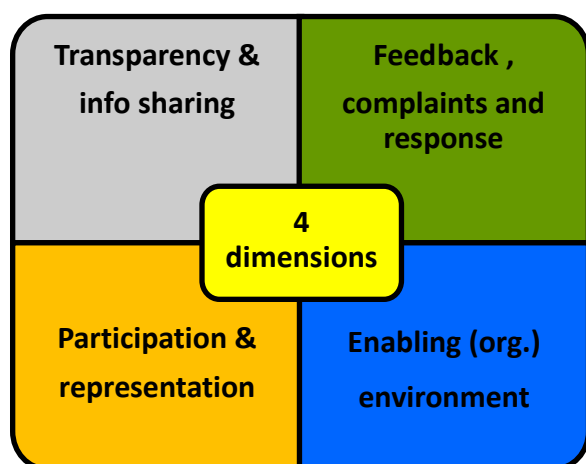


Figure 6: Organizational Accountability Typologies

Types of Accountability

- **Forward accountability:** is the accountability of CARE towards its beneficiaries and communities that are directly affected by our interventions.
- **Internal accountability:** is the accountability of CARE towards its employees.
- **Lateral accountability:** is the accountability of CARE towards its partners, whether operational or implementing.
- **Upward accountability:** is the accountability of CARE towards donors, sponsors and governments.

The four dimensions of organisational accountability



In addition to the 4 dimensions of accountability, CARE's Accountability Framework identifies 3 enablers:

1. Staff attitudes and behaviours.
2. Policies and systems
3. Leadership (and culture)

Figure 5: Four dimensions of organizational

accountability

How can we put these enablers into practice? Suggestions for improving CARE's organisational accountability

- **Staff attitudes and behaviour:** Some of the mechanisms for improving the enablers work include job descriptions; recruitment; and dedicated accountability staff; Staff inductions and clarity around expectations. Recommendation: Establishing ways of following up on staff attitudes and behaviour using the existing mechanisms
- **Policies and systems: these provide the instruments and mechanisms for entrenching CARE's accountability. They could include** staff appraisal mechanisms, information giving mechanisms, feedback and complaints mechanisms etc. Internal values of CARE and to what extent do the internal procedures allow us to be open? Guidelines to be produced on Organisational Accountability and shared amongst COs. **Recommendations:** Use newsletters as a platform to feedback information.
- **Leadership:** Line managers instructed/trained to recognise and encourage good practice; capacity development. **Recommendation:** Exchanging between best practices between COs and getting impact groups involved and participating in developing organisational accountability.

Frameworks, standards and initiatives towards organisational accountability

External to CARE	Internal to CARE
Humanitarian Accountability Partnership (HAP)	Humanitarian Accountability Framework (HAF)
The SPHERE Project	Accountability Framework (AF) (DRAFT)
People in Aid/Core Humanitarian Standard	CARE CO and Sector Specific Accountability Guidelines and Practices (Peru, Rwanda, Ethiopia, Uganda, Somalia, CIUK, Haiti etc)
Good Enough Guide (Emergency Capacity Building Project)	
Code of Conduct for Red Cross/Red Crescent Movement & NGOs	
INGO Accountability Charter	

Save the Children's Programme Accountability Guidance Pack	
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Current status and trends on development agencies accountability to their constituencies: where are we heading and what are we learning?

(Panel discussion with Andre Proctor – Keystone Accountability and Florence Makhanu – CEO, Viwango)

[Keystone Accountability presentation](#) | [Viwango presentation](#)



Viwango spoke of establishing standards for regulating Civil Society and thus provided information that has implications on the sorts of partners that CI can go for and the instruments to use to ensure accountability in partnerships. Keystone Accountability focused on one dimension of accountability (feedback) and explored the new thinking around it.

Viwango

Certification and regulation in the Civil Society sector

➔ **There is an attempt towards self-regulation in the CSO sector.** Gunningham and Rees' (1997) defines self-regulation as;

..... when an "industry-level (as opposed to a governmental or firm-level) organization sets rules and standards (codes of practice) relating to the conduct of firms in the industry" (p. 364-365).

Viwango expresses how the state usually sees CSOs as an enemy rather than a partner. They are unhappy with Human Rights organisations, therefore we need a mechanism in place to build this trust and legitimacy.

Viwango was involved in the development of minimum standards for the operation of CSOs in provision of services to the Kenyan public. You would expect to see the following from an organisation that is serving you well:

Expectations from an organisation that is serving you well?	Viwango Standards
Civil society Organisations standards	Legal & Statutory Requirements
Code of practice	Identify
Assessment tool	Legal & Statutory Requirements

Certification mechanism	Governance (How is the NGO managed?)
	Work Programming & Planning
	Management Systems & Policies
	Resource Mobilization (Is money taken from everyone?)
	Partnerships & External Relations (Wanting to help partners grow but not cause lots of trouble.)
	Organizational Culture & Leadership

How certification can help CSOs:



Figure 7: How certification can help CSOs

Keystone Accountability

Standards, Logic models and checklists alone didn't do it; new thinking on feedback as a dimension of accountability

Keystone Accountability framed **feedback** as a major determinant of development outcomes; the value of feedback lies not only in what it contains but what it enables (changes the way people organise, think and act). Keystone research discovered that many of the most successful companies were far better at using components of feedback - listening, learning and responding than CSOs were. Keystone liked language such as 'learning organizations', 'agile' and 'lean+' start-ups which focused on service delivery, see www.leanimpact.org.

How feedback can revolutionize assessing performance and bring the voice of people up to the top in decision making?

When we think of feedback don't just think of data, numbers and questionnaires. Feedback has become a movement → **Feedback Labs**. These involve a group of people/organizations interested in feedback of performance in a systematic way.

Turning feedback into Voice process: See Keystone Accountability presentation slides above for details on each stage in the process

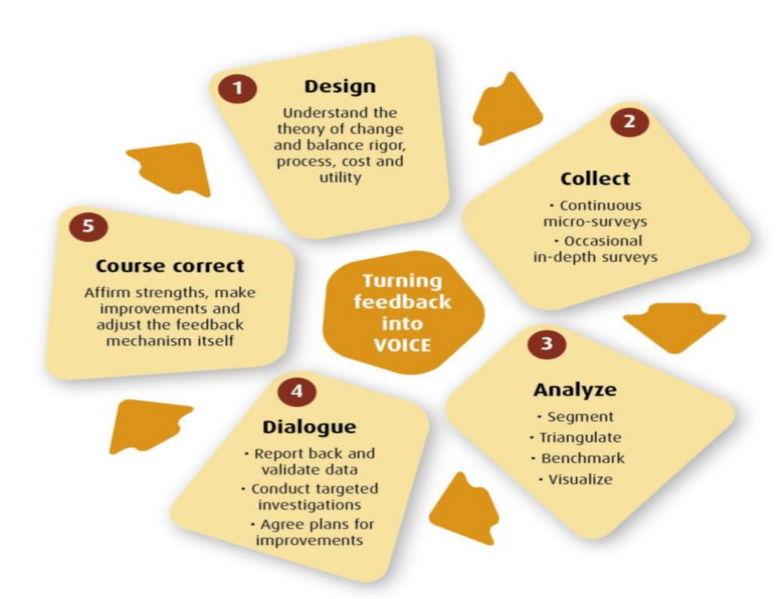


Figure 8: Turning feedback into voice process

Key challenges and questions raised during participant discussion:

- How do you report feedback data in an **understandable** and **accessible** way so even the most marginalised feel empowered to speak out: turn data into voice? Community discussion groups to include the illiterate.
- How do we **reliably collect, analyse and thus convert constituent perceptions** and experience into performance data that feed into **performance management systems**?

Build rapport and relationships with those providing data and develop verification mechanisms.

- How to **maintain enthusiasm and motivation** so people keep contributing? Need to report data back quickly so people feel they have been heard. If ideas come up that had never done so before then people are motivated to keep contributing. This in turn encourages innovation and adaptation. Loyalty builds up as people see the improvements (virtuous cycle).

A few Keystone Accountability CASE STUDIES demonstrating how feedback can not only enable performance of people but also the quality of service provided

- **Constituent Voice in Crisis responses: Ground Truth Solutions.** If feedback happens quickly and is used as a management tool, then this helps make decision making fast and useful. The data is not reliable for scientific conclusions but good as a management tool if used quickly.
- **Capturing the quality of the service experience: LIFT.** Short micro-surveys on the experience of people who have recently used the facility (no more than 4 questions) and capturing frontline staff experience (Staff satisfaction as an indicator of performance).
- **Using feedback to improve performance in agricultural extension: AEPMS.** Feedback from farmers to assess performance of technology i.e. a seed, technology that farmer is using. Feedback can not only assess performance of people but quality of the technology.

Principles of Collecting Feedback:

1. **Independent**
2. **Anonymous**
3. **Affordable**
4. **Frequent**
5. **Actionable**

The key is to ask a few questions often.

Way forward for organisational accountability

- **How to select strategic partners?** Do we go for partners who are strong and with structures, or those that don't have structures and help them gain good structure? Our community of practice includes rather than excludes. Perhaps, CARE would prefer to work with people who have decided to improve their internal accountability. Something for CARE to consider would be the challenges of aligning and negotiating organisational accountability objectives due to different partner ideas.

- **Making feedback as cheap and easy as possible.** Collect information on paper sheets then digitalise. Make feedback as cheap and easy as possible.
- **Who collects data?** Collect by independent people not the NGO itself
- **Dealing with differentiation of different groups.** Implicit choices of feedback mechanism need to be made. For instance, which is most appropriate for different contexts, population needs and main impact population.
- **How prompt are governments in responding to communities?** Keystone reported that improvements have happened at the community/local level. For instance, a police force had only one vehicle fleet maintenance person, resulting in not enough vehicles working. After feedback, more maintenance people hired and citizens saw their feedback responses acted upon, building trust and loyalty in the community as people see the improvements.
- **How to share findings?** Exchanging best practices between COs is key. We need to show information findings at a glance. If need more info then click on something for more information. Take data in a pdf and pin on wall to discuss and using newsletters as a platform to feedback information.
- **Benchmarked performance dashboards.** Choose something to compare against. Compare yourself with neighbours. Benchmark against neighbour, but set by citizens. For instance, in X years' time, I want to be performing like them.
- **Community Feedback groups.** How-to guides, case studies, methodology and user groups. Closing the feedback loop is where the trust gets built and the learning happens. Getting impact groups participating in developing organisational accountability from the beginning will build the trust.
- **New wave of interest from DFID to collect beneficiary feedback and collected by 3rd party to neutralise the feedback.** Seems time and resource consuming. Could set up a huge mechanism that is extra to daily work. How can we integrate these mechanisms into our everyday job? Do we build into M&E? Where is our easy way to start/ a practical way to integrate this new way of thinking?
 - Needs to be cheap and useful and flexible to make changes when needed.
 - Use a capacity building tool. Small structures, have committees not boards, have volunteers not employees. Have a tool you can adapt to different types of organisations.

- The authenticity of replies depends on the number of questions. Keep questions to 4, more than 4 at a time will get people tired and they will not respond as accurately.

- **Gain reliable evidence on four performance dimensions:**

1. Importance to respondents
2. Perceptions of outcomes
3. Relationship experience
4. Quality of service (i.e. was I treated with respect, did I understand easily)

Emerging experience on organisational accountability across the CARE world

Enhancing the CO internal accountability: the case of CARE Rwanda's management scorecard



CARE Rwanda
Accountability

Presentation by CARE Rwanda

Aim: CARE Rwanda established the management scorecard to provide a formal avenue for engaging dialogue between staff and management on sensitive and tangible issues, thus improving quality of working environment, relationships and overall CO performance. **Process:** See presentation *slide 7* for outline of the management scorecard process. **Lessons learnt:** The first meetings had hesitations since staff and SMT members were not sure on whether the process is healthy. However contrary to these concerns, the SMT-Staff interface meeting was extremely open, fair, transparent touching even sensitive issues generally a taboo in Rwandan culture. The management scorecard process revealed that staff at different levels have skills/capacity to lead on CO strategic priorities (SMT score card animators, good facilitators) and that information gaps between staff and SMT needed addressing. **Challenges moving forward:** workload limiting staff participation; translation of CARE documents to local language as most are written in English and the learning process requires a lot of time for documentation.

Strengthening accountability relations with beneficiaries: CARE Ghana's Governance and Accountability Learning Initiative (GALI)

Presentation by CARE Ghana



CARE Ghana GALI

Aim: GALI, an initiative supported by DFID, identifies and activates mechanisms for ensuring effective accountability in project implementation to the beneficiaries or impact group of the project. It is a small-scale intervention integrated into the broader Cocoa Life programme and identifies feedback mechanisms aimed at empowering Cocoa Life communities to hold CARE and implementing collaborators accountable. **Process:** see figure 8 below.

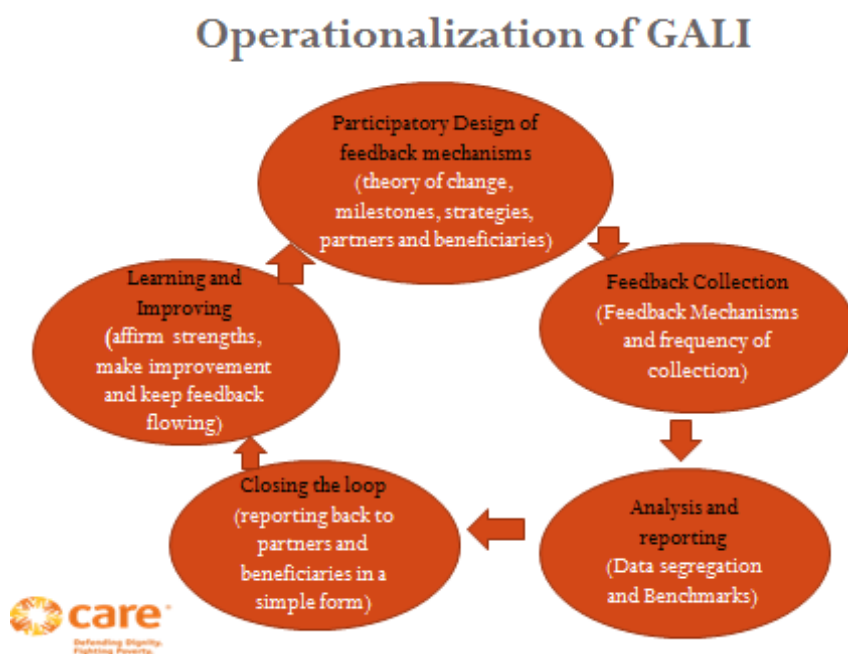


Figure 9: GALI Process

Feedback mechanisms included:

- Touchpoint micro survey (activity/event evaluation) **(After every activity)**
- Partnership health survey **(Quarterly)**
 - a) programme delivery assessment tool
 - b) relationship assessment tool
- Structured independent survey (household survey) **(Bi-annual)**
- Systematic unsolicited feedback **(All times)**
 - a) feedback journal
 - b) use of a toll-free line

Lessons learnt and successes: GALI in the Cocoa Life project led to strengthened stakeholder involvement and collaboration (giving beneficiaries the voice to provide feedback on CARE's programme quality) and strengthened the work planning process of Cocoa Life. There was also an

increased drive by communities in demanding accountability from duty bearers. If the Cocoa Life project does something wrong, there is a sanction. For instance, if you give training on a date that wasn't convenient for them then they can complain. There is also an apology procedure in place. Through GALI, citizens have been able to exercise and enhance their advocacy and lobbying skills.

Challenges:

- Needs extra staff commitment as it requires additional time
- Difficulty in getting a toll-free line which can accommodate calls from all telecommunication networks for the collection of unsolicited feedback
- Lack of landline use to give feedback. Individuals preferred to interact personally with the officer rather than calling on the landline offered. They did not understand they would not be charged calling the line and they feared of who is on the end of the line.

**FINAL TAKEAWAYS**

This event has allowed us to share views and experiences so that we can collectively build a common approach to CARE's governance programming work and better understand what mechanism we want to lay down to put this common approach into practice.

What did participants find exciting about mainstreaming CARE's inclusive Governance approach?

- A move towards a more structured, consistent, mainstreamed 'inclusive governance' approach will help propel us faster and stronger as an organisation and build our own organisational accountability. Working in Silo's makes us less effective.

- Creating space to reach out to other colleagues in different country offices (cross-country learning) and share learning from projects and approaches will help reinforce CARE as a learning organisation, committed to adapting and changing.

What did participants see as key challenges in mainstreaming CARE's inclusive governance approach?

- **CARE's Culture.** Overcoming CARE's organisational culture when acting in a 'political' environment. CARE is currently very quick to go back to its comfort zone and not getting out from where we are comfortable.
- **Partnerships.** Working in partnerships with a third party who does not share the same vision is a challenge. When working with strategic partners, how do we get partners on board to accept our values? What compromises will need to be had? How can CARE start to work more with the private sector? And how can we better document our commitments and what we are doing with partners.
- **Leadership:** Getting buy-in from leadership, strong support from CARE UK, CARE Netherlands etc. with pushing forward the mainstreamed 'inclusive governance' approach. How can we convert others in the country offices? Who will be the champions?
- **Sharing information. What language will documentation be?** Many documents produced by CARE are in English, what about other languages so different country offices can understand? Not many people had heard of the humanitarian governance framework, how can we ensure people know about the frameworks that exist? How will cross-country visits and training be funded?
- **Innovation:** There is an over emphasis on community score cards. We need to start thinking about new ideas beyond just the CSC. We can give ourselves more 'teeth' with more tools. Designing such tools and approaches that can empower the poor so their voice is heard and reaches government will be a challenge.
- **Acting and putting into practice.** How are we going to put all we have talked about into practice and who is going to be leading this?
- **Measuring our impact.** Becoming better at M&E so that we can have demonstrable impact.

APPENDIX A: World Bank definitions and uses of social accountability tools (citizen engagement mechanisms)

Budget literacy campaigns are efforts—usually by civil society, academics, or research institutes—to build citizen and civil society capacity to understand budgets in order to hold government accountable for budget commitments and to influence budget priorities.

Citizen charter is a document that informs citizens about the service entitlements they have as users of a public service; the standards they can expect for a service (timeframe and quality); remedies available for non-adherence to standards; and the procedures, costs, and charges of a service. The charters entitle users to an explanation (and in some cases compensation) if the standards are not met.

Citizen report card is an assessment of public services by the users (citizens) through client feedback surveys. It goes beyond data collection to being an instrument for exacting public accountability through extensive media coverage and civil society advocacy that accompanies the process.

Citizen satisfaction surveys provide a quantitative assessment of government performance and service delivery based on citizens' experience. Depending on the objective, the surveys can collect data on a variety of topics ranging from perceptions of performance of service delivery and elected officials to desires for new capital projects and services.

Citizen/User membership in decision-making bodies is a way to ensure accountability by allowing people who can reflect users' interests to sit on committees that make decisions about project activities under implementation (project-level arrangement) or utility boards (sector-level arrangement).

Citizens' juries are a group of selected members of a community that make recommendations or action participatory instrument to supplement conventional democratic processes.

Community contracting is when community groups are contracted for the provision of services, or when community groups contract service providers or the construction of infrastructure.

Community management is when services are fully managed or owned by service users or communities. Consumers own the service directly (each customer owns a share) when they form cooperatives.

Community monitoring is a system of measuring, recording, collecting, and analyzing information; and communicating and acting on that information to improve performance. It holds government institutions accountable, provides ongoing feedback, shares control over M&E, engages in identifying and/or taking corrective actions, and seeks to facilitate

dialogue between citizens and project authorities.

Community oversight is the monitoring of publicly funded construction projects by citizens, community-based and/or civil society organizations, participating directly or indirectly in exacting accountability. It applies across all stages of the project cycle although the focus is on the construction phase.

Community scorecard is a community-based monitoring tool that assesses services, projects, and government performance by analyzing qualitative data obtained through focus group discussions with the community. It usually includes interface meetings between service providers and users to formulate an action plan to address any identified problems and shortcomings.

Consultation, as distinct from dialogue, is a more structured exchange in which the convener commits to “active listening” and to carefully consider the comments, ideas, and recommendations received. Good practice consultations provide feedback on what was heard, and what was or was not incorporated and why to ensure that consultations contribute to improved policies and programs.

Focus group discussions are usually organized with specific goals, structures, time frames, and procedures. Focus groups are composed of a small number of stakeholders to discuss project impacts and concerns and consult in an informal setting. They are designed to gauge the response to the project's proposed actions and to gain a detailed understanding of stakeholders' perspectives, values, and concerns.

Grievance redress mechanism (or complaints-handling mechanism) is a system by which queries or clarifications about the project are responded to, problems with implementation are resolved, and complaints and grievances are addressed efficiently and effectively.

Independent budget analysis is a process where civil society stakeholders research, explain, monitor, and disseminate information about public expenditures and investments to influence the allocation of public funds through the budget.

Input tracking refers to monitoring the flow of physical assets and service inputs from central to local levels. It is also called *input monitoring*.

Integrity pacts are a transparency tool that allows participants and public officials to agree on rules to be applied to a specific procurement. It includes an “honesty pledge” by which involved parties promise not to offer or demand bribes. Bidders agree not to collude in order to obtain the contract; and if they do obtain the contract, they must avoid abusive practices while executing it.

Participatory budgeting is a process through which citizens participate directly in budget formulation, decision-making, and monitoring of budget execution. It creates a channel

for citizens to give voice to their budget priorities.

Participatory physical audit refers to community members taking part in the physical inspection of project sites, especially when there are not enough professional auditors to inspect all facilities. Citizens measure the quantity and quality of construction materials, infrastructure, and facilities.

Participatory planning convenes a broad base of key stakeholders, on an iterative basis, in order to generate a diagnosis of the existing situation and develop appropriate strategies to solve jointly identified problems. Project components, objectives, and strategies are designed in collaboration with stakeholders.

Procurement monitoring refers to independent, third-party monitoring of procurement activities by citizens, communities, or civil society organizations to ensure there are no leakages or violation of procurement rules.

Public displays of information refers to the posting of government information, usually about projects or services, in public areas such as on billboards or in government offices, schools, health centers, community centers, project sites, and other places where communities receive services or discuss government affairs.

Public Expenditure Tracking Surveys (PETS) involves citizen groups tracing the flow of public resources for the provision of public goods or services from origin to destination. It can help to detect bottlenecks, inefficiencies, or corruption.

Public hearings are formal community-level meetings where local officials and citizens have the opportunity to exchange information and opinions on community affairs. Public hearings are often one element in a social audit initiative.

Public reporting of expenditures refers to the public disclosure and dissemination of information about government expenditures to enable citizens to hold government accountable for their expenditures.

Social Audit (also called *social accounting*) is a monitoring process through which organizational or project information is collected, analyzed, and shared publicly in a participatory fashion. Community members conduct investigative work at the end of which findings are shared and discussed publicly.

User management committees refer to consumer groups taking on long-term management roles to initiate, implement, operate, and maintain services. User management committees are for increasing participation as much as they are for accountability and financial controls.

