Analyze, Convene, Contextualize, Implement and Monitor (ACCIM) Social Accountability Guide for Accountable and Responsive Governance
On the cover residents, part of a men’s group formed, draw on a map areas they want to improve including
health and sanitation, access to potable water and access to education during a visit by a CRS team in the
village of Bena Mabika, Miabi territory, Kasai Oriental Province, Democratic Republic of Congo on September
17, 2017. Photo by Sam Phelps for CRS

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Foreword

Dear Colleagues,

Accountable and responsive governance is essential for achieving and sustaining the impact at scale that Catholic Relief Services Vision 2030 envisages. Inclusive and multistakeholder partnerships are instrumental in upholding the social contract, enhancing family and community life, protecting the environment and fostering peaceful and vibrant societies. Therefore, CRS needs to catalyze the formation of inclusive coalitions that bring together ordinary citizens, the private sector, civil society and state actors to collectively solve governance and development challenges that undermine human dignity and fulfillment of the social contract. How do we do this?

The Analyze, Convene, Contextualize, Implement, and Monitor (ACCiM) Social Accountability Guide for Accountable and Responsive Governance provides step-by-step guidance for program designers and practitioners working on standalone governance/social accountability or multisectoral initiatives. Furthermore, the resource is equally valuable for leaders at country, regional and international levels who want to understand how to contribute to creating an enabling environment for accountable and responsive governance through their formal and informal encounters with decision-makers with the necessary gravitas to make change happen.

The ACCiM guide skillfully blends theory and practice to aid the integration of accountable and responsive governance in different contexts and programs. So, the guide has put together several practical approaches and tips regarding problem analysis, prioritization and sequencing, coalition formation and leadership, customization of accountability strategies and tools, implementation and monitoring of accountability initiatives.

ACCiM is an adaptive programming approach that embraces learning by doing through ongoing political economy analysis and frequent moments of reflection. To this end, we encourage CRS colleagues and partners to continuously scan their intervention context, among other things, to identify the key actors, their interrelationships and incentives, gatekeepers and blockers, and adjust program strategies accordingly.

Our profound gratitude goes to all CRS staff and external thought partners who provided invaluable feedback during the development of the ACCiM guide. Your timely and thoughtful reviews have shaped the outlook and content of this resource.

We wish you the best of success as you implement and learn from ACCiM,

Scott Campbell  
Regional Director  
Central Africa  
ACCiM Champion

Sarah Ford  
Director  
Integrated Program Quality, PIQA  
ACCiM Champion
Acknowledgments

This social accountability (SA) guide is a product of a collective effort that coalesced several social change champions with varied professional and academic backgrounds to marshal customizable and scalable guidance that can foster accountable and responsive governance in different contexts and sectors. Moses Ngulube conceived and developed the SA model, ACCiM (Analyze, Convene, Contextualize, Implement and Monitor), and the field guide with close support from Bob Groelsema and Nell Bolton. Additionally, Moses benefited from practical and theoretical insights that external and internal reviewers provided generously and on time. Below is a list of external and internal thought-and-practice partners with their location (in parenthesis) at the time of writing the guide.

External Reviewers
1. Dr. Fletcher Tembo (Malawi—Mwananchi Accountability Research and Learning)
2. Prof. Jonathan Fox (USA—Accountability Research Center, American University)

Internal Reviewers
1. Alexandra Medina (Philippines)
2. Alvaro Cobo-Santillan (Ecuador)
3. Angela Kalambo (Zambia)
4. Bob Groelsema (USA)
5. Brezhnev Paasewe (Liberia)
6. Bridget Kimball (USA)
7. Chalilwe Chungu (Zambia)
8. David Tsetse (USA)
9. Denis Okori (Uganda)
10. Dickson Matulula (Zambia)
11. Dina Ferrer (Philippines)
12. Edwin Antipuesto (Philippines)
13. Emily Doogue (USA)
14. Emily Wei (USA)
15. Erin Baldridge (USA)
16. Ethel Ingrid Villarta (Philippines)
17. Gideon Mavise (Zimbabwe)
18. Ian Digal (Philippines)
19. Ian Proctor (USA)
20. James Baay (Philippines)
21. John Katunga (DRC)
22. Julie Ideh (Malawi-USA)
23. Kaitlyn Maloney (USA)
24. Kushal Neogy (India)
25. Linda Gamova (Armenia)
26. Lucy Kiekebusch-Steinitz (USA)
27. Mary Rose O’Brien (USA)
28. Michelle Kendall (USA)
29. Michelle Llorente (Philippines)
30. Mwayabo Jean Claude Kazadi (Zambia)
31. Myla Leguro (Philippines)
32. Nell Bolton (USA)
33. Owen Sopo (Malawi)
34. Penjani Longwe (Zambia)
35. Peter Safeli (Zambia)
36. Petula Nash (USA)
37. Rafaramalala Volanarisoa (DRC)
38. Sarah Ford (USA)
39. Scott Campbell (Togo)
40. Sekai Mudonhi (Zimbabwe)
41. Siméon Dembele (Mali)
42. Sowinska Adele (UK)
43. Stacy Prieto (USA)
44. Tanja Engelberger (Madagascar)
45. Valerie Kamatsiko (Uganda)
46. Wim Troosters (Malawi)

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Finally, CRS Leadership expresses its profound gratitude to everyone who contributed to this guide and those who will eventually use it to catalyze accountability and responsiveness at scale.
Preface

The Analyze, Convene, Contextualize, Implement and Monitor (ACCIM) Social Accountability Guide for Accountable and Responsive Governance presents Catholic Relief Services’ (CRS) collective resolve to promote human dignity through social accountability (SA) programming. CRS defines SA as an iterative and politically versatile process that mobilizes reformers from civil society, the private sector and the state to collectively contribute to accountable and responsive governance. Reformers coalesce around workable and shared accountability agendas that can be implemented locally or escalated to higher levels of decision-making.

The ACCIM model recognizes the centrality of context in shaping governance and development outcomes. Therefore, the guide provides practical and theoretical tips regarding how partners can invest in ongoing political economy analysis (PEA) to inform the choice of issues to tackle, accountability approaches to customize and deploy, allies to enlist in multistakeholder and inclusive coalitions and windows of opportunity to leverage to foster accountability and responsiveness.

Who is the audience?

This guide is for program designers and practitioners working on standalone social accountability/governance initiatives or multisectoral programs. The guide skillfully merges theoretical and practical insights to facilitate context-appropriate programming and stimulate the search for additional emerging SA evidence and learning.

How is the guide structured?

The guide is organized into seven chapters:

1. **Chapter I: Setting the Stage**—defines the critical concepts used throughout the guide, then situates SA within Catholic social teaching and CRS’ partnership principles, Integral Human Development and engaging government frameworks. Furthermore, the chapter distills CRS’ social accountability guiding principles and concludes with an overview of the agency’s SA model, ACCIM. The next five chapters treat and illustrate each phase of ACCIM.

2. **Chapter II: Analyze**—blends two diagnostic tools: Problem Driven Iterative Adaptation (PDIA—Harvard University 2018) and PEA to guide problem selection, diagnostic, prioritization, sequencing, and layering.

3. **Chapter III: Convene**—offers some insights when identifying and bringing together change agents from government institutions, private sector and civil society to form inclusive coalitions working on shared accountability agendas.

4. **Chapter IV: Contextualize**—provides detailed guidance regarding the development of context-savvy accountability strategies and mechanisms to address prioritized issues.

5. **Chapter V: Implement**—demonstrates how program designers and practitioners can translate shared accountability agendas into action and desired results; test, learn from practice, adapt and iterate when needed.

6. **Chapter VI: Monitor**—offers additional insights regarding how to track progress towards desired milestones, scan the context where the SA program is being implemented and ascertain whether assumptions underpinning the SA theory of change are still valid and relevant. Furthermore, the chapter invites SA champions to seize new windows of opportunity as they emerge and adjust the SA strategy as the implementation context evolves.
7. Chapter VII: Scaling Up—concludes the guide and exhorts program designers and practitioners to consider catalyzing accountability and responsiveness at scale (within and across sectors). The chapter offers instrumental reflection questions and guidance to facilitate smooth scaling up.

How can I use this guide?
It is essential that users of this guide appreciate the foundational contents of Chapter I before embarking on subsequent chapters. Chapters II to VII can be read sequentially at first attempt, and iteratively in subsequent interactions.

Where can I find additional information?
The guide references several internal and external resources that some curious users may consult for additional information on specific topics. A detailed list of referenced publications is available towards the end of the guide.
# Main Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>AAA</td>
<td>Authority, Acceptance and Ability (Triple A)</td>
</tr>
<tr>
<td>ACCIM</td>
<td>Analyze, Convene, Contextualize, Implement and Monitor</td>
</tr>
<tr>
<td>AIIM</td>
<td>Alignment, Interest and Influence Matrix</td>
</tr>
<tr>
<td>CLA</td>
<td>Collaborating, Learning and Adapting</td>
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<tr>
<td>CMS</td>
<td>Central Medical Stores</td>
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<td>CP</td>
<td>Country Program</td>
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<td>CRS</td>
<td>Catholic Relief Services</td>
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<td>CSC</td>
<td>Community Scorecards</td>
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<td>EU</td>
<td>European Union</td>
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<td>IR</td>
<td>Intermediate Result</td>
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<tr>
<td>MarCom</td>
<td>Marketing and Communications</td>
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<tr>
<td>MEAL</td>
<td>Monitoring, Evaluation, Accountability and Learning</td>
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<tr>
<td>PDIA</td>
<td>Problem Driven Iterative Adaptation</td>
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<tr>
<td>PEA</td>
<td>Political Economy Analysis</td>
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<tr>
<td>PTA</td>
<td>Parent Teacher Association</td>
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<td>SA</td>
<td>Social Accountability</td>
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<td>SMC</td>
<td>School Management Committee</td>
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<td>SMS</td>
<td>Short Message Service</td>
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<tr>
<td>SO</td>
<td>Strategic Objective</td>
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<tr>
<td>UK</td>
<td>United Kingdom</td>
</tr>
<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<tr>
<td>UNICEF</td>
<td>United Nations Children's Fund</td>
</tr>
<tr>
<td>USA</td>
<td>United States of America</td>
</tr>
<tr>
<td>USAID</td>
<td>United States Agency for International Development</td>
</tr>
<tr>
<td>WASH</td>
<td>Water, Sanitation and Hygiene</td>
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<tr>
<td>WHO</td>
<td>World Health Organization</td>
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Chapter I: Setting the Stage

Introduction

Why start with defining key terms and concepts in this guide? Because several words might mean different things to different people depending on the context. Therefore, Chapter I explains the critical concepts used throughout the guide, then situates SA within the Catholic social teaching and CRS’ partnership principles, Integral Human Development and engaging government frameworks. Additionally, the chapter distills CRS’ social accountability guiding principles and concludes with an overview of the agency’s SA model, ACCIM (Analyze, Convene, Contextualize, Implement and Monitor).

By the end of this chapter, you will have learned more about:

1. Key concepts that are used throughout the guide.
2. How social accountability programming at CRS leverages existing agency-wide programming principles and frameworks.
3. Critical components of the ACCIM model.

Definition of Key Concepts

**Government** is a group of people, institutions and structures with the authority to direct and control public affairs of a country or state. Public affairs include the provision of goods and services such as security, policy formulation, water and sanitation, health, education and agricultural extension services. Governments are usually made up of three complementary units: the legislature, judiciary and the executive. Each of these arms of government have specialized mandates:

1. Legislation, oversight, budget appropriation, deliberation of existential issues of public interest (legislature),
2. Interpretation of laws and administration of justice (judiciary), and
3. Drafting and implementation of policies and serving as head of state/government (executive).

SA initiatives seek to work across all these arms of government depending on the prioritized issue.

**Governance** refers to the rules and processes that guide the efforts of both governmental and nongovernmental actors to manage public affairs for the common good. CRS seeks to promote transparency, accountability, equity and inclusion in these rules and processes.¹

**Citizen** is a member of a political community,² typically though not always tied to a geographic state, region, province or country. Qualifications for citizenship are usually enshrined in domestic legislation, such as a constitution or other charter. Citizens enjoy certain rights and privileges as provided for under local laws, such as the right to vote and hold public office. In return, citizens are expected to fulfill specific obligations including (but not limited to) paying taxes and observing public health measures. A citizen of one country living in a foreign country may be categorized as a foreign national or expatriate. The rights and duties of foreigners are usually stipulated in international treaties, conventions, protocols and local legislation.

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Foreigners may not participate in elections nor hold public office but may be required to pay taxes and respect public health and security controls, among other things.

**Community members** comprise citizens and, in some cases, non-citizens—for example, expatriates, refugees or people such as migrants and those displaced within their own countries—without full legal protections and access to services. “Community member” is a term inclusive of all groups. It is part of CRS’ strategic mandate to contribute towards the protection of vulnerable groups like non-citizens. Many of our humanitarian programs are likely to be serving heterogeneous communities (consisting of citizens and non-citizens).

**Social contract** is an implicit or actual agreement/compact among the members of an organized society or between a community and its leader that defines and limits the rights and duties of each. National constitutions, subsidiary legislation, protocols, regulations and policies all form part of a formal, documented social contract and there is a legitimate expectation that every member of a nation-state will conduct himself/herself accordingly. The social contract is the basis for the rule of law “a set of principles, or ideals, for ensuring an orderly and just society … where no one is above the law, everyone is treated equally under the law, everyone is held accountable to the same laws, there are clear and fair processes for enforcing laws, there is an independent judiciary, and human rights are guaranteed for all.” Further, when a political party makes promises during political campaigns and is given a mandate to rule, campaign promises become part of the social contract and should inform subsequent accountability conversations. So, a social contract is a foundational element of any social accountability work.

**Service provider** is a person or group of people that may be state or non-state actors (for example, staff working for faith-based institutions, non-governmental organizations and the private sector) providing a service to other people such as primary health care, solid waste management, mobile phone network, water treatment and distribution, agriculture extension services, refugee camp management, early childhood development and so on.

**Accountability** is an iterative process with two complementary components: answerability and enforceability:

A. **Answerability**—the obligation of service providers to explain their performance to citizens/community members and the former’s right to demand answers regarding how, for example, public resources are being utilized when providing services such as education, health and agriculture.

B. **Enforceability**—the capacity and willingness of relevant state accountability/oversight institutions (parliament/legislature, judiciary, anti-corruption bureau, ombudsman, auditor general, law enforcement/security services, among many) to investigate underperformance/malpractices and implement/set in motion remedial measures.

Most civil society-led accountability efforts revolve around answerability, as civil society has no legal mandate to enforce laws or policies—particularly when they concern state agencies/actors. However, when civil society strategically works with state oversight institutions such as the ones listed above, enforceability is feasible. These hybrid accountability mechanisms are sometimes metaphorically referred to as diagonal accountability. Why the spatial metaphor **diagonal accountability**? As it can be inferred from the above, diagonal accountability blends two forms of accountability, which are:


A. **Vertical accountability** consists of relationships often experienced between citizens and their governments. The vertical accountability relationship may also be seen between (or be extended to) multi-national organizations (such as regional bodies and U.N. agencies), non-governmental organizations and project participants in both long-term development and humanitarian contexts. Sphere Standards and the Core Humanitarian Standard on Quality and Accountability, among others, formally define such vertical accountability relationships and may be useful benchmarks to assess performance of humanitarian initiatives.

B. **Horizontal accountability** comprises relationships between government agencies; that is, between state oversight institutions such as parliament, ombudsman, auditor general, judiciary, among others, and government agencies providing public services including the security sector as well as ministries/departments of health, agriculture, education and water. These state oversight institutions often have constitutional (and subsidiary legislative) mandates to investigate wrongdoing and institute corrective measures as needed.

**Responsiveness** is the service provider’s (or duty-bearer’s) capacity and willingness to sustainably address legitimate citizen/community members’ needs/demands, such as calls for:

- A. cleanliness at health facilities and schools,
- B. construction of a school within a 5-kilometer radius to avoid children walking long distances,
- C. repairing a broken/washed-away bridge,
- D. provision of decent accommodation for frontline staff (in contexts where this is a policy requirement),
- E. public facilities with easy access for people living with disabilities,
- F. provision of protective equipment for frontline health service providers during pandemics,
- G. availability of essential supplies and commodities in public facilities to facilitate timely service delivery,
- H. treatment with respect and dignity when mothers are accessing maternal and newborn health services,
- I. availability of clean and safe water for both domestic and productive use,
- J. recruitment and deployment of qualified teachers and health care workers to where they are needed most,
- K. availability of agriculture extension services.

Please note that even autocratic and authoritarian regimes and organizations can be responsive without necessarily being transparent and accountable towards the people they serve. Therefore, it is essential to distinguish between government responses and responsive governance. As mentioned above, responsive governance consists of *sustained* responses to citizen voice or pressure when duty-bearers make commitments and keep them. Social accountability champions may experience government responses that deliver partial concessions in ways that divide social and civic actors (may experience divide and rule techniques). Duty-bearers “may also respond with vote-buying, or temporary payouts that leave corrupt or partisan bureaucrats in power. Similarly, positive yet discretionary reforms can also be driven by enlightened technocrats, without involving responsiveness to citizen demands. In these scenarios, what looks like a policy win in the short term could be easily
withdrawn at the government’s discretion in the future.⁵ So, please discern wisely to determine if the duty-bearer’s actions amount to responsiveness.

**Social accountability** is a form of participatory governance, in between elections that promotes and sustains mutual accountability relationships among community members, elected representatives, service providers and other duty-bearers to improve, for instance, the implementation of social and economic policies. Social accountability is different from political accountability in the sense that the latter (in functioning democracies) is usually exemplified during elections (presidential, parliamentary or local).

Examples of social accountability mechanisms⁶ include (but are not limited to) social audits, community score cards, public expenditure tracking, citizen report cards, citizen juries, town halls, community dialogues, participatory budgeting and planning, live radio phone-in programs and citizen journalism.

**Antagonistic social accountability approaches** such as *naming and shaming* may make an implementing agency popular among peers and activists but are unlikely, in several contexts, to sustainably bolster public sector performance nor lead to long-term institutional norm changes among both state and non-state actors.

**Accountability ecosystems** are multiple and non-linear relationships with diverse actors across civil society and government institutions and structures built to bolster public sector accountability. Besides being about relationships, the ecosystem is non-linear. Applying an ecosystem approach is about navigating and collectively reshaping accountability relationships to shift power towards those seeking to demand, enable and enforce public accountability.⁷

**Political economy analysis** (PEA) is a necessary aspect of any successful social accountability initiative. PEA helps program designers, implementors and evaluators understand how power and resources are distributed among and within groups and individuals; how decisions are made; which factors favor and constrain influence in each context; who are the gatekeepers; and what motivates or hinders collective action among relevant actors (incentives and disincentives). PEA should be an iterative and ongoing process of examining how political, economic, religious, cultural, social and institutional dynamics interact to influence development and governance outcomes.

**Problem Driven Iterative Adaptation (PDIA)** is a systematic approach that helps to break down complex problems into their root causes, identify entry points, explore possible solutions, act, reflect, adapt and then act again. It is a dynamic process with close feedback loops that allows coalitions to build fit-for-purpose solutions. PDIA was developed by the Center for International Development at Harvard University.⁸

**Coalition building** is an iterative process of identifying, enlisting and sustaining participation of influential individuals in addressing solvable governance and development challenges. Some challenges require short-term interventions and others long-term investment. So, it is important that PEA informs decisions around coalition building; for example, who needs to be part of the coalition, how long will they be aligned and act together and what their specific contribution will be. At a minimum, coalition members should have the following attributes: interest in the issue under consideration; influence to make change happen; time; and willingness to invest

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⁵ Jonathan Fox, “Accountability Keywords” (Accountability Research Center, January 2022), 25, https://accountabilityresearch.org/publication/accountability-keywords/.
political/material/financial capital to collectively construct/deconstruct problems and act upon them.

Shared accountability agenda is the collective governance/development process for constructing, deconstructing, sequencing and solving—or acting upon—problems. Coalition members work together to understand and prioritize solvable components of complex problems. They must weigh accountability actions to undertake within the prevailing political economy dynamics. Additionally, they must resource and rally behind their collectively developed change pathway to bring about desired outcomes.

Iterative programming refers to the process of deliberately imbedding learning by doing in the design and execution of a social accountability initiative and decentralizing decision-making power to appropriate program levels to effect program adjustments as the intervention context evolves. There is no value in sticking to the original program design and targets if there are significant changes in the implementation context. Therefore, iterative programming often requires regular dialogue and negotiation between implementers, project participants and funders to ensure that there is shared understanding regarding what needs to change, how, when and why.

Democratic local governance is about fostering collaborative decision-making among citizens, bureaucrats and elected representatives at subnational level through ongoing dialogue, mutual accountability, collective planning, implementation and monitoring. Collaborative decisions may range from how local elections are held; how locally generated revenue is collected and utilized; and how different local community groups participate in running their local governments. CRS’ social accountability model is instrumental in deepening local governance through, among other things, promoting inclusive multistakeholder coalitions and shared accountability agendas in resolving governance and development challenges at the subnational level.

Catholic Social Teaching, Integral Human Development and Social Accountability

CRS social accountability work is grounded in longstanding Catholic social teaching regarding the common good, the role of the state and political authority and the intersection between democracy and accountability, among other considerations. The Church teaches that:

1. The responsibility for attaining the common good is the duty of both individual citizens and the state, since the common good is the reason that the political authority exists. The individual person, the family or intermediate groups are not able to achieve their full development by themselves for living a truly human life. Hence the necessity of political institutions, the purpose of which is to make available the necessary material, cultural, moral and spiritual goods. The goal of life in society is in fact the historically attainable common good.9

2. Political authority is a mechanism of coordination and direction through which individuals and intermediate bodies must coalesce to support integral human development. Political authority, in fact, “whether in the community as such or in institutions representing the State,” must always be exercised within the limits of morality and on behalf of the dynamically conceived common good, according to a juridical order enjoying legal status. When such is the case, citizens are conscience-bound to obey.10

3. In the democratic system, political authority is accountable to the people. Representative bodies must be subjected to effective social control. The control exercised by the citizens does not in any way exclude the freedom

that elected officials must enjoy fulfilling their mandate with respect to the objectives to be pursued.\textsuperscript{11}

4. The principle of subsidiarity is dignifying. Therefore, governments should develop effective governance mechanisms (for example, through decentralization/devolution) that empower citizens and intermediate decision-making bodies to take charge of their affairs without always having recourse to high-level authorities.\textsuperscript{12}

It can be inferred from the above teachings that the Church is encouraging collective action and mutual accountability among citizens, bureaucrats, politicians and the private sector in the pursuit and sustenance of the common good. State officials are equally exhorted to take up a leadership role in ensuring that different sections of the community work together within the established just legal provisions.

The Catholic social teaching has shaped CRS’ Integral Human Development Framework — please see Figure 1 below.

Figure 1: Integral Human Development Framework

\begin{align*}
\text{Source: CRS Vision 2030}
\end{align*}

\textsuperscript{11} Pontifical Council for Justice and Peace, 231.
\textsuperscript{12} Pontifical Council for Justice and Peace, 104-7.
CHAPTER I: SETTING THE STAGE

CRS Theory of Change for Engaging Government

Social accountability is one of the forms of participatory governance developed to foster mutual accountability and collaborative actions between state and non-state actors to sustainably deliver public goods and services. SA is part of the CRS broader agenda of engaging governments as summarized below:

Figure 2: CRS Engaging Government Framework

SA contributes to all the three programming pathways through several mechanisms as explained in subsequent sections.

CRS Partnership Principles

CRS’ social accountability work is grounded in the agency’s firm commitment to cultivating and sustaining equitable, mutually beneficial and transformative partnerships with both state and non-state actors. Below is a summary of the agency’s partnership principles:13

1. Shared agenda—share a vision with relevant stakeholders for addressing people’s immediate needs and the underlying causes of suffering and injustice.
2. Subsidiarity—foster decision-making at a level as close as possible to the people who will be affected by them.
3. Collective action—champion mutuality, recognizing that each partner brings skills, resources, knowledge and capacities in a spirit of autonomy.
4. Foster equitable partnerships by mutually defining rights and responsibilities.
5. Diversity and shared learning—respect differences and commit to listen and learn from each other.
6. Encourage transparency and accountability in civil society and public institutions.
7. Transformative change—engage with civil society and governments to help transform unjust structures and systems.
8. Optimize local systems—commit to a long-term process of local organizational development.
9. Localization—identify, understand and strengthen community capacities, which are the primary source of solutions to local problems.
10. Sustainability—promote sustainability by reinforcing partners’ capacity to identify their vulnerabilities and build on their strengths.

Social Accountability Guiding Principles

Additionally, CRS’ social accountability work is shaped by the following principles:\footnote{14}{For further guidance please also Catholic Relief Services, {	extit{Engaging Government: A CRS Guide for Working for Social Change}}, 3–4.}

1. **Equity** in access to and distribution of public goods and resources.
2. **Inclusive participation**, particularly of vulnerable and marginalized members of the community (such as people living with disabilities, women and young people) in multistakeholder accountability coalitions and decision-making.
3. **Integrity** in both words and deeds by state and non-state actors.
4. **Transparency** in public policy objectives, processes, implementation and access to actionable information.
5. **Vertical accountability** between leaders and the people they are supposed to serve. Decisions and actions should be explained and accounted for according to established performance criteria.
6. **Horizontal accountability** fostered by a system of checks and balances among various state oversight institutions such as the anti-corruption bureau, judiciary and auditor general’s office.
7. **Iterative programming** inspired by ongoing PEA. Accountability mechanisms are tailored to evolving local contexts, and are tested and adapted before going to scale. Experiential learning is an integral component of iterative programming.
8. **Localization/subsidiarity** whereby those people affected are the ones who prioritize solvable issues and determine fit-for-purpose solutions with the support and accompaniment of external actors/agencies when appropriate.

Overview of the ACCIM SA model


Through ACCIM, CRS commits to facilitating inclusive multistakeholder coalitions to develop shared accountability agendas to build relevant skills and resources. CRS also commits to accompanying these coalitions as they think and work politically (through ongoing PEA) and learn from, and scale up, social accountability approaches.

Figure 3, on the next page, summarizes CRS’ preferred approach to fostering accountable and responsive governance through its iterative five-phase ACCIM social accountability model.

\footnote{17}{Jonathan Fox, “Disentangling Government Responses, Responsiveness and Accountability (Unpublished),” November 8, 2020.}
1. **Analyze**—identify key development and governance challenges to be resolved and apply PDIA and PEA techniques to have a more nuanced analysis of a prioritized issue.

2. **Convene**—identify and bring together change agents from government institutions, the private sector, and civil society. Secure the support and commitment of prioritized state allies, authorizers/decision-makers/duty-bearers, and enablers/gatekeepers at different levels of decision-making.

3. **Contextualize**—develop context-smart accountability mechanisms to address prioritized issues. SA mechanisms to customize include (but are not limited to) social audits, community scorecards, public expenditure tracking, participatory theater, and integrity pacts.

4. **Implement**—translate the shared accountability agenda into action and desired results. Test, learn from practice, adapt and iterate when needed.

5. **Monitor**—continuously scan the context where the SA program is being implemented and ascertain whether assumptions underpinning the SA theory of change are still valid and relevant. Seize new windows of opportunity as they emerge and adjust the SA strategy as the implementation context evolves.

In real life, ACCiM phases intersect and may be implemented concurrently and iteratively. For example, as a small team of accountability champions conducts an initial issue analysis with a PEA lens, they can enlist some allies from government and civil society and collectively explore how existing accountability initiatives may be customized. Furthermore, reformers within government may also proactively address identified gaps before multisectoral coalitions conduct field participatory monitoring exercises and, subsequently, develop collective action plans.
Chapter II: Analyze—ACCIM

Introduction

Why should you invest in understanding your intervention context and unpacking the problem you want to solve? Because you want to administer the right remedy, at the right time and in the correct quantity, combination or sequence. Will a once-off analysis then suffice to solve governance and development maladies? Not necessarily. Why not? Because some challenges are very dynamic and require that you regularly adapt your interventions. Therefore, this chapter looks at the first phase of the ACCIM model, “Analyze,” and complements the existing guidance on context analysis by blending two analytical approaches:

1. Problem Driven Iterative Adaptation (PDIA)—which helps to construct and deconstruct problems and identify solvable parts (through change space analysis) of complex development and governance problems.
2. Political Economy Analysis (PEA) tools that inform PDIA’s change space analysis and subsequent solutioning and actioning. PEA instruments highlighted in this guide include stakeholder analysis, alignment, interest, and influence matrix (AiiM), and boundary partner identification. Admittedly, this list of PEA mechanisms is not exhaustive. Therefore, you may want to consider other tools that can augment your understanding of how power and economics, incentives and disincentives, gatekeepers and influencers interact to shape development and governance outcomes in your context.

By the end of this chapter, you will be able to:

1. Appreciate the importance of the initial analysis phase of the ACCIM model before you begin enlisting coalition members to be part of subsequent phases (Convene, Contextualize, Implement and Monitor).
2. Understand that social accountability initiatives take place in very dynamic contexts that keep evolving. Therefore, it is critical to invest in ongoing context analysis to ensure that SA undertakings are recalibrated to prevailing contextual trends.
3. Sharpen your analytical skills using PDIA and PEA tools to distill complex development and governance challenges, ascertain solvable root causes and design politically feasible, financially tenable and technically sound social accountability programs.

Critical Questions to Consider

The illustrative questions below serve to help Country Program (CP) teams and partners critically think through prospective problem(s) to resolve via social accountability mechanisms including their root causes, consequences of inaction, decision-makers, allies, incentives and disincentives, opponents, entry and leverage points and potential points of failure. These questions are inspired by PDIA and PEA. They can be customized, as needed, to specific program demands.

1. What issue do you want to resolve using social accountability?
2. Why is it important to resolve it—and how will it look like when it is addressed?
3. What will be the consequences of inaction?
4. What are the root causes of the issue?

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5. Is the issue sector-specific or multisectoral? Please specify the affected sector(s).
6. What are the existing local legal and policy provisions about the issue?
7. What international legal and policy instruments has your country ratified and can be useful in framing the relevance of the issue?
8. What resources (human, material and financial) already exist within government and civil society to resolve the prioritized issue?
9. Who are the critical actors for the issue we want to resolve? Who decides what, how, when, for whom and where resources and services are distributed?
10. What is the source of decision-making power?
11. Who is benefiting from the status quo and who is losing out?
12. What is the relationship between different actors?
13. Which government allies are likely to support or oppose the proposed reforms/changes?
14. What are the potential incentives and disincentives of suggested reforms?
15. What are the entry and pressure points to effect the required social change? Is government planning to do/already doing something that we can leverage?
16. How will institutional, cultural and structural dynamics foster and/or hinder proposed reforms?
17. Is there already an inclusive coalition working on the issue under consideration?
   - Have there been any previous attempts to resolve prioritized issues? Who implemented what, and where?
   - When did previous SA initiatives take place and under what circumstances; what successes and failures have been recorded, and why?
   - Are there any ongoing CRS CP initiatives that can be leveraged?
18. What root causes can the CP and partners work on given available resources, relevant partners’ interest in addressing the underlying causes and the CP’s latitude to galvanize critical authorizers/decision-makers to take the necessary decisions that will address the primary causes?

Guidance

ACCiM is a problem-driven social accountability approach that promotes collective action through inclusive multistakeholder coalitions. So, it is important that from the onset, the country program has a fair appreciation of the problem to be solved, its root causes, entry points and potential allies, among other things. The CP needs to form a multistakeholder team (four to six people) to conduct an initial analysis using the tools highlighted below to help them build a business case to inform subsequent investment decisions and outreach to prospective coalition members.

Problem Driven Iterative Adaptation (PDIA)

Problem Driven Iterative Adaptation (PDIA) is a systematic approach which helps to break down complex problems into their root causes, identify entry points, explore possible solutions, act, reflect, adapt and then act again. It is a dynamic process with close feedback loops that allows coalitions to build fit-for-purpose solutions.19

PDIA is shaped by four mutually reinforcing principles:20

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20 Center for International Development, 6.
CHAPTER II: ANALYZE—ACCIM

1. Local solutions for local problems. People affected by the problem should identify, articulate and prioritize problems to be solved.

2. Pushing problem-driven positive deviance. Implementing organizations and coalition members should encourage experimentation and positive deviance.

3. Try, learn, iterate and adapt. Experiential learning and adaptive programming are essential.

4. Scale through diffusion. It is critical to share the learning with relevant stakeholders to encourage uptake, seek feedback and enhance legitimacy of reform outcomes.

Problem-driven programming demands that CPs enhance their capacity to solve problems by working on good problems. A good problem is one that:

1. Matters to key change agents and therefore cannot be ignored.

2. Motivates and drives change among relevant stakeholders.

3. Can be broken down into smaller causal elements/root causes.


5. Is locally driven, where local actors define, debate and refine the problem statement through shared consensus.

The PDIA Toolkit has eight iterative phases: constructing your problem, deconstructing your problem, sequencing, crawling the design space, building authorization, designing first iteration, learning from iterations and onward. What is applicable to ACCIM’s first phase, Analyze, are the first three PDIA processes: problem construction and deconstruction, and sequencing.

Problem Construction

Problem construction helps to frame the problem and initiates the search for fit-for-purpose solutions. The following questions help to build a business case:

1. What is the problem?

2. Why does it matter?

3. To whom does it matter?

4. Who needs to care more?

5. How do we get them to give it more attention?

6. How will the problem look like when it is solved?

Problem Deconstruction

The second step in PDIA is problem deconstruction. This step involves breaking down the prioritized problem into its constitutive elements: root causes and sub-causes using the “5-Why” technique. Deconstruction enables identification of components of the complex problem that can be solved using locally available resources.

If the prioritized major problem that the CP wants to resolve is persistent drug stockout in health facilities, you can turn your problem into a question such as “why are health facilities experiencing drug stockouts?” For each cause that you identify, you need to ask five times “why is this happening?” to surface sub-causes. The five “why” questions are what constitute the “5 Why” technique, as shown in Table 1 on the following page.

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21 Center for International Development, 9.
22 Center for International Development, 10–13.
23 Center for International Development, 14–19.
### Table 1: Problem Deconstruction Using the 5 Why Technique
Turning your problem into a question: “Why are health facilities experiencing drug stockouts?”

<table>
<thead>
<tr>
<th>Cause 1</th>
<th>Cause 2</th>
<th>Cause 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ineffective Central Medical Stores (CMS) systems</td>
<td>Poor information management system linking procurement to suppliers</td>
<td>Dysfunctional drug monitoring systems</td>
</tr>
<tr>
<td>Why does this happen?</td>
<td>Why does this happen?</td>
<td>Why does this happen?</td>
</tr>
<tr>
<td>Business and political interference in CMS procurement</td>
<td>Failure to migrate to e-procurement despite existing legislation</td>
<td>Lack of effective whistleblowing mechanisms</td>
</tr>
<tr>
<td>Why does this happen?</td>
<td>Why does this happen?</td>
<td>Why does this happen?</td>
</tr>
<tr>
<td>Service Charters for Ministry of Health (MoH) and CMS not properly harmonized</td>
<td>Poor work ethics and corrupt practices by procurement officers</td>
<td>Dysfunctional or politically compromised health facility oversight committees</td>
</tr>
<tr>
<td>Why does this happen?</td>
<td>Why does this happen?</td>
<td>Why does this happen?</td>
</tr>
<tr>
<td>Clash of vested interests between MoH and CMS</td>
<td>Anti-corruption laws not adequately enforced to deter prospective offenders</td>
<td>Citizens have limited access to actionable information</td>
</tr>
<tr>
<td>Why does this happen?</td>
<td>Why does this happen?</td>
<td>Why does this happen?</td>
</tr>
<tr>
<td>Procurement kickbacks incentivize ongoing limited joint efforts between MoH and CMS</td>
<td>Some corrupt MoH and CMS staff collaborate with law enforcement officials</td>
<td>Some corrupt MoH and CMS officers fear being exposed by health facility committees</td>
</tr>
<tr>
<td>Why does this happen?</td>
<td>Why does this happen?</td>
<td>Why does this happen?</td>
</tr>
<tr>
<td>Anti-corruption laws not adequately enforced to deter prospective offenders</td>
<td>Sometimes high-ranking politicians are part of the corruption in MoH and CMS</td>
<td>Public outcry against corrupt MoH and CMS staff may force government to terminate contracts of some wrongdoers</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cause 4</th>
<th>Cause 5</th>
<th>Cause 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leakage of drugs to private health facilities</td>
<td>Lack of transparency in revenue management in private wings of public hospitals</td>
<td>Disparities between budgets, requests, and supplies</td>
</tr>
<tr>
<td>Why does this happen?</td>
<td>Why does this happen?</td>
<td>Why does this happen?</td>
</tr>
<tr>
<td>Most private clinics and hospitals owned by staff working in public health facilities</td>
<td>Lack of “fit for purpose” accounting systems</td>
<td>Sometimes the Ministry of Finance delays to disburse funds allocated for drug procurement</td>
</tr>
</tbody>
</table>

**NOTES:**

A. Causes 3 and 4 present large change spaces that is why they are shaded in green.

B. You can complete the blank spaces for causes 4, 5 and 6 to practice the “5 Why” technique.
Deconstruction of Complex Problems Using Fishbone/Ishikawa Diagrams

You can use the information gathered through the “5 Why” discussion to visually represent the deconstructed complex problem using a Fishbone/Ishikawa diagram as shown in Figure 4.

Figure 4: Deconstructing Complex Problems Using Ishikawa/Fishbone Diagram

Sequencing Using the Triple-A Change Space Analysis to Find Entry Points

The third step in PDIA is sequencing, determining politically and technically feasible entry points. Each root and sub-cause surfaced during problem deconstruction provides an opportunity for engagement, policy reform and practice transformation. The opportunity for policy/practice reform is what is called “change space.” To determine the existing “change space,” you need to subject every root cause and associated sub-causes to triple-A change space analysis. The “triple-A” in “change space analysis” is about:

1. Authority—how much support do you need to effect policy/practice reforms? The support you require might be political, legal, institutional or personal. It is important to establish what support you already have and what gaps need to be filled to foster the required change.

2. Acceptance—to what extent will the people to be affected by the proposed policy/practice reform accept the need for change and the implications thereof? It is critical to determine the level of acceptance that already exists and any gaps that require addressing to facilitate speedy delivery of expected reforms.

3. Ability—what resources (time, human, financial and material) will be needed to implement associated policy/practice reform interventions? What do you already have — and what additional resources can you realistically mobilize?

Key for Change Space Analysis

Using an estimation scale of low, medium and large, assess each cause and associated sub-causes for “change space,” using three filters: authority, acceptance and ability.

CHAPTER II: ANALYZE—ACCIM

Table 2: Change Space Estimation Scale

<table>
<thead>
<tr>
<th>Cause</th>
<th>Authority</th>
<th>Acceptance</th>
<th>Ability</th>
<th>Overall Change Space</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Large</td>
<td>Large</td>
<td>Large</td>
<td>Large change space</td>
</tr>
<tr>
<td>B</td>
<td>Large</td>
<td>Large</td>
<td>Medium</td>
<td>Medium change space</td>
</tr>
<tr>
<td>C</td>
<td>Medium</td>
<td>Large</td>
<td>Low</td>
<td>No change space</td>
</tr>
<tr>
<td>D</td>
<td>Medium</td>
<td>Medium</td>
<td>Large</td>
<td>Small change space</td>
</tr>
</tbody>
</table>

Source: Adapted from the Center for International Development 2018, 22 (with estimation variations for causes B and D as per footnote 25).

Table 3: Worksheet for a Basic Triple-A Change Space Analysis

Please use the table below to facilitate a triple-A change space analysis for causes identified during the problem deconstruction phase. You can nuance this basic analysis with PEA tools presented in the next section.

<table>
<thead>
<tr>
<th>Questions for reflection</th>
<th>AAA estimation (Low, Medium and Large)</th>
<th>Assumptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cause 1</td>
<td>Overall, how much Authority do you think you have to engage?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Overall, how much Acceptance do you think you have to engage?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Overall, how much Ability do you think you have to engage?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>What is the change space for cause 1 (small or medium or large change space)?</td>
<td></td>
</tr>
</tbody>
</table>

Source: Adapted from the Center for International Development 2018, 23.

You need to complete the above worksheet for every cause identified during the problem-deconstruction process. It is important to note here that causes with a large change space are entry points with high probability of success to effect required changes. So, it is recommended that you start working on causes with large change spaces as you improve the triple-A scores for other causes with low ratings. Below is a worksheet to help you strategize how to increase authority, acceptance or ability.

Table 4: Increasing your Authority, Acceptance and Ability

<table>
<thead>
<tr>
<th>Cause/Sub-cause</th>
<th>Change Space (large, medium, small or no change space)</th>
<th>Strategy What will you do to expand your authority, acceptance or ability?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: Adapted from the Center for International Development 2018, 28-29

25. There is a slight variation in the change space estimation for causes B and D from the PDIA Toolkit; please see p.22. The toolkit states that when authority and acceptance are “large” and the ability is “medium,” there is small change space. We argue that the change space is medium as for cause B in the estimation table. Furthermore, the PDIA Toolkit guides that when authority and acceptable are “medium” and the ability is “large,” there is no change space (as for cause D). We differ here too by postulating that the change space for cause D is small. The PDIA Toolkit change space estimations may be graphically conceivable but are logically problematic to defend for causes B and D as presented above.
Nuancing Change Space Analysis with Political Economy Analysis

Earlier in Chapter 1 of this guide, we presented PEA as a useful enabler for decision-making throughout a social accountability undertaking. Therefore, program designers, implementors and evaluators need to deploy PEA to understand how power and resources are distributed among and within groups and individuals; how decisions are made; which factors favor and constrain influence in each context, who are the gatekeepers and what motivates or hinders collective action among relevant actors (incentives and disincentives). PEA should be an iterative and ongoing process of examining how politics, economics, religious, cultural, social and institutional dynamics interact to influence development and governance outcomes.

So, PEA will be valuable in assessing how much authority, acceptance and ability you possess to work on identified causes and for strategizing how to expand the scores of each critical variable of the change space (where needed).

We are going to sample three PEA tools that you can utilize to explore further power dynamics relative to the issue you are considering solving via social accountability. These tools are stakeholder analysis; the alignment, interest and influence matrix (AiiM); and the boundary partner identification approach.

**Stakeholder Analysis**

Stakeholder analysis enables you to reflect on the people you need to work with, and influence, to deliver the desired policy and practice changes. It helps to think about the interests, concerns and influence stakeholders have on the issue under consideration. Understanding stakeholder interests, fears, influence and interrelationships are critical in devising robust engagement strategies that yield sustainable governance and development outcomes.

It may be useful to look at stakeholders through the lens of the three change space variables: authority, acceptance and ability. The next page provides a sample template for stakeholder analysis that you can adapt.
<table>
<thead>
<tr>
<th>Stakeholder Name</th>
<th>Institution and Contact Details</th>
<th>Position/Role in the Institution</th>
<th>Change Space</th>
<th>Interest</th>
<th>Influence</th>
<th>Obstruction</th>
<th>Engagement Strategy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mike Audit</td>
<td>Ministry of Finance</td>
<td>Permanent Secretary</td>
<td>Authority</td>
<td>High</td>
<td>High</td>
<td>Delay disbursing funds to frontline facilities</td>
<td>Secure quarterly courtesy calls by our Country Representative to keep him informed</td>
</tr>
</tbody>
</table>
You can plot on four quadrants stakeholder alignment, interest, and influence after completing the stakeholder matrix for prioritized actors using the tool below.

**The Alignment, Interest and Influence Matrix (AIIM)**

There is already very detailed guidance (six pages) developed by Enrique Mendizabal (n.d.) at the Overseas Development Institute on the AIIM. Users of this guide are encouraged to consult the existing AIIM guidance. Below are a few considerations to frame the value proposition of AIIM.

AIIM is a useful tool for:

1. Visualizing the current (and subsequent) behaviors and capacity (namely interest, influence and alignment) of critical and prioritized stakeholders relative to the issue under consideration.
2. Developing pathways/trajectories of behavioral changes (interest and alignment) expected of prioritized stakeholders to contribute to desired policy and practice reforms—and thereafter, designing commensurate interventions to bring about behavior changes in target actors.
3. Monitoring and evaluating stakeholder behavior changes over time: quarterly, semi-annually, annually, mid- and endpoints.
4. Determining influential and accessible stakeholders to the social accountability team.

**Figure 5: Illustration of the Alignment, Interest and Influence Matrix**

<table>
<thead>
<tr>
<th>HIGH</th>
<th>HIGH</th>
</tr>
</thead>
<tbody>
<tr>
<td>INTEREST</td>
<td>INTEREST</td>
</tr>
<tr>
<td>LOW</td>
<td>LOW</td>
</tr>
<tr>
<td>Charter</td>
<td>Accord</td>
</tr>
<tr>
<td>Right</td>
<td>Duty</td>
</tr>
<tr>
<td>Convention</td>
<td>Draft</td>
</tr>
</tbody>
</table>

**NOTES:**

1. Arrows—represent the anticipated movement/trajectory of a stakeholder as you implement the program.
2. Size of the circle/bubble—signify the influence of a stakeholder.
3. Alignment—establishes whether a stakeholder agrees with your shared accountability agenda or is planning to work on the same or similar things.
4. Interest—indicates if a stakeholder is committing money, time and political capital to the issue your coalition is focusing on.

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Plausible Interventions Based on Alignment and Interest of Stakeholders

1. High alignment and high interest—initiate partnerships/consider including them in your multistakeholder coalition—the focus of the next chapter on convening prospective allies.

2. High alignment and low interest—consider increasing their interest in the issue under consideration or develop their capacity to participate meaningfully in solutioning and actioning.

3. Low alignment and high interest—invest in challenging their worldviews/persuade them to prioritize your issue.

4. Low alignment and low interest—you may simply ignore such stakeholders or monitor their behavior in case they transform in favor of your intervention or begin to pose a threat to SA work.

Identification of Boundary Partners

Policy and practice changes that are needed to sustainably deliver public goods and services also imply transforming behaviors, relationships and attitudes of relevant actors. You may easily identify these actors whose mindset and conduct you want to influence through PDIA, stakeholder analysis and the AiiM among other mechanisms. As you may have already noticed under AiiM, not all relevant and influential actors are accessible—so, what do you do with such people?

1. Boundary partners are stakeholders whose mindset and conduct you want to influence, are accessible and you will directly work with. What do you do with influential and critical stakeholders who are inaccessible, but whose mindset and behavior equally need transformation?

2. You need to identify accessible individuals that you can influence, who in turn will also influence the inaccessible critical stakeholder. The actor who can be influenced needs to be included on the list of boundary partners (member of the multistakeholder and inclusive coalition).

The outcome mapping community has been extremely instrumental in championing the discussion around boundary partners:

Boundary partners are those individuals, groups or organizations with whom the program interacts directly and with whom the program can anticipate opportunities for influence. These actors are called boundary partners because even though the program will work with them to effect change, it does not control them. The power to influence development rests with them. The program is on the boundary of their world. The program tries to facilitate the process by providing access to new resources, ideas or opportunities for a certain period.27

Boundary partner considerations need to start early and continue throughout ACCIM phases to ensure that you deliver the required changes on time.

Connecting the Dots for ACCIM Phase I: Analyze

Now that you, as a small group of CRS staff and partners, have a fair appreciation of the issue you want to solve utilizing social accountability, you need to write up a business case using a combination of PDIA and PEA tools (if appropriate to facilitate decision-making). Please share your concise business case with your leadership for their buy-in and investment (personnel and finances) before enlisting the support of other actors beyond the small group that was involved in the initial analysis. Furthermore, PEA tools should have enabled you to identify boundary partners that

you need to invite/convene to be part of a multistakeholder coalition to address prioritized governance and development challenges.
Chapter III: Convene—ACCIM

Introduction
Do all governance and development challenges need inclusive multistakeholder coalitions to be solved? Not necessarily. Why? Because some problems are localized or caused by a few individuals. So, identifying and working on a specific case may remedy the problem. For example, transforming the behavior of a few teachers or health personnel who frequently report late for work may correct poor service delivery. However, if the above poor work attendance is partly caused by insufficient monitoring/oversight at subnational and national levels by the ministries of education and health, then the above problem is no longer localized but a consequence of collective action failures within these two institutions. It follows then that some governance and development challenges may be systemic, brought about and sustained by a horizontally and vertically integrated network of individuals and values found at various levels of decision-making. Systemic challenges call for collective action between state and non-state actors. Besides, governance challenges are not about one set of people (citizens) getting another set of people (state officials, such as politicians and bureaucrats) to behave better but fundamentally about these two groups (citizens and state officials) working collaboratively to promote and sustain the common good.

Chapter III of this guide looks at the second phase of the ACCIM model: Convene. The Convening phase builds on the analytical and prioritization work completed during the preceding phase: Analyze. At this point, you should understand what root causes of your prioritized problem present high chances of success, politically and technically. You now need to constitute, grow and sustain an inclusive and multisectoral coalition.

At the end of Chapter III, you should learn more about how to:

1. Determine whether a prioritized and agreed upon problem requires a multistakeholder response or a single organization can address it.
2. Ascertain the number and diversity (of sectors, sex, interests, levels of influence) of coalition members to ensure that your grouping has the necessary legitimacy, gravitas, resources and stamina to bring about the change you want.
3. Ensure that coalition members have a shared accountability agenda and rally behind it until its logical conclusion.
4. Secure consensus, among other things, regarding the coalition’s structure, frequency of meetings, participation costs, mechanisms for enlisting additional members and coordination with other initiatives at national and subnational levels to facilitate joined-up efforts.
5. Anticipate conflicts and set up conflict management mechanisms to transform conflicts before they manifest in violence and derail the coalition’s raison d’être.
6. Promote vigilance among coalition members to avoid elite capture. There may be a temptation among political heavyweights, economic elites and lobby

groups to infiltrate your accountability coalition and inadvertently sway it towards supporting self-serving elite agendas.

Critical Questions to Consider

The following select questions serve to help Country Program teams and strategic partners consider whether a prioritized problem is better resolved through inclusive and multisectoral coalitions or through a handful of passionate, skilled and committed individuals. If you decide to form a coalition, the questions also enable you to consciously scrutinize the configuration, functioning, logistics and potential risks of the coalition:

1. Is the prioritized problem isolated (for example only experienced at one facility) or it is symptomatic of an entrenched problem within the sector?
2. Which stakeholders do we need to recruit to be part of solutioning and actioning?
3. How big should our coalition be?
4. Do we work only at the subnational level, or do we also need a corresponding coalition at the national (and international) level to shift power dynamics and foster optimal system performance (through sustained accountability and responsiveness)?
5. What are some of the ongoing reform efforts/existing coalitions that your nascent coalition can leverage to make change happen?
6. How will our coalition be structured? Do we need a lead agency or convener?
1. What is the frequency of meetings, and how do we cover participation costs?
2. How do we keep coalition members engaged and motivated?
3. How do we assess the performance of the coalition?
4. How will interpersonal conflicts among coalition members be handled?
5. How do we prevent and manage elite capture to remain focused on our accountability agenda?
6. How and when do we enlist additional coalition members?
7. At what point do we disband or reconstitute the coalition to monitor sustenance of the desired change or tackle other outstanding/emerging challenges?

Guidance

The guidance below provides practical tips that you can reference and customize as you sail through your governance and development landscapes.

Do we need a coalition to solve the prioritized problem?

The answer to the above problem depends on the nature and scale of the prioritized problem. You do not need to form a coalition if the problem is localized; decision-makers are easily accessible and willing (with a bit of advocacy/lobbying); and requisite resources (human, material and time) are also readily available. However, if the prioritized problem is being experienced in multiple places (even if it is in one district/county/commune/state/province/prefecture); decision-making is at multiple levels or involves different people; and many people are being affected due to continued inaction, then an inclusive multistakeholder coalition presents a versatile mechanism to remedy your governance/development challenge.

As you decide whether to work through coalitions or with a few individuals, please ensure that your actions contribute to optimizing local leadership\(^{30}\) and strengthening

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local systems, so that there is continued optimum public sector performance long after CRS and its partners have ceased operations in target areas.

Who should be part of the Coalition?
The analytical work in Phase I (of ACCiM) should guide decisions regarding initial prospective coalition members to recruit. For example, during your PDI A and PEA exercises, you identified individuals and institutions with decision-making power/influence; those affected by the problem; and stakeholders that can contribute resources (money, materials, skills) to bring about the desired change. You also determined who among the above stakeholders are influential, accessible, interested and aligned with the changes you are looking for in your community/region/country. Furthermore, you also established—through your stakeholder analysis and boundary partner identification process—how to transform the behavior of influential but inaccessible decision-makers.

As a lead agency and convener, you need to make some initial decisions regarding the size and diversity of coalition members to foster legitimacy, gravitas, representativeness and stamina. Please ensure that your coalition is nimble and manageable. Depending on the issue and results of your analytical work in Phase I, you need a fair mix of coalition members from civil society (including media and faith groups), academia, community groups, traditional leaders, private sector and state institutions. People directly affected by the problem—men and women, boys and girls—should also be included equitably.

The people you enlist as coalition members should, at a minimum, possess the following attributes: influence, interest, availability/time and willingness to contribute/invest resources (political capital, money, materials, skills) towards resolving prioritized challenges.

Please exercise flexibility in your recruitment of members. Adapt your membership list as you interact with more people and deepen your understanding of the problem and potential solutions. It is plausible that some coalition members may recommend additional names (of gatekeepers, influencers, enablers/interlocutors). Kindly filter additional names using the already stated coalition member attributes: influence, interest, availability and willingness to invest in problem-solving.

How you go about recruiting coalition members depends on your prioritized problem, local context and the relationships that you already have. A phone call is sufficient for some to accept the invitation—others might need an in-person discussion. Some stakeholders may ask for a written business case to weigh the potential benefits and risks before they can commit themselves. You may even encounter individuals who want you to make them feel indispensable before they commit to becoming a coalition member. Be ready to deploy a combination of strategies. Please exercise patience and good judgement as you manage these recruitment dynamics.

How should your coalition be structured?
The structure of your coalition will depend on several contextual factors including the complexity of your prioritized problem, group dynamics and the anticipated duration of solutioning and actioning.

As an initial lead agency, you need to facilitate/accompany decision-making regarding how your group will be structured, managed and resourced at the start of your coalition meeting. Genuinely listen to and consider the views of every coalition member present during the initial meeting(s) as you decide on the configuration of your group. Openly discuss and document decisions around the frequency of your meetings and how coalition activity costs will be covered so that you manage

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expectations upfront and avoid unnecessary conflicts along the way over, for example, transport refunds, refreshments and the hosting of meetings.

At a minimum, you can consider having a lead agency/convener/chair to coordinate and steer all group activities. The chair role can alternate as the group sees fit to ensure that there is shared leadership and that everyone feels included in decision-making. Another important function is the secretariat, who documents all group activities, key decisions and milestones. The chair and secretariat need to coordinate their work closely and ensure that all coalition members are pulling in the same direction.

Please develop a fit-for-purpose structure that will steer the coalition towards desired outcomes; promote inclusive participation, testing and scaling up of promising ideas; promote learning from both successes and failures; and is agile to course-correct as the intervention context evolves.

How do you ensure a shared Accountability Agenda?
Fostering a shared accountability agenda is an ongoing process that starts right from the Analyze Phase and may end at the delivery of the desired public good or service. That is why it is critical that you involve some of your strategic partners in the Analyze Phase. By now, you must have agreed (as a small group of the lead agency) on root causes of your problem that present large opportunities for reform (change spaces). That initial agreement on opportunities for reform and the supporting evidence form part of the shared accountability agenda that you need to present to the nascent coalition for validation, updating and buy-in.

You need to present your PDIA and PEA findings so that every coalition member understands how you arrived at specific problem components to work on and the list of stakeholders to prioritize. Your PDIA and PEA work to present include:

1. Problem construction, deconstruction and sequencing (change space analysis).
2. Stakeholder analysis; alignment, interest and influence matrix; and boundary partner identification.

Please use this opportunity to address any gaps in your analysis and ensure that your problem is “a good one” (that, for example, many coalition members care about it, are interested in doing something about it and you have a good chance of resolving it).

Once you have secured the agreement of coalition members that the prioritized problem is worthy of the coalition’s collective capital and leadership, you can now delve into exploring potential solutions (please see Phase III, Contextualize, which is the focus of the next chapter).

How will you manage and transform your conflicts?
It is highly plausible that you will end up working with individuals and institutions that you already collaborate with in some way. So, you probably have a fair understanding of prospective members’ attitudes, temperaments, character, beliefs, interests and hot buttons. However, even with this “a priori” knowledge, you cannot always predict how individuals will behave during all coalition activities. Disagreements and misunderstandings may accumulate and lead to tensions over many things including leadership styles, prioritized issues, meeting venues, external engagement strategies, choice of intervention regions/communities, etc.

The best strategy is to prevent conflicts before they escalate into violence and derail your coalition. Conflict prevention may take several forms and include:

1. Creating an atmosphere where every coalition member can freely express himself/herself and feels respected and valued. How you create this enabling
environment depends on factors such as local customs and coalition members’ emotional and intellectual profiles.

2. Setting up a small conflict management subcommittee (or “committee of the wise”) to facilitate de-escalation and transformation of interpersonal conflicts. Some coalitions may decide to assign this role to the coalition chair and secretary. Please establish a conflict management and transformation mechanism that is appropriate to your context.

3. Informing coalition members that the coalition leadership will collaborate with appropriate local authorities to duly investigate (and prosecute if appropriate) cases of abuse and violation as, and when, they occur.

Is there a potent vaccine to prevent elite capture?
Not necessarily. Therefore, you need to constantly ensure that your coalition members, while acting in the name of the group, remain focused on your shared accountability agenda and do not use the group’s collective capital to advance their private interests/agenda.

It is tempting for some unscrupulous local elites, such as politicians, businesspeople or lobby groups, to infiltrate vibrant coalitions in the hope of slowly steering the group towards their private objectives and away from the coalition’s shared accountability agenda. Therefore, be on your guard to avoid being lured into promoting activities that do not add value to your coalition vision and objectives. It is equally important that you are attentive to the above risks when determining leadership roles such as chair, secretariat and conflict-resolution committee.

Connecting the Dots for ACCIM Phase II: Convene
Congratulations for having coalesced an inclusive and multisectoral coalition brought together by a shared accountability agenda. As a team member, your assignment is to ensure that your coalition remains motivated and focused on your short- and long-term objectives while recalibrating your strategies as the intervention context evolves. Having agreed as a coalition on the solvable parts of your governance/development problem and identified critical stakeholders and entry points (among other things), you now need to develop a coherent and contextually appropriate strategy that skillfully integrates different social accountability mechanisms and tools to bring forth the change you want. This is the focus of Chapter IV, Contextualize.
Introduction

Why contextualize social accountability mechanisms and tools when governance and development problems are similar across communities? Are we not just wasting our precious resources by adapting existing tools when we can simply copy and paste? Not at all. Why? Because context matters in governance and development programming. What succeeds in one intervention context does not necessarily guarantee us the same level of success in other contexts. Why is this so? Because those affected by the problem and decision-makers may be different (including their incentives and interests). This is the reason the ACCIM social accountability model encourages ongoing context analysis through the deployment of PEA tools so that our intervention strategies are responsive to the evolving implementation environment.

This chapter is dedicated to distilling how to develop context-appropriate and implementable social accountability strategies, mechanisms and tools. By the end of this chapter, you will learn more about how to:

1. Skillfully develop coherent social accountability strategies that seamlessly integrate multiple techniques, tools and avenues to deliver the desired change.
2. Distinguish between tactical and strategic SA approaches.
3. Customize and facilitate SA mechanisms such as service charters, social audits and community scorecards.
4. Facilitate action planning based on the participatory monitoring exercises mentioned above.

Critical Questions to Consider

1. Have there been any significant contextual changes that you need to consider as you design your strategy (since the last time you conducted your landscape assessment)?
2. What combination and sequencing of SA techniques and tools do you need to deploy to effectively solve your prioritized problem?
3. What will it take to implement your strategy in terms of skills, influence, time, money and other resources?
4. Does your coalition include people with the appropriate skills, influence, time, and other resources? If not, who else needs to be included in your coalition for it to have the commensurate configuration for the task at hand?
5. How will you measure your progress?
6. What are the assumptions underlying your strategy?
7. What are the potential risks that you need to closely monitor and manage?

Guidance

The next few pages provide detailed guidance regarding how you can develop your SA strategy and customize select SA tools and mechanisms to implement your plan. We will use the drug stockout issue to demonstrate the customization journey.

SA Strategy

Why an SA Strategy?

Why should you invest in developing an SA strategy? Because it provides a map and compass of how different pieces of your work contribute to your shared accountability agenda both in the short- and long-term. Having a compass or
GPS does not necessarily mean that you must move in a straight line. Often, your governance terrain will have hills, rivers and streams, valleys, plateaus, grasslands and rainforests. So, you must use different instruments to navigate your way out. Your GPS is designed to help you make wise decisions regarding how you navigate through your challenging terrain to get to your destination. Fox’s (2014, 2015, 2016) distinction between tactical and strategic accountability approaches is very instructive in this respect.

Table 6: Differentiating Between Tactical and Strategic Accountability Approaches

<table>
<thead>
<tr>
<th>Tactical Approaches</th>
<th>Strategic Approaches</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Tool-led interventions (often external)</td>
<td>• Multiple, coordinated tactics (can the whole be greater than the sum of its parts?)</td>
</tr>
<tr>
<td>• Limited to citizen voice efforts</td>
<td>• Enabling environments for collective action, to reduce perceived risk</td>
</tr>
<tr>
<td>• Information provision (assumed to inspire collective action that can influence public sector performance)</td>
<td>• Citizen voice coordinated with governmental reforms that bolster public sector responsiveness (voice plus teeth)</td>
</tr>
<tr>
<td>• Limited to “local” arenas</td>
<td>• Multilevel (linking local, subnational and national actors and targets)</td>
</tr>
<tr>
<td></td>
<td>• Campaigns rather than interventions (iterative, contested and therefore uneven processes)</td>
</tr>
</tbody>
</table>

Source: Fox 2016, 5

What are the critical building blocks of an SA Strategy?
It is important that your SA strategy, at a minimum:

1. Summarizes the key challenges that you intend to resolve.
2. Indicates the desired changes you want to see, both short- and long-term.
3. Articulates critical assumptions informing your strategy.
4. Identifies potential risks that you need to anticipate, monitor, treat and manage.
5. Establishes your resource needs, allies, opponents, decision-makers, engagement techniques, action points, key messages and timelines.
6. Assigns responsibilities for implementation and monitoring.

SA Strategy Example

What is our key challenge?
Public health facilities run out of essential drugs several times a year in our province. Often, health service providers only give prescriptions. Patients spend a lot of money buying medicines from privately owned pharmacies. Some patients cannot afford drugs in private pharmacies, thus jeopardizing their recovery prospects. The above situation causes some patients to be bedridden for longer periods and makes others to lose their lives.

What is causing these drug shortages? Health facility staff argue that the problem lies with their supervisors at the national level, who delay procuring medicines and divert part of medicines meant for public facilities to some of their privately owned health centers and pharmacies. Senior officials within the department of health—at the district, provincial and national levels—counter allegations of wrongdoing by arguing that the alleged drug shortage is caused by poor planning and reporting by frontline staff who delay to account for quarterly essential drug allocations from the Central Medical Stores.

CHAPTER IV: CONTEXTUALIZE—ACCIM

What changes do we want to see?
1. Establishment and rollout of a participatory drug monitoring system from the national to local level.
2. Increased knowledge among patients and health service providers regarding drugs that are provided for free and those dispensed at a fee.
3. Reduction in patients’ out-of-pocket expenditure on drugs.
4. Timely dispensing of essential drugs to patients when they visit public health facilities.
5. National and local governments allocate sufficient funds for procurement and distribution of essential drugs.

What are our key assumptions?
1. Health will remain one of the priority sectors receiving adequate government support.
2. Patients/community members will collaborate well with their local member of parliament in advocating for an end to essential drugs stockouts.
3. Other prioritized government allies, including the vice president and the Ministry of Health permanent secretary (technical services), will continue to support our work.

What are the potential risks?
Table 7: Risk Matrix Sample

<table>
<thead>
<tr>
<th>Risk</th>
<th>Probability</th>
<th>Impact</th>
<th>Mitigation Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Some patients become scared of reporting drug stockouts to their local MP out of fear of reprisals.</td>
<td>Low</td>
<td>Major</td>
<td>Aggregate community voices, through social audits and community scorecards, before sharing with different duty-bearers to minimize the risk of being singled out.</td>
</tr>
<tr>
<td>Members of the ruling party refuse to be part of the coalition out of suspicion that the coalition is a mouthpiece of the opposition meant to undermine government.</td>
<td>Medium</td>
<td>Major</td>
<td>Ensure inclusive multistakeholder coalitions—that represent different interests. Avoid partisan activities while working together as a coalition.</td>
</tr>
</tbody>
</table>

Source: CRS 2022

You can customize your risk matrix according to your needs. For example, you may want to add other columns that will help you track how the risk evolves over time; mitigation measures implemented along the way; and the responsible and accountable person/institution for every risk identified.
### Table 8: Social Accountability Strategy Sample

<table>
<thead>
<tr>
<th>Resources</th>
<th>Support and Opposition</th>
<th>Target and Change Agents</th>
<th>Techniques</th>
<th>Key messages to Targets</th>
<th>Action Steps</th>
<th>When</th>
<th>Responsible</th>
<th>Accountable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funds</td>
<td>Our strategy will cost about $75,000.</td>
<td>1. Vice President – has recently complained about drug stockouts in rural health facilities.</td>
<td>1. Ministries of Finance (name) and Health (name)</td>
<td>1. Ongoing context analysis.</td>
<td>1. Conduct regular context analysis using PDIA and PEA.</td>
<td>October 12, 2022</td>
<td>Joshua Strategy and Vivian Evidence (coalition member)</td>
<td>Jane Scorecard (coalition chair)</td>
</tr>
<tr>
<td>Human resources</td>
<td>All coalition members will contribute time and skills when needed.</td>
<td>2. Director of the National Broadcaster (radio and TV) – lost a close relative due to drug shortages.</td>
<td>2. Director of the National Drug Store (name)</td>
<td>Mobilization of decision-makers, allies and patients at various levels.</td>
<td>2. Develop and implement a stakeholder mobilization plan.</td>
<td>November 15, 2022</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Facilities</td>
<td>Coalition members have availed their conference facilities, including the local authority’s assembly hall.</td>
<td>3. Department of Health Permanent Secretary (technical services) – is passionate about quality and timely service provision.</td>
<td>3. Managers of Regional Drug Distribution Hubs (names)</td>
<td>Relationship building with allies, change agents and decision-makers.</td>
<td>3. Organize courtesy visits/coffee chats to consolidate relationships with allies and deliver key messages/asks.</td>
<td>Ongoing</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>4. Provincial Minister – likes to be identified as a person of action, pro-poor lawmaker.</td>
<td>4. Provincial and District Health Directors</td>
<td>Civic education regarding health entitlements and obligations.</td>
<td>Minister of Health and Local Elected Officials</td>
<td>Drug stockouts are killing voters.</td>
<td>February 18, 2023</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>5. Traditional and religious leaders – have openly called for availability of essential drugs.</td>
<td>5. Procurement and Stores Officers at district, provincial and national levels (names)</td>
<td>Collective gathering of actionable evidence through service charters, social audits and community scorecards.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>6. Procurement and Stores Officers</td>
<td></td>
<td></td>
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<td></td>
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</tbody>
</table>
## CHAPTER IV: CONTEXTUALIZE—ACCIM

**ANALYZE, CONVENE, CONTEXTUALIZE, IMPLEMENT AND MONITOR (ACCIM) SOCIAL ACCOUNTABILITY GUIDE**

### What do we need?

**Support and Opposition**

- **Support**
  - More Spells up to 5%
  - Local radio stations – like to be associated with noble causes.
  - Patients – particularly those with no health insurance and access to private health care.

- **Opposition**
  - Owners of Zebra Pharmacy and Giraffe Health Facility as they are regular recipients of stolen drugs.

### What are our resources?

- **Resources**
  - Local Member of Parliament and Councilors
  - Donors investing in health (USAID, UNICEF, UNFPA, WHO, World Bank, EU, and others).

### Who is our target audience?

- **Target and Change Agents**
  - Train target stakeholders on service charters, social audits and community scorecards.
  - Facilitate collective action planning after each round of data/evidence collection.
  - Organize quarterly review and learning events online and in-person.
  - Document and disseminate emerging results and critical lessons.

### Who are our change agents?

- **Change Agents**
  - Health (names)
  - Finance (names)
  - National Medical Stores (names)

### What techniques shall we deploy to bring about change?

- **Techniques**
  - Change management
  - Evidence collection
  - Action planning
  - Executive decision

### Key messages to Targets

- **Key Messages**
  - Health facilities need the support of local schools, and our community.

### Action Steps

- **Action Steps**
  - Share the results and critical decisions among change agents and leaders.

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### Resources

- **Resources**
  - Support
  - Opposition
  - Target and Change Agent

---

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  - Executive decision

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### Key messages to Targets

- **Key Messages**
  - Health facilities need the support of local schools, and our community.

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### Action Steps

- **Action Steps**
  - Share the results and critical decisions among change agents and leaders.
NOTES:
1. You can further develop your accountability strategy using an Excel spreadsheet as it will enable you to add other columns as you see fit.
2. The above strategy might also be useful when developing a detailed MEAL framework; please see Chapter V, on Implement.
3. You can deploy other SA tools, such as Citizen Report Cards, and Public Expenditure Tracking (PET) depending on your contextual dynamics and the problem you want to remedy. However, for the purposes of this guide, we will only demonstrate how to develop and facilitate service charters, social audits and community scorecards as these constitute some of the critical enablers to operationalize the above strategy.

Priming the Gears of Accountability and Responsiveness

Does a good strategy guarantee you success? Not necessarily? Why not? Because a strategy is a game plan that you need to implement and adjust in very dynamic contexts. It calls for discernment and wisdom. Below are a few practical tips to help you contribute to sustained accountability and responsiveness in your prioritized sector(s)—regardless of the social accountability mechanism/tool that you adopt.

1. Know your context, keep track of its evolution and adjust your strategy when needed. Among other things:
   a. Secure explicit buy-in from relevant authorities to implement social accountability work.
   b. Invest in relationship/trust building across target constituencies/audiences. The above will increase your coalition’s convening authority.
   c. Identify and cultivate relationships with gatekeepers and interlocutors/enablers of accountability and responsiveness. These enablers can include media houses, traditional and faith leaders, elected representatives, bureaucrats, entrepreneurs and other influential persons who will be helpful in building bridges, diffusing tensions and informing you when to go fast and when to slow down. They will serve as your reliable ears and eyes on the ground and provide regular “temperature checks” to enable you to adjust your strategy accordingly.
   d. Listen actively and be flexible. Seize new windows of opportunity when they emerge.
   e. Pay attention to seasonality/community calendar and plan accordingly. Acknowledge that participants have established ways of utilizing their precious time throughout the year which might include trading, farming, herding animals, studying, participating in religious and cultural events, visiting friends and relatives and so on. So, engage with your target audiences to agree on the best time for your SA activities to foster maximum participation (and cause minimum interruption to other community priorities).

Keep your meetings short—avoid long meeting agendas as these might easily lead to participation fatigue.

Identify meeting venues that are centrally located so people do not have to walk/cover long distances. The meeting venue may also influence the participation of women, young, the elderly and persons living with disabilities.

2. Prepare your facilitation team by ensuring that:
   a. They can comfortably articulate the coalition’s raison d’être and highlight available opportunities for other participants to shape the accountability agenda.
   b. Master the SA mechanisms and tools that you plan to roll out, for example, service charters, social audits and community scorecards.
   c. Utilize facilitation techniques that promote active learning and maximum participation.
   d. Respect people’s time and diversity of opinion.

3. Foster shared understanding regarding the existing social contract (appropriate to the sector/problem) contained in existing policies, regulations, frameworks and protocols.
   a. Constitute a multisectoral team to identify, summarize and translate into local languages rights and responsibilities appropriate to your target problem/sector.
   b. Ensure sign-off by the relevant government agency on the abridged version of the social contract. It is a creative way of setting in motion the gears of mutual accountability and can serve as raw material for the subsequent development of a service/citizen charter (see next section).
   c. Please utilize sectoral service charters where they already exist (see examples in the next section on service/citizen charters).
   d. Disseminate widely the abridged and translated service standards through different channels: community radio/TV, social media, SMS, participatory theater, community and religious gatherings, as appropriate.

4. Plan and secure your logistics ahead of schedule:
   a. Prepare and send your meeting invitations ahead of time. Some people will appreciate if a senior person within your group delivers the invitation in-person, in addition to phone calls/emails/written invites.
   b. Ensure that the right people are in the room. For example, you will want decision-makers to participate in action planning, but they can delegate other related activities to their team members.
   c. Secure the requisite materials: venue, stationery, technology and refreshments (if appropriate).
   d. Consider safety and security and dedicate a few minutes of your meeting to discussing some of the appropriate measures you have put in place. You may want to coordinate your work with local authorities to ensure security and first aid.

5. Facilitate collective evidence generation, action planning and follow-up:
   a. Collectively generated evidence regarding the performance of public services is difficult to refute by decision-makers.
   b. Use the collected evidence to facilitate action planning to address identified gaps/maintain good standards. Your plans need to be operationally realistic and politically feasible.
   c. Set up a team that will follow up on commitments. Good intentions declared during public meetings are a good starting point but are
insufficient. Individuals/institutions that commit to working on something should follow through and make good on their promises.

6. Promote learning by doing:
   a. Begin small, test, learn, adapt and scale up. Demonstrate proof of concept by working on less complicated issues and progressively embark on more demanding challenges.
   b. Regularly document your journey and create moments to reflect on your progress and adjust your program strategy based on your experiential learning. Do not learn alone as a coalition but also with the wider community to increase uptake, attract novel resources and widen your legitimacy and influence.
   c. Celebrate successes and graciously acknowledge failure.

Service/Citizen Charters

Service/Citizen charters are social contracts/public agreements between citizens and target service providers that clearly articulate rights and responsibilities regarding service delivery. They were pioneered by the U.K. government in the early 1990s to optimize the public sector, and other governments have subsequently adopted them. Citizen charters provide valuable benchmarks that SA coalitions can use to monitor public service delivery using social audits (for quantifiable standards/benchmarks) and scorecards (for qualitative standards).

You will notice that service and citizen charters are used interchangeably. Furthermore, the health sector might call such public agreements client/patient charters, as you will see below in the referenced case studies (see footnotes of the next subheading).

Should you develop a new Service/Citizen Charter?

Before you develop a new service/citizen charter, be certain that none exists for your prioritized sector. If there is already a service charter, please ascertain if it needs updating to reflect the prevailing social contract in the sector. For example, if you are working on a health issue in Ghana, Kenya, Tanzania or Zambia, you can use the already approved health service charters (please see footnotes). You will notice that some of the existing service charters are developed at the sectoral/national level (Tanzania and Zambia), the subnational level (Kenya) and the facility level (Ghana).

How do you develop a Service/Citizen Charter?

Please consider the following steps if no service charter exists for your prioritized sector:

1. Constitute an inclusive multisectoral team (civil society, academia, professional bodies, target ministry/department, donors, community members, etc.) that


will collectively work together to identify, summarize and codify rights and responsibilities for citizens and service providers.

2. Ensure that the language you use is simple to understand and preferably translated into local languages to facilitate wider accessibility to critical information.

3. Utilize different communication channels to disseminate the contents of the service charter to citizens and service providers—as both have rights and responsibilities.

**What are the contents of a Service/Citizen Charter?**

The details to include in a service/citizen charter will depend on what you think will help promote transparency, accountability, participation and responsiveness. At a minimum, please include the following two elements:

1. Name of the target service/department/facility, and
2. Rights and responsibilities of citizens and service providers.

**Community Scorecards**

Community scorecards (CSC) are a culmination of several interrelated governance and development initiatives over the years including participatory research, participatory monitoring and evaluation and rights-based approaches. They create conditions for collective action through critical mass mobilization, civic education, joint assessment of public services, action planning, advocacy and lobbying to ensure that action plans are implemented. The current CSC practice has immensely benefited from the World Bank’s pioneering work in the early 2000s around Community Based Performance Monitoring in countries such as The Gambia.\(^{43}\) CRS has equally invested in community scorecards for several years in different contexts, such as Ghana.\(^ {44}\)

The CSC approach comprises two complementary tools: a social audit and a scorecard. The difference between these two tools, usually, is that the social audit tracks quantifiable aspects of the social contract/service charter and the scorecards assesses qualitative elements, for example, cleanliness of public facilities, respectful care of patients and availability of essential medicines.

**What are the key steps of a Community Scorecard?**

Below are the critical phases when designing and implementing community scorecards:

1. Creating an enabling environment for mutual accountability and responsiveness—please see the preceding section regarding priming the gears of accountability and responsiveness.
2. Facilitating a social audit.
3. Facilitating scorecards for different interest groups among service users and service providers.
4. Consolidating the scorecard scores.
5. Facilitating collective action planning based on the evidence generated from the preceding steps.
6. Implementing, monitoring and evaluating the joint action plan.

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7. Repeating the CSC process after four or six months to ascertain whether prioritized issues/entitlements have been addressed. If expectations have been met, the accountability coalition may decide to embark on a new set of challenges (or disband if they have outlived their usefulness).

We now turn to demonstrating how to facilitate a social audit.

**Social Audit**

The format of your social audit template will depend on the amount and nature of actionable evidence you want to gather. Please feel free to adapt the proposed form, below, so that it serves your accountability agenda.

Before you complete your template be sure to check the following:

1. You have carried out your accountability enabling activities discussed earlier to ensure that all relevant stakeholders appreciate the value of participatory monitoring and subsequent resolution of identified gaps. You are not there to “catch/expose” wrongdoers but to optimize public sector performance to serve the common good. However, if wrongdoers are identified because of your accountability work, then, you need to collaborate with appropriate law enforcement agencies to investigate and prosecute, as necessary.

2. There is a representative multisectoral team to collectively conduct the social audit. The team should include service users (men and women, boys and girls) service providers and other interest groups as appropriate.

3. Your social audit does not unnecessarily interrupt the operations of the target institution, such as a health facility or school. Utilize your knowledge of the local context to plan your activities accordingly.

4. You have the requisite logistics before going out in the field, such as stationery.

5. Utilize the service/citizen charter for the target sector/facility if you have already developed one:
   
   d. Facilitate the process of prioritizing service charter provisions (rights and responsibilities) that you want to include in your current round of monitoring

6. However, if you have not yet developed a service charter for the sector/facility that you want to assess, you will need agree as a group (of service users and providers) on what legal/policy provisions you want to prioritize. Please keep in mind that you cannot monitor everything at once. The process must be incremental as you learn by doing.
### Table 9: Social Audit Sample

**Target Sector:** Health  
**Date:** March 22, 2020  
**Name of Facility/Community:** Eucalyptus Rural Health Center  
(catchment population: 7,000)

<table>
<thead>
<tr>
<th>Service Charter/ Legal/ Policy Provision</th>
<th>Established/ Agreed Standard</th>
<th>Actual</th>
<th>Explanation of Variance (if any)</th>
<th>Suggestions for Improvement (if any)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating hours</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Monday to Friday</td>
<td>08:00—16:00 08:00—13:00</td>
<td>09:00—15:00 10:00—12:00</td>
<td>Fewer staff, feeling overworked.</td>
<td>Advocate for additional qualified staff.</td>
</tr>
<tr>
<td>Saturday and Sunday</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Essential drugs</td>
<td>Two consignments every quarter</td>
<td>One consignment every quarter</td>
<td>One consignment disappears “mysteriously” before reaching the health facility.</td>
<td>Collaborate with Ministry of Health officials to investigate the alleged mysterious disappearance.</td>
</tr>
<tr>
<td>Staff establishment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Registered nurses                        | 3                            | 1 (enrolled) | • Two registered nurses got transfers shortly after being deployed. | • Advocate with district officials for replacement of transferred nurses.  
| Midwife                                  | 1                            | 1      | • The Ministry is yet to employ the other cadre of staff. | • Collaborate with national allies for recruitment of additional health personnel. |
| Nurse Prescriber                         | 1                            | 1      |                                   |                                     |
| Public Health Officer                    | 1                            | 1      |                                   |                                     |
| Clinical Officer General                 | 1                            | 1      |                                   |                                     |
| Clinical Officer Psychiatry              | 1                            | 0      |                                   |                                     |
| Dispenser/Pharmacist                     | 1                            | 1      |                                   |                                     |
| Nutritionists                            | 2                            | 1      |                                   |                                     |

**Notes**

1. You need to translate the social audit tool in the local language, when appropriate, to ensure that everyone participates.

2. You can use the above social audit tool to monitor several social and productive services.

3. You may also adapt it to monitor devolved funds, such as the constituency development fund to establish:
   a. How much the target constituency has been allocated and disbursed in a fiscal year.
   b. How much each ward is supposed to receive, and has received.
   c. What the money was budgeted for and where it is being expended (you can create additional columns for these).

**What is next after the Social Audit?**

It depends. If your prioritized policy/service charter provisions are all quantitative and can be monitored easily through the above social audit process, you can proceed to preparing for interface/action planning meeting. However, if prioritized provisions have both qualitative and quantitative provisions, then, you also need to assess the qualitative aspects using a scorecard.

**Scorecard**

**Preparation**

The preparatory activities for the social audit apply here too. We include them below for easy reference and introduce a few other tips. Please ensure that:

1. You have carried out your accountability enabling activities discussed earlier so that all relevant stakeholders appreciate the value of participatory monitoring and subsequent resolution of identified gaps. You are not there to “catch/expose” wrongdoers but to optimize public sector performance to serve the common good.
2. There is a representative multisectoral team to collectively conduct the scorecard. The team should include service users (men and women, boys, and girls) service providers and other interest groups as appropriate.

3. Your scorecard process does not unnecessarily interrupt the operations of the target institution, for example, a health facility or school. Utilize your knowledge of the local context to plan your activities accordingly.

4. Constitute and train a facilitation team and allocate at least two facilitators per focus group that you anticipate having:
   a. One facilitator can lead the discussions while another writes on flip charts.
   b. Each facilitation team should ensure that they have all the requisite materials to enable them to effectively lead scorecard discussions. It is good practice to prepare scorecard templates before going out in the field (using provided samples): one for practice and another for the real exercise.
   c. Consider how you will translate the scorecard into your local language to ensure that everyone participates. Please do not finalize the translation until you validate it with your target audience to avoid ambiguity (e.g., same word meaning different things to different people).

5. Utilize the service/citizen charter for the target sector/facility if you have already developed one:
   a. Facilitate the process of prioritizing qualitative service charter provisions (rights and responsibilities) that you want to include in your current round of monitoring.

6. However, if you have not yet developed a service charter for the sector/facility that you want to assess, you need to agree as a group about which legal/policy provisions you want to prioritize. Please keep in mind that you cannot monitor everything at once. The process must be incremental as you learn by doing.
   a. Form small focus groups of different interest groups (girls, boys, men and women, service providers) who will agree on four to six priorities to be monitored.
   b. Consolidate the priorities and be sure to formulate them in a neutral indicator format such as availability of staff, medicines, water points, etc., as you do not want to influence the assessment pattern.
   c. Assign at least two facilitators per focus group.
   d. Introduce a simplified version of the scorecard for focus groups to practice—explain what the assessment scale means.
**Scorecard Practice**

Table 10: Simplified Scorecard for Practice

**Target Sector:** Health  
**Date:** March 22, 2020  
**Name of Facility/Community:** Eucalyptus Rural Health Center  
(catchment population: 7,000)  
**Group:** Mixed (service users and providers: women, girls, boys and girls)

<table>
<thead>
<tr>
<th>Performance Standards/Indicators</th>
<th>Very bad</th>
<th>Bad</th>
<th>Average</th>
<th>Good</th>
<th>Very Good</th>
<th>Key Observations on the Assessment Pattern</th>
</tr>
</thead>
<tbody>
<tr>
<td>Availability of essential drugs</td>
<td>1</td>
<td>7</td>
<td>2</td>
<td>1</td>
<td></td>
<td>Seven people noted that malaria drugs and painkillers usually run out and they are forced to walk long distances to buy from private pharmacies at higher prices.</td>
</tr>
</tbody>
</table>

**NOTES**

1. Please consider translating the scorecard into your local language, if appropriate, to facilitate maximum participation.
Facilitating the Actual Scorecard Exercise
Before you divide the bigger group into manageable focus groups, be certain that all groups are clear about prioritized performance standards/indicators. We shall prioritize three for the sake of demonstration (please see the next page for the complete scorecard template that you can use for the real exercise).

Prioritized Performance Indicators:
1. Availability of essential drugs
2. Respectful care of patients
3. Availability of safe water

Table 11: Complete Scorecard Sample

<table>
<thead>
<tr>
<th>Target Sector: Health</th>
<th>Date: March 22, 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Facility/Community: Eucalyptus Rural Health Center (catchment population: 7,000)</td>
<td>Group: Girls</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Performance Standard/ Indicator</th>
<th>Very bad</th>
<th>Bad</th>
<th>Average</th>
<th>Good</th>
<th>Very Good</th>
<th>Majority Score(s)</th>
<th>Key Observations on the Assessment Pattern</th>
<th>Suggestions for Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Availability of essential drugs</td>
<td>1</td>
<td>7</td>
<td>2</td>
<td>2</td>
<td></td>
<td></td>
<td>Seven girls noted that malaria drugs and painkillers usually run out and they are forced to walk long distances to buy them from private pharmacies at higher prices.</td>
<td>Advocate for regular procurement and delivery of additional malaria drugs and painkillers.</td>
</tr>
<tr>
<td>Availability of safe water</td>
<td></td>
<td>5</td>
<td>5</td>
<td>2</td>
<td>1</td>
<td></td>
<td>The facility usually has safe running water except when there are power outages.</td>
<td>Sink a borehole and mechanize it with an industrial solar water pump (1.5 horsepower—HP pump).</td>
</tr>
<tr>
<td>Respectful care of patients</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: CRS 2022

NOTES:
1. Performance Indicators—you can distinguish two sets of indicators:
   a. Indicators that the community around a facility prioritizes.
   b. Indicators agreed on centrally (for example by the coalition at the district/ commune level) and want to be measured/assessed across multiple facilities—in addition to the ones that service users and providers, in respective communities, prioritize. Please ensure that you explain why you are asking focus group discussions to also consider centrally prioritized indicators; namely, to facilitate easy comparison.

2. Pay attention to the assessment scores of both the majority and minority. Try to learn more about what motivated their assessment scores and record the reasons in the Key Observations column. Be sure to ask for their recommendations for improvement, too.

3. If there is a tie in the scores, as above, put the two smiley faces in the Majority Score column and explain the tie in the next column.
Consolidating the Scorecard Assessments from Focus Groups

It is important to consolidate scores of different focus groups using formats such as the one below. The key is to pick the majority score for each performance indicator for each group to facilitate decision-making during the action planning meeting.

Table 12: Consolidated Scorecard for Girls, Boys, Men, Women and Service Providers

<table>
<thead>
<tr>
<th>Performance Standards/Indicators</th>
<th>Girls</th>
<th>Boys</th>
<th>Women</th>
<th>Men</th>
<th>Service Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Availability of essential drugs</td>
<td>😞</td>
<td>😞</td>
<td>😞</td>
<td>😞</td>
<td>☺</td>
</tr>
<tr>
<td>Respectful care of patients</td>
<td>☺</td>
<td>☺</td>
<td>☺</td>
<td>☺</td>
<td>☺</td>
</tr>
<tr>
<td>Availability of safe water</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Target Sector: Health
Date: March 22, 2020
Name of Facility/Community: Eucalyptus Rural Health Center
(catchment population: 7,000)

You now need to prepare for and facilitate an interface/action planning meeting where you will present all the relevant and actionable evidence collected through social audits, scorecards and any other mechanisms.

Interface/Action Planning Meeting

The interface meeting is a logical consequence of all your participatory monitoring processes that you have undertaken this far. It is where relevant stakeholders—such as ordinary citizens, entrepreneurs, bureaucrats and politicians—validate the collected evidence and, collaboratively, make commitments to improve identified gaps. Therefore, it requires sufficient planning and skillful facilitation to yield the required results.

Please pay attention to the following tips when preparing and facilitating the interface meetings:

1. Identify and agree on the appropriate venue, day and time to hold the action planning activity.
2. Anticipate action points by scanning through improvement recommendations and ensure that rightful decision-makers participate in the interface meeting.
3. Ensure a representative sample of stakeholders is present: service users, providers and local leaders (religious, political and traditional) as appropriate.
4. Brief decision-makers who might not have participated in participatory monitoring exercises so that they know what has been done so far. It is also plausible that they already have a representative who is a member of the accountability coalition and regularly provides them with updates. However, be certain that decision-makers/duty-bearers are briefed to avoid unnecessary resistance during interface meetings. Listen to their concerns and how you can support them as they contribute to addressing some identified gaps.
5. Engage a skilled facilitator who will diligently guide the discussions, creating an enabling environment for frank dialogue, mutual accountability and collective will to promote the common good.
6. Present your consolidated evidence from all your participatory monitoring activities—radio programs, community visits, social audits and scorecards—and
invite decision-makers to comment and ask questions and for service users to seek more clarification and demand accountability.

7. If you notice tensions building up, acknowledge them and find creative ways to diffuse them. You might occasionally remind people that your meeting is about promoting the common good and well-being of your community—and not about fighting or hating each other. Use your judgement to determine which message will resonate well with your audience to enhance social cohesion.

8. Thereafter, prioritize the list of issues that the gathered community can collectively address.

9. Ensure that you name individuals who will be responsible for identified activities. You can also include the name of the institution and position that they represent.

10. Furthermore, be sure to identify a person/group that will monitor different action points. The implementer should not be the monitor at the same time. Separation of roles is critical to fostering mutual accountability.

You can use the template below to facilitate action planning.

<table>
<thead>
<tr>
<th>Priority Issue</th>
<th>Action Points</th>
<th>Timeline</th>
<th>Implementer (Who will lead?)</th>
<th>Supporter (Who will support implementation?)</th>
<th>Monitor (Who will be checking on progress?)</th>
<th>Comments/Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stockouts of essential drugs</td>
<td>Allocate and deliver two essential drug kits every quarter</td>
<td>Ongoing</td>
<td>Jane Pineapple (District Health Director)</td>
<td>Joshua Strawberry (District Commissioner)</td>
<td>Emmanuel Avocado (Vicar General) and Senior Chief Mopane (Traditional Leader)</td>
<td>On track—Jane already issued a directive that drug deliveries should be countersigned by community and religious leaders to curb the alleged mysterious disappearance.</td>
</tr>
<tr>
<td>Erratic supply of safe water</td>
<td>Sink and mechanize a borehole</td>
<td>June 30, 2020</td>
<td>Lilian Msafiri (Director Planning, Local Authority)</td>
<td>James Cohesion (Local entrepreneur)</td>
<td>Angeline Sawubona (Chair, Savings Group)</td>
<td>The local authority will sink the borehole and James will supply the solar pump (1.5 HP plus three 540 watts solar panels)</td>
</tr>
</tbody>
</table>

Source: CRS 2022

Consider Integrating New Technologies for Evidence Collection, Analysis and Visualization

Please consider leveraging recent technologies to facilitate accountability evidence collection, analysis and visualization, especially if you are working in multiple facilities and regions. Modern technologies will save you time and energy if you use them diligently. Before you create your own system, kindly reach out to other organizations that may already have tried and tested recent technologies and ascertain if you may utilize their platform. Please take time to learn from them and assess what has worked well and what needs improvement or discontinuation.

The phased-out Making All Voice Count Program (2013-2017), among others, has produced valuable resources\(^\text{45}\) to help you decide whether to invest in modern technologies to enhance your accountability work.

If you decide to integrate modern technologies, please be certain that the technology contributes to, and does not undermine, collective action at multiple levels.

Connecting the Dots for ACCIM Phase III: Contextualize
Well done for exemplifying the spirit of ACCIM; namely, that you will not just copy and paste solutions but customize your approaches to local contexts and adjust your game plan as the intervention environment evolves. Now that you have acquired the art of developing a dynamic SA strategy and know how to facilitate some SA mechanisms/tools, it is time to implement your bold and realistic plans.
Chapter V: Implement—ACCIM

Introduction
Is it not time to celebrate after a robust participatory context analysis exercise, convening an inclusive and multistakeholder coalition and contextualizing various social accountability tools? Well, you are on course but you still have some work to do. Good intentions and articulate accountability strategies are necessary but insufficient conditions to “take a vacation” and let things “operate in autopilot.” What should you do then? Please ensure that you collectively and adaptively implement your ambitious accountability strategy to deliver desired outcomes.

By the end of this chapter, you will have learned more about:

1. The importance of continued context analysis and accountability strategy recalibration as the intervention context evolves.
2. How to sustain your coalition’s legitimacy to demand accountability and responsiveness from prioritized stakeholders.
3. The value of adaptive programming.
4. The indispensability of local leadership in sustaining accountability and responsiveness, and
5. Critical aspects of a social accountability monitoring, evaluation, accountability and learning (MEAL) plan to guide your performance, foster mutual accountability and shared learning.

Below are a few questions to help you remain agile and nimble in complex contexts.

Critical Questions to Consider
1. What are some of the emerging critical changes in your implementation context that warrant accountability strategy recalibration?
2. How will you ensure robust coalition momentum, and joined-up efforts at different levels of implementation: subnational and national?
3. How will you foster continued coalition legitimacy to champion accountability and responsiveness from both state and non-state actors?
4. What existing/upcoming accountability spaces and systems; policy reforms; planning and budgeting moments; and new windows of opportunity can you plug in and leverage to make change happen?
5. What type and quantity of evidence do you need to gather, package and disseminate to influence the behavior and actions of decision-makers? When and who should present the above evidence?
6. How will you ensure shared learning and adaptive programming?
7. How will you foster sustainability of action and outcomes?

Guidance
In what way has your context evolved since you developed your social accountability strategy?
Context matters for any development and governance initiative to deliver the desired change. Consequently, you need to conduct a rapid context analysis to ascertain whether your social accountability strategy is still context-responsive, e.g., based on sound assumptions and that the anticipated risks have not actualized and will not impede your success. If your context has evolved, you need to adjust your strategy accordingly. For example, there are new decision-makers; government has revised
its planning and budgeting cycle; or there is a widespread need for enhanced accountability following revelations of indiscriminate abuse of public funds by some bureaucrats, politicians and private citizens, sometimes, working in concert. Alternatively, the implementation context may become restricted, thus curtailing your accountability agenda. If the civic space is no longer conducive, you need to work towards creating an enabling environment for participatory governance. Throughout this exercise, please adhere to “do no harm” principles.

Adaptive programming requires regular context scans and being politically savvy. For example, should you issue a policy brief through a press conference or organize a breakfast discussion with a decision-maker (without media attention)? Sometimes, your coalition might need to deploy, sequentially or simultaneously, multiple techniques to influence leaders to act on your policy demands. Investing in ongoing political economy analysis will enhance your savviness and chances of success (please see Chapter II of this guide for guidance regarding PEA).

Additionally, you need to be intentional about promoting shared learning and skillfully utilizing program evidence to make program adaptations. Create regular moments (in-person and virtually) to pause and reflect on how you are performing as a coalition and journeying towards achieving your collective agenda. Celebrate what is working well and has surpassed your targets. Graciously embrace failure and deviations from plan. Boldly establish, and follow through with, plans to address missteps. Document your learnings and disseminate them widely, as appropriate.

How will you ensure sustained coalition legitimacy and momentum to champion reforms?
The sustenance of your coalition’s legitimacy and momentum will depend on several factors as you implement your accountability strategy. Please pay attention to the following (and others that are appropriate to your context):

1. **Be inclusive**—ensure that your coalition brings on board, and sustains, regular participation of diverse voices and needs: the young and old, poor and affluent, women and men and state and non-state actors.

2. **Focus on the shared accountability agenda and good problems**—please remember that, as a coalition leader or member, you created a coalition based on a prioritized good problem. That is the glue that bonds people together. If you need to change course halfway into implementation, please involve every coalition member in change management. It fosters goodwill and people are likely to vigorously rally behind the revised strategy. It is also a potent antidote for elite capture.

3. **Demonstrate proof of concept by harvesting low-hanging fruits**—start working on less complex “good problems” that you can quickly resolve to show that your accountability work is not just about gathering people, doing sophisticated analyses and using complicated development and governance words to assess your government’s performance (and that of other actors providing essential services). Small successes will invigorate/galvanize your coalition and attract new members who have been sitting on the fence waiting for you to demonstrate if your approach works or to laugh at you if your efforts yield no tangible results.

4. **Show that you value coalition members as individuals and not just the work they do**—take time to connect with fellow coalition members and be interested in their well-being while respecting boundaries that individuals may have

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regarding what they can share with others, particularly non-family members or close friends. Intra-group bonds are essential for optimum collective performance.

5. **Monitor participation trends in coalition activities**—regularly track participation in coalition activities, virtually and in-person, as that will reveal commitment levels, prioritization and participation fatigue, among other things. Take time to follow up with perpetual absentees to learn why they no longer prioritize the coalition’s accountability agenda and address any concerns they may have.

6. **Ensure accountability over coalition resources**—please walk the good governance talk by regularly and transparently accounting for coalition resources: material, financial and human—if applicable. Misappropriation and misapplication of coalition resources can lead to resentment and frustration among coalition members and culminate in litigation, so be the change you want to see.

7. **Practice democracy by being exemplary leaders and respecting term limits for coalition leadership roles**—leaders often incur several costs in terms of money, limited leisure and family time to steer the group towards its raison d’être. However, leadership whether voluntary or paid, can also attract benefits including public respect and preferential access to decision-makers. Consequently, it may be tempting for some people to extend their term limits because of the inadvertent prestige and preferential treatment that are associated with either chair or secretary positions.

**How and when does evidence matter to make change happen?**

How, when, what type and amount of evidence you need to influence a decision-maker’s behavior and action will depend on your context, the problems you have prioritized and the relationship (or reputation) you already have/might establish with your target audience. Some decision-makers want you to rigorously demonstrate that several citizens are affected and might ask you to prepare a concise presentation clearly indicating your research design, key findings (with impressive figures and tables) and recommendations. Please note that some demands for rigor are genuine and aimed at helping leaders build a business case to inform investment decisions or corrective measures. Other times, demands for rigor shield impunity by implying that your claims are not substantiated by solid evidence. Remember that impunity forces can mobilize and team up to launch a counter campaign to prevent you from dislodging them from long-held hegemonic, opaque, unaccountable and unresponsive practices. Similarly, some leaders may ask for real (and not aggregated) voices of some people directly affected by the problem you are working on. Therefore, apply your PEA (and strategic advocacy communication) skills to determine the type and quantity of evidence you need to gather and package; and discern where, how and when to disseminate evidence to influence your prioritized decision-makers.

Be sure not to get easily discouraged by leaders who publicly label your evidence as significantly flawed (and even politically charged/biased). They may be issuing such statements to save face and convince their political sponsors or voters that they are selfless, and that their intentions and practices serve the common good. Nevertheless, even with outright public denials, some of these leaders may consider your evidence when alone and eventually reach out to you for guidance regarding how to address identified challenges. Be patient and vigilant.

**How will you sustain the practice of accountability and responsiveness?**

You need to consider sustainability and work towards it right from the first phase of ACCiM, Analyze. Be deliberate about enabling local leadership and bolstering local systems so that local stakeholders and institutions can sustain accountability and responsiveness beyond the active implementation of an issue-based coalition.
It is equally valuable to link your coalition’s work with existing/upcoming spaces for participatory governance. You may want to have a coalition representative sit in and influence the decisions of district/provincial/national development coordination meetings where state and non-state actors collectively and regularly discuss governance and development issues.

Additionally, it is important to explore how you support government to institutionalize state-citizen accountability mechanisms by, for example, developing and funding regular accountability dialogues, reviews and action planning. Please note that some governments that plan and budget for social accountability may still need facilitation and accompaniment by multistakeholder coalitions until they are comfortable running the process with minimal outside technical assistance.

What are the critical components of a social accountability MEAL plan?

The outlook and contents of your accountability MEAL plan will depend on the amount of detail that your coalition (potential donors) need to monitor performance, foster mutual accountability and learning, and enable adaptive programming. Your coalition is likely to have a lot of flexibility to design its MEAL plan as it sees appropriate if it is utilizing its resources. However, some donors tend to prescribe the type of changes to report on (including strategic objectives, results, intermediate results, outputs and indicators), and the MEAL templates to use. Some donors are open to co-creating MEAL plans especially for adaptive governance initiatives. The sample MEAL plan (see next page) builds on the accountability strategy that you developed in Chapter IV: Contextualize.

### Table 14: Sample Social Accountability MEAL Plan

<table>
<thead>
<tr>
<th>Objective Statement</th>
<th>Performance Indicator</th>
<th>Indicator Definition and Unit of Measurement</th>
<th>Data Sources</th>
<th>Life of Project Targets</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goal:</strong> Improved public service performance in health, education and water, sanitation and hygiene (WASH) sectors</td>
<td>Number and percent of community members in target areas who report that their service providers are accountable and responsive to them.</td>
<td>Please see the Governance PIRS</td>
<td>Annual surveys</td>
<td>Year 1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>25,000 community members from target districts report that service providers are accountable and responsive to them.</td>
</tr>
<tr>
<td>501: Increased availability of essential drugs in public health facilities</td>
<td>Percent of public health facilities in target districts reporting no stockouts of essential medicines</td>
<td>Monitoring report</td>
<td>30% of target public health facilities report no stockouts of essential medicines.</td>
<td>50% of target public health facilities report no stockouts of essential medicines.</td>
</tr>
</tbody>
</table>

---

48 Please note that you can add other columns depending on your performance monitoring requirements. Such columns might include (but are not limited to):
1. Approaches for data collection/calculation;
2. Responsibilities and timelines for data collection (who and when);
3. Data analysis, use and report (using subcategories such as why, who and when); and
4. Additional project life years, with targets.
## CHAPTER V: IMPLEMENT—ACCIM

### Objective Statement

<table>
<thead>
<tr>
<th>Indicator Definition and Unit of Measurement</th>
<th>Data Sources</th>
<th>Life of Project Targets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of participatory monitoring visits conducted in a year by state and non-state actors.</td>
<td>Activity reports</td>
<td>Year 1</td>
</tr>
<tr>
<td>Inclusive multistakeholder teams are established.</td>
<td>Assessment of the drug supply chain conducted to identify challenges and opportunities for reform.</td>
<td>30% of public health facilities are monitored by multistakeholder monitoring teams in target districts.</td>
</tr>
<tr>
<td>Number of patients who spend less than $30 per year on essential drugs.</td>
<td>At least 20% of patients in target districts spend less than $30 on essential drugs.</td>
<td>40% of patients in target districts spend less than $30 on essential drugs.</td>
</tr>
<tr>
<td>Percent of patients who visit public health facilities who report timely dispensing of drugs.</td>
<td>Monitoring reports</td>
<td>30% of patients who visit public health facilities get essential drugs on time.</td>
</tr>
<tr>
<td>Percent of national/local government health budget ring-fenced for essential drugs.</td>
<td>Government budget statements</td>
<td>Year 1</td>
</tr>
<tr>
<td>10% additional resources allocated to procurement of essential drugs.</td>
<td>15% additional resources allocated to procurement of essential drugs.</td>
<td>20% additional resources allocated to procurement of essential drugs.</td>
</tr>
<tr>
<td>Number of teachers who regularly report for work.</td>
<td>Monitoring reports</td>
<td>30% of teachers in target schools regularly report for work.</td>
</tr>
<tr>
<td>Percent of schools in target districts with functioning SCMs/PTAs.</td>
<td>Monitoring reports</td>
<td>Assessment conducted regarding the existence and functionality of SCMs/PTAs.</td>
</tr>
<tr>
<td>Percent of teachers who regularly report for work.</td>
<td>Activity reports</td>
<td>Teacher absenteeism trends established and disseminated. Inclusive multistakeholder monitoring teams established.</td>
</tr>
<tr>
<td>Number of SMCs and PTAs established/reactivated.</td>
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### Performance Indicators

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<th>Definition and Unit of Measurement</th>
<th>Data Sources</th>
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<tr>
<td>IR 1.1: Participatory drug monitoring system from national to subnational level established.</td>
<td>Number of participatory monitoring visits conducted in a year by state and non-state actors.</td>
<td>Activity reports</td>
<td>Assessment of the drug supply chain conducted to identify challenges and opportunities for reform.</td>
<td>30% of public health facilities are monitored by multistakeholder monitoring teams in target districts.</td>
</tr>
<tr>
<td>IR 1.2: Reduced patients’ out-of-pocket expenditure on drugs.</td>
<td>Number of patients who spend less than $30 per year on essential drugs.</td>
<td>Annual surveys</td>
<td>At least 20% of patients in target districts spend less than $30 on essential drugs.</td>
<td>At least 40% of patients in target districts spend less than $30 on essential drugs.</td>
</tr>
<tr>
<td>IR 1.3: Prescribed essential drugs are dispensed on time to patients.</td>
<td>Percent of patients who visit public health facilities who report timely dispensing of drugs.</td>
<td>Monitoring reports</td>
<td>30% of patients who visit public health facilities get essential drugs on time.</td>
<td>45% of patients who visit public health facilities get essential drugs on time.</td>
</tr>
<tr>
<td>IR 1.4: Increased budgetary allocation to procurement of essential drugs.</td>
<td>Percent of national/local government health budget ring-fenced for essential drugs.</td>
<td>Government budget statements</td>
<td>10% additional resources allocated to procurement of essential drugs.</td>
<td>15% additional resources allocated to procurement of essential drugs.</td>
</tr>
<tr>
<td>Output 1.1.1: Inclusive multistakeholder teams established at different levels to monitor the supply of drugs.</td>
<td>Number of inclusive multistakeholder teams established.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SO2: Reduced teacher absenteeism in public schools.</td>
<td>Number of teachers who regularly report for work.</td>
<td>Monitoring reports</td>
<td>30% of teachers in target schools regularly report for work.</td>
<td>40% of teachers in target schools regularly report for work.</td>
</tr>
<tr>
<td>IR 2.1: School Management Committees (SMCs)/Parent Teacher Associations (PTAs) established/reactivated.</td>
<td>Percent of schools in target districts with functioning SCMs/PTAs.</td>
<td>Monitoring reports</td>
<td>Assessment conducted regarding the existence and functionality of SCMs/PTAs.</td>
<td>30% of target schools have SCMs/PTAs operating.</td>
</tr>
<tr>
<td>IR 2.2: Teacher attendance is monitored through participatory monitoring mechanisms involving district and community stakeholders.</td>
<td>Percent of teachers who regularly report for work.</td>
<td>Activity reports</td>
<td>Teacher absenteeism trends established and disseminated. Inclusive multistakeholder monitoring teams established.</td>
<td>50% of teachers in target schools regularly report for work.</td>
</tr>
<tr>
<td>Output 2.1.1: SMCs/PTAs established/reactivated.</td>
<td>Number of SMCs and PTAs established/reactivated.</td>
<td></td>
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<td></td>
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</tbody>
</table>
### Objective Statement

<table>
<thead>
<tr>
<th>Indicator Definition and Unit of Measurement</th>
<th>Data Sources</th>
<th>Life of Project Targets</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SO3</strong>: Increased availability of WASH services for productive and domestic uses.</td>
<td>Annual surveys</td>
<td>Year 1: 70,000 people benefit from the adoption and implementation of measures to improve water resources management. Year 2: 150,000 people benefit from the adoption and implementation of measures to improve water resources management.</td>
</tr>
<tr>
<td><strong>IR 3.1</strong>: Rights-holders and duty-bearers understand their rights and obligations relative to WASH.</td>
<td>Annual surveys</td>
<td>Assessment conducted regarding prioritized stakeholders’ knowledge of their rights and responsibilities. Year 1: 40% of target rights-holders articulate at least three rights and responsibilities. Year 2: 60% of target rights-holders articulate at least three rights and responsibilities. Year 3: 75% of target rights-holders articulate at least three rights and responsibilities.</td>
</tr>
<tr>
<td><strong>IR 3.2</strong>: WASH mutual accountability mechanisms are operational at subnational and national levels.</td>
<td>Monitoring reports</td>
<td>Assessment conducted regarding the existence and functionality of accountability mechanisms. Year 1: 45% of target districts have functioning mutual accountability mechanisms. Year 2: 70% of target districts have functioning mutual accountability mechanisms.</td>
</tr>
<tr>
<td><strong>Output 3.1.1</strong>: Customized civic education conducted for WASH rights-holders and duty-bearers.</td>
<td>Number of people trained.</td>
<td></td>
</tr>
<tr>
<td><strong>Output 3.2.1</strong>: Assessment conducted of existing WASH accountability mechanisms in target districts.</td>
<td>Number of target districts assessed.</td>
<td></td>
</tr>
<tr>
<td><strong>SO4</strong>: Learning is integrated in program design</td>
<td>Number of senior leaders who openly commit to adaptive programming.</td>
<td></td>
</tr>
</tbody>
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### Connecting the Dots for Phase IV: Implement

You have done an amazing job by committing yourselves to implementing your shared accountability strategy and accompanying MEAL plan. Remember to be context-savvy and use evidence strategically to influence the behavior and practice of your target stakeholders. Create regular moments to pause and reflect. There is no value in doing the same things that yield no results. Be honest with your coalition members (and donors) in case you overpromised. Revise your plans and try again. Please do not give up easily, because sometimes you must take three steps forward and five steps back. There are also moments when you will leapfrog and achieve results in record time. Context matters, so adjust your plans accordingly. The next chapter on monitoring will give you some practical tips to assess your performance.
Chapter VI: Monitor—ACCIM

Introduction
Why should you invest your efforts in monitoring your shared accountability agenda, strategy and implementation plan? Because your intervention context evolves. For example, will the civic space open or become restricted, or will corrupt officials take up strategic positions and frustrate your ambitious plans. Is that all? Not at all. There are several other good reasons. Among them, you want to establish what is working well versus what is off tangent and needs recalibration or strengthening. Additionally, you can use your monitoring data to ascertain your efficiency ratios and keep track of emerging results. Regular monitoring is equally important to ensure that your coalition’s actions or omissions are not causing harm to target communities.

By the end of this chapter, you will learn more about:

1. The value of monitoring the cohesiveness and performance of your coalition.
2. The significance of accountability strategy recalibration and acting on stakeholders’ feedback.
3. The different types of social accountability results that you should be tracking.
4. The importance of regularly documenting and reflecting on your practice.

Critical Questions to Consider
1. Are the coalition members still enthusiastic and committed to the accountability agenda?
2. How has the intervention context evolved, and what strategy adaptations do we need?
3. Who else needs to be part of collective solution and action?
4. What feedback are we getting from different stakeholders, and how are we acting on it?
5. Are we using our resources in the most efficient way?
6. What are we doing well that should be taken to scale, what is not working, what do we need to stop immediately or later?
7. What are the emerging and cumulative results of our work?
8. What are we learning from our practice and from others?
9. How do we promote a culture of learning and adaptive programming among ourselves (and others, when appropriate)?

Guidance
Is our coalition still enthusiastic and committed to the accountability agenda?
What brought you together is a common resolve to work on a good problem. Therefore, it is important that you periodically ascertain whether your coalition members are still passionate about, committed to and optimistic about change. It is plausible that some coalition members will sign off along the way and others will join and infuse some new vigor into the group. Coalitions tend to be loose membership groupings whose composition might vary over time depending on several factors, such as leadership style, competing commitments, change of location/residence and likelihood of achieving the initial desired objectives. So, practice adaptive programming as you lead and contribute to the optimal performance of your coalition.
How has our intervention context evolved and what strategy adaptations do we need?

Remember that one of the principles of the ACCIM social accountability approach is adaptive programming. This principle recognizes that our intervention contexts are dynamic and therefore require strategy recalibration to remain responsive and relevant. Invest in ongoing quick context scans to assess whether your initial assumptions are still holding, risks have not transformed into real challenges and that your resources (including political capital/influence) are still adequate to foster required reforms. It serves no purpose to keep original work plans when the implementation environment requires new ways of doing things. However, we also need to avoid unnecessary strategy reviews when there are no significant contextual shifts. The threshold for change will be up to your group to collectively decide, follow through and adjust when appropriate.

What feedback are we getting from our stakeholders and are we being accountable and responsive?

The underlying principle here is to model the behavior and attitudes that we want to see in others, the target of our accountability strategy. Therefore, we should establish mechanisms to gather feedback from different stakeholders to genuinely learn what is working well, what needs improvement and what needs immediate action from the coalition (and where necessary, relevant local authorities). It is valuable to learn more about safeguarding and “do no harm principles” so that our actions contribute to the common good and do not jeopardize the respect and dignity of others. At a minimum, your coalition should endeavor to establish one contextually appropriate, functional and financially feasible feedback mechanism.

What accountability changes should we be monitoring?

The alternative to the above question is “why should you invest in social accountability initiatives?” As you respond to the above question, you are likely to identify the following categories of change that you should closely monitor as you implement SA programs:

1. The **effectiveness of the delivery of public goods and services** that are responsive to citizens’ needs.
2. The **quality of governance** and democracy through bolstering the integrity of public institutions and actors, reducing corruption and promoting citizen engagement in public affairs.
3. **Citizen empowerment** through the expression of voice, transformation of state-society relations and the reduction of horizontal and vertical inequality.

Your coalition’s work is likely to contribute to one or more of the above outcomes. You need to regularly consult the MEAL plan that you developed in Chapter V to help you unpack and track the incremental changes that your coalition is making.

How shall we promote the culture of learning and adaptive programming?

One of Socrates’ (c. 470-399 BC) maxims regarding ongoing reflection and learning is apt here. Socrates is one of the distinguished Greek philosophers who lived in Athens and postulated, “unexamined life is not worth living.” While he talked about life in general, it is appropriate to apply it to a life-enhancing initiative such as the coalition’s accountability work. You may even reframe the above assertion like “unexamined accountability work is not worth doing.”
accountability work is not worth pursuing." Therefore, you need to plan for and allocate resources to regular in-person and virtual learning. Learning moments can be weekly, monthly, quarterly, semi-annually or annually. It is important to pause and reflect on what is working well and what requires corrective measures. It might be appropriate to agree on specific learning themes to guide your learning moments. Be open to surprises and have the tenacity to adjust your strategies in case your milestones are overly ambitious or proposed interventions are obsolete. If your work is externally funded, learn with your donors so that you are co-creating knowledge and using it to inform program decisions. Enjoy the learning adventure and graciously share your key lessons with other interested stakeholders. Knowledge is a social good and is meant to be shared, tested, challenged and validated. Use your good judgement to determine what is appropriate to disseminate outside the coalition while respecting any information disclosure commitments that you have with your donors (if applicable).

Connecting the Dots for Phase V: Monitor

Congratulations for completing all the five ACCIM phases: Analyze, Convene, Contextualize, Implement and Monitor. Being in the monitoring phase does not necessarily signal the end of your accountability work. You may solve the drug stockout issue and disband your coalition, but your community, district/commune, province, and country have numerous collective action challenges that require a social accountability approach. It is now time to apply your sharpened skills to other good problems and scale up your interventions by enlisting other stakeholders. Please proceed to the next chapter, which is dedicated to scaling up your amazing participatory governance work.

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52 Catholic Relief Services, “Promote and Facilitate Intentional Project Reflection, Learning, and Adaptation.”

53 USAID, “CLA Toolkit: Facilitating Pause and Reflect.”
Chapter VII: Scaling Up

Introduction
Why should you scale up your collective accountability work? There are several reasons. You may have started your accountability work in one district or commune and now want to cover additional districts where there are similar challenges in the same sector, such as food security (horizontal scale-up). You might as well dare to apply your sharpened accountability skills to other sectors while working in the same or multiple districts (cross-sectoral and horizontal scale-up). You may equally decide to scale up your accountability initiatives across decision-making levels covering local, subnational and national levels (vertical scale-up) because the governance and development challenges you want to remedy are caused by an intricate ecosystem of decision-makers sitting at various levels of the command-chain. What should you do then to increase your success as you go to scale? It depends.

By the end of this chapter, you will learn more about:

1. The meaning and forms of scaling up.
2. The significance of discerning your context before you go to scale.
3. How to create an enabling environment to expand your influence and reach.
4. How to proceed with your scaling up.

Critical Questions to Consider
Below are some critical questions to help you think through your scaling up process or strategy:

1. What does “going to scale” mean for you and your coalition?
2. What is your programming and contextual evidence saying about your envisaged scale-up?
   a. What aspects of your shared accountability agenda are working well, need adjustment or require immediate cessation?
   b. Who supports and opposes your accountability work, and why? What can you do differently to increase your influence and support for your work?
   c. What does promotion of inclusive participation “at scale” mean for the previously marginalized and elite groups?
3. What is your scale-up plan and what resources will you need to implement it successfully?
   a. What adaptations do you need to make to your accountability work as you scale up horizontally, vertically and across sectors?
   b. What are the major political and development events in your anticipated intervention context that you should consider?
   c. Who will scale up your accountability work and what will be the implications for mutual accountability and learning?

Guidance
What does “going to scale” mean for you and your coalition?
It is critical that you have a shared understanding as a coalition regarding the meaning of scaling up. For example, does scaling up imply replicating your accountability

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work in multiple districts or communes after a successful pilot in one location? Or does scaling up mean applying promising accountability mechanisms (with some customization) to several sectors? Or does scaling up signify increasing geographical coverage (horizontally), sectoral coverage (championing accountability in multiple sectors) and vertically integrating your accountability initiatives to dislodge the culture of impunity and foster system-wide accountability and responsiveness? Whatever negotiated answer you develop, ensure that it is grounded in a nuanced understanding of your current and anticipated intervention contexts so that you design programs that are technically, financially and politically appropriate.

What does your programming and contextual evidence say about your envisaged scale-up?

This question is a fervent invitation to evidence-based decision-making and programming without yielding to analysis paralysis. ACCIM is an adaptive social accountability initiative with short sprint cycles of testing, learning, adapting and scaling up. Therefore, it is essential that you diligently keep your eyes and ears to the ground to identify and gather evidence regarding what is working well, what is off tangent and what needs recalibration or immediate discontinuation. Caution is not necessarily synonymous with cowardice but is an exercise in wisdom, discernment and prudence. Do you have to wait until you exhaustively know your context before you go to scale? Not necessarily. Why not? Because your anticipated intervention context is dynamic and will keep evolving—sometimes creating opportunities for entrenching participatory governance and other times restricting the civic space. So, you must work with the grain incrementally\(^55\) and avoid premature load-bearing\(^56\) while being mindful not to bite off more than you can chew. Equally, it might not be wise to increase your accountability dosage in a sector that is already suffocating with a low-dosage accountability initiative.

What should you do when you experience significant opposition to your accountability work during your pilot or initial phase? Should you fold your arms and let impunity consolidate itself in the public service, or must you devise countervailing mechanisms\(^57\) that neutralize anti-accountability elements? If yes, what will be a potent countervailing approach that will not unnecessarily expose participants to harm? The answers to the above questions are contextual. In any case, before you administer any countervailing treatment, be sure to understand why some people are opposed to your accountability agenda so that you have a targeted approach. Sometimes, the opponents’ fears may be unfounded and you can easily win their hearts with a short orientation on the value-add of your participatory governance work. Other times, the opposition might stem from the anticipated loss of privileges or spoils that the elite and their associates may have long enjoyed sharing among themselves because of limited public vigilance and scrutiny. Will opposition be a one-off experience? Not at all. Sometimes it might recur, and you may have to tolerate some of it as you promote accountability and responsiveness among state and non-state duty-bearers. Therefore, applying PEA will be instrumental in appreciating the complexity of the opposition and identifying opportunities for transformation as you go to scale.


What is your scaling up plan and what resources do you need to implement it successfully?

There are four essential questions to help you think through your scale-up plan:

1. What aspects of your accountability work do you want to scale up horizontally, vertically and across sectors?
2. How will you proceed with scaling up?
3. What are the major public policy processes that you need to consider as you go to scale?
4. What are the resource requirements of your scaling up agenda?

What aspects of your accountability work do you want to scale up horizontally, vertically and across sectors?

As you explore the above question with other coalition members, be certain that your proposed scalable elements have the following attributes summarized under the acronym, CORRECT:

1. **Credible** in that they are based on sound evidence or advocated by respected persons or institutions.
2. **Observable** to ensure that potential users can see the results in practice.
3. **Relevant** for addressing persistent or sharply felt problems (aka good problems à la PDIA—please see Chapter II of this guide).
4. **Relative advantage** over existing practices so that potential users are convinced that the costs of implementation are warranted by the benefits.
5. **Easy to install and understand** rather than complex and complicated.
6. **Compatible** with the potential users’ established values, norms and facilities; fit well into the practices of the national program.
7. **Testable** so that potential users can see the intervention on a small scale prior to large-scale adoption.

The above seven attributes help program designers and practitioners reflect on their ongoing practice, identify items that will increase uptake probability and develop a contextually responsive scaling up plan.

How will you proceed with scaling up?

It is critical that you explore some of the following practical issues:

1. **Specifying your reach:** geographically and hierarchically (decision-making levels). It is essential to be clear about how many districts or communes, sectors and decision-making levels you want to cover and foster agreement on sequencing or combination of tasks. For example, are you planning to start work in all the target communes/districts at the same time or will you have a phased style?
2. **Considering the combination of scaling up approaches applicable to your prioritized sector(s) and context:**
   - **Spontaneous**—individuals (persons or organizations) decide what aspects of your accountability initiative they want to apply when solving good problems in their respective communities—sometimes without even telling you about what they are doing until they have recorded some results or encounter a problem. The above scenario highlights the importance of

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monitoring how other organizations or organized citizen groups may adopt some components of your accountability initiatives. It may be challenging logistically to track all spontaneous scale-up activities but try, to the extent feasible, as some adaptations might bring forth interesting lessons.

b. **Institutionalization**—some government departments adopt and budget for certain components of your accountability work, such as participatory reviews of local government plans. Institutionalization will not happen by mistake. You need to plan for it and cultivate and accompany change champions within the target government departments. Institutionalization can be a lengthy process, especially if it requires legislation; setting up new structures or reconfiguring existing ones; and appropriating additional funds. Please be sure to identify change champions within target sectors and include them in the multistakeholder coalition from inception—so they can progressively prime the gears of accountability (create an enabling environment) within their department.

c. **Coalition-led**—the initial multistakeholder coalition might want to expand its work through the formation of similar groups in other locations, such as districts and provinces, and ensure that their operations are coordinated to enhance influence and impact. If you decide to establish other coalitions, be certain to define your relationship with the groups you are helping to create and agree on the frequency of your coordination meetings and the financial implications. It might be useful to assess the capacity of the lead organization to convene other members and adequately manage and account for performance targets and resources that you might sub-grant to them (if applicable). Consult widely with your program and operations teams so that you are working within the established regulations (including those of a donor, if relevant). If you identify capacity gaps, co-create an improvement plan and support the new coalitions accordingly. Remember that you are supposed to contribute to building local leadership and optimizing local systems for sustainable social change.

What are the major public policy processes that you should consider as you go to scale?

Context matters, so please pay attention to political, social, economic, religious and development initiatives taking place in your anticipated intervention context as they can affect, negatively or positively, scaling up prospects. Plan with your context in mind. For example, imminent general elections may limit convening nonpartisan meetings without politicians taking advantage of an organized and potentially influential audience. Similarly, public reviews of medium- and long-term national/ regional socioeconomic development plans might present a fertile ground to institutionalize participatory governance in select sectors. So, seize the moment and be ready to share your experience when appropriate.

What are the resource requirements of your scale-up plan: financial, material and personnel?

Kindly think through the resource needs of your scale-up initiative. You do not want to shoot for the moon when your fuel and equipment can only fly for a few miles—except if you have solid guarantees that you will be able to refuel and change your equipment midair without jeopardizing the safety and health of your crew and passengers.

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62 Catholic Relief Services, “Subsidiarity Across the Nexus: Policy Principles to Support Effective and Sustainable Local Leadership in Humanitarian Response and Development Assistance.”
63 USAID, “Local Systems.”
Connecting the Dots for Chapter VII: Scaling Up

Your scaling up ambition is commendable. Your major ongoing challenge is to remain genuinely committed to helping other people sharpen their collective accountability skills and contribute to accountable and responsive governance in their societies. Please remember to document your scale-up plan as it will be instrumental in fostering a shared vision, tracking your adaptations and progress and enabling collective learning. Enjoy the adventure as you promote collective accountability in new territories or sectors. Please think and work “ACCImly” as you go to scale: analyze, convene, contextualize, implement and monitor your work and learn from it while disseminating valuable lessons, as necessary.
References


REFERENCES


