Evaluation Report - Final

Evaluation and Design of Social Accountability Component of the Protection of Basic Services Project, Ethiopia

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# Table of Contents

PREFACE ........................................................................................................ iii

ACRONYMS ...................................................................................................... i

EXECUTIVE SUMMARY ................................................................................. 1

1 INTRODUCTION ............................................................................................ 12
   1.1 Objective of the Evaluation .................................................................. 13
   1.2 Country Context .................................................................................. 15
   1.3 Conceptualization of ESAP .................................................................. 18
   1.4 Expected Outcomes ............................................................................ 19
   1.5 Critical Assumptions .......................................................................... 23
   1.6 Linkage between Social Accountability & Financial Transparency and Accountability (PBS-I Component 3) ......................................................... 25

2 METHODOLOGY ............................................................................................. 27
   2.1 Data Gathering Methodology ............................................................... 27
      2.1.1 Consultations and Desk Review of Relevant Documents ............. 27
      2.1.2 Field Data Collection .................................................................. 27
      2.1.2.1 Focus Group Discussions and Key Informant Interviews ....... 28
      2.1.2.2 Structured Citizens’ Perception Survey ................................... 28
      2.1.2.3 Sample Selection Scheme and Sample Size ......................... 28
      2.1.3 Expert Observations .................................................................... 29
   2.2 Profile of Survey Respondents ................................................................ 29
   2.3 Data Analysis ....................................................................................... 31
   2.4 Limitations of the Evaluation ............................................................... 31

3 SOCIAL IMPACT OF ESAP .......................................................................... 32
   3.1 Impact on Citizens .............................................................................. 32
   3.2 Impact on service providers ............................................................... 35
   3.3 Sectoral impacts .................................................................................. 36
   3.4 Impact on Elected Councils at Woreda and Kebele levels .................. 38
   3.5 Civil Society Organizations/Implementing Partner Organizations ....... 39
   3.6 Gender Inclusion ................................................................................ 39
   3.7 Rural and Urban Differential ............................................................... 41
   3.8 Impact on disadvantaged groups ......................................................... 41
   3.9 Conclusions ....................................................................................... 42
   3.10 Lessons Learnt & the Way Forward ................................................... 43

4 TOOLS, APPROACHES & ACTORS .............................................................. 44
   4.1 Tools .................................................................................................... 44
   4.2 Approaches ......................................................................................... 51
   4.3 Actors .................................................................................................. 54
   4.4 Conclusions ....................................................................................... 56
4.5 Lessons Learnt & the Way Forward.................................................................58

5 IMPLEMENTATION ARRANGEMENT .....................................................................60
   5.1 Steering Committee .....................................................................................60
   5.2 The Managing Agent ..................................................................................61
      5.2.1 MA’s Responsibilities .........................................................................61
      5.2.2 MA’s Stewardship to the Program .........................................................62
      5.2.3 Linking C4 with C1, C2 and C4 ...............................................................62
      5.2.4 Institutionalization and Sustainability of ESAP ........................................63
      5.2.5 Building Consensus among Stakeholders ...............................................63
      5.2.6 MA’s Effectiveness as Interlocutor with GOE, Donors, CSOs/IPOs et al. ...63
      5.2.7 Effective Utilization of M&E Data and Information ...............................64
      5.2.8 Oversight and Mentoring Support ..........................................................64
   5.3 CSO/IPOs ......................................................................................................65
      5.3.1 Selection of the 12 lead CSOs ..................................................................65
      5.3.2 Piloting of ESAP by CSOs/IPOs ..............................................................66
   5.4 Conclusions ..................................................................................................71
   5.5 Lessons Learnt & the Way Forward ..............................................................71

6 INVENTORY OF ESAP ASSETS .......................................................................74
   6.1 Human Capital ............................................................................................74
   6.2 Physical assets .............................................................................................74
      6.2.1 Manuals and guidelines .......................................................................75
      6.2.2 Vehicles, office equipment and accessories .............................................75

7 LINKAGE BETWEEN ESAP AND GOE INITIATIVES ....................................77

8 LESSONS LEARNT & THE WAY FORWARD ................................................81

ANNEXES ...........................................................................................................90
Annex 1: The Evaluation Terms of Reference ....................................................91
Annex 2: Ethiopia Social Accountability Project ................................................96
Annex 3: Documents Reviewed .........................................................................101
Annex 4: List of projects, lead CSOs, tools applied, and sectors by region and woreda .......105
Annex 5: Field Data Collection Instruments ................................................................108
Annex 6: Number of Citizens Surveyed, FGDs and Key-Informants by Region and Woreda/Town ........................................................................................................138
Annex 7: Template for Database of ESAP Assets .............................................140
This report presents the findings, conclusions and recommendations of an independent evaluation conducted of the PBS I Social Accountability Program which was piloted across Ethiopia between January 2008 and June 2009 following comprehensive knowledge sharing and planning. The evidence gathered from selected woredas, towns and cities where the social accountability program was implemented, show how the activities, facilitated by civil society organizations (CSOs) in cooperation with citizen groups and local government officials, introduced selected tools such as Community Score Cards, Citizens Report Cards and Participatory Budgeting for assessing (a) access and quality of basic services and (b) effectiveness and efficiency of the use of public resources. The Government of Ethiopia recognizes that the program has enhanced the knowledge and understanding of relevant stakeholders regarding social accountability tools, mechanisms, approaches and best practices.

Based on their findings, the evaluators have also concluded that the social accountability activities have enhanced the quality of basic services where they were applied. Their basic premise is that the interface meetings between the service providers and service users that reviewed the status of specific services resulted in joint actions for service quality improvements. They further argue that interface meetings, seen as breakthrough platforms by citizens and service users, resulted in increased citizens’ awareness of their rights, entitlements and responsibilities as well as enhanced understanding among service providers of their accountability to citizens/service users.

However, the positive results of the Pilot Social Accountability Program did not take place in a vacuum: it’s my belief that the program would not have materialized without the Government of Ethiopia’s commitment and wider activities to enhance governance and accountability in the context of devolution and empowerment. These activities created an enabling environment for social accountability.

The evaluators had a challenge attributing the positive results to the exact interventions, with GOE governance reforms, including the public sector capacity building program, civil service reform and democratic institutions program, taking place in parallel with the PBS I social accountability activities. An important lesson to take away for the next phase of the PBS social accountability program, which will be rolled out in the first part of 2011, is therefore the need for a strong M&E component so we can more easily learn what type of accountability measures are effective in our country.

I hope the findings of the evaluation will serve as an inspiration to practitioners and policymakers interested in effective and accountable service delivery.

Mekonnen Manyazewal
Former State Minister of Finance and Economic Development (now Minister of Industries)
Chairman of the PBS Social Accountability Steering Committee (2006-2010)
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<th>Acronym</th>
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<td>Action Aid Ethiopia</td>
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<td>ACS</td>
<td>Adigrat Catholic Secretariat</td>
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<td>ADA</td>
<td>Amhara Development Association</td>
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<td>AEPA</td>
<td>Action for Environment Public Advocacy</td>
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<td>AFD</td>
<td>Action for Development</td>
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<td>AFSR</td>
<td>Action for Self Reliance</td>
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<td>Amhara Women's Association</td>
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<td>Association of Women in Tigray Children</td>
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<td>C4</td>
<td>Component 4</td>
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<td>CAAA</td>
<td>Chora Abugida Arts Association</td>
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<td>CBOS</td>
<td>Community Based Organizations</td>
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<td>CDI</td>
<td>Center for Development Initiative (Shashamane)</td>
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<td>CDPOs</td>
<td>Community Development Program Offices of Bishoftu/ of Dire Dawa</td>
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<td>CIDA</td>
<td>Canada International Development Agency</td>
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<td>CMG</td>
<td>Citizen Monitoring Group</td>
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<td>CSC</td>
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<td>CSOs</td>
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<td>EC</td>
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<td>EDC</td>
<td>Evaluation and Design Consultant</td>
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<td>EIFDDA</td>
<td>Ethiopian Interfaith Forum for Development Dialogue and Action</td>
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<td>EMDA</td>
<td>Ethiopian Muslim Development Agency</td>
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<td>ESAP</td>
<td>Ethiopian Social Accountability Pilot Project</td>
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<td>FAT/TFA</td>
<td>Farmers Association of Tigray/ Tigray Farmer's Association</td>
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<td>FCE</td>
<td>Facilitator for Change Ethiopia</td>
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<td>FGD</td>
<td>Focus Group Discussion</td>
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<td>FTA</td>
<td>Financial Transparency and Accountability</td>
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<td>GICDO</td>
<td>Green Belt Integrated Community Development Organization</td>
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<td>GOE</td>
<td>Government of Ethiopia</td>
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<tr>
<td>GTZ IS</td>
<td>Gesellschaft Fuer Technische Zusammenarbeit International Services</td>
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<tr>
<td>HCS</td>
<td>Hararghe Catholic Secretariat</td>
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<td>IDA</td>
<td>International Development Agency</td>
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<td>IMPACT</td>
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<td>JeCCDO</td>
<td>Jerusalem Children and Community Development Organization</td>
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<td>MA</td>
<td>Managing Agent</td>
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MCIP  Multi-Purpose Community Development Project
MDTF  Multi Donor Trust Fund
MOCB  Ministry of Capacity Building
MOFED  Minister of Finance and Economic Development
NGOs  Non-Governmental Organizations
ODA  Oromiya Development Association
OPRIFS  Organization for Prevention, Rehabilitation and Integration for Female Street Children
OSRA  Oromo Self Reliance Association
PADET  Professional Alliance for Development in Ethiopia
PANE  Poverty Action Network - Ethiopia?
PASDEP  Plan for Accelerated and Sustained Development to End Poverty
PB  Participatory Budgeting
PBS – I  Protection of Basic services Project - I
PBS - II  Protection of Basic services Project - II
PBS  Protection of Basic Services
PC  Project Coordinator
PET  Public Expenditure Tracking
PLWHA  People Living With HIV/AIDS
PMAC  Provisional Military Administrative Council
PSCAP  Public Sector Capacity Building Program
PTAs  Parent-Teachers Associations
PTMC  Project Technical Management Committee
PWDA  People With Disability
RCCT  Randomized Control Community Trials
RCWDA  Rift Valley Children and Women's Development Association
REST  Relief Society of Tigray
SAC  Social Accountability Committee
SAIC  Social Accountability Implementing Committee
SASC  Social Accountability Steering Committee
SC  Steering Committee
SC-CSO  Steering Committee of Civil Society Organization
SNNP  Southern Nations, Nationalities and People
SNNPR  Southern Nations Nationalities and Peoples Region
SPSS  Statistical Package for Social Scientists
STFA  Solidarity of Tigrean Fighters' Association
SWDA  Siqqee Women Development Association
TC  Technical Committee
TEACA  Tigray Education Against Corruption Association
TOR  Terms of Reference
TOT  Training of Trainers
TTF  Technical Task Force
TYA  Tigray Youth Association
UHHRDA  Ugas Hassen Helsi Relief and Development Association
UYRDAT  United Youth Relief and Development Association of Tigray
WAE  Water Aid Ethiopia
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<th>Acronym</th>
<th>Description</th>
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<tr>
<td>WAT</td>
<td>Women Association of Tigray</td>
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<td>WB</td>
<td>World Bank</td>
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<td>WSA</td>
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EXECUTIVE SUMMARY

Background

1. This report presents the results of an independent evaluation of the Protection of Basic Services (PBS-I) - Social Accountability (Component 4) piloted between January 2008 and June 2009. In 2006, the Government of Ethiopia (GOE), the World Bank and Development Partners initiated the Protection of Basic Services Project to strengthen service delivery at the Woreda/town level. The initiative included measures to encourage transparency and accountability and required the GOE to spend the money on basic social services in an accountable and transparent manner and also to maintain its own financial commitments to these services.

2. PBS-I Social Accountability Component 4, as originally conceived, aimed at enhancing (a) the transparency of budget processes (formulation, expenditure) and (b) the capacity of citizens and civil society organizations (CSOs) to engage in these processes (“budget literacy”). It also aimed to support the piloting of selected tools and approaches to strengthen citizen and civil society organizations’ voice and downward accountability in the context of decentralized service delivery. This social accountability initiative referred to as the ‘Ethiopian Social Accountability Project (ESAP)’ by the Managing Agent (MA) was piloted around Ethiopia in selected regions (i.e., Somali, Harari, Amhara, Tigray, Oromiya, Beni-Shangul Gumuz, SNNPR and the federal cities of Addis Ababa and Dire Dawa), and in approximately 86 woredas/towns and four sectors including: (i) education, (ii) health, (iii) water and sanitation, and (iv) agriculture.

3. The Conceptual Framework: Social accountability is understood as the process and approach by which ordinary citizens, who are the users of public basic services, (a) voice their needs, preferences and demands for improved and effective public basic services delivery and policies; and (b) hold policy-makers and service providers accountable for weak or non-performance. On the demand side, social accountability requires that citizens understand and put into practice, their rights and responsibilities with respect to access and use of basic public services. It aims to build capacities of and empower citizens, communities and civic groups to demand better basic services and hold service providers accountable. On the supply side, social accountability requires that government officials and service providers develop and establish mechanisms and procedures to listen to citizens’ voices and demands and to respond with appropriate policies and solutions to service deficiency in a time bound manner. When effectively implemented, mainstreamed and practiced, social accountability promotes and fosters collaborations and partnerships between government and citizens resulting in effective, efficient and quality basic service delivery and responsible use of the same. Within this context, the objective of ESAP has been stated as “Strengthened use of social accountability tools, approaches and mechanisms by (a) citizens, (b) civil society organizations (CSOs), (c) local government

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1 World Bank (2006), Project Appraisal Document (PAD) on Proposed Grant in the Amount of SDR 149.60 million (US $215 Million Equivalent) to the Federal Democratic Republic of Ethiopia for a Protection of Basic Service Projects, May 2, 2006, page 51
4. Based on review of relevant documents, the PAD and initial consultations with Steering Committee members and other key stakeholders, the EDC team identified the following four expected results that contribute to the stated objective.

- **Outcome 1**: Increased citizens’ awareness of their rights, responsibilities and entitlements to get better quality public basic services.
- **Outcome 2**: Increased empowerment of citizens to participate in, negotiate with and hold accountable, service providers and public policy-makers.
- **Outcome 3**: Increased involvement of citizens and communities in planning, budgeting, implementation, and monitoring of the quality, access and quantity of basic public services.
- **Outcome 4**: Increased capacity of policy-makers and public basic service providers to respond to community and citizens’ needs and preferences and be accountable.

Performance of ESAP was assessed in terms of progress towards achievement of these outcomes.

**Objective of the Evaluation**

5. According to the EDC team’s Terms of Reference (TOR), the objective of the evaluation was to:

- (a) determine if the pilot project had achieved its objective and expected results and assess its social impact;
- (b) assess the relative effectiveness of the different social accountability tools, approaches and actors;
- (c) appraise effectiveness of the implementation arrangement; and
- (d) inventory the list of assets produced during the piloting of social accountability and determine if they can be applied forward.

Furthermore, in order to make an informative assessment of the impact of ESAP, the EDC team was asked - partway into the process - to compare social accountability pilot areas with non-pilot areas.

**Methodology and Coverage**

6. Data collected from desk review of relevant documents, key informant interviews, focus group discussions, expert observations and citizens’ perception surveys was triangulated to assess the impact of ESAP. A total of 20 woredas/towns, 2 sub-cities and 44 kebeles in seven regions and 2 federal cities were selected in the ESAP pilot areas. Within these sample woredas, sub-cities and kebeles, the EDC team conducted (a) 104 focus group discussions with men, women, youth and other groups; (b) 120 key informant interviews including with

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2 Adopted from the World Bank (2006) PAD, page 50. The EDC team has added local government officials and service providers as key actors that make social accountability initiatives work effectively.
regional, zonal, woreda and kebele government officials and sector officers, civil society organization representatives and community leaders; and (c) 275 citizens’ perception surveys.

7. In non-ESAP areas, a total of 14 woredas, one sub-city and 25 kebeles were selected in the pilot regions and federal cities. In these areas the EDC team conducted 57 focus group discussions, 74 key informant interviews and administrated a structured citizen perception survey on 141 citizens. Most of the woredas selected were located nearby or at a short distance from the pilot sites.

**Conclusions and Supporting Findings**

8. **ESAP has achieved its stated objective:** ESAP has shown that use of appropriate social accountability mechanisms can work in Ethiopia and have beneficial outcomes for the actors involved and improves the quality of basic service delivery. It has enabled Ethiopia to test selected social accountability tools such as Community Score Cards (CSC), Citizen Report Cards (CRC); and to a limited extend, Participatory Budgeting. It has also demonstrated that these simple tools are powerful because they are easily understood and can be applied by local communities. Additionally, it has demonstrated that citizens and service providers can sit face-to-face to review service delivery performance and jointly address service delivery deficiencies. Specific accomplishments of ESAP are discussed below.

9. **The pilot social accountability project has increased citizens’ awareness of their rights, responsibilities and entitlements to the selected basic services.** Over 84% survey respondents in ESAP pilot areas indicated that they had been orientated to and made aware of their rights, responsibilities and entitlements to basic services. Nearly an equal percentage in non-ESAP areas (86% of survey respondents) indicated that they were informed and aware of their rights and responsibilities. However, there is evidence to suggest that the depth of understanding and appreciation between ESAP and non-ESAP areas is different. In the pilot areas, discussions on the Input Tracking Matrix discussed by CSOs/IPOs in the social accountability awareness creation workshops and the use of social accountability tools for rating basic service delivery performance was comparatively better.

10. In both pilot and non-pilot areas, citizens learn about their constitutional rights from public forums, mass gatherings, mass mobilization efforts for development and democratization by local government officials, and from radio and TV programs. The EDC team however, has evidence to suggest that while in both ESAP and non-ESAP sites, citizens are consulted on local government plans and their preferences during the budget

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3 In this process, the CSOs implementing the pilot social accountability initiative (a) conduct baseline studies and social mapping to understand the basic service delivery problems in the target communities, (b) collect input data from the local government and service providers including budgets, staffing levels, material and equipment available at the service providers’ facilities, and (c) gather data on service standards and benchmarks established by the federal line-ministries and regional bureaus. This information is reviewed with the community at the initial interactive sensitization workshop and during the training of the community focus groups along with reference to the 1995 Constitution of the Federal Democratic Republic of Ethiopian that guarantees citizens’ rights and holds government officials and civil servants accountable to citizens.
formulation cycle, when the final budget allocated to each sector is announced or posted for public viewing, citizens do not receive adequate information or explanation on why the original budget they developed with the local government changed or how the new budget was arrived at and how it will affect the status of basic services.

11. **The CSC appears to be the most effective and efficient tool that has the effect of empowering local communities, and building social capital.** Of the three social accountability tools tested by the CSOs -- Community Score Card (CSC), Citizen Report Card (CRC) and Participatory Budgeting (PB), the most used tool was the CSC. The CSC has allowed residents to discuss their frustrations with basic service delivery with neighbors and to work together for improved delivery thus building social capital. It has built confidence and enabled citizens to rate the performance of the service providers objectively. Rating the performance of service providers was seen as an empowering experience. The CSC is capable of being used in both literate and non-literate communities and urban and rural settings.

12. **The pilot social accountability project has resulted in citizens and service providers jointly evaluating the performance of public basic services.** In the pilot area, CSOs through the use of social accountability tools such as Community Score Cards, Citizen Report Cards and Participatory Budgeting and Expenditure Tracking (PBET) brought together citizens and service providers to assess the quality, adequacy and effectiveness of basic services in the education, health, water/sanitation and agriculture sectors. For example, in most pilot areas, the target communities selected representatives (i.e. focal groups) categorized into men, women, youth (boys and girls separately) and marginalized groups were trained by the CSOs on how to use the Community Score Card. Each group discussed service delivery problems in their community, from these discussions developed performance indicators and rated the performance of service providers. The different citizen groups then reviewed and discussed each other’s performance indicators, ratings and reasoning, agreed upon a common list of performance indicators and reconciled the ratings to develop a final service delivery performance score.

13. The same community-based indicators were then used by CSOs with the service provider teams for self-evaluation of their performance, only occasionally adjusting the performance indicators.

14. **Interface Meetings** between community representatives and service providers were organized to jointly review the service delivery performance scores and discuss service delivery deficiencies. Out of these discussions emerged (a) common performance indicators, (b) a consensus-based service delivery performance score, and (c) Joint Service Improvement Agendas/Action Plans countersigned by the service providers and community representatives.

15. Such participatory performance evaluations were missing from non-pilot areas. Although, community members often voiced their dissatisfaction with the services to local government officials and service providers at mass gatherings and sometimes in response to survey questions from service providers, there are no formalized mechanisms for joint reviews of the status of basic services.
16. **The pilot social accountability initiatives have improved public basic services.** The EDC team encountered evidence in several pilot areas that basic and social services such as education, health, water, sanitation and agriculture have improved as a result of implementation of the **Joint Service Improvement Action Plans** developed at interface meetings. In most pilot areas these Action Plans categorized service deficiency improvement interventions into (a) immediate, (b) intermediate and (c) long-term actions. The implementation of immediate actions resulted in immediate improvements in the subject basic services. For instance, in Lagahare Kebele in Dire Dawa, a formerly troubled high school now has declining dropout rates for both girls and boys. Besides, (a) there is a well disciplined and academically well-performing student body; (b) teachers with well prepared lesson plans doing what they were hired to do at school – imparting knowledge to students; (c) toilets for girls and girls clubs; (d) teachers taking initiatives to educate themselves and improving their teaching skills; (e) unqualified teachers have been dismissed, and (f) student and teacher absenteeism from school and /or tardiness has been reduced drastically. Furthermore, the social accountability pilot initiative has increased community’s ownership and engagement with the school and supervision of their students’ conduct and academic performance⁴. Parents now check their students’ exercise books and homework and sign school papers. Parents also meet with teachers quarterly to discuss their students’ academic performance.

17. The EDC team did not note service improvements in majority of non-pilot sites visited. In a few cases, though there were service delivery improvements as a result of (a) reform minded woreda administrators that were trained in GOE’s good governance package, and (b) citizens’ participations in local government awareness raising forums. For example, in Arbarakete Kebele in Chiro Woreda, citizens were actively involved in their children’s education. Student and teacher attendance and timeliness were strictly enforced. Non performing Development Agents are reported to the Kebele Administrator and quickly replaced.

18. **The pilot social accountability initiatives have improved the quality of engagement between citizens and service providers.** ESAP interface meetings, considered as breakthrough platforms, provide a forum for constructive dialogue between citizens and service providers. In this forum, citizens discuss the service delivery problems and performance of the service provider based on objective and verifiable evidence. Service providers also get an opportunity to explain (a) what services they provide; (b) how they do their work; and (c) their expectations from citizens’; (d) how they have performed, and (e) why the service delivery performance is the way it is. Also, a Social Accountability Implementing Committee (SAIC) composed of community representatives and service providers is established to oversee and monitor the implementation of the Joint Service Delivery Improvement Agenda/Action Plans.

19. In both ESAP and non-ESAP areas mass gatherings provide opportunity to citizens to denounce the poor quality of basic service delivery and demand for improvements. However, the EDC team did not encounter evidence of an independent follow-up mechanism to oversee and monitor implementation of service delivery improvement interventions promised at mass-gatherings.

⁴ Other examples are provided in the main body of the report.
20. **The pilot social accountability initiatives have enhanced the capacities of all participating actors; CSOs, government officials at all levels, service providers and citizens.** Various actors were involved in the implementation of the pilot social accountability initiative including the Steering Committee, the Managing Agent (MA) at the federal level and regional, zonal, woreda and kebele administrators, elected representatives, community leaders, and CSOs and citizens. A capacity building chain has been established under ESAP. The MA and the grantee CSOs providing sensitization and awareness creation workshops and seminars at the regional and local levels. In particular, the MA has provided induction workshops to illustrate to the CSOs the use of social accountability tools with citizens. Likewise, CSOs have given training on the social accountability tools to their Project Coordinators and Community Facilitators/Moderators. CSOs have also organized sensitization workshops at the Woreda level for woreda and kebele officials, service providers as well as the community at large. The EDC team however, has noted need for more training and capacity building of all actors to effectively engage in social accountability initiatives. For instance, focus group discussants and key informants in Fantalle Woreda, Hakim and Dire Dawa indicated that woreda and kebele officials, service providers and the community at large require more training on social accountability concepts and practices and that a onetime awareness creation workshop was insufficient. Training and capacity building need to be carried out repeatedly (perhaps quarterly) over the life of the initiative.

21. **The pilot social accountability initiatives have benefited from involvement of federal, regional, zonal and woreda decision-makers.** The participation and chairmanship of the Ministry of Finance and Economic Development (MOFED) has demonstrated commitment of the Federal Government as well as provided leadership and guidance for the initiative. The EDC team found evidence, in several pilot sites, of the participation of regional and zonal decision-makers in interface meetings with positive basic services outcomes. Quick actions were taken to reallocate resources and remedy the service delivery deficiencies.

22. **The pilot social accountability initiatives’ impact is magnified when public officials are trained in social accountability and the GOE’s good governance package.** Woreda administrators trained in the GOE’s good governance package were seen to be champions of the social accountability initiative. For instance, in Kombolcha, East Hararghe and other woredas, the woreda administrator and his deputy actively mobilized and encouraged the service providers and citizens to participate in assessing service delivery performance and to find solutions to the problems. These public officials saw social accountability as an integral component of good governance. Consequently, the pilot social accountability initiatives in these woredas resulted in positive citizens’ outcomes.

23. **The pilot social accountability initiatives were implemented by a wide-range of CSOs including faith-based, development-based and charity-based organizations.** While there were no differences in effectiveness between these different groups of CSOs, the EDC team has evidence to suggest that locally established and registered CSOs were generally more effective than others because of their local knowledge, the trust they have built with local government officials and within the local communities as the complementary resources that they are able to inject into the targeted communities. The rapport they enjoy with all stakeholders strengthened their interventions. The flip side however, is that locally active agencies with a track record of development and service provisioning tend to blur ESAP
goals and identity with their projects, and ESAP was perceived as a component of their on-going development program.

24. The pilot social accountability initiatives have benefitted from the participation of religious and traditional leaders. Participation of religious and traditional leaders was found to promote strategic alliances among community members and increased social capital. For instance, in Dire Dawa and Gomma Woreda the Muslim and Christian communities forged strategic alliances to influence improvements in basic services by service providers. Focus Group discussants also indicated that community leaders facilitated and ensured participation of marginalized groups.

25. Results of the pilot social accountability initiative would have been better with a Managing Agent with multi-disciplinary expertise in social accountability; training and capacity building; monitoring and evaluation; and participatory planning, budgeting and public expenditure tracking. CSOs, local government officials and local communities require continuous and intensive capacity building to understand and internalize social accountability practices. Although the Managing Agent provided sensitization and knowledge building workshops on social accountability to a range of stakeholders, the EDC team found evidence to suggest the Managing Agent lacked expertise in social accountability, capacity building and participatory budgeting processes. The latter can be confirmed from the fact that only two of 33 CSOs in the pilot used participatory budgeting tools; capacity which could have been built by a capable MA. CSOs have alluded to the lack of technical support from the MA. As indicated before, key informants have suggested that onetime training on such an important topic is not sufficient. Regular trainings to all regional, zonal and woreda and kebele level officials were essential, especially since there is a high turnover of government officials and employees.

26. The MA also did not provide adequate guidance to the grantee CSOs with respect to entry approaches, sustainability and exit strategies. Due to lack of standardized entry approaches, several CSOs bypassed regional and zonal governments and signed Memorandum of Understanding (MOU) directly with the Woreda administration or the service sector head at the woreda level (e.g., Dima Guranda, Sebeta Hawas woreda, the CSO signed MOU directly with the education bureau). Besides, at the launch of the initiative, some CSOs (inadvertently) did not include the relevant regional, zonal and woreda administrators and elected Councils. Further, such lack of standardized sustainability and exit strategies, led to a loss in momentum of the social accountability initiatives and these got discontinued after the pilot period. This can also be attributed to the built-in incentive structure, such as payment of per diems to participants that could not be sustained post pilot. This is also due to the handover of the project to ad hoc committees instead of community based organization (CBOs) such as Iddir and/or to other civic groups that have permanency and independent financing such as the Social Accountability Implementation Committees led by heads of CBOs in Lagahare Kebele, Dire Dawa.

Lessons Learned & the Way Forward

27. A managing Agent with (a) strong project management capacity; (b) training and capacity building skills; (c) public sector financial management skills; (d) social
accountability expertise, and (e) strong monitoring and evaluation capacity would have produced more effective social accountability results. A combination of these capabilities is essential for effective implementation and management of a complex program such as social accountability. These capabilities enable the Managing Agent to:

- Develop a training and capacity building agenda that could provide both training and mentoring support, on a regular basis, to all stakeholders including local government officials and elected representatives at the regional, woreda and kebele levels as well as to CSOs/IPOs and to civic groups (including, among others, leaders and members of NGOs, community-based organizations, independent media and cooperatives and other member-based organizations).

- Develop and deliver training on social accountability objectives and practices to all levels of GOE policy makers and officials. For example, the MA could work with MOFED and Ministry of Capacity Building and integrate training on social accountability tools including participatory budgeting as components of GOE’s financial transparency and accountability initiative, good governance package and civil service reform initiatives.

- Provide proper guidance to the CSOs/IPOs on strategies for (a) entry and exit; (b) institutionalization and sustainability; (c) public officials and citizens mobilization, engagement and consensus building; and (d) moderating and conflict resolution skills.

- Develop a strategy to synergize the social accountability component with other components of PBS to enhance the effectiveness, efficiency and responsiveness of basic services to citizens.

- Develop standardized practices for social accountability implementation, entry, sustainability and exit strategies with M&E guidelines and training manuals. The pilot project has generated varying quality training manuals, social accountability implementation guidelines and evaluation reports produced by CSOs.

28. **To maximize the effectiveness of social accountability initiatives a robust Monitoring, Evaluation and Learning system needs to be established.** This will facilitate the monitoring of inputs, outputs and the evaluation of outcomes and impacts of the social accountability initiatives, including identifying and documenting relevant lessons and best practices to inform the provisioning of basic services. A robust monitoring and evaluation system can be used by the MA to identify additional actions and activities to (a) mainstream social accountability practices, (b) increase stakeholder capacity for social accountability, (c) identify and address governance-related issues, and (d) identify constraints to institutionalization and mainstreaming of social accountability practices and work with GOE partners and the Steering Committee to remove these bottlenecks.

29. **Mainstreaming and institutionalizing social accountability practice will require integrating SA training into the GOE capacity building and civil service training program to raise awareness and knowledge of social accountability among government officials and civil servants at all levels even while maintaining the independence of citizens’ groups to voice a demand for improved basic services and government accountability.** On one hand, social accountability initiatives should be mainstreamed into the existing government
operations and institutions, at regional, woreda and kebele levels, by closely linking social accountability to the ongoing government programs, like PSCAP, good governance, BPR and civil service reforms. This will promote and urge federal, regional, zonal, woreda and kebele administrations to proactively provide information on budgets and programs and to justify them and take responsibility for their performance. It will also accelerate, strengthen and deepen the GOE’s reform agenda and capacity building initiatives. Over time, results of social accountability tools such as citizen report cards or community score cards could also be linked to civil service incentive structure to guarantee service providers’ responsiveness to citizen demands and needs. Such an approach has been tested and found effective in enhancing service providers’ responsiveness to citizens in several countries including Porto Alegro, Brazil, India, and Panama municipalities.

30. On the demand side, citizens’ rights to adequate services and to hold service providers accountable should be mainstreamed into the existing community based organizations (CBOs) and civic groups. In this way users’ rights will be protected and the CBOs and civic groups can interact with (a) the kebele, woreda and regional elected assemblies that have oversight on budget allocation responsibilities, and (b) directly with the service department and bureaus to lobby and negotiate for improved basic service delivery and to exact accountability.

31. **Regional, woreda and kebele level elected councils would need continuous training and capacity building in social accountability for engaging effectively with citizens groups and represent the needs, desires and preferences of their constituents.** For example, it was only after exposure to social accountability that a member of Sofi Harari community, who also happened to be an elected representative at the regional level, took the initiative to complain and request immediate remedy for the activation of a health facility that was not operational since completion of its construction almost two years earlier.

32. **In order to enhance the effectiveness of social accountability initiatives, citizens engagement with the government should be scaled-up to the kebele, woreda, zonal, regional and federal level program planning, budget allocation, implementation, and expenditure and performance tracking to ensure citizens’ service priorities are adequately addressed at all levels of decision-making.** The pilot social accountability initiative has demonstrated that citizens’ engagement at the service facility level does not provide space for dialogue on budget allocation issues once the budget has been set at the federal, regional, zonal and woreda levels. Figure 1 below illustrates the entry-points for citizens’ engagement. Citizens’ involvement in service delivery planning, budgeting and expenditure tracking can be a very powerful tool for (a) exacting accountability from policy-makers and service providers and (b) ensuring the services reflect citizens’ preferences. Citizens have a firsthand knowledge of service delivery deficiency and how it affects their lives. Citizens have vested interests in improving service quality and quantity. Informed and empowered citizens want to be consulted and involved in the service delivery planning processes; know explicitly what it costs to obtain the desired level of service, its financing mechanism, resource mobilization and expenditure. They also need to understand what was

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accomplished and measure the services quality relative to local and national quality benchmarks. Through this process, citizens take increased ownership of service assets, pay user fees and taxes in time and are willing to contribute personal resources to complement government investments. Such participatory processes also promote partnerships between government and citizens with sustained improvements in the quality and quantity of services delivered.

Figure 1: Participatory Budgeting & Expenditure Tracking

33. To maximize effectiveness of social accountability initiatives, cross-departmental synergies need to be identified and strengthened. This will allow (a) free flow of resources among sectors to provide optimal service response to citizens with the available resources; and (b) joint decisions by sector officers to unblock constraints one sector poses on the other. For example, non availability of clean water to the Fantalle Animal Health Clinic could have been easily resolved by the Water Department through convergence.

34. CSOs/NGOs that participate in the implementation of social accountability initiatives should have adequate organizational, administrative, project management and policy research experience as well as track record in implementing similar projects. This will enable CSOs/NGOs to provide adequate training and capacity building to communities and civic groups, enhance citizens’ empowerment to engage with service providers, and test and implement different social accountability tools including participatory budgeting. Suggested criteria for selection of implementing CSOs/NGOs are:
- Experience of working in essential services sectors (provisioning and/or advocacy);
- Expertise of working with local government institutions (LGIs);
- Community mobilization skills;
- Capacity to train frontline staff of line departments/service providers, community members and Woreda/Kebele officials;
- Sufficient understanding of participatory planning and budgeting;
- Capacity to be interlocutors between federal, regional, woreda and kebele level officials and citizens through publications and dissemination of alternative service delivery budgets, lessons learned and challenges, etc.; and
- Sufficient policy analysis and research capacity.

35. **Networking among implementing CSOs/NGOs for long-term continuity and institutionalization of social accountability.** Such partnerships can help pool resources, develop sustainability strategies and provide support in for implement of strategy. Network partners can undertake joint policy research to inform GOE’s basic service delivery policy and program.

36. **Incorporating gender into the design of social accountability program will empower women in traditional communities with restricted freedoms and choices.** Specific aspects of gender can be addressed through participation in the social accountability activities and service delivery performance assessment and through capacity building trainings, focus group discussions and community mobilization. Formulation of gender-disaggregated indicators for each sector and service will ensure project implementers incorporate gender into all project activities.

37. **Carrying forward the Knowledge and Tools of Phase 1.** Phase 1 CSOs have developed implementation and training manuals during the course of the pilot project. **These assets may not be available for Phase 2 unless these same CSOs are participating.** The human capital developed within CSOs, staff should be capitalized upon by reengaging with the good CSOs. This will ensure that phase 1 institutional memory is retained in phase 2.
1 INTRODUCTION

In this Chapter we highlight the objective of the evaluation, the conceptual framework, and the country context. We also discuss the linkage between Social Accountability and PBS-I Component 3 – Financial Transparency & Accountability.

1. The Evaluation and Design of the Social Accountability Component of the Protection of Basic Services Project (PBS-I), Ethiopia was commissioned to Infrastructure Professionals Enterprise (IPE) Private Limited by World Bank on 16th December 2009. IPE was asked to (a) understand and outline the objectives and expected outcomes of activities of PBS I Social Accountability Component 4 (C4) and to determine if these results have been achieved; and (b) make recommendations for, and develop the design for scaling up social accountability interventions under the Social Accountability component of PBS II based on the evaluation findings, lessons learnt and experience with social accountability pilot project under the guidance of the Steering Committee (see Annex 1 - Terms of Reference (TOR) ).

2. An additional task overlaid on the top of the TOR, at the Inception Report review meeting at the Steering Committee, on February 3, 2010, was to assess the impact of PBS I Component 4 – Social Accountability using a sample of non-participating woredas as control groups in order to control for the impact of the on-going Government of Ethiopia (GOE) reform initiatives that began in the mid-1990s and continues to the present. In the absence of a project baseline, conclusions of the EDC team drawn from the assessment of ESAP woredas, it was felt will be limited and the use of a control group would strengthen the conclusions of the evaluation.

3. As outlined in the Project Appraisal Document (PAD), PBS-I was designed to support development and implementation of accountability mechanisms on the government and citizens’ side. Component 4 on Social Accountability was expected to strengthen citizens’ voice and enhance accountability of the public sector service providers to citizens. The component was also designed to build capacity to engage in and create demand-side pressure for accountability in the public budgeting process. PBS-I also aimed at “strengthening the use of social accountability approaches by citizen and civil society organizations (CSOs) as a means to make basic service delivery more effective, efficient, responsive and accountable”. According to the PAD, the Social Accountability component aimed to:

- Enhance the transparency of budget processes (formulation, expenditure) and the capacity of citizens and CSOs to engage in these processes;
- Support the piloting of selected approaches to strengthen citizen and CSOs’ voice and downward accountability in the context of decentralized service delivery;

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6 World Bank (2006), Project Appraisal Document (PAD) on a Proposed Grant in the Amount of SDR 149.6 million (US$215 million Equivalent) to the Federal Democratic Republic of Ethiopia for a Protection of Basic Service Project, May 2, 2006

7 Ibid, page 50
• Assess the experience gained under the various initiatives supported in this component, disseminate these lessons, and prepare the scaling-up of effective social accountability approaches.

4. PBS-I Social Accountability Component 4 had four sub-components:
   • Sub-Component 4.1: Independent Public Dissemination of Budget Information
   • Sub-Component 4.2: Budget Literacy and Transparency for Civil Society
   • Sub-Component 4.3: Piloting Social Accountability Approaches in Basic Service Delivery
   • Sub-Component 4.4: Assessment of Experience, Joint Learning and Scaling-Up

5. The EDC team’s analysis is based on (a) conceptualization of expected results of the PBS-I Social Accountability Component 4 \(^8\); (b) understanding of the Constitution of Ethiopia and the package of reforms and the comprehensive public sector capacity building program, business process reengineering (BPR), and good governance package initiated by the GOE; and (c) assessing ESAP with respect to basic services delivery performance of the government.

6. In subsequent sections we have briefly described the objective of the evaluation, the country context, the concept of PBS-I Social Accountability Component 4 (C4) and an outline of the expected results and outputs. The latter has formed the basis for evaluating C4 as per the TOR. A brief discussion on financial transparency and accountability has also been included in the analysis. Chapter 2 describes the methodology used by the EDC team. Chapter 3 analyses the social impact of the pilot social accountability project. Chapter 4 assesses the social accountability tools, approaches and actors involved in the pilot initiative. In Chapter 5 we assess the effectiveness of the implementation arrangement. Chapter 6 discusses the inventory of assets developed by the pilot project that could be carried forward. Chapter 7 discusses the links between PBS-I Component 4 and the GOE initiatives. Chapter 8 presents lessons learned and EDC’s recommendations for scaling up SA component of PBS II.

1.1 Objective of the Evaluation

7. The objective of the evaluation was to make evidence based analysis of ESAP achievements, outcomes and outputs as intended. It was also aimed at determining the lessons of the pilot social accountability activities and capacity building carried out.

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**Definition**

**Social Accountability:** Is the phenomenon through which systems (essential sectors primarily) are made responsive to the demand of the users. Accountability is a key determinant of good governance.

The EDC team uses social accountability as a concept where the service providers and or the government officials should be answerable to citizens' formal demands of rights, entitlements and explanations. Citizens’ voice is the various ways citizens and organized groups place pressure on service providers and policy-makers to demand or advocate for better services and policies. This takes many forms including: participation in planning and management committees, citizen reports, media campaigns, and participatory public expenditure tracking et al. These are often collectively referred to as forms of social accountability.

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\(^8\) The original design of PBS-I Component 4 (C4) did not have a logical framework delineating the objective and expected outcome. It also did not collect baseline data against indicator targets that could be used for monitoring and assessing progress toward achievement of the stated outcomes and objective over time.
from January 2008 to June 2009 under PBS I – Component 4, and to prepare the design for scaling up social accountability activities in years 2 and 3 of PBS II.

8. The evaluation was undertaken on several levels. First, it examined the “outputs, outcomes and objectives achieved under the pilot social accountability initiatives and their impact in terms of (a) building capacities of public officials and citizens, (b) empowering citizens, (c) improving interface and interactions (i.e., dialogue and negotiations) between citizens and service providers, (d) improving responsiveness of service providers, and (e) improving service delivery”. The evaluation has also analyzed:
   - Factors that have enhanced or prevented pilot activities from achieving their stated objectives and expected outcomes; and
   - Variability in success or failures across sectors, geographical areas and/or population groups and reasons for the same.

9. The **social impact** of ESAP has been analyzed using a demand-supply framework:
   - On the **demand side** the assessment has explored citizens’ and civic groups’ empowerment, awareness of rights, responsibilities and entitlements; and improvements in service delivery systems.
   - On the **supply side** the assessment has measured responsiveness of line departments and ministries as manifested through plans and budgets, increased coverage, improved delivery of services, voice mechanisms and spaces as mainstreamed and institutionalized to facilitate engagement with citizens and monitor services.

10. Within the definition of **social impact**, the evaluation has examined changes in capacity and engagement of citizens and officials in piloting various social accountability tools and approaches and the systems, mechanisms and structures for citizen participation to understand their relevance within GOE’s institutional framework. In particular, this assessed if there had been a:
   - shift in the nature of transaction between citizens and public service providers from indifference to collaboration
   - de-mystification of service delivery arrangements towards facilitating citizen participation and discourse;
   - change in citizens’ exercise of their rights and responsibilities.

11. Second, it assessed the effectiveness, relevance, efficiency and sustainability of the social accountability **tools and approaches** under different contexts and on the range of actors involved.

12. Third, **implementation arrangement were assessed with respect to** the challenges, effectiveness and efficiency of implementation; management and governance arrangements adopted including the roles of and relationships between the multi-
stakeholder Steering Committee, the managing agent model, civil society organization participation. Effectiveness of the implementation arrangement were examined with respect to:

- Stewardship of the pilot initiatives
- Ownership and consensus at the GOE and service provider levels
- Role of Managing Agent and CSOs as interlocutors between citizen groups and service providers and capacity builders,
- Implementation oversight and mentoring support to GOE officials at all levels, CSOs and community based organizations

13. Fourth, an inventory of assets – people, processes, mechanisms, products, developed and used in the pilot was prepared with a view to identify and recommend assets to be applied in the scaled-up component.

14. Fifth, linkages and synergies between social accountability initiatives and the GOE structures and reform programs were examined to derive lessons and the future road map.

1.2 Country Context

15. For centuries highly centralized governments have ruled Ethiopia. Delivery of basic services was at the benevolence of the emperors. Following the overthrow of Emperor Haile Selassie in 1974, the Provisional Military Administrative Council (PMAC) or the Dergue, promulgated the Peoples’ Democratic Republic of Ethiopia under a new constitution modeled on Marxist-Leninist state in September 1987 to govern Ethiopia. The feudal and the Dergue eras were marked with a political culture engrained in highly hierarchical authority and did not provide space for civic engagement.

16. The Ethiopian People’s Revolutionary Democratic Front (EPRDF), which took power in 1991, introduced a series of institutional and policy reforms with significant public sector capacity building to enhance government responsiveness to citizens. As shown in Table 1.1, the 1994 Constitution of the Federal Democratic Republic of Ethiopia implemented in 1995, grants rights and freedoms to citizens (Articles 13 through Article 32, 41, 43) and makes government accountable to the people (Article 12, 41, 43). The rights of women and disadvantaged groups such as the disabled, aged and orphaned children are also protected through Article 35 and 41.

17. Article 41, for instance, states that “every Ethiopian national has the right to equal access to publicly funded social services” (Articles 41.3). Article 41.4 states that “the State has the obligation to allocate ever increasing resources to provide to the public health, education, and other social services”. Article 41.5 also states that “the State shall, within available means, allocate resources to provide rehabilitation and assistance to the physically and mentally disable, the aged, and to children who are left without parents or guardians”.

18. Furthermore Article 43.2 states that citizens have the right to participate in national development and in particular to be consulted with respect to policies and projects affecting their communities. According to Article 43.4 the basic aim of development activities was to enhance the capacity of citizens for development and to meet their basic needs. The government also initiated successive rounds of reforms for decentralized governance,
enshrined in the Constitution, by devolving powers and mandates to Regional states and then to Woreda authorities. Social Accountability is thus integral to the Constitution of the Government of Ethiopia.

**Table 1.1: Selected Reform Initiatives of the GOE**

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<tr>
<th>Reform Title</th>
<th>Intended Outcome</th>
<th>Year of Implementation</th>
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| The Constitution of the Federal Democratic Republic of Ethiopia | • Articles 10, 14, 15, 16, 17, 25, 27, 29, 30-32 are directly related to citizens’ rights  
• Articles 12, 41, 43 relates to government accountability  
• Article 35 relates to women’s rights | 1995 |
| Public Sector Capacity Building Program | • To improve the scale, efficiency and responsiveness of public service delivery at the federal, regional and local level; to empower citizens to participate more effectively in shaping their own development; and to promote good governance | 2001 |
| Decentralization | • Enhanced and improved local level governance  
• Enhanced capacity of officials at woreda level | 2002 |
| Monitoring & Evaluation Action Plan | • Used for planning and evidence based decision-making | 2002 |
| Civil Service Reform | • Effective implementation and efficient enforcement of government policies, programs and strategies in a transparent and accountable manner | 2004 |
| Justice System Reform | • Improved legal system that should serve as a basis to speed up the on-going democratization process | 2004 |
| Fiscal Decentralization | • Increases in service coverage, utilization, quality and social inclusion | 2004 |
| Gender & Development | • Enhance the participation of women in the development process | 2004 |
| Business Process Re-engineering | • Effective and responsive service delivery to citizens | 2005 |
| Urban Development | • Improved urban management | 2005 |
| Good Governance Package | • Enhance the responsiveness of government organs to citizens’ demands and preferences. The package includes eight elements including:  
- Participatory,  
- Consensus,  
- Responsiveness,  
- Transparency,  
- Accountability,  
- Fairness & inclusion,  
- Rule of law, and  
- Effectiveness and efficiency | 2006 |
| A Plan for Accelerated and Sustained Development to End Poverty (PASDEP) to meet MDGs | • The objective of the PASDEP is to define the nation’s overall strategy for development for the coming five years; to lay out the directions Ethiopia wants to take, with the ultimate objective of eradicating poverty; and to outline | 2006 |
19. Within this decentralized framework, the federal government sets standards and provides overall policy guidance and monitors and evaluates the entire basic services sector. The regional governments share responsibility in oversight and management of the service sectors. For instance, in the education sector, the regional governments are responsible for the oversight of the training of primary school teachers, provision of primary school textbooks and adaptation of the primary school syllabus to local conditions. Woredas are responsible for paying and recruiting primary and secondary school teachers, and for supervision and training of primary and secondary school teachers. Similarly regional governments and woredas share responsibility with the federal government in the management of health, agriculture and water/sanitation sectors in order to enhance quality, equity and access to all people.

20. In the organizational structure implemented since June 2002, the woredas organization and functions were expanded. The Woreda arrangement consists of an elected council, an executive committee and judiciary. The Woreda Council has an oversight responsibility over budget formulation and allocation across service sectors and is accountable to the people by whom they are elected.

21. The Good Governance package introduced by the GOE in 2006 was aimed at, improving the management, information, and complaints mechanisms at all levels of government. There is evidence that this has changed the interactions between citizens and local administrations in several localities. At the same time, the GOE has incorporated traditional leaders into the local government structure recognizing the co-existence of modern practices and procedures introduced by the modern state alongside the informal and traditional structures of accountability, which have been critical in dispute resolution for centuries, creating a mix of institutional arrangements on the ground. For example, in Somali region, the Issa elect their traditional leader. In others the local government may work through the ‘offices’ of traditional leaders to mobilize citizens. It will take some time before good governance practices are fully adopted, internalized and practiced across all regions.

<table>
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<th>Definition</th>
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<td><strong>Basic Services:</strong> These are essential services, of public goods’ nature, whose guaranteed provisioning can only ensure a human existence with dignity. The Universal Declaration of Human Rights (UDHR), 1948 clearly states that these are essential in nature and are inalienable from the Right to Life.</td>
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The EDC team believes the provisioning of these services is essential for a dignified human existence and are at the core of social contract between a state and its citizen. We consider: Primary Healthcare (preventive and curative), Basic Education (eight years of quality formal education), water and sanitation (potable water of adequate quantity per capita per day and environmental sanitation including safe disposal of human and animal feces), access to livelihoods (wage work and or agricultural services which provides enough household income for a healthy and dignified existence), roads (of quality and providing assured connectivity between habitats and livelihoods’ and basic services’ sites) and energy (including domestic requirement for cooking and a basic standard of life) are the range of basic services protected by the United Nations’ Covenant on Economic Social and Cultural Rights and ratified by member-countries across the world. Like human rights, these are also universal in application.
22. Capacity building was identified as a key component in Ethiopia’s development and democratization process, and the GOE launched massive capacity building programs to address the issue. It has developed and implemented a multi-sectoral national capacity building strategy, being implemented to varying degree in all regions and woredas across the country and overseen by the Ministry of Capacity Building (MOCB). The capacity building strategy upholds the principles of decentralization, regional autonomy and efficiency and its basic tenets are to create public-private partnerships in economic development, enhance popular participation in economic management across sectors and regions and promote good governance, accountability and transparency. The GOE has trained elected officials at the woreda, zonal and regional levels in issues related to agricultural development, basic management, financial management, integrated rural development, ethics etc.

23. Traditionally, Ethiopia had limited experience in involving non-state actors in the policy process. Over the past 10 years, however, non-state actors have increasingly assumed significant roles in Ethiopian Government and politics, even though their practical contribution in terms of influencing government policy-making and decision processes has yet to be seen. The role of Civil Society Organizations (CSOs) and the legal framework for their involvement in public policy-making and implementation processes in relevant areas is in the process of being defined.

24. Social accountability pilot, from this perspective may be seen as an integral component of the GOE’s reform agenda and capacity building initiatives to enhance the responsiveness of government to citizens’ needs and priorities.

1.3 Conceptualization of ESAP

25. In 2006, the Government of Ethiopia (GOE), the World Bank and Development Partners initiated the Protection of Basic Services Project (PBS-I) to strengthen service delivery at the Woreda level. PBS-I had four complementary components and was designed to support the delivery of basic services in four sectors including: (i) education, (ii) health, (iii) water and sanitation, and (iv) agriculture. The four component of PBS-I were stated as:

- **Component 1:** Protect the delivery of basic services: Providing funds to the sub-national and local governments (through inter-governmental fiscal transfers and federal block grant system) for improving delivery of basic services
- **Component 2:** Deliver basic health services: Providing funds to procure critical health commodities and focusing on capacity building activities pertaining to procurement and logistics
- **Component 3:** Financial Transparency and Accountability: Improving citizens’ understanding of regional and woreda budgets and making service facilities more accountable to the citizens they serve; and
- **Component 4:** Social Accountability: Engaging citizens and Civil Society Organizations in pilot activities that use social accountability tools such as citizen report cards, community score cards, participatory planning and budgeting; and enhancing budget literacy and
downward accountability in the context of decentralized service delivery.

26. ESAP, component 4 of PBS I, was aimed at building capacity in social accountability for all stakeholders including public actors, non-governmental actors and citizens.\(^9\) Financed by a Multi-Donor Trust Fund (MDTF), ESAP was designed to enable Ethiopia to test a range of new accountability approaches and tools in partnership with civil society organizations and in a variety of socio-cultural settings. As shown in Figure 1.1 below, and as understood by the EDC team, the primary objective of Component 4 was “Strengthened use of social accountability tools, approaches and mechanisms by (a) citizens, (b) civil society organizations (CSOs), (c) local government officials and (d) service providers as a means to make basic service delivery more effective, efficient, responsive and accountable”\(^10\)

27. Social accountability was envisaged as the processes, approaches and tools by which ordinary citizens, who are the users of public basic services, voice their needs and preferences, demand improved and effective public basic services, and are able to hold public officials and service providers accountable for weak or non-performance (Malena et al, 2004). As a key element of good governance, social accountability required that government officials and service providers develop and establish mechanisms and procedures to listen to citizens’ grievances and demands and to respond appropriately in a timely manner and be answerable to citizens.

1.4 Expected Outcomes\(^11\)

28. ESAP envisaged four outcomes that contribute towards the achievement of the stated objectives:

- **Outcome 1**: Increased citizens’ awareness of their rights, responsibilities and entitlements to get better quality public basic services.
- **Outcome 2**: Increased empowerment of citizens to participate in, negotiate with and hold accountable, service providers and public policy-makers.
- **Outcome 3**: Increased involvement of citizens and communities in planning, budgeting, and implementation and monitoring of the quality of, access to and quantity of basic public services.
- **Outcome 4**: Increased capacity of policy-makers and public basic service providers to respond to community and citizens’ needs and preferences.

29. **Outcome 1** related to citizens’ voice and ability to demand better quality basic services. Voice refers both to the capacity to express views and interests and to the exercise of this, usually in an attempt to influence government priorities or governance processes (O’Neill,

\(^9\) Piloting Social Accountability in Ethiopia, Analytical Report with Case Studies, GTZ International Services, June 2009

\(^10\) It should be noted that while ESAP focused on the demand side of basic public services, there were parallel GOE efforts mainly directed at strengthening service delivery capacity of regional, zonal and local governments (supply side) through public sector reforms, civil service reforms, business process reengineering, decentralization and the introduction of good governance package.

\(^11\) ESAP did not have a structured logical framework at project inception. The EDC Team had to create ex post the logical framework based on document reviews and key informant interviews.
et al 2007). This could use many instruments such as community score cards (CRCs) and citizen report cards (CRCs) for assessing the performance of public basic services providers, and participatory budgeting and public expenditure tracking (see Goetz and Jenkins, 2002, 2005).

30. **Outcome 2** is about citizens having the knowledge and skills (capacity) to receive information from the public service providers, understanding the information and having the constitutional and legal right to confront and demand answers and remedies from service providers. According to O’Neill (2007) ‘For citizens to exercise voice and fulfill their role in accountability relationships they not only need to be aware of their rights, responsibilities and entitlements but must have the requisite skills and tools to exercise them, and also feel empowered to use these’. It is only empowered citizens who will be, and feel able to, exercise voice. Empowerment, say Gloppen (2003) and Amartya Sen (1999) includes awareness of issues (i.e., access to information), political freedom for citizens to articulate their needs and values through their participation in public debates and alter the incentives faced by power-holders, including their incentive to hear and respond to citizen’s needs and preferences.

31. **Outcome 3** are the mechanisms by which citizens and communities can effectively participate in the planning, budgeting, implementation and tracking of progress in the provisioning of public basic services together with policy-makers and service providers, thus ensuring that communities and their service priorities become the primary basis on which public officials design and deliver basic services (More and Teskey, 2006). Without the inclusion of service users, service providers cannot provide effective and efficient basic services. This then, introduces the concept of partnerships and power sharing between public officials and citizens in the determination of the levels and qualities of basic services.

32. **Outcome 4** relates to the capacity of public basic service providers and policy makers to listen to and respond to citizens’ voices in a transparent, accountable and inclusive manner. Strengthening government capacity to effectively engage citizens and civil society in policy making enhances responsiveness of service providers (Caddy and Peixoto, 2006). Ackerman (2005) believes that a more proactive and open government is required to make accountability work. Public officials must actively inform citizens and explain to them what they are doing and provide the rationale for the same in a comprehensible language. In addition, a formal and appropriate institutional framework is needed to ensure public officials and institutions are receptive to citizens’ voices – not only in terms of their willingness or capacity to hear but also, crucially, to act and behave in ways consistent with the ethos of accountability (O’Neill, et al 2007). This framework would establish the “rules of the game” which provide the incentives and sanctions that govern individual and institutional behavior.

### Definition

**Empowerment**: Is the term, which broadly means self-worth, autonomy, self-direction and or self-confidence. It is a psychosocial concept, which is a combination of social, economic, and exposure inputs.

The EDC team firmly believes, other than tangible impacts, its most important manifestation is in the psychological perception of feeling confident and self-assured. We believe development effectiveness is best manifested by empowerment of the marginalized. Good governance per definition should lead to empowerment.
33. ESAP was piloted in seven regions, namely, Oromiya, Tigray, Southern Nations Nationalities and Peoples Region (SNNPR), Amhara, Beni-Shangul Gumuz, Harari, Somali, and the federal cities of Dire Dawa and Addis Ababa; and in approximately 86 woredas/towns.
**Figure 1.1: ESAP Expected Results**

**Objective**

*Strengthened use of social accountability tools, approaches and mechanisms by (a) citizens, (b) civil society organizations (CSOs), (c) local government officials and (d) service providers as a means to make basic service delivery more effective, efficient, responsive and accountable*

---

**Outcome 1**

Increased citizens’ awareness of their rights, responsibilities and entitlements to get better quality public basic services

**Outcome 2**

Increased empowerment of citizens to participate in, negotiate with, and hold accountable service providers and public policy-makers

**Outcome 3**

Increased involvement of citizens and communities in planning, budgeting, and implementation and monitoring of the quality of, access to and quantity of basic public services

**Outcome 4**

Increased capacity of policy-makers and public basic service providers to respond to community and citizens’ needs and preferences

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**Outputs:**

- Social Accountability International Best Practices disseminated widely to all stakeholders: citizens, government officials & policy-makers, and citizens’ groups including CSOs, CBO, etc.
- Social Accountability best practices understood and adopted by CSOs/IPOs
- Social Accountability tools developed with indicators of basic service delivery performance
- Project Management Units (PMUs) established by lead-CSOs and their implementing partners
- Project coordinators trained on the objectives, concepts and practices of social accountability
- To Community groups and citizens mobilized and given awareness about their constitutional rights to basic public services and accountability of service providers to them
- Project Coordinators & Community Facilitators recruited and trained to train citizens and communities on how to use social accountability tools to rate the performance of basic services providers
- Service providers trained on how to self-evaluate their performance using social accountability tools
- Community groups & citizens complete social accountability tools for targeted sectors
- Interface meetings held between citizens and basic service providers
- Joint Reform Agenda/Action Plans developed & countersigned by citizens/community representatives and service providers
- Social Accountability Steering Committee (SASC) established to monitor and oversee the

**Inputs:**

- Establishment of Steering Committee at the federal level to oversee implementation of the pilot SA pilot project
- Selection & contracting of a Managing Agent to implement and oversee and manage the pilot SA pilot project
- Selection of lead CSOs to pilot the social accountability project
- Allocation & disbursement of funds for social accountability pilot project
- Sensitization and training of CSOs/IPOs on SA objectives, concepts and practices
- Develop and disseminate social accountability tools
1.5 Critical Assumptions

34. Underlying the design and implementation of the Ethiopia Social Accountability Project were several key assumptions. These assumptions determine the degree to which the stated outcomes and objective were achieved.

- **The political context and culture**: There is adequate political will at all levels of governments to listen to diverse opinions and dissenting voices.
- **The GOE capacity**: There is adequate GOE capacity at all levels to design responsive systems, listen to, engage with users/citizens and take feedback into planning and budgeting activities.
- **Access to information**: There is adequate public disclosure of information on basic service budgeting, programming and delivery in simple and comprehensible manner.
- **Civil society capacity**: Civil society organizations have capacity to understand and demystify technical sectors and administrative structures and build citizens and community capacity to mobilize and engage with service providers. Civil society organizations and civic groups are able to engage in a range of roles- from collaborative to partnership, and to work with the GOE machinery to address basic service delivery needs of citizens.

35. Table 1.2 shows the steps taken to implement the social accountability pilot projects in the targeted Regions, woredas and kebeles.

<table>
<thead>
<tr>
<th>Steps</th>
<th>Responsibilities/Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Establishment of National Level Steering Committee</td>
</tr>
<tr>
<td></td>
<td>• A Steering Committee (SC) made of GOE Representatives, Development Partners &amp; CSOs to oversee the implementation of ESAP and to provide guidance through the Managing Agent</td>
</tr>
<tr>
<td>2</td>
<td>Selection &amp; Contracting of Managing Agent (MA)</td>
</tr>
<tr>
<td></td>
<td>• Managing Agent responsible for overall implementation and coordination of ESAP</td>
</tr>
<tr>
<td></td>
<td>• Ensure effective communication with the SC</td>
</tr>
<tr>
<td></td>
<td>• Financial Management &amp; procurement function for implementation of ESAP</td>
</tr>
<tr>
<td>3</td>
<td>Selection of Civil Society Organization through competitive tender</td>
</tr>
<tr>
<td></td>
<td>• MA prepared tender, evaluated and selected CSOs to implement ESAP</td>
</tr>
<tr>
<td></td>
<td>• Designed and implemented training and other CSO capacity building modules and conducted training sessions</td>
</tr>
<tr>
<td>4</td>
<td>National /Regional Workshops</td>
</tr>
<tr>
<td></td>
<td>• Introduced all stakeholders to the concept and objectives of Social accountability</td>
</tr>
<tr>
<td>5</td>
<td>CSOs recruit/hire Project Coordinators &amp; Community Mobilizers/Facilitators</td>
</tr>
<tr>
<td></td>
<td>• Introduced social accountability to regional/woreda level stakeholders</td>
</tr>
<tr>
<td></td>
<td>• Trained project coordinators &amp; facilitators on SA tools and application</td>
</tr>
<tr>
<td></td>
<td>• Facilitators organized the community and service providers through facility heads and community or traditional leaders</td>
</tr>
<tr>
<td></td>
<td>• Preliminary session of both services providers and users or beneficiaries was held to discuss the CSC objectives, methodology, significance and expectations</td>
</tr>
<tr>
<td>6</td>
<td>Selection of Pilot Kebeles</td>
</tr>
<tr>
<td></td>
<td>• Organized sensitization workshop on the objectives and principles of ESAP to all stakeholders</td>
</tr>
<tr>
<td>Steps</td>
<td>Responsibilities/Activities</td>
</tr>
<tr>
<td>-------</td>
<td>----------------------------</td>
</tr>
<tr>
<td>7</td>
<td>- Participatively selected the sectors and pilot kebeles based on agreed on criteria – need or where service delivery has been very inadequate</td>
</tr>
<tr>
<td></td>
<td>- Baseline/Situation Assessment Report</td>
</tr>
<tr>
<td></td>
<td>- Input Tracking Matrix</td>
</tr>
<tr>
<td></td>
<td>- Facilitators determined with service providers the government entitlements for each facility</td>
</tr>
<tr>
<td></td>
<td>- Facilitators collected information on how service departments allocate and spend the budget</td>
</tr>
<tr>
<td></td>
<td>- Facilitators discussed with service providers and beneficiaries facility entitlements, and completed input tracking matrix – comparing expected amenities with what were actually provided</td>
</tr>
<tr>
<td></td>
<td>- Facilitators working with service providers developed service benchmarks/standards</td>
</tr>
<tr>
<td>8</td>
<td>- Citizens review and rate service departments’ performance</td>
</tr>
<tr>
<td></td>
<td>- Facilitators asked the subject communities to select people that can represent them grouped into youth (girls &amp; boys), men and women from all segments of the community.</td>
</tr>
<tr>
<td></td>
<td>- Beneficiaries or the community developed facility performance assessment indicators and used the group generated and standard indicators to evaluate the adequacy of amenities in the health and education facilities</td>
</tr>
<tr>
<td>9</td>
<td>- Service providers self-evaluate their performance</td>
</tr>
<tr>
<td></td>
<td>- By way of performance assessment, service providers evaluated their own performance using standard and group generated indicators</td>
</tr>
<tr>
<td>10</td>
<td>- Interface Meeting between Service Providers &amp; Service Users</td>
</tr>
<tr>
<td></td>
<td>- Performance assessments and observations of each focus group were methodically discussed</td>
</tr>
<tr>
<td></td>
<td>- Problems inhibiting quality performance in the facilities were collated and harmonized</td>
</tr>
<tr>
<td></td>
<td>- Recommendations and feedback to service providers were proposed</td>
</tr>
<tr>
<td></td>
<td>- Action plans were mutually developed</td>
</tr>
<tr>
<td>12</td>
<td>- Monitoring &amp; Tracking Implementation of Action Plans</td>
</tr>
<tr>
<td></td>
<td>- Establish SAIC consisting of community and service provider representative to monitor the progress on the implementation of the reform agenda/action plan</td>
</tr>
</tbody>
</table>

36. Besides, component 4 - social accountability, component 3 - Financial Transparency and Accountability (FTA), aims to enhance service providers’ accountability. However, PBS-Component 4 and FTA are directly linked. For instance, Sub-Component 4.2 “Budget Literacy and Transparency among Citizens and Civil Society Organizations at Regional and Sub-Regional Levels” aimed at enhancing the understanding of budget and public expenditure processes amongst citizens and CSOs, and strengthening their capacity to engage in these processes. It was also expected to (i) support the widespread dissemination of public budget information at Regional/City, Woreda and sub-Woreda using simplified budget and expenditure formats developed under Component 3 (C3); and (ii) provide practical training to increase “budget literacy” (including on actual and proposed budgets) for citizens and CSOs.

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12 World Bank (2006), Project Appraisal Document on a Proposed Grant in the Amount of SDR 149.6 million (US$215 million Equivalent) to the Federal Democratic Republic of Ethiopia for a Protection of Basic Service Project, May 2, 2006; page 51
1.6 Linkage between Social Accountability & Financial Transparency and Accountability (PBS-I Component 3)

37. The EDC team was asked to explore how PBS-I Component 3—Financial Transparency and Accountability can be integrated into the Social Accountability component. The EDC team believes that there is a direct link between FTA and the social accountability initiatives. Financial transparency and accountability relates to the effective and efficient utilization of public resources. It is tied to citizens’ demand for effective and efficient use of public resources, and transparency and accountability in public financial management. To effectuate fiscal transparency and accountability, elected councils and citizens have to have access to complete information and be able to understand the information. Detailed budget documents and audited financial statements need to be made available to them, as well as statements of compliance by the authorities with statutes and rules governing open procurement and contracting, employment, access to services, tax expenditures, and taxpayer treatment by the income-tax and customs administrations.

38. According to the World Bank, there are four broad social accountability mechanisms through which FTA can be exercised. As shown in Box 1.1, these include independent budget analysis by citizens and Civil Society Organizations, participatory expenditure tracking (citizens, CSOs, public policy-makers and service providers), participatory performance monitoring (citizens and CSOs, public policy-makers and service providers) and participatory budgeting (citizens, CSOs, public policy-makers and service providers). Effective implementation of FTA activities require enhancement of citizens’ and CSOs’ capacities to assess, analyze and scrutinize government actions with a focus on the power of information to push for accountability. It also requires that government effectively and deliberately incorporates citizen and civic groups in service delivery planning, budgeting and expenditure tracking processes.

39. FTA is also about transparent government procurement systems. Procurement is about preparing specifications, requesting, receiving and evaluating bids, and awarding contracts. The fulfillment of the contract, through provision of goods or services and subsequent payment by the government completes the system. There are several transparency and accountability issues at each of these stages.

40. In the context of Ethiopia, citizens’ budget literacy and knowledge of how much budget is allocated to local government for basic services delivery has been very low. According to a Citizens’ Perception Survey conducted by the Ministry of Finance and Economic Development (MOFED) in 2009, an overwhelming majority of survey respondents had no

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Box 1.1: Mechanisms Linking FTA & SA

- **Independent budget analysis** refers to the research, advocacy, demystification and dissemination of budget information to citizens by civil society and other actors independent of the government.
- **Participatory public expenditure tracking** involves civil society and citizens scrutinizing how the public sector spends the money that was allocated to it.
- **Participatory performance monitoring** consists of citizen and community scorecards that solicit user feedback on the performance of public services.
- **Participatory budgeting** relates to the involvement, and consultation, of citizens in the budgeting cycle.

*Adapted from the World Bank*

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knowledge of the budget, the budget process and were not engaged in decisions regarding the delivery of basic services\textsuperscript{14}. According to the study, these findings are consistent, with only small variations, for place of residence (urban/rural), demographic groups (sex, income, age) and regions. The study identified a capacity gap among civil society and non-governmental organizations/actors in budget analysis and demystification. Thus the social accountability initiative together with FTA is expected to address and narrow this capacity gaps.

\textsuperscript{14} MOFED (2009), Financial Transparency and Accountability Perception Survey, The Federal Democratic Republic of Ethiopia, the Ministry of Finance and Economic Development, June 2009
2 METHODOLOGY

This chapter presents the scope and coverage of the evaluation, methodologies used for gathering data from the field as well as approaches used for analyzing the data. It also provides profile of quantitative survey participants. The chapter also presents certain methodological challenges worthy of noting while reading the findings of the evaluation.

2.1 Data Gathering Methodology

41. Multiple tools were used to gather quantitative and qualitative data for the evaluation and included consultations with key stakeholders, desk review of relevant documents and field data collection.

2.1.1 Consultations and Desk Review of Relevant Documents

42. A series of consultations and discussions in the inception stage with key actors and stakeholders on PBS-I Social Accountability (Component 4) was critical for the development of the analytical framework. These key informants were selected from across the various actors, notably the Steering Committee, the World Bank and Development Partners, relevant government agencies at the federal level, and selected CSOs. These discussions provided the background information that enabled the EDC team to contextualize the evaluation.

43. In addition, all available documents and reports were reviewed to understand the context and develop the design of the evaluation. Besides project related documents and reports obtained from the World Bank, the Managing Agent, the Ministry of Finance and Economic Development (MOFED), the Ministry of Capacity Building (MOCB) and selected Civil Society Organizations, Internet searches helped access reports on international best practices. Documents reviewed in the course of the evaluation are listed in Annex 3. The review of documents enabled the EDC team to construct the list of the piloted initiatives, lead CSOs, sectors covered, tools piloted and geographical coverage (in terms of regions, woredas/towns and sub-cities) (see Annex 4) that served as a sampling frame for the selection of woredas/towns and sub-cities.

2.1.2 Field Data Collection

44. Four field teams were organized; each composed of a core team member, a senior researcher, assistant researcher and local facilitators; who collected data between February 14 and March 16th. The field data was collected through focus group discussions (FGDs), key-informants interviews (KII), structured survey of citizens and expert observations. Assets (people, processes and products) created under the project by the lead and partner CSOs was also assessed as part of the field data collection.

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15 The four filed teams are as follows: Team 1 lead by Dr. Samuel Taddesse, Feyera Abdissa (senior researcher), and Megrsa Tufa (assistant researcher), Eastern-region; Team 2 led by Tesfa Berhanu, Aberra Gayessa (senior researcher) and Mesfin Atomsa (assistant researcher), Northern-region; Team 3 lead by Gadissa Bultosa, Gari Duguma (senior researcher) and Teshale Hirphasa (assistant researcher), Western-region; and Team 4 lead by Merga Afeta, Raya Abagodu (senior researcher) and Tesfaye Azmera (assistant researcher), Central & Southern region.
Definition

Gender: Is a social concept and manifests itself in the socially ascribed roles expected from the biological entities of men and women. It inherently includes both the sexes (and the current discourse is opening up to the 3rd sex, i.e., trans-gender too).

The EDC team believes, any gendered programming would be inclusive, i.e., take all the sexes into consideration and aim at challenging socially held harmful notions resulting in gender inequities in any society.

45. Quantitative and qualitative tools (structured questionnaires, checklists and an asset inventory format) were prepared based on desk review and preliminary consultations (see Annex 5). The questions were carefully constructed so as to capture the required data that would reflect the prevailing contexts in ESAP and non-ESAP areas. These data collection instruments were shared with the Client to get feedback on the suitability of the items. The instruments were translated into the official language (Amharic) prior to launching the actual data collection.

2.1.2.1 Focus Group Discussions and Key Informant Interviews

46. A mapping of citizens and community groups helped identify the range of groups for the Focus Group Discussions (FGD). FGDs were conducted with groups of men, women, youth and other social groups (e.g., People Living with HIV/AIDS (PLWHA) and People with Disabilities (PWDA) in Addis Ababa; and youth organized in micro- and small enterprises mainly solid waste management in Jimma town). KIIs were held with selected individuals among service providers, members of the community (composed of knowledgeable individuals and community leaders), local government officials at regional, zonal, woreda/town and kebele levels, and lead CSOs and their respective implementing partners. Parallel selection of focus group discussants and key-informants was also made in non-ESAP areas.

2.1.2.2 Structured Citizens’ Perception Survey

47. A structured citizens’ perception survey was undertaken for both ESAP and non-ESAP areas. Structured questionnaires were administered to individuals involved in ESAP activities in pilot areas and available respondents in non-ESAP areas.

2.1.2.3 Sample Selection Scheme and Sample Size

48. A stratified three-stage cluster sampling procedure was adopted to select the final sample of woredas, kebeles and interviewees in both ESAP and non-ESAP areas. The selection process at each stage of sampling was applied to ensure appropriate coverage of sectors, tools, actors, geographical diversity and gender balance.

49. The seven regional states and the two federal city administrations in which the social accountability pilot initiatives were conducted provided the geographical variability. Within each region and federal cities, woredas and towns were mapped by sector piloted to pick a purposive sample while also considering similarity of woredas in terms of socio-cultural and economic criteria.

50. In the first stage of the sampling process, sample woredas were selected among the 86 pilot woredas/towns and sub-cities in PBS I, while taking into account representations of entry sectors (education, health, water/sanitation, and agriculture). Sample woredas/towns and sub-cities from non-ESAP areas were selected in the vicinity of the sampled ESAP pilot woredas.
In the second stage, sample pilot kebeles/communities were selected from the selected woredas/towns and sub-cities. This was followed by the third stage; selection of respondents for the structured citizens’ perception survey and focus group participants. Key-informants were identified at each stage of the sampling process. A similar approach was followed in the non-ESAP woredas. Table 2.1, summarizes the sample size for the field study (also see Annex 6 for distribution of citizens surveyed, focus group discussant and key informants and kebeles by sample woreda/town and region).

<table>
<thead>
<tr>
<th>S/N</th>
<th>Description</th>
<th>Sample size</th>
<th>ESAP areas</th>
<th>Non-ESAP areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Sample woredas/ towns</td>
<td>20</td>
<td>20</td>
<td>14</td>
</tr>
<tr>
<td>2</td>
<td>Sub-Cities</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>3</td>
<td>Kebeles</td>
<td>44</td>
<td>44</td>
<td>25</td>
</tr>
<tr>
<td>4</td>
<td>FGDs</td>
<td>104</td>
<td>104</td>
<td>57</td>
</tr>
<tr>
<td>5</td>
<td>Key-informants</td>
<td>120</td>
<td>120</td>
<td>74</td>
</tr>
<tr>
<td>6</td>
<td>Citizens</td>
<td>275</td>
<td>275</td>
<td>141</td>
</tr>
</tbody>
</table>

2.1.3 Expert Observations

Expert observations were made of the selected facilities; schools, health centers, water points, etc. in both ESAP and non-ESAP areas. These observations provided an understanding of the status of facilities and physical assets including office facilities developed under the pilot. Improvements to service facilities resulting from implementation of agreed joint action plans were observed with photo documentation (e.g., service facilities, toilets constructed and equipment acquired to enhance service delivery).

2.2 Profile of Survey Respondents

Based on the above sampling process, 416 respondents formed a part of the citizens’ perception survey. Distribution of respondents by sex, level of education, category of service used and residence (rural, urban) is presented in Table 3. In the ESAP areas, 52.4% (51.8% in urban and 52.9% in rural) survey respondents were male and 47.6% (48.2% in urban and 47.1% in rural), female.

Majority (42.9%) had attained primary level education (1-8 grades); 39.4% in the urban and 46.4% in the rural areas. One fourth (25.5%) (30.7% in urban and 20.3% in rural) had studies up to secondary level (9-12 grades); and 15.6% (24.1% in urban and 7.2% in rural) had attained tertiary level education. Of the remaining, 5.1% (2.9% urban and 7.2% rural) of respondents could read and write and 10.9% (with 2.9% in urban and 18.8% in rural) could not read or write.

Distribution of respondents by sectors suggests that bulk (62.8%), were parents or students involved in the social accountability exercises in the education sector; 21.5% engaged with the water and sanitation sectors and 13.5% in the agricultural sector. The remaining 2.2% were patients and parents of patients who were involved in the health sector.

In Non-ESAP areas, 51.8% (41.4% in urban and 59.3% in rural) were male and 48.2% (58.6% in urban and 40.7% in rural) were female. Most (39.0%) interviewees; (33.9% in
urban and 42.7% in rural) had studied up to the primary level (1-8 grades); 23.4% (35.6% in urban and 14.6% in rural) had studied up to secondary level (9-12 grades); and 7.8% (11.9% in urban and 4.9% in rural) had reached tertiary levels. About 8.5% could read and write; and slightly over one-fifth (21.3% with 13.6% in urban and 26.8% in rural) could not read and write.

57. Sectorally, over half (57.4%) of the respondents in non-ESAP areas were parents and students engaged in the education audits. About a quarter (24.8%), were users of agricultural extension services; and 15.6% were users of water and sanitation services. Just 2.1% respondents (patients and parents of patients) were users of health facilities.

### Table 2.2: Profile of Citizens Surveyed

<table>
<thead>
<tr>
<th>ESAP Pilot Areas</th>
<th>Selected variables</th>
<th>Urban</th>
<th>Rural</th>
<th>Total</th>
<th>#</th>
<th>%</th>
<th>#</th>
<th>%</th>
<th>#</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sex</strong></td>
<td></td>
<td>137</td>
<td>138</td>
<td>275</td>
<td>100</td>
<td>100</td>
<td>100</td>
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</tr>
<tr>
<td></td>
<td>Male</td>
<td>71</td>
<td>73</td>
<td>144</td>
<td>51.8</td>
<td>52.9</td>
<td>52.4</td>
<td>52.4</td>
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<tr>
<td></td>
<td>Female</td>
<td>66</td>
<td>68</td>
<td>131</td>
<td>48.2</td>
<td>47.1</td>
<td>47.6</td>
<td>47.6</td>
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<tr>
<td><strong>Level of education</strong></td>
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<td>275</td>
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<td>100</td>
<td>100</td>
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</tr>
<tr>
<td></td>
<td>Cannot read &amp; write</td>
<td>4</td>
<td>26</td>
<td>30</td>
<td>2.9</td>
<td>18.8</td>
<td>10.9</td>
<td>10.9</td>
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</tr>
<tr>
<td></td>
<td>Can read &amp; write</td>
<td>4</td>
<td>10</td>
<td>14</td>
<td>2.9</td>
<td>7.2</td>
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<td>Primary (1-8)</td>
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2.3 Data Analysis

Quantitative data obtained from the structured citizens’ perception survey were processed using the SPSS software. The outputs were triangulated with the qualitative information obtained from focus group discussions, key-informant interviews and expert observations to arrive at conclusions.

2.4 Limitations of the Evaluation

The evaluation findings and conclusions need to be read in the context of the following limitations that may have implications on the robustness of our conclusions.

**Absence of Randomized Control Community Trials (RCCT):** This evaluation was Ex-Ante and Ex-Post assessment of impacts of ESAP. The comparison would have yielded a much more robust result had the project established a control group at the start.

**Attribution Challenges vis-à-vis GOE Reform Initiatives:** The fact that ESAP pilot activities were launched and implemented in an environment where public sector reforms and capacity building initiatives of the GOE have been undergoing creates attribution problems. The reform initiatives of the GOE strive to bring about improvement in Government capability to plan and implement development projects, raise and manage public resources more effectively, mobilize communities, for instance, in making contributions to construction of basic service facilities, and improve service delivery, among others. Hence, the implementation of ESAP activities along with the on-going Government initiatives would create limitations in terms of attributing the achievements entirely to the pilot.

**Lack of Performance Indicators and Baseline Data:** The lack of performance indicators and baseline data has been another limitation for the evaluation. Comparison of assessment data with the baseline would have provided clear evidence of and ring fence the extent of change due to ESAP in the context of the GOE reforms agenda. Recall methods were used instead to re-construct the project logical framework and performance indicators to capture data and make a time in point analysis, which yields less robust conclusions owing to memory losses.

**Non-availability of FTA Tools during ESAP’s Pilot Period:** The EDC team was also asked to evaluate and comment on PBS-I Component 3 and link it with social accountability. However, the fact that the Financial Transparency and Accountability (PBS-I Component 3) tools (Layperson’s Budget and Expenditure Templates, Layperson’s Service Delivery Facility Templates, and Media Disclosure of Budget Information) were still under construction and not available during the pilot limits the findings and conclusions on the effectiveness of the FTA tools.
3 SOCIAL IMPACT OF ESAP

This chapter discusses the impact of the pilot social accountability project on various actors and stakeholders with reference to key inquiry areas. It also compares, to the extent possible, differences between ESAP and non-ESAP areas per the indicators, while considering the contextual differences in rural and urban pilot sites. The chapter concludes with suggestions on how these impacts could have been optimized and the various pegging points for the same that need to be kept in mind for Phase II.

3.1 Impact on Citizens

64. Impact of ESAP on citizens was measured using the following indicators:
   - Citizens’ awareness and understanding of their rights and entitlements with regard to access to basic services (Outcome 1).
   - Citizens’ self-perception of empowerment vis-à-vis the state and the service providers (Outcome 2).
   - Citizens’ access to and use of feedback opportunities to influence service adequacy (quality and quantity) (Outcome 2).
   - Citizens’ capacity to engage in the planning, budgeting, implementation and monitoring of basic services (Outcome 3).

65. ESAP has increased citizens’ understanding of their constitutional rights, responsibilities and entitlements to better quality basic services. Findings of the Citizen Perception Survey (CPS) suggest that ESAP initiatives have enhanced citizens’ understanding of their rights, responsibilities and entitlements with respect to basic services, access procedures and usage. Large percentage of respondents (84%, M=86%, F=82%), focus group discussants and key informants affirmed receiving orientation on their constitutional rights to adequate and properly delivered basic public services. The awareness can be attributed to discussions on the input matrices developed by implementing CSOs in the social accountability sensitization workshops and scoring of sector performances using social accountability tools. Input matrices provided details of service providers’ budgets, staffing levels, and service standards.

66. Knowledge of the specific packages of services available to citizens had increased. For example, in the Fantalle woreda, East Shoa Zone, Oromiya region the pastoralist community was not aware that de-horning and de-hoofing of animals for better management of draught animals was part of the package of services provided until they heard it at the interface meeting from the Animal Health Clinic staff. Also, farmers, out of despair, would inject sick animals with antibiotics (sometimes mixed with coffee grind) without understanding the cause of sickness, worsening the condition of the animal. At the interface meeting they learned about the laboratory at the Animal Health Clinic for testing the blood of sick animals and providing the appropriate medical treatment. In Non-ESAP areas too,
86% of survey respondents (78% female and 93% of male) indicated that they were informed and made aware of their rights, responsibilities and entitlements.

67. This enhanced understanding has resulted in de facto **better engagement** of citizens/service users in the essential sectors, both from a planning and resource generation perspective. As service providers began to value with seriousness citizen’s feedback, there has been improvement in attitude, ownership and implementation responsibility. For example, in Jimma town of Oromiya region one of the Iddir members explained that “ESAP project made service users sit together with their service providers, discuss issues and ideas freely without hesitation.” Another group of female student focus group discussants in Hermata School, Jimma Town explained that now they were able to understand the problems of their school and feel responsible for contributing to the solutions, which was not the case before. They were able to identify “the major problems such as lack of separate toilets for girls; student and teachers discipline; library being unable to accommodate all students; lack of educational materials, etc.”; issues that hadn’t been discussed prior to ESAP in an open forum involving students, parents, teachers and the education sector office staff. While the awareness levels prevalent on basic services in both ESAP and non-ESAP areas were almost the same, the engagement intensity varied significantly. About 88% female and 91% male citizens (overall 90%) considered interface meetings as breakthrough platforms that encouraged citizens’ engagement with service providers. While the mass gatherings in both ESAP and non-ESAP areas led to some form of engagement, the outcomes were very limited, leading the EDC team to safely conclude that the engagement lacked depth.

68. Even simple tools like the Community Score Card led to considerable sense of empowerment amongst the citizens with 99% (98% female and 99% male) respondents affirming the sense of empowerment. In contrast to the response in non-ESAP areas was just 40% (36% female and 44% male).

69. There was no significant difference between prevalence and usage of feedback mechanisms in ESAP and non-ESAP sites. There were a range of feedback mechanisms prevalent in the ESAP sites (from interface meetings to community scores) and citizens were using these optimally. Government of Ethiopia had initiated feedback mechanisms such as suggestion boxes as part of good governance and public service reforms in both ESAP and non-ESAP areas also which the citizens were using.

**70. Social accountability has increased ownership and engagement of citizens in basic services delivery.** Apart from realizing their right to quality services, users were also more aware of their responsibilities and the potential of mobilizing community resources to improve these services. The EDC team met many users who opined, “The delivery as well as the improvement of basic public services is not the sole responsibility of the government but is a shared responsibility of citizens and the state”.

71. **ESAP has made important contribution to the empowerment and self-confidence of service users who are better able to express their opinions and make open complaints to evaluate service providers without fear.** Box 3.1 captures some of those impressions. For example, in Maji Shanann kebele, Zuway Dugda woreda, Oromiya, a user stated, “I felt greatly empowered when I gave a low score to the cashier of the Water Committee for being inefficient and ineffective in cash handling”.

72. In non-ESAP woredas, although the EDC team found evidence of rights awareness as an outcome of government efforts at democratization of the development agenda; there were missing elements such as:

- Objective tools to measure service delivery adequacy (quality and quantity) and to use these as entry-points for a dialogue, engagement, and partnership with service providers;
- A voice platform chaired by the CSO/IPO as in case of interface meetings (quoted by nearly all ESAP participants as a breakthrough platform) for service delivery performance rating/scoring;

73. The opportunity to feedback both individually and in a group, is an important ingredient of any social accountability mechanism. Unlike the Government of Ethiopia’s initiatives of using complaint registers and suggestion boxes, where some of these feedback opportunities have been limited, under ESAP there has been considerable seriousness linked to the whole exercise and a genuine attempt to influence service standards. Most users perceived this as an improvement. In the absence of more interactive mechanisms in the non-ESAP areas, the EDC team noted that:

- The service providers were not taking feedback seriously with a response based action plan. No evidence of this was seen either in budgeting, behavioral change or disclosure of information. Thus while there was empowerment, the demand-side pressures was missing;
- Feedback mechanisms like suggestion boxes and Citizens’ Complaints Hearing Office/Secretariat (CCHO) were not adequately used except in a few woredas where serious attempts to review the complaints and respond to them promptly as a measure of good governance were seen. For example, in Chiro woreda, Bilo Nopha, Gomma and Liben Chuqala woreda, Oromiya region, suggestion boxes were taken seriously. In these localities CCHO opened the complaint register and suggestion boxes every week and referred these to appropriate sectors for action. Complaints were managed by calling and asking for explanations from the concerned officials/functionaries with appropriate actions and the actions taken reported back to the complainants.
- Good governance practices had not reached several localities due to the rapid turnover of public officials. Many individuals that had taken the training had left and their replacements were not exposed to the package.

**Box 3.1: Recognizing empowerment**

The EDC team identified various manifestations of empowerment that were not limited to just having a scope to give negative feedback. The tangible process of giving feedback, individually and in groups, in interface meetings and having those feedbacks taken seriously was empowering, as most users explained.

We also encountered Christian and Muslim religious leaders standing side by side to bless the interface meetings and the action plans. We would like to believe there is potential for building solidarity amongst different groups, if social accountability is harnessed properly.

We also feel participation and representation of members from every community, class and hamlets, especially the marginalized, has its own knock-on impact on empowerment.
74. In the ESAP areas, benefits notwithstanding, the EDC team feels there were certain missed opportunities that could have maximized the impact of social accountability. For example, the Government of Ethiopia’s ownership of this initiative was inadequately communicated at the kebele levels; the payment of per diem to focus group and workshop participants could not be sustained post June 2009; handing over the responsibility of the action plan monitoring to an ad hoc committee instead of community based organizations (CBOs) such as Iddir was unsustainable as members of the ad hoc committee expected payment of per diems for time spent in monitoring implementation of the action plans. As a result, post ESAP phase-out, the practice of taking service users’ feedback seriously has discontinued in some woredas.

3.2 Impact on service providers

75. ESAP’s impact on service providers was measured using the following criteria:
- Service providers’ (especially the staff from specific line departments) understanding of the concept of accountability (Outcome # 4);
- Openness to citizens’ engagement (Outcome # 4);
- Receptivity to citizens feedback and complaints mechanisms (Outcome # 4); and
- Self-assessment of capacity development (Outcome # 4).

76. **ESAP has increased service providers’ understanding of the objectives and concepts of social accountability.** Amongst the service-providers, the most encouraging impact of ESAP has been the development of a personal definition of accountability. As officials in Dire Dawa city administration and Kombolcha woreda of Oromiya articulated, “Earlier we thought we were just accountable to our supervisors. As a result of the ESAP initiatives and the GOE reform packages layered on each other, now we know accountability is a two-way street, between service providers and users i.e., officials and citizens, and also between us and our subordinates within the system.”

77. In ESAP areas, 98% of female and 95 % of male survey respondents (overall 97%) indicated that there was enough openness amongst the service providers in all four sectors on citizens’ suggestions, feedback and planning inputs. Openness to inputs from citizens was also evident in non-ESAP areas with 79% female and 86% male (overall 83%) survey respondents affirming the openness. While this can be attributed to GOE’s decentralization and good governance capacity building efforts, what was unique to ESAP was the service providers’ willingness to sign-up for the **Joint Reform Agenda and Action Plan** and the setting of personal timelines and deliverables from these interface meetings.

78. ESAP trainings and interface meetings have also influenced service providers’ responsiveness in all four sectors to citizens’ feedback, performance rating and complaints. This was affirmed by 98% female and 95% male (overall 96%) survey respondents. While service providers were self evaluating their performance, use of tools like Community Score Cards helped them to review their performance from the users’ perspective on jointly agreed assessment indicators. For example, the water committee cashier in the Maji Shanan Kebele of Zuway Dugda woreda, Oromiya region stated, “I was given a zero score and felt really bad. I have apologized and since then I have made
tremendous improvement in timely collection and deposits of cash every week in the bank. I keep records of all cash collected and disbursed. We have today Birr 23,564.33 in the bank and Birr 6,000 cash on hand.”

79. Service-providers’ capacity in prioritizing gaps and problems in services provision and their own self-evaluation of performance has increased as a result of intensive inputs during the ESAP phase and the complementary efforts of GOE reforms and capacity building program.

80. In non-ESAP areas too, service providers were reportedly responding to citizens’ complaints within 30 days according to 86% female and 88% male (overall 87%) respondents. However, the remit of accountability had not expanded to include the notion of users and downward accountability to the same extent as in ESAP areas.

81. Even as there was change in service provider response/attitude, lack of resources and limited cross-departmental synergies has created a ceiling on the potential impact of ESAP. In the absence of resources, some outcomes could not be optimally achieved. For example, Abdi Boru School in Mettu woreda, Oromiya had two specific problems of noise pollution from sawmill and environmental pollution due to the location of an abattoir in the vicinity. But action for relocation of the abattoir or sawmill could not be undertaken because of lack of resources after agreements were reached during interface meetings. The EDC team also came across cases of schools and health posts failing to get water connections because the woreda water sanitation departmental staff and senior staff did not join the interface meetings.

3.3 Sectoral impacts

82. The criteria used for assessing the impact of ESAP on the four essential sectors, i.e., health, education, water/sanitation and agriculture were:

- Extent of demystification of the sector to encourage citizens’ engagement (Composite of outcome 1 and outcome 4);
- Development of objective performance indicators for the sector acceptable to sectoral staff (Outcome 4); and
- Benchmarking services for quality and quantity (Outcome 4).

83. ESAP has improved the coverage and quality of basic services as a result of implementation of the joint action plans responding to the rational demands of users (paying and non-paying) with appropriate pricing, public-funded practices and processes to increase and sustain citizens’ engagement.

84. The EDC team found evidence of a demystification of sector services in all four sectors in both ESAP and non-ESAP areas. Range of services, access processes, responsible officials and budget allocation were some of the information shared with users. Budget constraints for service enhancement were also explained. EDC team found the following evidence of public disclosure and stipulated standards:

- Discussions on performance indicators and localized benchmarks;
- Establishment of Children’s parliaments, more representative than PTAs in exemplifying students’ interests;
• Reach and public disclosure in the agriculture sector as a result of sharing by development agents.

85. Service performance indicators have received a major fillip from ESAP interventions and use of social accountability tools such as citizen report cards and CSCs. Citizens were trained on how to use them in rating service providers’ performance as per the performance indicators listed in Table 3.3. In ESAP pilot areas, services users, along with providers/officials have localized the service standards (both in terms of quality and quantity), based on availability of resources (human and capital). These can be attributed to the interface meetings that have enabled users to demand and access a certain level of service standard.

Table 3.3: Performance Indicators used in the Rating of Service Delivery Performance

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<tr>
<th>Sectors</th>
<th>Service Delivery Performance Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>• Increase in healthcare professionals posting (e.g., Limu Shay and Gembe health centers in Gomma woreda, Oromiya)</td>
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<td></td>
<td>• Adherence to timings of health posts and centers; some actually health centers even increased their operational timings to 24X7 (e.g., Shinille, Somali and Gembe health centers)</td>
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<td></td>
<td>• Increase in provisioning of equipment (gloves, beds, bed-nets, essential drugs) (e.g., Limu Shay health center).</td>
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<tr>
<td>Education</td>
<td>• Text-book to student ratio</td>
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<td></td>
<td>• Students per Classroom</td>
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<td></td>
<td>• Teacher to student ratio</td>
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<tr>
<td></td>
<td>• Teachers’ attendance and evaluation</td>
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<tr>
<td></td>
<td>• Girl-students drop-out</td>
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<td></td>
<td>• Students’ performance scores.</td>
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<tr>
<td>Water/Sanitation</td>
<td>• Better maintenance of water points</td>
</tr>
<tr>
<td></td>
<td>• Improved availability and quality of water (chlorination and maintenance of water lines, plugging of leakages etc)</td>
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<tr>
<td></td>
<td>• Predictable water supply timing</td>
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<tr>
<td>Agriculture</td>
<td>• Disclosure of entire package of services (crop and animal care included)</td>
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<td></td>
<td>• Access procedures clearly laid out</td>
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<tr>
<td></td>
<td>• Predictable timings for provision of technical advice</td>
</tr>
<tr>
<td></td>
<td>• Timely delivery of agricultural inputs (e.g., selected seeds, fertilizers, pesticides, etc.)</td>
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86. In the education sector, ESAP interventions have created community ownership and engagement in schools; strengthened supervision of parents of their wards; and invigorated the Parent Teacher Associations (PTAs). Students’ internal and board exam performance was found to have improved because parents started to check exercise books and homework of children and sign on

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Box 3.2: Collateral impact on education sector
The EDC team has encountered some of the PTAs keeping watch on girl students’ attendance post menarche’. Any drop-out had resulted in PTAs approaching the parents of the specific girl child to be sent back to school.

In Hawassa town of SNNPR region, the girls’ clubs even intervened to stop eve-teasers from harassing senior primary school girl students from attending class.

The EDC team has also noticed voluntary contribution to upgrade school infrastructure by community and lobbying for school’s up-gradation from primary to secondary levels. (e.g., Burusa School in Mettu woreda).
the results of their children’s tests and exams. It is as a result of ESAP that Edget Beandinet School was selected as a model school in the entire Hawassa town while Minilik II School was awarded the second best performing primary school amongst Addis Ababa public schools. Some other collateral impacts on education sector are listed in Box 3.2.

87. **In the water/sanitation sector, very encouraging reports about change in the attitudes of water/sanitation staff in Addis Ketema sub-city, Hakim, Jimma, Bedele, Ghimbi and Assosa towns were observed.** Earlier, leakage complaints got standard response such as pre or post metering (since that is directly linked to volumetric consumption). Post-ESAP report is that leakage complaints got prompt attention and were fixed within 24 hours.

88. In Hakim, Harari, the Water Department had four water tanks to supply water to the community. Although contractors were hired by the Water Department to fill these water tanks daily water shortages continued. In the ESAP meetings, the community learnt that the Water Department filled just two water tanks out of four for various reasons. The situation was discussed and all four water tanks began to be filled daily and chlorinated.

### 3.4 Impact on Elected Councils at Woreda and Kebele levels

89. Any decentralization process is unsustainable without participation of the democratically elected representatives, i.e., the Woreda and Kebele members. Since social accountability is a key ingredient of good governance, it is natural, that elected representatives, responsible for effective local governance are part of ESAP initiative. The criteria used for assessing the impact of ESAP on local elected councils was:

- Elected representatives’ understanding of the objective of social accountability (composite of Outcome 3 and 4);
- The quality of their representation of their constituents (outcome 4)

90. ESAP, in several sites, has resulted in better understanding among elected representatives’ of their own and sectoral obligations and accountability to users/citizens. ESAP has also resulted in their enhanced awareness of service standards and ability to assess service standard attainments in their constituencies. This has de facto resulted in deepening and enriching their constituency representation agenda.

91. The EDC team came across several instances of exclusion (albeit inadvertently) of elected councils from interface meetings and intensive ESAP trainings.  

92. In contrast, in the non-ESAP areas, the EDC team found little awareness of the status of services and standards in their constituencies among elected representatives. For example, in Dachatu 06 kebele in Dire Dawa where a water point was not functioning resulting in scattered feces, the matter was raised with the water department by an elderly woman who had organized her community, but to no avail. When the EDC team brought the matter to the notice of the Kebele Chairman after an in-depth interview, he confessed to his lack of

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16 This could be partly due to the local elections that took place after ESAP piloting had started. New candidates replaced those that had participated in ESAP and needed Social Accountability induction training.
awareness of dysfunctional water-points and suggested the need for better feedback mechanism.

3.5 Civil Society Organizations/Implementing Partner Organizations
93. CSOs/IPOs are also key players in the successful implementation of ESAP. They are also grass root implementers of all ESAP activities. The impact of ESAP on lead CSOs and their implementing partners on the ground was assessed using the following parameters:

- Understanding of social accountability objectives (composite of outcomes 1, 2 and 3)
- Capacity to implement social accountability tools and approaches (composite of outcome 2 and 3)

94. Participating CSOs demonstrate significantly enhanced capacity to understand the need for demand-side responsiveness for democratic processes to function optimally. They also enthusiastically participated as trainers/resource persons/interlocutors between the local government/service providers and citizens/service users.

95. While there were many CSOs who used Community Score Cards as an entry-point for initiating dialogue and measuring service standards and users’ satisfaction, those using Citizens’ Report Cards and Participatory Budgeting and Expenditure Tracking were fewer. This was attributed to difficulty and cost of use.

96. However, sustainability of some of the CSO capacities with regard to social accountability was somewhat doubtful. For instance,

- Staff used in this process intensive initiative was mostly project staff hired for the task and/or consultants, that would result in loss of institutional memory and or capacity amongst CSOs at the end of the project;
- Lack of professional technocrats amongst the CSOs staff engaging in ESAP has limited their effectiveness to demystify the sector, create positive pressure for service enhancement and increase citizens’ capacity to engage.
- The fact that budget works had few takers, (2 out of 33 sample CSOs) shows a concerning lack of capacity amongst CSOs to engage in technically demanding and potentially high-impact tools.

97. CSOs in non-ESAP areas were not evaluated and hence there is no comparison.

3.6 Gender Inclusion
98. All social development programming should be inclusive, i.e., especially gender inclusion. This would help challenge social hegemonies based on gender in society. Since, the design of ESAP, itself had limited gender component, our assessment was limited too and did not examine the marginalization of female constituents within ESAP but assessed the participation of women as a homogenous community rather than various sub-categories of women.

99. The criteria used to assess gender inclusion were:
- Participation/representation of women in public forums (composite of outcome 1 and outcome 3);
• Women’s perception of empowerment (outcome 2); and
• Acquired mobility freedom, if any (composite of outcome 2 and outcome 3) from such participation.

100. **Women were found to be major participants in the ESAP exercises at the kebele levels. This has resulted in their ability to voice their concerns and dissatisfaction.** They do perceive ESAP as empowering, especially where site and timings of trainings were changed to accommodate women’s attendance. They admit to an enhancement of their mobility to participate in public meetings and access of girl children to schools. Box 3.3 above, elucidates the girl-child and sanitation access connect which has been a collateral benefit of ESAP discussions. Box 3.4 illustrates the satisfaction and empowerment enjoyed by some women participants.

### Box 3.3: Sanitation and girl-child education

**Construction of a separate toilet for girl students’ was an important outcome of ESAP impact on the education sector. Globally, UNICEF attributes lack of separate sanitation facility and inadequate menstrual management as a primary reason for girl children drop-out in secondary education. This has been effectively addressed in both ESAP and non-ESAP areas.**

101. According to the survey results ESAP has also contributed to meeting specific needs of women. For example, 86% female and 88% male (overall 88%) survey respondents indicated health needs of women have been met; and 92% female and 93% male survey respondents indicate that the relationship between girl students and teachers has improved.

102. However, the EDC team has encountered similar empowerment testimonials in non-ESAP areas. Some of these were:
  - Discouraging polygamy and early marriage;
  - Promoting equal rights to inheritance;
  - Joint registration of land and homestead and immovable property between husband and wife; and
  - Encouraging parents to send the girls back to school and continuing their education, post menarche

103. In non-ESAP woredas, 78% female and 85% male (overall 82%) survey respondents indicated that the health needs of women are addressed. About 82% female and 85% male
(overall 84%) survey respondents also indicated that the relationships between girl students and teachers have improved.

3.7 Rural and Urban Differential

While intervention approaches were common to both spaces, the proximity of urban communities to service providers had its own set of advantages. But the relationship is not completely straightforward as urban habitations have their own set of compulsions that makes, taking time out for civic engagement a challenge. Besides urban dwellers, like rural dwellers are not necessarily homogenous and any comparison would be fraught with dangers of simplification and generalization. The criteria used as comparators are:

- Awareness of rights and entitlements (outcome 1);
- Mobilization and organization (outcome 2); and
- Civic engagement (outcome 3).

The EDC team’s observations are as follows:

- In rural areas availability and accessibility was the over-riding concern while in urban areas, due to increased awareness, the concerns are higher order too, i.e. pricing, access cost and quality of services and are the entry points for community mobilization. Urban citizens definitely displayed a higher level of expectation of quality services, both from public and private sector.
- Mobilization has a mixed outcome, while urban habitats are proximate, these do not argue for easier mobilization. Demands of petty trade and daily wage work meant no predictable time of availability to mobilize and meet amongst the urban poor.
- Rural service users are often scattered, isolated and loosely linked with decision makers, advocacy groups and far-off from service providers and hence engagement meant specifically designed prior agenda. This could also be due to higher levels of urban illiteracy, rural remoteness from modern information and other reasons related to low economic development. This suggests the need for different time and resources to create awareness in the rural/and urban community.
- Urban dwellers are not homogenous, hence while the well-off might be more organized, have educated members, elites and groups that advocate for the protection of citizens’ rights are heard more easily particularly in major urban centers like Addis Ababa, the same cannot be said of the urban poor. Special efforts will be needed to engage these groups.

This comparison was limited to ESAP areas.

3.8 Impact on disadvantaged groups

Impacts of ESAP on disadvantaged groups like the disabled and stigmatized communities, i.e., sex-workers and people living with HIV/AIDS were also examined using the following parameters:
• Awareness among disadvantaged communities of their rights and entitlements (outcome 1);
• Their own perception of empowerment (outcome 2); and
• Inclusion of their special needs in the agenda of social accountability and their own inclusion in the processes (composite of outcome 2 and outcome 4)

108. It is expected that any enhancement in basic services provisioning and removal of access costs would result in benefiting the disadvantaged, since their poverty disallows them from switching service providers and going to private sectors. In ESAP areas, 92% female and 93% male (overall 93%) survey respondents have indicated improvements to basic service delivery access, quality and adequacy. In Ghimbi, Mettu and Gomma Woredas, of Oromiya region and Addis Ababa it was observed that the social accountability project had increased participation of people with disabilities. Special writing paper for blind students and additional budget (from Birr 80 to Birr 240 per month) for both blind and deaf students was provided in Mengesha Ganbere Primary School of Dangila Woreda of Amhara region. The EDC team confirmed these improvements while visiting the schools.

109. In non-ESAP areas much fewer respondents, about 65% female and 78% male (overall 72%) survey respondents have also indicated that disadvantaged groups enjoy improved basic service delivery access, quality and adequacy.

3.9 Conclusions

110. There has been a positive impact of ESAP on all categories of actors and sectors. Expanded remit and view of accountability amongst service-providers from merely upward accountability to supervisors and managers to downward accountability to users/ citizens and subordinate staff, has been a very progressive impact of ESAP.

111. The Government of Ethiopia’s reforms have further enhanced/magnified the impacts of ESAP and have generated awareness and commitment to the concept of social accountability and good governance across Ethiopia in ESAP pilot areas.

112. To a large degree, ESAP has achieved its objectives by enabling CSOs to test selected social accountability tools and approaches. This has resulted in:

• Creating increased awareness of rights, responsibilities and entitlements among participating citizens;
• Empowering and building confidence among service users to dialogue and negotiate with service providers for better quality services;
• Enhancing the quality of engagement between service users and providers;
• Creating an appropriate mechanism for service improvements through tracking inputs, rating services, and interface meetings to develop agreed action plan for implementation and service delivery improvement
• Improving the accountability and responsiveness of service providers to citizens’ demands and preferences;
• Creating space for collaborative effort between communities and service providers to enhance the coverage, quality and quantity of basic services;
• Enhancing local government officials’ and elected councils’ awareness of social accountability objectives;

• Empowering women and disadvantaged groups to demand better quality basic services;

113. ESAP has provided an *appropriate mechanism* for collaborative efforts between citizens, service providers and local government for the provisioning of quality basic services (i.e. tracking inputs, rating services, and interface meetings to develop agreed joint action plans for improved services). This mechanism needs to be emulated and adopted throughout Ethiopia.

### 3.10 Lessons Learnt & the Way Forward

114. *Sustaining the impact of social accountability learning would require repeated training and hands-on exercise to internalize the understanding and regularize the practice.* As noted above a majority of focus groups, key informants and survey respondents have suggested that the onetime training was insufficient to grasp the social accountability concepts and international best practices. In addition, in many pilot sites understanding of the objectives of social accountability by the community at large was incomplete. While the community representatives (i.e., the focal groups) were given adequate training they did not go back to share their understanding and learning with the community at large. Going forward, the Managing Agent together with the implementing CSOs/NGOs would need to develop a training/capacity building agenda to be implemented across all target woredas and communities.

115. *While women have been participants in the ESAP, gender mainstreaming requires targeted programming.* Specific attention should be given to incorporating gender in social accountability initiatives.
4 TOOLS, APPROACHES & ACTORS

In this chapter we assess the social accountability tools, approaches and actors involved in ESAP. We present evidence that Community Score Card is the most used tool because of its simplicity and accessibility by both literate and semi-literate communities as well as its suitability to localized service delivery assessment.

4.1 Tools

116. **Community Score Card (CSC) is the most utilized social accountability tool.** Of the 33 CSOs/IPOs in the study, majority or 94% used the CSC, and 3 or 9% used the Citizen Report Card (CRC). Only 2 out of 33 CSOs/IPOs used the Budget Works tool. Furthermore, 80% female and 78% male (overall 79%) citizens surveyed in ESAP participating woredas indicated that the CSO/IPO introduced them to CSC. Only 1.1% said they used participatory budgeting tools and 0.4% said they used CRC. Community Score Card was used in all sectors – education, health, water/sanitation and agriculture. Citizen Report Card was used only in the education sector. Budget literacy, and participatory budgeting and expenditure tracking was piloted only for the water sector, and only by two water committees using the Water Committees’ funds.

117. Based on feedback from Focus Group discussants, Key Informant interviews and citizens surveyed; the simplicity, efficacy, appropriateness and inclusion were used as criteria for evaluating the tools used.

- **Simplicity** as measured in terms of how easily citizens and service providers in both rural and urban communities can be trained to use the social accountability tool to rate the quality and quantity of and access to basic services. It is also measured in terms of how easily community facilitators hired and trained by the CSO/IPO understand and can train citizens and service providers on the selected social accountability tool.

- **Efficacy** as related to the cost-effectiveness of the administration of the tool.

- **Appropriateness** is measured in terms of applicability of the tool for assessing the performance of the relevant sectors and communicating the results to all stakeholders.

- **Inclusion** is assessed in terms of the tool’s capability of being used by various groups of populations.

118. With regard to simplicity or ease of understanding how to use the tools, 84% female and 84% male (overall 84%) of survey respondents found the Community Score Card simple and user-friendly and 3% found participatory budgeting understandable. Very few survey respondents or 0.7% found the Citizen Report Card useful but could not explain how

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17 Percentages do not add up to 100% because a few CSOs have used a combination of tools.
it could be applied to local conditions. All categories of survey respondents, looked from level of literacy and education, found CSC easy to use and apply to the local situation.

119. **Citizens’ Report Cards** are client feedback surveys that provide a quantitative measure of user perceptions on the quality, efficiency and adequacy of different public services. Specific issues evaluated in the education sector using the CRC included:

- Inclusiveness and equality in access to primary education services;
- Quality of the learning environment in primary schools (health and safety of school infrastructure, facilities and budgetary capacity, etc);
- Quality of teaching and relearning processes;
- Quality of the leadership and management of primary education;
- Level and quality of community and school relations and cooperation;
- Gender as a cross cutting issue.

120. Internationally, Citizens Report Cards are used not only for rating service delivery at the local level but also at national and regional levels. They are conducted regularly, widely disseminated and discussed and institutionalized to exact public accountability. Some examples of actual applications across the world include (i) using CRCs as a basis for performance-based budget allocations to pro-poor services (Philippines), (ii) cross-state comparisons on access, use, reliability and satisfaction with public services (India), (iii) supplementing national service delivery surveys (Uganda), and (iv) governance reform projects (Ukraine and Bangladesh). Service providers implement Citizens Report Card surveys on a regular interval (i.e., quarterly, semi-annually or annually) to monitor and learn how users perceive their services and use the data to improve the quality, and coverage of service delivery.

121. Rift Valley Children & Women’s Development Association, Zema Setoch Le-Fitih/Zema Sef and Jerusalem Children and Community Development Organization (JECCDO) were the three CSOs that used CRC in the education sector. The process used by JeCCDO is documented by EDC and is shown in Figure 4.1. In the implementation of the CRC, JeCCDO hired a consultant to plan, develop and implement the CRC in 5 cities including Dire Dawa. In Dire Dawa school district, the consultant selected 8 sample schools from which it randomly selected 300 students and 300 parents for the survey. Survey respondents are oriented on social accountability concepts and objectives and on the use of CRC before administering the survey instrument. In addition, the consultant conducted focus group discussions with students, service providers and community representatives. The consultant also conducted site observations. The information gathered from focus group discussions and site observations were used to validate and enrich the survey findings. These findings were then discussed separately with service providers and then with service users before the interface meeting between the service providers and the service users.

122. During the interface meetings the findings and their implications were discussed and debated between the two sides (i.e., service providers and service users), moderated by the consultant. A consensus was reached and a joint reform agenda/action plan was developed.

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to address key service delivery deficiencies in the selected schools/kebeles.
Figure 4.1: The Citizen Report Card (CRC) Process

1. CSOs sign MOUs & Launch SA
2. CSOs Select Pilot Woredas/Towns
3. Select Sample Size & Survey Participants
4. Create Awareness on the use of CRC among Survey Respondents
5. Conduct Primary Data Collection
   - Implement Survey Instrument - CRC
   - Conduct Focus Group Discussions
   - Conduct Physical Facility Observations
6. Compile and Analyze the Data
7. Review Findings & Validate the Data w/ Service Providers
8. Review Findings & Validate the Data w/ Service Users
9. Conduct Interface Meeting
   - Select Pilot Kebele/Facility & Develop Joint Action Plan
   - Establish SA Implementation Committee to Oversee Implementation of the Action Plan
The Community Score Card is a hybrid of techniques of social audit, community monitoring and citizen report cards. Like the citizen report card, the CSC is an instrument for public accountability and responsiveness. By including a community discussion on service delivery problems and issues CSC empowers citizens to voice their problems and frustrations. From the discussions the community customizes localized service delivery performance indicators for rating the quantity, quality, coverage and access aspects of the service delivery. The CSC uses the “community” as its unit of analysis, and is focused on monitoring and evaluating performance of service sectors at the local level. It therefore facilitates the monitoring and performance evaluation of services by the local communities themselves. Since it is a grassroots process, it is effective both in urban and rural setting.

From citizens’ perspectives, the added value of the Community Score Card was its participatory nature. Since identification of the service delivery performance indicators are developed based on discussion of the community’s problems with the services, it gave community members opportunity to interact, discuss and work with their neighbors to solve a common service delivery problem thus building social capital. The process was also inclusive and accessible to both literate and semi-literate community members.

From service providers’ perspectives, the CSC process gave them an opportunity to view their service delivery performance from the users’ perspective. The EDC team has encountered many service providers who indicated that prior to participating in ESAP they were under the impression that they were providing satisfactory services. These same service providers indicated that looking at service delivery performance from the users’ vantage point gave them a new perspective.

From CSOs/IPOs perspectives the value of the CSC was not only its simplicity but also the rich and animated discussion it generated among the community members on how to rate a particular service. Also the process of identifying the issues and problems and then prioritizing and translating them into service performance indicators was educative and empowering. The CSC process used by the majority of civil society organizations is shown in Figure 4.2 below.
Figure 4.2: The Community Score Card (CSC) Process

1. Sign MOU w/Region or Woreda Government & Launch SA Sensitization Workshops
   - Select Pilot Woreda Service Facility/Kebele
   - Conduct Baseline Survey
   - Develop Input Tracking Matrix
     - Inventory of Inputs
     - Budgets & Resource Allocations
     - Entitlements & Benchmarks

2. Review Baseline data & Input Tracking Matrix with Service Providers
3. Organize Service Providers into Focus Groups
4. Train & Facilitate Service Provider Focus Group to Self-Evaluate their Service Delivery Performance using the Indicators Developed by Citizens/Service Users
5. Facilitate Focus Groups to Brainstorm & Develop Service Delivery Performance Indicators
6. Organize Community into Representative Focus Groups (youth (male/female), men, women, etc.)
7. Train & Facilitate Community Focus Groups to Score the Performance of Services Using the performance indicators
8. Conduct Interface Meeting Between Service Users & Providers
9. Facilitate the Development of Joint Reform Agenda/Action Plan
10. Establish SAIC to Monitor Implementation of Action Plans
Participatory Budgeting and Expenditure Tracking: ESAP has demonstrated elements of participatory planning, budgeting, implementation, and monitoring and evaluation albeit not in a systematic manner. For instance, as shown in Figure 4.3, participatory budgeting and expenditure tracking involves several steps. First, the current status (diagnostic assessment) of the services are assessed jointly or separately and communicated to both service providers and the service users. In the case of ESAP, Rift Valley Children & Women Development Association, Relief Society of Tigray, and Derash Relief and Development Association have done this.

Figure 4.3: Participatory Budgeting & Expenditure Tracking

Diagnostic Assessment of Status of Basic Services
✓ What is working?
✓ What is not working
✓ Constraints & Opportunities

Participatory Performance Monitoring & Evaluation
✓ Expenditure Tracking
✓ M&E Results
   * Citizen Report Card
   * Community Score Card

Participatory Planning for Basic Services Provision
✓ Reflecting Citizens’ Priorities
✓ Adjusting to Budget Realities

Participatory Implementation of Basic Services Delivery
✓ Joint Monitoring

Participatory Budgeting for Basic Services
✓ From Own Revenue
✓ From Federal Allocations

Typically, CSOs conduct baseline surveys to understand the socio-economic condition of the community, and also collect data on the service sector budget and staffing levels, service standards. CSOs also collect additional information on service providers’ service delivery strategy, operation and management and complete input matrices. This baseline data and the input matrix are reviewed and validated with service users (participatory problem analysis/assessment). Second, as indicated in earlier chapters, service users/communities discuss among themselves the service delivery status and problems before rating the performance of the service providers. At the same time, service providers also self-assess their performance. Third, the service delivery problems are discussed between service providers and users and joint service improvement plans are developed (participatory planning). Fourth, the budgeting for implementing the service improvement plans/action plans is estimated jointly between service providers and service users (participatory budgeting). The budget includes expenditures for material, human
resources and other running costs. In many pilot sites, the community contributed material and labor. Fifth, the plan is implemented jointly (participatory implementation) with the SAIC overseeing the implementation of the Joint Action Plan. Sixth, progress in implementation of the Action Plan is monitored and evaluated jointly by service users and the service providers. In addition service delivery improvements are assessed jointly using a combination of tools (participatory performance evaluation). Results of the assessment are discussed and then fed into the next cycle of service improvement planning.

129. Based on survey results, and feedback from key informants and focus group discussants, the social accountability tools are ranked as high, medium and low. The final scores are presented in the table below:

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Community Score Card</th>
<th>Citizens Report Card</th>
<th>Participatory Budgeting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Simplicity</td>
<td>High</td>
<td>Low</td>
<td>Medium</td>
</tr>
<tr>
<td>Efficacy</td>
<td>High</td>
<td>High</td>
<td>High</td>
</tr>
<tr>
<td>Appropriateness</td>
<td>High</td>
<td>High</td>
<td>High</td>
</tr>
<tr>
<td>Inclusion</td>
<td>High</td>
<td>Low</td>
<td>Medium</td>
</tr>
</tbody>
</table>

4.2 Approaches

130. The ESAP implementation approaches/steps are summarized in Table 1.1. Effectiveness of these approaches is assessed using the following indicators.

- Capacity building requirements, i.e., training in using the social accountability tools and practices
- Targeting of woredas and kebeles
- Adoption of rights-based approach, i.e., citizens’ demanding for better quality basic services as a matter of their constitutional rights
- Use of interface meeting
- Implementation of monitoring and evaluation systems

131. The EDC team has encountered many project coordinators, facilitators and moderators that said they were given adequate training that enabled them to train communities and service providers on how to use the selected social accountability tool and to demystify the targeted service sectors. The lead CSOs and their implementing partners have conducted a series of awareness creation workshops for their project implementation staff including project coordinators, community mobilizers and facilitators. They have also provided capacity building and awareness trainings to local government officials and service providers.

132. The EDC team has also encountered, in some sites, facilitators and project coordinators with insufficient understanding and capacity to implement the social accountability tools. For example, in Selga 24 and Belmili, Assosa, and Gandaqore (Kebele
04) in Dire Dawa the community facilitators had no clue when asked about their awareness of the social accountability objectives and concepts. Likewise, the focus group discussants did not respond to questions relating to social accountability. For instance, in Gandaqore, they could only discuss what they had done to get the water point fixed, fenced, kept clean and protected from vandals.

133. **As noted in Chapter 3, CSOs/IPOs have built social accountability capacities of government officials and elected representatives.** CSOs/IPOs have provided awareness creation workshops on social accountability to concerned government officials and service department officers, mainly at the woreda and kebele levels. As understanding and consensus is built at the woreda administration level, the Deputy Woreda Administrator in most pilot areas, served as the main actor and directed kebele administrators and service offices to provide full support for the implementation of the pilot social accountability project. The EDC team noted that *increased understanding of social accountability by woreda officials boosted the effectiveness of ESAP*. For example, in Kombolcha Woreda, East Hararghe and Zwaye Dugda Woreda (Oromiya), Misha Woreda, Hadeya Zone the woreda administrators’ involvement was pivotal for follow-up and effective implementation of Joint Action Plans.

134. The targeting of woredas was mostly based on the CSOs/IPOs established relationships with the woreda government officials and service providers. However, selection of the pilot kebeles was based on a participatory approach using need and critical service deficiency problems as key identification criteria. Generally, pilot kebeles were selected at the woreda-level social accountability sensitization workshops.

135. The EDC team has also encountered evidence that suggests that CSOs with sufficient capacity to implement social accountability initiatives can succeed in woredas where they have never worked in before. For instance, the CSO, Action for Environmental Public Advocacy (AEPA) was found to have implemented the pilot project successfully, in the agricultural sector in Misha Woreda, Hadiya Zone where it had not worked in before. Focus group discussants, citizens and service providers in Abushura and Duna Gemedo kebeles indicated that AEPA had explained to them their rights and entitlements and how to rate the performance of the service providers. This improved their ability to negotiate for improved services with the service providers at interface meetings. What is interesting is that the interface meetings took place twice. The first interface meeting took place at the start of the pilot project and the second interface meeting took place six months later. At the first meeting the agriculture department officers and staff were given low ratings by the community. Six months later they received very good ratings from the community reflecting improvements in service delivery performance as a result of progress in implementing the agreed on reform agenda/action plans.

136. A key approach used by CSOs/IPOs is to (a) conduct baseline surveys or situation analysis to understand the economic and social problems of the target community and (b) gather data for Input Tracking Matrices for the targeted sectors. The Input Tracking Matrix provides information on the sector’s inputs (i.e., staffing, equipment, supplies, etc.), budgets, expenditures, benchmarks and entitlements. CSOs/IPOs introduced social accountability objectives and principles to the community using rights to basic services as entry point. Rights to basic services were discussed while reviewing and discussing the Input
Tracking Matrix. These discussions were found by majority of focus group discussants and key informants to be empowering because for the first time many of them got clear and detailed information on the sector and their rights and entitlements. The EDC team did meet with several key informants and focus group discussants that said, “At first we were reluctant to participate for fear of annoying the local officials. However, after the NGO explained that this was about our constitutional rights to receive adequate basic services we changed our minds and begun to participate in all meetings and trainings”.

137. The EDC team however found that in some sites the Input Tracking Matrix was not always completed nor communicated to citizens. For example, in Gandaqore (04 kebele), Dire Dawa, the Catholic Harargie Secretariat (CHS) facilitator had no information about the Input Tracking Matrix. In turn, the community he worked with was also unaware of their constitutional rights to quality public basic services and could not recall the objectives of the social accountability project.

138. From service providers’ perspectives, the EDC team also found incidents where service providers were resistant to interface meeting with service users fearing dismissal from their jobs. However, the resistance was overcome after the CSO/IPO clarified the purpose of the interface meeting as being strictly service enhancement interaction with service users and not a personal attack on service provider department staff.

139. According to key informants, CSOs/IPOs in many pilot sites used their established working relationships and good will to organize interface meetings between service providers, local government officials and service users. In other cases regional and woreda administrators had to intervene and persuade service providers to participate in the interface meetings. And in some cases interface meeting deadlocks were broken by interventions of regional or zonal officials.

140. As discussed elsewhere interface meetings were considered by many service providers and users as breakthrough platforms which resulted in mutually-agreed service delivery performance reform agendas and action plans. In Shinelle, Somali the health post staff said, “for the first time we learned about the needs, priorities and preferences of citizens and what we have been doing wrong. All along we had assumed we were doing our jobs and providing good service with the resources given to us.”

141. Majority of CSOs/IPOs had established Social Accountability Implementation Committees (SAIC) to monitor and ensure implementation of the Joint Reform Agendas and Action Plans19. These SAICs consisted of community representatives and service providers. In many woredas these SAICs have disbanded at the completion of the pilot project in June 2009 for lack of payment of per diem and lack of coherent exit strategy20. In some woredas and kebeles they continue to meet and follow-up with the implementation of the action plans. The EDC team observed that in Lagahare Kebele, Dire Dawa where the SAIC is

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19 Other names used included: Joint Monitoring Committee (JMC), Social Accountability Committee (SAC), Citizens Monitoring Group (CMG), and Technical Task Force (TTF)

20 Payment to community members for participation in meetings, designed to ensure the poor do not have to spend from their pocket, may be unsustainable in the long term, as participation gets linked to monetary gains. Effort need to be made to ensure community groups feel sufficiently involved in the process of making governments work for them through a gradual withdrawal of monetary incentives.
composed of representatives of Community-based Organizations (CBOs), Iddir and service department representatives, the SAICs continues to meet, monitor and follow-up on the implementation of the action plan. Similarly in Shinille, Somali, where the community has assumed ownership of ESAP, the SAIC, composed of community and service provider representatives continues to meet and ensures the implementation of the action plan. In Sofi, Harari, however, the SAIC could not fulfill its duties because the service provider refused to work with the SAIC saying that it was not a registered entity with the government and thus had no legal mandate.

4.3 Actors

As summarized in Table 4.2 and elaborated in Chapter 5, several actors played roles in the piloting of ESAP. While the Steering Committee at the national level provided overall guidance and direction to the project, the Managing Agent provided administrative and coordination support to the 12 lead CSOs and their implementing partners, including the provisioning of capacity enhancing training workshops, study tours and periodic experience sharing workshops. Regional, Zonal & Woreda government officials provided impetus to the effective implementation of ESAP although the level of their involvement varied across regions. Of these structures, woreda administrations played critical roles. For example, at woreda level, the Woreda administrator chaired awareness creation workshops. There was also evidence of woreda administrators trained in both the GOE good governance package as well as ESAP trainings, were relatively more engaged than others. Similarly, sector officers that had exposure to the good governance package were more committed and responsive.

Regarding actors, the EDC team came across cases where regional and zonal officials participating in interface meetings, took quick actions to remedy service delivery deficiencies. For example, in Shenille, Somali, Limu Shay and Gembe in Gomma Woreda, Oromiya resources were reallocated to health posts to address service delivery deficiencies as well as to respond to citizens’ priorities. More staff was added, night shifts were established and in the case of Shenille, Somali, a vehicle appropriated by the Zonal administrator was returned to the clinic.

The EDC team has also encountered evidence that suggest involvement of elected representatives at the regional, zonal and woreda level was limited. For example, in Fantalle, (East Shoa) and Kombolcha, East Hararghe (Oromiya), Shinille, (Somali) and Hakim, (Harari), Assosa (Beni-Shangul Gumuz) the involvement of elected councils was minimal. However, their participation is crucial. For instance, participation of an elected regional representative in Sofi (Harari) resulted in the community getting a reactivated health station. As indicated by the community focus group discussants, after a community member who had participated in ESAP, and who was also a regional level parliamentarian, complained in the regional parliament meeting about a health station that was constructed in Sofi more than two years ago but had not functioned since completion, the regional government took action and the health station was quickly staffed and supplied with drugs and equipment and is now functioning and serving the people of Sofi.

CSOs played the key role of piloting ESAP. They provided capacity building training in social accountability and managed interactions between citizens and service providers. The
EDC team found evidence that CSOs/IPOs that continue to work in the pilot area on non-ESAP projects tended to give stability and continuity to ESAP. There is also evidence to suggest that CSOs/IPOs that have experience working in the social development activities (e.g., Jerusalem Children and Community Development Organization and Facilitator for Change Ethiopia (Jimma Town)) tend to provide supplementary resources and technical guidance to sustain the ESAP initiatives. The EDC team also finds that locally established and registered CSOs/IPOs tend to be effective because of their familiarity with the local situation (e.g., Derash Relief and Development Organization, ODA, ADA and REST).

146. Many focus group discussants and key informants have suggested that the scaling up of social accountability under a government led initiative may not be a good option; “the implementation of social accountability initiative should be by non-governmental organizations such as civil society organization. Incorporating the implementation of social accountability into the existing government structure will not work as it will get lost in the bureaucracy and it will water down citizens’ rights to demand improved services and to hold service providers accountable for their performance.”

147. The EDC team has found the participation of community and religious leaders crucial in mobilizing the community and promoting strategic alliances between Muslims and Christians as evidenced in Gomma Woreda, Oromiya and the federal city of Dire Dawa.

148. The evidence also points to the fact that more literate communities are more effectively engaged than semi-literate communities; and that the wealthier communities are relatively more engaged than poverty stricken communities.

**Table 4.2: Actors & Their Level of Participation**

<table>
<thead>
<tr>
<th>Actors</th>
<th>Level of Participation</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Steering Committee</td>
<td>Provided overall oversight and guidance on the implementation of the social accountability pilot project.</td>
<td>Delay in the disbursement of funds and contracting of the Managing Agent slowed the implementation of the pilot project</td>
</tr>
<tr>
<td>Managing Agent</td>
<td>Provided awareness creation workshops and capacity building training; provided support in the selection of CSOs; and was responsible for the implementation of the pilot project.</td>
<td>While it was able to introduce social accountability tools it failed in building CSO capacity on the use of participatory budgeting and giving guidance on the use of multiple tools on a given sector</td>
</tr>
<tr>
<td>CSOs/IPOs</td>
<td>CSOs and IPOs are the main actors that implemented ESAP.</td>
<td>Some CSOs had relatively stronger understanding of social accountability objectives approaches and tools as well as stronger project management skills</td>
</tr>
<tr>
<td>Regional Officials</td>
<td>Regional Officials participated in the Managing Agent sponsored sensitization workshops as well as at CSO held familiarization and completion workshops</td>
<td>In some regions, for example, in Somaliland &amp; Beni-Shangul Gumuz and SNPAR the participation of regional and zonal administrators was absent.</td>
</tr>
<tr>
<td>Zonal Officials</td>
<td>Similarly, Zonal officials have participated in regional and woreda level social accountability sensitization and familiarization workshops and some have attended interface meetings and made key decisions to resolve service delivery deficiencies in the pilot kebeles and sectors</td>
<td>In Fantalle woreda, for example, the zonal officials participated in the interface meeting between the Animal Health Clinic staff and the pastoral community and facilitated the resolution of service delivery deficiencies &amp; problems by assigning additional resources</td>
</tr>
<tr>
<td>Woreda Cabinet &amp; Elected Councils</td>
<td>Some woreda officials were key participants. They have participated in all stakeholders. They participated in self-</td>
<td>Woreda sector officers were key stakeholders. They participated in self-</td>
</tr>
</tbody>
</table>
Actors | Level of Participation | Remarks
--- | --- | ---
Organized meetings and trainings throughout the implementation process of ESAP. They have also participated in community mobilization and interface meetings. Woreda officials have also taken quick actions at interface meeting to resolve service delivery deficiencies by realocating human and material resources. | | Evaluation exercises as well as in interface meeting with service users.

Kebele Cabinet & Elected Councils | Kebele officials in the target kebele have also participated in all ESAP activities and were key for mobilizing the community to participate in ESAP. | Kebele officials were key participants and they helped in monitoring and ensuring action plans developed at interface meetings are implemented.

The Regional and Woreda Bureau of Finance & Economic Development (BOFED) | BOFED officers at regional and woreda level have participated in regional and/or woreda level ESAP sensitization workshops. At the woreda level, BOFED had actively participated in posting of kebele and sector budgets and also participated in interface meetings. | Participation of BOFED at the woreda level appears to be low and varied from woreda to woreda.

The Regional & Woreda Bureau of Capacity Building (BOCB) | While both the Regional and Woreda BOCB officers have participated in ESAP sensitization workshops, it was the Woreda BOCB that had actively participated during the implementation of ESAP. In many localities the head of the Woreda BOCB was also the Deputy Woreda Administrator. | In some woredas where the head of BOCB is also the deputy woreda administrator, he/she has taken ownership of ESAP and is actively involved.

Community-Based Organization (CBOs) | CBOs were active participants in ESAP. In some cases they served as implementation partners to the lead CSOs (e.g., Tigray Women’s Association was an IPO). | In Dire Dawa, Lagahare Kebele a strong Iddir based community group continues to monitor the implementation of the Lagahare High School Action Plan developed in the interface meeting with the education department.

Religious & Traditional Leaders | Community leaders were active participants in ESAP. They participated in the mobilization of the community. | In Dire Dawa and Gomma Woreda the involvement of religious leaders was critical in creating community harmony and the development of strategic alliances to resolve service delivery deficiencies in these communities.

### 4.4 Conclusions

**Tools**

ESAP has allowed Ethiopia to test selected social accountability tools including Community Score Card, Citizen Report Card and Participatory Budgeting. The exercise of rating service providers’ performance was an empowering experience to most ESAP participants. It appears that:

- Social accountability tools that are simple to use, promote discussions, debates and dialogue among community members and service providers such as the Community Score Card have better acceptance by citizens as well as by service providers in both urban and rural communities.
- Cost of administration of tools has also been a factor in the choice of social accountability tools. As a low budget tool Community Score Card was the most used tool.
- CSO capacity has also been a factor in the choice of tools. Most CSOs did not choose to use participatory budgeting tools because of the technical skill required in demystifying budgets in the absence of Financial Transparency & Accountability tools which were under production during the piloting of ESAP.
- Both Citizen Report Card and Participatory Budgeting have potentials for both nation-wide and region-wide resource allocation and service improvement policy discussions and dialogues. Civil society can use these tools to solve service delivery problems beyond the local level by influencing national and regional level resource allocation decisions and service delivery policies. However, a limited number of CSOs used them and only at the local level.
- Government budget inflexibility has also been a factor for not electing to use participatory budgeting tools.
- All actors need capacity and continued training to use social accountability tools effectively and efficiently and also to internalize and institutionalize social accountability practices. Onetime training is insufficient.

**Approaches**

**150. ESAP has also allowed Ethiopia to test selected social accountability approaches and mechanisms.** Most participants see the use of Input Matrices and Interface Meetings between service providers and citizens as breakthrough approaches.

- The use of baseline surveys to assess the condition of the target community and the development of Input Tracking Matrices were important vehicles for explaining to Social Accountability Participants their rights, entitlements and the challenges to receiving or accessing quality basic services.
- The systematic breakdown of entitlements and the level of input at the service provider level created service users’ understanding of their entitlements and created awareness of what they can expect from the service providers while at the same time giving them awareness on how to effectively use these services.
- Interface meetings, considered as breakthrough platforms by ESAP participants, provided constructive, collaborative and participatory interactions between service providers and service users. The resultant Joint Reform Agenda/Action Plan countersigned by both service providers and service users demonstrate responsiveness and accountability of service providers and empowerment of service users.
- Interface meetings between service providers and users should be conducted more frequently, perhaps quarterly, to maintain the momentum and to realize tangible basic service delivery improvements, as in the case of Misha Woreda, Hadiya Zone, and SNNPR, which conducted two interface meetings over the life of the pilot project.
- The establishment of Social Accountability Implementation Committees composed of service providers and service users representatives to monitor and oversee the implementation of the Action Plans is a demonstration of real partnerships between the public sector and citizens in basic service delivery.
- Implementations of Action Plans have resulted in improved basic service delivery.
Actors

151. *The pilot social accountability initiatives have involved a variety of actors.*

- All actors and stakeholders have a crucial role to play in the success and sustainability of social accountability systems.
- Community members (beneficiaries) who have participated in ESAP have greater ownership in the process and are keen to participate in the improvement of the service facilities, e.g., schools, health centers & posts, water points, etc. for their benefits.
- Community members are eager to speak out and criticize the inadequate service delivery and to prescribe or suggest what they feel is best for them and suggest solutions on how to fix the problem.
- Service providers are more open to critical review and are prepared to listen to what the beneficiaries say about their service delivery performance.
- CSOs/IPOs, government officials and service providers, elected representatives, civic groups and citizens require continuous ESAP training and capacity building in order to deepen and widen the acceptance of and sustain social accountability initiatives.
- Participation of Regional, Zonal and Woreda government officials and decision makers including elected councils in social accountability initiatives is critical for deepening social accountability practices.
- Social Accountability Implementation Committees (SAIC) established at the community level to monitor and follow-up on the implementation of Joint Reform Agendas and Action Plans should be given full recognition by regional, zonal and woreda administrations so as to involve them more effectively and not to repeat the experience of the Sofi, Harari SAIC, which was rejected by the service provider as having to legal basis after the completion of the pilot project.

4.5 Lessons Learnt & the Way Forward

152. *Social Accountability tools such as Citizen Report Cards and Participatory Budgeting with far reaching impact need local technical capacity and adequate resources to work with.* Implementing CSOs/NGOs would need to have the requisite skills and capacity to train community-based organizations and citizens, as well as woreda and kebele elected councillors and service providers on participatory planning and budgeting. Participatory budgeting activities would also need to be integrated into the annual planning and budgeting cycle in order for citizens to have opportunity to influence basic service provisioning decisions of the local government.

153. *Use of multiple social accountability tools to rate performance of service providers and government policy-makers would result in systematic analysis of service delivery performance and enable the local government, service providers and the target communities to come up with practical and effective solutions.* The pilot activity has demonstrated that the use of Community Score Card at the local level has enabled citizens to identify service delivery deficiencies in their community. However, more robust outcomes are achievable had CSOs/IPOs conducted region-wide budget analysis and service standards comparisons.
154. Service delivery performance assessment interface meetings between service providers and citizens should be conducted regularly (i.e., quarterly) to facilitate institutionalization of social accountability. Regularly evaluating service delivery and reviewing service delivery deficiencies and updating the Joint Service Delivery Improvement Action Plans will (a) ensure improvements in the quality of basic services, (b) enhance community engagement with service providers and ownership of service facilities, and (c) regularize participatory service delivery performance monitoring.

155. Inclusion of regional, zonal and woreda level decision-makers from the beginning is crucial to sustain social accountability initiatives. High level decision-makers can reallocate resources and incentivize service providers to correct service delivery deficiencies quickly.

156. Initiatives such as social accountability require implementers that can be trusted by local government officials and community members. Bringing government actors and citizens to the table to discuss basic service deficiencies and service providers’ performance requires not only moderation capabilities but also trust.
In this chapter, we discuss the implementation arrangement adopted by ESAP. We also assess the adequacy of this arrangement in relation to meeting ESAP’s objectives, and the roles played by various actors at each level. The chapter concludes with recommendations on institutional arrangement that would need to be kept in mind for the optimal implementation of any social accountability initiative.

157. In accordance with the Project Appraisal Document (PAD), the Implementation Arrangement for ESAP was set-up at three hierarchical levels (See Figure 5.1). At the top of the hierarchy is the Steering Committee (SC) that provides guidance and oversight, while program coordination and management is given to a Managing Agent (MA), which reports to the SC. At the grassroots levels, the responsibilities to implement the pilot initiative are given to Civil Society Organizations (CSOs).

5.1 Steering Committee

158. The high level Steering Committee provides guidance and oversight to the MA, particularly on issues relating to policy and strategic direction. The specific functions/mandates of the Steering Committee could be summarized as follows:

- Provision of strategic direction and guiding the progress of implementation of PBS-Component 4;
- Endorsement of annual plans and budgets prepared by the Management Agent;
- Oversight of the Management Agency contracted to coordinate the implementation of Component 4;
- Review lessons learnt from piloting exercises, and provide directions as to how best practices can be replicated.

159. Following Project Financing Agreement with the World Bank and other Development Partners, the Steering Committee (SC) was established to give guidance and oversight to the pilot project. The Steering Committee consisted of three representatives from government, three representatives from the development partners and three representatives from civil society. Ministry of Finance and Economic Development (MOFED) was given the Chairmanship of the SC. The leadership of MOFED provided focus and directions for the implementation of ESAP and enhanced public sector acceptance and responsiveness. Development Partners provided the impetus for the introduction of Social Accountability International Best Practices. CSOs represented citizens’ perspectives. Generally, the SC has acted as the Client and/or owner of ESAP and thus has been very active in providing guidance and supervision for the whole operation as well as in making decisions on policy and strategic issues. The World Bank managed the multi-donor fund for the implementation of PBS–I Component 4, and acted as a Secretary to the SC.

160. The implementation framework for SC is to respond to the dynamic perspectives of the multi-stakeholders, that is, the government’s aim to achieve the MDG goals and the targets of PASDEP, donors’ expectations that their contributions to government’s efforts are effective and CSOs’ goals to supplement government’s efforts at the grassroots level. The
benefits of such joint ownership and implementation framework have contributed to the government’s strategy to meet the MDG goals and PASDEP targets and created synergy and common goals of all the stakeholders.

161. Indeed multi-donor funding has created delays in timely disbursement of the grant fund due to late release of contributions by different donors having different procedures. Such late release of funds caused further delays in start-up of ESAP.

5.2 The Managing Agent

162. Pursuant to the recommendation made in the Project Appraisal Document (PAD, May 6, 2006) to recruit an independent managing agent, outside government structure, with technical expertise and appropriate experience in project management and social accountability initiatives in basic services, to handle and ensure independent and efficient implementation of the overall management and coordination activities, GTZ-IS/CDC was recruited as a management agent (MA) through international competitive bidding.

5.2.1 MA’s Responsibilities

163. The expressed responsibilities of the MA included:
- Provision of technical assistance and capacity building, networking and support as needed to the implementing CSOs/IPOs
- Overall program coordination and provision of proper guidance and supports to the social accountability piloting CSOs/IPOs
- Promotion of learning processes through monitoring and evaluation reports
- Ensuring effective communication with the SC
- Coordination of preparatory steps, selection and contractual arrangements relating to the pilot initiatives as well as to the related M&E activities.
- Designing training and capacity building modules and conducting training sessions for CSOs/IPOs
- Collating and providing reports and publications on implementation activities of ESAP to the SC & relevant stakeholders
- Coordination of the assessment of experience sharing to learn from the outcomes of ESAP
- Taking the lead on overall program implementation and coordination of Component 4, as specified in the PAD, with the advice and endorsement of the Steering Committee
- Providing substantive direction, leadership and analytical guidance on the accountability initiatives included under Component 4 either directly or with the assistance of appropriate qualified consultant support

164. Our evaluation is, therefore, based on the above criteria. That is, as to whether the MA has fulfilled its responsibilities by providing, among others, an overall program guidance and support to the pilot social accountability project, like giving stewardship; linking C4 with

C1, C2 and C3; institutionalization of ESAP; building consensus among stakeholders; acting as an interlocutor; effective utilization of M&E information; and the provision of oversight and mentoring support.

165. GTZ-IS organized the Technical Selection Team in the selection of the grantee CSOs and signed Memoranda of Understanding (MOU) with 12 grantee CSOs. It conducted various sensitization and awareness creation workshops in Addis Ababa and a few major regional cities to the grantee CSOs/IPOs, senior regional and woreda government officials and other stakeholders. Similarly GTZ-IS provided several training and capacity building workshops on how to select and apply social accountability tools, organize and facilitate the interface meetings to the CSOs/IPOs using consultants. In addition, it organized a study tour for CSOs/IPOs to Durban (South Africa) to enable them to gain experiences on social accountabilities.

166. In addition, GTZ-IS designed M&E and Financial reporting templates and procedures for the CSOs/IPOs to report to it. GTZ-IS provided training and built capacities of CSOs/IPOs on how to use these templates in preparation of regular performance and financial reports. It was thus able to obtain M&E and financial reports from the CSOs, which were summarized and submitted to the SC and the World Bank. Apart from this, GTZ-IS established an ESAP website to be used as a reference on Social Accountability, and for dissemination/exchange of information and communication to facilitate learning and knowledge and experience sharing and capacity building to and/or among the CSOs/IPOs and other stakeholders.

167. GTZ also organized closing workshops at six major regional cities (Adama, Jimma, Hawassa, Bahir Dar, Mekele and Dire Dawa) that were opened by the Chairman of the SC and attended by Deputy Regional Heads of States and Mayors and other senior regional and woreda officials.

5.2.2 MA’s Stewardship to the Program

168. The MA has made efforts in providing guidance and directions to the implementing CSOs/IPOs. It did not however give them adequate guidance and directions in designing entry, sustainability and exit strategies, and model organizational structures for the implementation of the social accountability initiatives. As a result, different CSO/IPOs followed their own entry approaches and exit strategies as well as organizational structures.

5.2.3 Linking C4 with C1, C2 and C4

169. Similarly, the MA did not give adequate guidance and directions to CSOs/IPOs on how to link component 4 (C4) to the other components of PBS-I, like C1, C2 and C3. For instance, several woreda coordinators and kebele facilitators, woreda and kebele sector officers, with the exception of the woreda finance and economic development officers, could not understand what PBS is about or could not explain clearly the link between ESAP and PBS. Understanding the link should have helped to create synergies across sectors.

170. Parallel conversation with the GOE and the Steering Committee with tangible results to increase funds for hardware components of PBS should have been made. That is, efforts should have been made to link C4 with C1 and C2 where ESAP has shown positive interests and ownerships both by citizens, local governments and CSOs/IPOs at interface meetings
that led to joint reform agendas and action plans. Such efforts could have probably raised strong consensus building and awareness in setting up responses to get additional resources allocation by MOFED and development partners. Similar efforts could be made to create discourse with the GOE on allocation of additional resources to Social Accountability activities in the next phase. Indeed linking ESAP with C3 was impossible as the Templates for C3 component were approved by MOFED after the completion of ESAP.

5.2.4 Institutionalization and Sustainability of ESAP

171. The issue of institutionalization of ESAP and sustainability might have not been raised during project appraisals. It was nevertheless mentioned in the Inception Report of the MA "responding to the needs of institutionalizing SA by none state actors at woreda level ....... Lead to rapid demonstrable benefits with prospects of developing into sustainable activities" [Inception Report May 2007 Page 6]. Similarly requirements for sustainable strategy were made on the CSOs/IPOs in their selection." Grantee CSOs shall develop a strategy how to sustain the social achievements ....Grantee CSOs shall try to reach an agreement with regional/local governments on how to sustain the approaches ( incl. budget)* [GTZ Proceedings Report ....Annex III]. The MA did not, however, provide directions and guidance to the CSOs/IPOs on how to institutionalize and sustain ESAP. As a result each CSOs/IPOs followed their own different modalities for institutionalizing and sustaining ESAP mostly on an ad hoc basis by organizing committees such as Social Accountability Implementation Committees (SAICs)\(^22\).

5.2.5 Building Consensus among Stakeholders

172. The MA did not give guidance and directions to the CSOs/IPOs on how to build consensus among all relevant stakeholders of ESAP, particularly on entry approaches and level and types of institutions and officials to be involved. As a result, there were some cases where relevant government institutions at regional and woreda levels were left out from participation. For instance, the BOFED and WOFED and in some cases the woreda administrations and cabinet members, members of woreda councilors, sectoral heads other than the particular sector head/staff (education/water etc.) were not involved. These relevant officials being those involved in allocation of block grant to the PBS, the benefits of participation and spreading the effects of ESAP to other sectors of the woreda/sub-cities was a lost opportunity. For example, AFSR/SWDA/ORIFFS dealt only with the Education Departments in the Hayik Dar Sub-city (Hawasa SNNPR) and Arada sub-cities (Addis Ababa)/ and Sebeta Hawas Woreda (Finiffinne Oromiya Zone), respectively. Similarly Zema SeF/Maedot/Water AID involved only the Water & Sanitation Department of Addis Ketema Sub-city (Addis Ababa), leaving out the whole Woreda Administration and councilors and the sub-city management.

5.2.6 MA’s Effectiveness as Interlocutor with GOE, Donors, CSOs/IPOs et al

173. Despite efforts made to successfully complete ESAP, one could not find evidences that the MA brought messages from service users, service providers, CSOs/IPOs, elected councilors and local governments to the SC, as well as download messages or decisions to the grassroots levels (service users and providers, CSOs/IPOs and elected councilors and local government officials). That is, there had not been any feedbacks to try to influence the

\(^{22}\) SAIC is also know under different names like SAC, CMG, JMC, TC, TTF as disussed under Section 4.2.
decision-makers and or impress the service users and providers and local government actors. Such feedback up and down the institutional structure is critical for effective implementation of ESAP and removal of challenges and risks that could arise.

174. The MA assisted some CSOs/IPOs with their disputes and conflicts relating to the implementation of ESAP. For instance the MA was instrumental in resolving the conflict between the CSO (DRDA) its IPOs in Shinille, Somali. In the case of Zema Sef which terminated its operation in the Guraage zone (SNNPR) due to failure to renew its license and the involvement of the woreda coordinator in political controversy/diatribe the MA could not resolve the matter. Similarly, regarding the stoppage of ESAP implementation in Beni-Shangul Gumuz due to border conflict with Oromiya region, the MA could not resolve the problem since this was not within its mandate. ESAP was re-started when the border dispute was resolved by the intervention of the federal government.

175. The contribution of the MA to conflict resolution and dispute settlements was generally considered minimal by several IPOs. For instance, some big CSOs (like ADA and REST) might have marginalized their IPOs after securing the grants, in terms of allocation of promised funds and/or fully involving them in implementation of the project in preference to doing it themselves. Because of lack of follow-up by the MA smaller IPOs remained marginalized by their larger lead CSOs.

5.2.7 Effective Utilization of M&E Data and Information

176. As explained earlier, the MA developed M&E templates, trained and capacitated CSOs/IPOs to regularly prepare and submit the M&E reports. That was done and the MA was able to summarize the reports and submit to the SC. To some extent the MA was making field visits, if not regularly, for spot-checking on implementations and capacity building. However, there is no evidence that any Aide Memoires were left behind with the visited CSOs/IPOs to show for spot findings and actions taken in terms of quality checks or supportive supervisions and guidance communicators to CSOs/IPOs. Similarly we could not find evidences that their field reports and findings were sent down as a feedback to the CSOs/IPOs. The EDC team also did not encounter evidence that the MA had given any feedback on monitoring and evaluation reports of the CSOs/IPOs. In other words, we could not find any evidence that the M&E results were effectively utilized to influence the decisions of the SC nor the outcomes of ESAP.

5.2.8 Oversight and Mentoring Support

177. Generally there was lack of adequate and proper oversight and mentoring support by the MA to the CSOs/IPOs. For instance, no regular follow-ups to ensure appropriate implementation procedures and guidance were being followed. Field visits were not regular and mostly limited to the grantee CSOs and occasionally for specific purposes, such as for trouble shootings. Only one grantee CSO (REST) appreciated the technical supports and mentoring given to them by the MA through visiting them quarterly during the implementation of the project. Other actors, however, stated that the provision of oversight and mentoring supports they got from the MA was occasional or minimal. This might be attributed to the shortage of time, as preparation for starting ESAP (selection, training and capacity building of CSOs) and the delay in releasing the fund by the World Bank, which took more time, and thus left less time for actual implementation of the pilot
Although the piloting of ESAP was to start on January 2008, it did not in fact begin until May – June of 2008 partly due to staffing needs of CSOs and their implementing partners and due to delay in disbursement of funds by the World Bank.

178. Apart from this, the various reports prepared by the MA based on field visits and performance and financial reports submitted by CSOs for submission to the SC were too positive without any critical evaluation to find out whether the project implementation was going according to guidelines or not, and what additional oversight, mentoring and technical support might be needed. That is, the MA did not show and/or indicate problems and constraints nor gave alternative suggestions and critical assessments in its reporting to the Steering Committee.

5.3 CSOs/IPOs

179. Based on the PAD (2006) and the Scoping Study for the Elaboration of Component C4, the nature and rationale of using CSOs for implementing the pilot initiatives are:

- SA builds cooperation, enables dialogue and develops better relationships between government and CSOs – between leaders of local governments and CSOs at local levels by adopting less confrontational instruments/approaches (Scoping Study page 38);
- Component 4 – ESAP aims at strengthening the use of SA approaches by citizens and CSOs as a means of making basic service delivery more effective, efficient, responsive and accountable (PAD 2006 and Scoping Study page 37);
- Citizens and CSOs led approaches to increase responsiveness and downward accountability strengthens the demand side of governance, that is, emphasis is placed on building the necessary “bridges” between supply and demand (Scoping Study page 35);
- Component 4 – ESAP also complements many of the public sector capacity building activities envisaged under the government’s PSCAP, District Level Decentralization Program (DLDP) and Good Governance Packages (Scoping Study page 35);
- Effective partnership arrangements between local governments, CSOs and citizens’ groups under C4 – ESAP is essential for the success of activities envisaged and for CSOs efforts to catalyze greater local level accountability in service delivery and resources provided via the inter-governmental fiscal transfer system (PAD page 17).

It is thus in relation to the above context that we assess the performance of CSOs/IPOs in implementation of the pilot social accountability initiative.

5.3.1 Selection of the 12 lead CSOs

180. Selection of the 12 lead CSOs was based on their technical proposals, which CSOs got prepared by outside consultants, and interviews conducted with each of them. Although, there was no proper and adequate spot-checking and due diligence conducted on their organizational structure, staffing and institutional capacity to manage such a complex project they were able to perform well. The EDC team, however, believes better results would have been possible had they had sufficient experience implementing social accountabilities and good governance and civil service reform initiatives.

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23 Janelle Plummer and Mohamed Mussa (2006), Scoping Study for the Elaboration of Component C4, December 10, 2006 by
5.3.2 Piloting of ESAP by CSOs/IPOs

181. As mentioned earlier, developing and designing standard institutional/implementation arrangement was left to each CSO/IPO. While this has advantages in terms of localizing the agenda, developing/designing a model or standard implementation arrangement by the MA is better for consistency of approaches and outcomes and scale; with contextual variations made as per need within the model. In the absence of such model, CSOs/IPOs followed their own implementation arrangements, which evolved into a generalized organizational structure shown in Figure 5.1 below.

182. As shown in Figure 5.1, each of the lead CSOs established a project coordination/steering committee (SC-CSO) composed of the Executive Director of the lead CSO as a chairman and the Executive Directors of IPOs as members; while ADA, WAT and REST established project steering committees (SC-CSO), chaired by the Deputy Directors and the staff of project management units as members. In the latter group the IPOs were excluded from the SC-CSO. The functions of SC-CSO were to supervise and coordinate the overall operations of ESAP and liaison and report to the MA.
Figure 5.1: Organizational Structure for Implementation Arrangement ESAP in Relation to the Existing Government Structure

SC = Steering Committee  
MA = Managing Agent  
CSO = Grantee Civil Society Organization  
SC-CSO = Steering Committee of CSO  
PTMC = Project Technical Management Committee  
IPO = Implementing Organizations  
PC = Project Coordinator at Head Quarters of CSO/IPO  
WPC = Woreda Project Coordinator  
KF = Kebele Facilitators

CMG, SAC, TTF, TC, SAIC, CDC, Citizens

Zones in Tigray & Amhara (with 3 exception) have no executive, legislative and judiciary powers  
CMG = Citizen Monitoring Group  
TTF = Technical Task Force  
TC = Technical Committee  
SAC = Social Accountability Committee  
SAIC = Social Accountability Implementing Committee  
CBO = Committee Based Organization  
FGE = Federal Government of Ethiopia

--- Formal links (direct functional responsibilities)  
--- Informal links (non functional direct communication and coordination)
183. Project Coordinator (PC) was hired by each of the CSOs and IPOs at their head quarters. The functions of each project coordinator at the headquarters of CSO/IPOs were to guide, supervise and support their respective woreda coordinators and facilitators including M&E and follow-up of the whole implementation of ESAP being undertaken by their respective organizations including giving training and capacity building, passing/sharing experiences disseminated by other CSO/IPOs and the MA.

184. Project Technical Management Committees (PTMCs) were established at the headquarters of the lead CSOs. Members of the PTMC were composed of project coordinators at each IPO and CSO chaired by project coordinator of the lead CSOs who also acted as a secretary for the PC-SC. The functions of PTMCs were to assist the PC-SC in coordinating, follow-up and project M&E.

185. In the case of ADA, WAT and REST, no PTMCs were established. All the implementing CSOs/IPOs recruited/assigned and placed woreda project coordinators (WPCs) at every woreda selected for ESAP. The woreda project coordinators liaised with woreda administration/government, woreda relevant sectors, and coordinated the whole processes of implementation exercises of ESAP including organization, selection, recruiting and the training and capacity building of kebele facilitators, as well as selection, training and capacity building of kebele Citizen Monitoring Groups (CMGs)/SAICs\(^24\). The kebele facilitators/moderators as supported by the woreda coordinators were responsible for organizing and acting as moderators at the Interface Meetings, recording the joint reform agendas/action plans as well as monitoring and reporting the implementation of plan of activities. The kebele facilitators were mostly selected by the communities/kebeles/with consultation of the woreda administrators. In some cases the woreda coordinators have also acted as moderators at the interface meetings.

186. At implementation levels, different CSOs/IPOs established and trained different committees to assist and participate in the implementation of SA at Woreda and community levels. For instance, REST, ADA, WAT and RCWDA established Woreda Steering Committees (WSC) in all ESAP woredas chaired by woreda administrators or woreda deputy administrators who are also head of woreda capacity building. The WSC comprised woreda sector heads. In the case of RCWDA, the WSCs consisted of woreda sector heads, and representatives from kebele and woreda councilors, and representatives of users and providers from all the ESAP kebeles/ or representatives from Citizens' Monitoring Groups.

187. Similarly at each pilot area/site, Citizen Monitoring Groups/Social Accountability Implementation Committees were established and trained in both awareness creation and capacity building to participate and assist in the implementation of ESAP. Citizens selected members of the CMGs/SAICs in some cases after the Joint Reform Agenda/Action Plans were formulated and in other cases at the awareness creation and induction workshops.

188. In all cases members of such groups/committees were fairly represented from both the users and providers, including CBOs, MBOs and other civic societies/associations (like Iddirs, teachers’ associations, farmers’ cooperatives, youth and women

\(^{24}\) CMGs/SAICs are also known under different names like Technical Task Forces (TTFs)/Technical Committees (TCs)/Social Accountability Committees (SACs)/Community Development Committee (CDC)/Community Based Development Organizations (CBDOs) .
Box 5.1: AEPA Successful Work in Unfamiliar Woreda

CSCs were applied twice, the first at the start of the project and the second at the end of the project. The woreda administrator chaired the interface meetings. The results of scoring both by the service users and providers changed from an average bad at the first interface meeting to an average of very good at the second interface meeting. The woreda cabinet and elected representatives were very much impressed by the results that they allocated 30% of the woreda recurrent budget (other than salaries) for the purchase of veterinary drugs and distribution because animal diseases were identified as first priority issue. Many improvements like timely delivery of fertilizers and selected seeds, and regular visits by DAs were shown. Farm outputs and livelihood in the participating kebeles improved. In introduction of growing vegetables by women at the backyards has improved diets and income from sales of the produces. The woreda administration is using these kebeles as showcases or success stories to the remaining 32 kebeles in the woreda. Although the IPO (AEPA) left the woreda immediately after completion of the pilot project, the impact of the ESAP is nevertheless still working and remembered.

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189. At the end of the completion of ESAP, each CSO/IPO established Social Accountability Implementation Committees (SAICs) and gave them special training and capacity building with deliberate efforts to enable them to take over the ESAP and continue its activities. SAICs included all sections of the users and providers, that is, fairly representative. Some CSOs/IPOs, like RCWDA formally handed over the ESAP to SAICs and the woreda steering committees (WSCs), which assisted them in the implementation of ESAP after giving them additional training.

190. With a few exceptions of one CMG for water and sanitation in Arata Chufa kebele, Zeway Dugda Woreda- Oromiya (RCWDA), one SAC for agriculture in Misha woreda in Hadiya Zone (SNNPR), one SAIC (CBO-Iddir) at the Lagahare High School in Dire Dawa town, Abdi Boru School in Mettu (IWCIDA), Limu Shay Health Center in Goma woreda (EIFDDA/EDA), and Hermatta School in Jimma town (FCE), none of the woreda steering committees (WSCs) nor SAICs/SACs/JMCs/CMGs have ever met and followed up ESAP activities and made reporting since the completion of the pilot project. As a result, ESAP lost its momentum and the enthusiasms it created during its implementation phase. The main reasons for lack of momentum or loss of continuity include the following:

- Lack/absence of institutional responsibility and ownerships. That is, all the WSCs, CMG/Technical Committee or Task Forces etc. were established on an ad hoc basis;
- Members were paid per diem during implementation phase and probably expected further incentives, thus in the absence of any incentive, they have tended not to continue;
- Several frequent transfers of service providers personnel;

191. Piloting social accountability by CSOs/IPOs in their specialized sectors and their previous/existing woredas enhanced easy entries and acceptance by woreda officials and the community, because “trusting relationships between local NGOs and woreda developed from long term NGO engagement in supporting woredas in the provision of basic services”25. However, such advantages have also blurred the specific tasks of ESAP activities with their normal activities as service providers. For instance, in kebeles 08/09/18 and 16/17 water & sanitation (Zema Sef/Maedot) in Addis Ketema sub-city, and Dima Gurada School

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25 Ibid, Scoping Study to the Elaboration of Component 4, pages 37 and 42
in Sebeta Hawas (AFSR/SWOA) Oromiya, where CSOs/IPOs have been providing various development and extension services, it required a lot of effort to make citizens recall the objectives of ESAP, and when they recalled, they attributed ESAP to the CSOs/IPOs.

192. On the other hand, AEPA/IWCIDA had successfully implemented ESAP in three kebeles in Misha Woreda (Hadiya Zone, SNNPR), where it had never operated before. ESAP was accepted by the woreda administrations and participating citizens. The successful results of this particular case are discussed in Box 5.1.

193. The fact that WSC, CMC and Technical Committees/SAC/SAIC included both service users and service providers may jeopardize the sustainability of social accountability by blunting or preempting citizens from exercising their rights and holding service providers accountable. Thus, to avoid this risk, citizens should be sufficiently empowered not be overpowered or overawed by the service provider representatives. Indeed both service users and providers could make interface meetings and establish joint reform agendas and action plans with defined responsibilities and time lines; and strategic alliance in fund raising to fill immediate gaps and solve problems, but the rights of users to demand and obtain adequate and quality basic services should remain intact. Similarly the accountabilities and responsiveness of service providers to provide effective and efficient basic services should remain mandatory.

194. Another success story is the Meskerem Primary School in kebele 15/16 Arada sub-city, Addis Ababa (see Box 5.2). Soon after the completion of ESAP in the school, a children’s’ parliament was established and students who participated in ESAP were elected to the parliament. This was followed by the introduction of BPR to the school. The Teachers Association was also strengthened as the leadership was taken over by the ESAP participants. This success story is attributed to the combined application of ESAP, BPR and children’s parliament.

195. There have been no links established between ESAP and Citizen’ Complaint Hearing Offices/Secretariats, though such offices and suggestion boxes have been established in every woreda.

196. According to the MA and some lead CSOs, the duration of ESAP was to be 18 months. However, almost the first six months were used up for preparation, and also due to delay in releasing funds to the CSOs. It appears that the social accountability was piloted for 10 to 12 months only. The lack of adequate lead-time for preparation and the pressure to complete the pilot on or about the target date of June 30, 2009, may have prevented the MA as well as the CSOs/IPOs from testing multiple social accountability tools and from developing and implementing sound sustainability and exit strategies.
5.4 Conclusions

197. **ESAP has demonstrated that the three-tier implementation arrangement can work in the implementation of social accountability initiatives.** The MA provided basic project management like coordination of preparatory steps, selection and contractual arrangements relating to the pilot initiatives, signing MOU with the grantee CSOs, provision of sensitizations workshops to government officials, CSOs/IPOs; training and capacity building to the CSOs/IPOs in the use of social accountability tools, organization of interface meetings, preparation of financial and progress reports as well as M&E activities.

198. The MA did not, however, give adequate and proper guidance and directions to CSOs/IPOs for designing entry and sustainability strategies. It also did not provide or suggest a typical organizational structure for the effective implementation of such complex project. No guidance was given on how to institutionalize and sustain ESAP, or on how to build consensus among all stakeholders. The roles played by the MA as (a) an interlocutor among GOE, donors and CSOs; (b) in influencing Steering Committee agendas by effectively using the M&E information, and (c) in providing oversight and mentoring support to CSOs/IPOs were considered weak.

199. The EDC team feels that the model for implementation arrangement, particularly giving overall responsibility of such multi-faceted initiative to an organization with limited range of expertise may have led to ESAP’s weaknesses such as lack of coherent guidance for entry, institutionalization, sustainability and exit strategies and limited training and capacity building in participatory budgeting.

200. CSOs/IPOs have successfully implemented ESAP, particularly in organizing and testing the SA tools and approaches, conducting interface meetings and following-up on joint reform agendas/action plans. However, some of them failed to include relevant and key woreda officials, like woreda administrators, cabinet members and elected representative who are responsible in budget allocation. They dealt only with sector heads of the woredas and sub-cities.

201. In the absence of sustainability strategies, the CSOs/IPOs established different ad hoc committees to follow-up ESAP activities. As a result, ESAP lost its momentum and the enthusiasm it initially created.

202. The time given to implement ESAP was 18 months. However, the CSOs/IPOs in the preparation for project implementation spent half of that time, and a further delay occurred as a result of delay in disbursement of funds by the World Bank. Thus ESAP was practically implemented in almost nine months, which created pressures on the MA and CSOs/IPOs to complete the pilot within the allotted time.

5.5 Lessons Learnt & the Way Forward

203. **Giving the overall responsibilities of such complex project to a Managing Agent with limited expertise may have produced sub-optimal results.** Giving the overall responsibilities of implementation arrangement to an MA with limited disciplinary expertise should be reconsidered. Instead, giving such complex responsibilities to a multi-disciplinary MA, with specific requirements that it have specific expertise such as training and capacity
building, monitoring and evaluation, project management, social accountability, etc. should be explored.

204. **Adequate and proper guidance and directions regarding entry, sustainability and exit strategies should be given to all implementing partners.** Failing to do so results in loss of momentum and continuity of SA activities by citizens. The entry approaches should involve all levels and sectors of regional, zonal, woreda and kebele governments that have powers in allocation of human and financial resources to basic services. In particular, the entry point through one sector without involving the woreda administrations /cabinets and assembly should be discouraged.

205. Similarly proper exit strategies should be designed by the MA through mainstreaming SA into the overall existing government operations and institutions, at regional, woreda and kebele levels by closely or directly linking it to the ongoing government programs, like PSCAP, good governance and BPR with regard to the accountability of service providers. On the other hand, the social accountability aspects of the service users should be separately linked or be institutionalized into the existing community based organizations and civic groups like Iddirs, youth and women forums and associations, farmers’ cooperatives, children’s parliament and student councils at schools (teachers’ associations with respect to providers), associations of water and irrigation users etc. In this way users’ rights to voice their demands and preferences remains separate but with access to the kebele and woreda assemblies and councilors and Citizen’ Complaint Hearing Offices/Secretariats, while providers’ accountability will be mainstreamed to the government civil service reform programs. Handing over the SA activities to ad hoc committees would result in loss of momentum and enthusiasm created initially and should be avoid if at all possible.

206. MA should prepare a model organizational structure for implementation of social accountability. The model organizational structure should be drawn up in the Ethiopian context and serve as a benchmark to be emulated.

207. SA should be linked to C1, C2 and C3 of the PBS components for the simple reason to create synergies and enhance the effectiveness, efficiency and responsiveness to meet citizens’ needs.

208. MA should draw up plans of actions on how to effectively conduct and play its role as an interlocutor with the Citizens Bodies, GOE, Donors el al, to build consensuses among stakeholders, make oversight and mentoring supports, and influence SC’s agendas through effective utilization of M&E reporting systems with feedbacks to CSOs/IPOs, service providers and service users.

209. Allowing or leaving CSOs/IPOs to select implementing areas in their existing woredas should be carefully reviewed to avoid erosion of SA identity and attribute SA to the CSOs/IPOs.

210. Criteria for selection of implementing CSOs/IPOs would include the following:

- Experience of working in Essential Services Sector (Provisioning and/or Advocacy)
- Experience of working with local governance institutes (LGIs)
- Community Mobilization Skills
- Presence of training Capacity (for training frontline staff of Line Departments/service providers, community members and Woreda/Kebele officials)
- Basic understanding of Planning and Budgeting in Service Delivery
- Capacity to be interlocutors between federal, regional, woreda and kebele level officials and citizens
6 INVENTORY OF ESAP ASSETS

In this chapter we present a brief list of the different assets – people, process and products - produced and used during the implementation of the Ethiopian Social Accountability Project or Component 4 of the PBS-I. It also discusses the status of these assets.

211. The lead CSOs and their respective implementing partners have developed various assets during the ESAP implementation period that may be applied for the follow-on scaled up social accountability project. The assets created can be categorized broadly into two major categories. The first category is the cadre of trained project coordinators, facilitators, staffs of government offices and line departments, kebele leadership, members of the community, youth and women’s associations. The second category is the physical assets that include different materials, such as social accountability manuals and/or guidelines, vehicles, office furniture and equipment. The following is a list of assets in each category (irrespective of status of the assets). Annex 7 provides an Excel-based template for a database of the different assets created as a result of ESAP.

6.1 Human Capital

212. Human capital is a critical resource to sustainable implementation of social accountability measures. The following categories of trainees were provided training on (a) basic concepts of social accountability, (b) facilitation and moderation skill (mainly for the staffs from CSOs/ IPOs), (c) social accountability tools and how to use them for rating basic public services delivery performance, and (d) community mobilization skills.

- Coordinators
- Moderators and facilitators
- Staffs from the service providers
- Cabinet members at different levels, mainly woreda and kebele levels
- Civic organizations like Iddir, women and youth associations, among others
- Religious and traditional leaders
- Service users including social groups such as PLWHA, PWDA (at places),

213. The trainings were given at different levels in the form of training-of trainers (TOT) and included exposure visits, for example, to Uganda (in the case of EIFDDA) to gain experience on social accountability practices. In addition to these, induction and sensitization workshops were given by the Managing Agent at the initial stages of the pilot initiatives to familiarize all stakeholders with the purpose, concepts and application of social accountability.

6.2 Physical assets

214. The physical assets comprise of three sub-categories of products: (a) written materials (either in electronic format or in hard copy) and mainly include manuals,
guidelines and training material such as posters, etc., (b) vehicles, and (c) office equipment such as computers, copiers, printers and accessories and office furniture.

6.2.1 Manuals and guidelines

215. The development of training manuals, guidelines and brochures are among the major output of social accountability pilot initiatives. The different written materials that were developed by the different implementing CSOs and IPOs can be sub-categorized as follows:

- Manuals - training manuals (on the adopted social accountability tools), ESAP implementation manuals/ guidelines, and service delivery performance assessing and scoring process guidelines
- Reports - baseline survey & input tracking matrixes, periodic financial and technical reports, and terminal/ completion reports
- Brochures/ leaflets and posters
- Video cassettes (documentary films) showing the implementations process of the different pilot initiatives.

216. These written materials helped to equip the different actors involved in the implementation of the pilot initiatives in different socio-cultural and economic settings. CSOs have also translated some of the materials into official and local languages for ease of understanding. Nonetheless, the written materials seem to be generic and lack uniformity in terms of content and quality. Although they may serve as a springboard, there is a need to standardize and localize to the actual situation on the ground.

217. However, according to key informants the different training manuals and guides that were developed by the CSO/IPO have improved knowledge of the actors involved with regard to citizens’ rights, service delivery standards, and on how to assess basic service delivery performance. Key informants further stated that the assets (e.g., manuals and guidelines as well as the delivery trainings that were provided to the different actors) have been the basis for smooth communication that prevailed between service providers and service users. However, the EDC team had observed the following main challenges related to these assets. For example,

- In most instances, trained human resource are not in place because of high turnover, most staffs were recruited for the purpose of the pilot phase, and were terminated at the end of the project; and
- At places, for instance, ODA Jimma office, JeCCO office in Dire Dawa and to some extent WAE Assosa offices, the materials/ products could not be found easily.

6.2.2 Vehicles, office equipment and accessories

218. The implementing CSOs/ IPOs have also procured several other physical assets such as four-wheel drive vehicles (in the case of two CSOs, IWCIDA and AFSR), motor cycles (in the case of JeCCDO and FCE), and different office equipment and accessories of which the notable ones include heavy duty printing and photo-copy machines, fax machines, computers, scanners, audio-visual equipment (video cameras and digital camera), office furniture, etc.
The different physical assets were procured by the grantee CSOs/IPOs to enhance their respective capacity in implementing the ESAP initiatives. These assets will remain their respective properties until the CSOs/IPOs are dissolved as organization at which time the assets revert to the government. Key Informants from the MA as well as CSOs/IPOs opined, however, that since the assets were created with the grant given to the CSOs/IPOs, there is no legal ground for a third party to claim ownership or to use these assets for Phase 2. The contract agreement between the MA and each of the CSOs also lack provisions indicating what to do with the assets at the end of the contract period. Thus there is no good reason to expect these assets will be available for Phase 2. Furthermore, some of the physical assets (equipment, accessories, motor cycles and vehicles) are subject to wear and tear.
7 LINKAGE BETWEEN ESAP AND GOE INITIATIVES

This Chapter briefly discusses the linkages between what the Government of Ethiopia is doing to strengthen and capacitate the supply-side and the social accountability initiatives that aim at strengthening the demand-side for improved public policies and basic services delivery.

220. As noted in Chapter 1, GOE initiatives are directed at strengthening the capacity of public basic service providers (supply-side) to deliver effective and quality services to citizens. On the other hand, the Social Accountability initiatives aim at increasing citizens’ awareness of their rights, responsibilities and entitlements to basic public services and empowering them to demand better quality basic services and hold government policy-makers and service providers accountable for poor performance.

221. The GOE’s reform agenda in particular the civil service reform, for instance, is concerned with the development and introduction of a “comprehensive service delivery policy, complaints handling mechanisms, and service standards to facilitate positive changes in the culture, attitudes and work practices of government officials towards the provision of effective and equitable public services.” The major elements of the civil service reforms are strengthening staffing and incentives, and setting service standards for responsiveness to citizens. The expected outcomes of these reforms are:

- Improved service delivery speed, efficiency and fairness
- Attitudinal changes among increasing number of civil servants at the federal and regional levels, towards the need for accounting of resources under their control in a professional manner, searching for better ways of using scarce resources, and responsiveness to citizens’ demands and preferences
- Increased accountability and transparency of government policy-makers and service providers
- Establishment of Customer Services and Complaints Handling Units to handle citizens’ complaints

222. These GOE efforts are underway and have been implemented to a varying degree in all regions and in many woredas. However, there are variations on how effectively they are being applied across the different regions and woredas. In regions and woredas with high staff turnover they have not been effective. As the trained staff and officials leave office their replacement are yet to be trained and capacitated.

223. As stated in Chapter 1, the primary aim of ESAP was to strengthen the demand-side by educating citizens:

- about their rights, responsibilities and entitlements enshrined in the Constitution;
- how to objectively assess and rate government basic service delivery performance and convey their satisfaction with public basic services;

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• how to engage and dialogue with local government and service providers to obtain information and negotiate for improved basic services; and
• how and through what mechanisms they can hold government officials and service providers accountable for none and/or weak performance.

224. Thus, the main purpose of social accountability initiatives is to create an informed and empowered citizenry that can deal and work with the government machinery with confidence to extract effective, efficient and quality basic services in accountable and transparent manner. It is also to create an informed and responsible citizenry that can work hand-in-hand with the government for enhanced public basic services delivery and improved quality of life. This may include taking responsibility to pay taxes, protect public assets and engage in activities that enhance the quality of the physical environment that he/she lives in, including the prevention of crime and the damping of garbage in drainage ditches and unauthorized places that could create environmental health hazards, and flooding during the rainy season.

225. As shown in Figure 7.1, on the supply side, the GOE has begun to professionalizing civil servants, and reorganized how government does business to enhance efficiency and speed up response time to citizen requests. The GOE has also begun to implement merit-based hiring and promotions and has put mechanisms in place to root out corruption. It has developed effective training programs for parliamentarian. In spite of all these reform efforts, there are some gaps at the local government level.

226. Social accountability is a local level initiative. It works with citizens, civil society and community groups, which are recipients and demanders of basic public services. Given the GOE’s reforms and capacity building efforts, informing, empowering and capacitating citizens, civic groups, and civil society organizations to demand effective, efficient and quality basic services has the impact of incentivizing and pushing service providers to respond with effective, efficient and quality basic services in accountable and transparent manner. Effective implementation of social accountability initiatives, therefore, should accelerate and enhance the effectiveness of GOE reform initiatives. In this sense ESAP initiatives and GOE reforms reinforce each other. Strength in one will strengthen the other.

227. ESAP has built supply side capacity as well by training service providers how to use social accountability tools to rate their service delivery performance. Service providers have been trained on Community Score Card to self-evaluate the performance/quality of their service delivery. They have also been introduced to Citizens Report Cards, which they can implement to gain insight into the quality of their service delivery and to gauge what citizens think about their service delivery performance. They have also been introduced to participatory planning and budgeting which they can apply in the preparations of annual development plans and budgets as the Constitution requires them to do.

228. However, public officials, elected representatives (parliamentarians and local government councils) and civil servants from the regional level to the kebele level require capacity enhancing training to effectively apply social accountability practices and tools on their jobs. Likewise, civil society organizations, civic groups and citizens need awareness creation and capacity building training to effectively engage with and partner with service providers to extract effective, efficient and quality basic services.
229. CSOs can play a catalytic role. They can conduct policy research on service delivery issues and disseminate them widely through learning workshops and other fora. They can also develop alternative service delivery budgets and use them to promote dialogue and debates in the formulation of local service delivery budgets that are rolled up into the regional budget. It does not appear that CSOs have developed policy research and budget formulation capacities. Furthermore, it is not clear if the legal framework provides sufficient space to CSOs to play policy research and advocacy roles.
Figure 7.1: Linkage between GOE Initiatives and Social Accountability

GEO Reforms & Capacity Building Initiatives
- Decentralization of public service delivery
- Professionalization of civil servants
- Business process re-engineering
- Training & capacitating of executive officers & administrators
- Performance & merit based hiring and promotion
- Strengthened capacity of elected representatives at all levels of government
- Creation of Ombudsman Office to address citizens’ complaints

Social Accountability Initiatives
- Strengthened capacity of civic groups, CBOs and citizens, local government officials and legislatures
- Increased citizens’ awareness of their rights, entitlements & responsibilities
- Increased citizens’ ability to assess public service delivery performance
  - Community Score Card
  - Citizen Report Card
  - Participatory Budgeting
- Regular Interface Meetings between service users and providers
- Increased implementation of countersigned Joint Reform Agenda/Action Plans
- Effective Monitoring of Implementation of Action Plans
LESSONS LEARNT & THE WAY FORWARD

Understanding Social Accountability

Lesson 1: Implementing social accountability initiatives as an extension of NGOs development activities has blurred the initiative with development projects and the message of social accountability got lost as observed in several sites. As noted in earlier chapters, although ESAP has help create awareness of citizens in pilot sites about their constitutional rights, responsibilities and entitlements to quality basic services, in many pilot woredas, citizens’ understanding of the objectives and concepts of social accountability is confused with objectives of development projects implemented by NGOs/CSOs. The fact that CSOs used the sectors and the localities they had been working in perhaps is part of the problem.

Recommendation: The social accountability project should be properly branded and communicated; and citizens reminded of it continuously. In addition, as much as is possible, CSOs should be encouraged to enter new localities and work in new sectors so that citizens do not confuse social accountability initiatives with the other CSO-led development projects. Although it may result in improved basic services such as education, health, water/sanitation and agriculture, social accountability is a program designed to cause attitudinal changes and practices. It is critical to separate the social accountability message from other development projects. The emphasis should be on making sure citizens:

- Understand their constitutional rights to basic services, their entitlements and responsibilities
- Learn how to measure basic service performance objectively using international best practice social accountability tools
- Learn how to engage actively with service providers and local public officials and negotiate for improved basic services
- Participate with service providers and local government officials in the planning, budgeting and implementation of basic service projects
- Participate in monitoring and measuring the performance of basic service delivery on a regular basis and hold local government officials and service providers accountable for none or weak performance
- Participate in the upkeep and protection of basic service facilities that they benefit from as responsible citizens

Lesson 2: Participation of elected representatives and public officials in social accountability initiatives is crucial. Their participation in all social accountability events including interface meetings results in positive basic service improvement outcomes. Although CSOs have tried to include all woreda and kebele officials and service providers in social accountability sensitization and awareness creation workshops, in several localities elected regional and woreda representatives were not included.

Recommendation: Elected representatives and public officials represent citizens. Generally, elected representatives carry out their responsibilities in behalf of citizens. They
have the responsibility of making sure priorities and preference of citizens are reflected in
government policies and service delivery. Success depends on local government officials and
elected representatives understanding and embracing the tenets of social accountability
and good governance. As indicated elsewhere, woreda administrators trained in the GOE’s
good governance package became champions of ESAP, suggesting that the two trainings
should proceed jointly.

Using Social Accountability Tools

**Lesson 3:** The majority of CSOs adopted low cost and simple to use social accountability
tools such as Community Score Card. While the CSC is useful for evaluating the quality and
access to public basic service delivery at the local level and can be used by both literate and
semi-literate communities, Citizens Report Card and Participatory Budgeting can yield
results that go beyond the local level.

**Recommendation:** Citizen Report Card surveys seek to ascertain service users’
perceptions of service quality, which are the basis for discussions between service providers
and local communities on agreed actions to improve service quality. The citizen report card
methodology implies a transition from denouncement of the quality of basic services (as
observed in public forums) to systematic evaluation of service quality using objective
indicators, which constitutes a significant change in terms of the content, nature and
purpose of public policy dialogue. The citizen report card’s influence derives from its regular
(quarterly, semi-annual, or annual) use, statistical approach to data collection, and broad
involvement of service users and a follow-up of service providers’ compliance with the
previous period’s recommendations and action plans. These combined elements constitute
the social audit’s “teeth” and the technical basis for advocating service delivery
improvements in the targeted sectors, i.e., education, health, water/sanitation and
agriculture.

The citizen report card can deal with three important service standard/quality related
issues. The first concerns the benchmark against which a service is evaluated. These
benchmarks are the responsibility of the respective federal line-ministry and/or the
equivalent regional bureau.

A second standards issue relates to the quality and robustness of citizen report card
methodologies. The methodology should be carefully set up to ensure “buy in” from local
actors – community leaders, regional, zonal and woreda authorities and elected
representatives and representatives of the service providers. It should be designed locally to
collect qualitative and quantitative data on (i) service delivery quality; (ii) infrastructure
location, status and quality; and (iii) citizen participation and local support.

A third standards issue relates to international, national and regional standards of basic
services. For example in the education sector it may deal with key issues such as the quality
of school curriculum, student retention levels, student academic performance, teacher
training needs, school supervision as well as the provision of school texts and utensils across
regions and within regions across woredas and kebeles.
Citizen report card experiments are sustainable and replicable when local financing and trained professionals are available to conduct the survey on a regular basis. Furthermore, replicability also depends on whether the standards incorporated at the local government level represent federal government standards and policy directives.

All types of CSOs need increased capacity to test and use multiple social accountability tools and advocate for the delivery of improved and adequate levels of basic services to citizens.

**Lesson 4:** Besides the technical nature of Participatory Budgeting, another reason for not implementing Participatory Budgeting and Public Expenditure tracking is due to inflexibility of local government budgets. In most visited woredas, the EDC team was informed that more than 90% of the woreda’s budget is for recurrent expenditures of which more than 96% is for salaries. The remaining amount is for utilities and supplies. The capital budget is also very small relative to the needs of the woreda. The needs of the communities are higher than the available budget. These limit the flexibility of the woreda budget and thus may lead to erosion of confidence on participatory budget review as a tool and ESAP as an initiative. Hence there has to be room for budget responsiveness to Joint Action Plans developed in interface meetings between citizens and service providers.

**Recommendation:** Participatory budgeting is an important tool for inclusive and accountable governance and has been implemented in various forms in many developing countries around the globe. Participatory budgeting offers ordinary citizens opportunity to learn about government operations and to deliberate, debate, and influence the allocation of public resources. It is a tool for educating, engaging, and empowering citizens and strengthening demand for good governance. The enhanced transparency and accountability that participatory budgeting creates can help reduce government inefficiency and curb clientelism, patronage, and corruption. Joint action plan development provides opportunity to citizens and service providers and local government officials to learn and examine how resources are budgeted and allocated. It can also kick-start the process of participatory planning and budgeting. Some level of government resources must be available to execute the Joint Action Plans. Government failure to provide resources for action plan implementation will seriously erode citizens’ confidence in their government and the social accountability exercise.

To make participatory budgeting an effective tool and to institutionalize it, it should be incorporated into the existing planning and budget priority setting and budget preparation exercise at the kebele/woreda levels. Currently, citizens are consulted about their preferences and priority needs by woreda and kebele officials in the preparation of sectoral budgets. This process of consultation can be formalized by incorporating participatory planning and budgeting into the planning and budgeting cycle. Focal groups selected from a cross section of the community including men, women, youth and marginalized groups can represent the community. This community selected focal groups can be trained on participatory planning and budgeting and build their capacity to effectively engage with

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government representatives including the service providers, and the woreda and kebele level elected councils in the preparation of the annual budget. This will ensure that citizens’ preferences are incorporated in the government policy decisions. Similarly, these focal groups can participate in the tracking of how the budget was utilized and also evaluate the quality and coverage of basic services delivered.

**Training & Capacity Building**

**Lesson 5:** ESAP showed that for social accountability to be realized there is need for continuous citizen education and creation of various fora for public participation. Onetime training input is insufficient for sustaining and mainstreaming social accountability. On-going hands-on training, mentoring/couching, monitoring and evaluation and follow-up are needed to put the learning into practice.

**Recommendation:** Repeated exposure using different examples will deepen understanding of the concepts and objectives of social accountability among all participants. Awareness creation and capacity building should be provided on regular basis for the following reasons.

- High level of illiteracy in many rural and urban communities means continuous practical and intensive training to raise awareness, and to empower and engage citizens with public basic services providers.
- Rapid turnover of local officials, sector officers and service providers affects effective institutionalization and mainstreaming of social accountability practices in basic service delivery. This can be remedied by providing training to the new officials, officers and staff immediately after they assume their posts. It can also be addressed by requiring that all public officials and civil servants have training in social accountability.
- Capacity building is critical for understanding the concept and practices of social accountability and for operationalizing it. It has to focus both on the citizens as well as government actors including elected and appointed official and civil servants. Capacity may also include the provision of additional resources to effectively respond to citizens’ demands.

What is needed is for the MA to establish an SA training agenda to be implemented by participating CSOs/IPOs. The agenda should spell out the frequency of the training and the types of participants and the venue.

**Social Accountability Approaches**

**Lesson 6:** *Interface meetings* have been considered a breakthrough platform for presenting citizens’ complaints and for providing positive response by local government officials and service providers. They hold greater promise than the existing complaints mechanisms such as suggestion boxes. Objective review of service delivery performance and positive action to remedy service delivery deficiencies restore citizens’ confidence in social accountability and in the institutions exercising them.
**Recommendation:** Interface meetings provide a constructive forum for interactions between citizens, government officials and service providers. The fact that these meetings are moderated by CSOs/IPOs ensures they do not result in recriminations and stalemate. The CSO/IPO would control the agenda and guide the two sides to come to a consensus on the service deficiencies and to jointly device solutions to the problems. Interface meetings between citizens and service providers should be held regularly (perhaps quarterly). This will gradually lead to the institutionalization of the process.

**Lesson 7:** Participation of senior regional government decision-makers in interface meetings between citizens and service providers enhances commitment to social accountability initiatives and service providers’ responsiveness to citizens’ demands and complaints. Social accountability requires high-level commitment to the concept that citizens evaluate the performance of service providers and hold them accountable in terms of service quality and quantity.

**Recommendation:** In order to make sure senior regional government decision-makers are involved throughout the life of the social accountability project, it may be necessary to establish regional-level Project Coordination Committee (PCC) composed of representatives of the regional executive branch, representatives of the regional legislators and civil society organizations. Just like the federal level Steering Committee, this regional-level PCC will oversee and provide guidance to the implementation of social accountability initiatives in the region. At the same time, elected representatives at regional, zonal, woreda and kebele levels should be provided adequate training and capacity to serve as the voice of the people they represent. At the community level, it is not only the focal groups that should be trained but also the community at large. In many ESAP sites there were repeated requests from ordinary citizens for social accountability training. The onetime sensitization workshop was characterized as a teaser and not sufficient to build ones understanding and knowledge.

**Lesson 8:** Development of a Joint Action Plan countersigned by service providers is the mark of government responsiveness to citizens’ complaints and demands. Joint Action Plans reflect the commitments of both the local government/service providers and citizens. They represent true partnerships between local government and citizens in the provision of service delivery.

**Recommendations:** As noted elsewhere, Joint Action Plans should be taken seriously by government. Counter signed Joint Action Plans should be treated by government officials as legally binding social contracts. Thus, their implementation in full is critical. Reneging on the contract or partial fulfilment of the contract should not be acceptable as it will erode citizens’ confidence in their elected public officials.

**Implementation Arrangement**

**Lesson 9:** Initiatives like ESAP need to have a Managing Agent with proven track record and evidence of managing complex initiatives such as social accountability.
**Recommendation:** Complex programs such as social accountability that tend to focus on improved public basic services outcomes to citizens on a parallel but separate track to GOE’s public sector reform programs, requires a multi-disciplinary Managing Agent that can work very closely with the government structure and coordinate and manage the implementation and the results of the SA initiative. The MA must have experience in managing complex socio-political projects in a changing and dynamic environment where local actors continuously change. The MA should also have strong project management capacity and be prepared to be a resource center for the GOE and civic groups to access information and experts steeped in social accountability. This Managing Agent should have sufficient capacity and experience:

- to provide training and build capacities of CSOs/IPOs that would implement the initiative at the local level; and
- to provide adequate and proper guidance to the CSOs/IPOs, for instance, on (a) entry and exit strategies; (b) institutionalization and sustainability strategies; (c) public officials and citizens mobilization and engagement and consensus building strategies; and (d) moderating and conflict resolution skills and strategies

The MA should draw up plans of actions on how to effectively conduct and play its role as an interlocutor with the citizens, civic groups, GOE, and Donors to build consensuses among stakeholders, oversee and provide mentoring supports, and influence the Steering Committee’s agendas through effective utilization of monitoring and evaluation data with feedbacks to, CSOs/IPOs, local government officials, service providers and citizens

The MA should put a strategy forward and training agenda for CSOs/IPOs on how to link the social accountability component with other components of PBS for the simple reason to create synergies and enhance the effectiveness, efficiency and responsiveness of basic services delivery that meet citizens’ preferences.

**Lesson 10:** Project implementers need to commit to using their core staff than project-hired staff in order to retain the institutional memory and gain experience and expertise for continued involvement in implementation of such initiatives.

**Recommendation:** Selection of resource groups including civil society organizations implementing social accountability initiative should have adequate administrative and project management experience as well as track record in implementing similar projects. Criteria for selection of social accountability implementing partners would include the following:

- Experience of working in Essential Services Sectors (Provisioning and/or Advocacy)
- Expertise of working with local governance institutions (LGIs)
- Experience in community mobilization
- Experience in training and capacity building (for training frontline staff of Line Departments/service providers, community members and Woreda/Kebele officials)
Experience in Participatory Planning and Budgeting
- Capacity to be interlocutors between federal, regional, woreda and kebele level officials and citizens

Lesson 11: In the views of some service providers, the Joint Action Plans for addressing basic service delivery deficiencies is not legally binding. For instance, the EDC team was informed that in Sofi, Harari that the Social Accountability Implementing Committee established to oversee the implementation of the Joint Action Plan was rejected by the service provider which said “the group does not have legal identify or mandate” to oversee the implementation of the elements of the joint action plan.

Recommendation: Citizen and civic society engagement with service providers has both an intrinsic and instrumental value. It has an intrinsic value because it leads to a more active citizenry. It elevates the public discourse, enhances transparency and accountability. It increases the sphere within which citizens can make choices. The legality of the counter signed Joint Action Plans should be clearly communicated to all concerned. Clarity in the communication that service providers have to comply and act in good faith once they counter sign a Joint Action Plan would enhance the quality of engagement between citizens and public basic services providers. It will promote participatory implementation and monitoring of basic services improvement action plans.

Monitoring & Evaluation

Lesson 12: As indicated earlier, interface meetings conducted at regular time interval result in improved delivery of basic services. Citizens continued involvement in monitoring and evaluation of basic service delivery will gradually result in the institutionalization of social accountability and in enhancing the quality and coverage of basic services.

Recommendation: In order to improve the quality of social accountability, there has to be continuous learning and improvement through participatory monitoring and evaluation of the initiative. This can be achieved by involving citizens in the evaluation of basic service delivery on a regular basis, for instance, quarterly using a combination of social accountability tools. These evaluation results are then shared with local government officials and service providers at interface meetings, which too should be held regularly (e.g., quarterly).

Sustainability and Institutionalization of Social Accountability

Lesson 13: There is a need for linking social accountability and existing GOE formal accountability systems. Current GOE efforts to professionalize the civil service incorporate merit-based hiring and promotion, and streamline business operations provide opportunity for institutionalization of social accountability practices.

Recommendation: One approach for institutionalizing social accountability is to incorporate social accountability into the performance appraisal and incentive schemes of local government officials and service providers. For example, service ratings using
community scored cards and/or citizen report cards can be linked to the incentive system. At the same time, community participants (i.e., focal groups selected by each community) in the social accountability exercises are made aware that their opinion matters and would affect local government officials and service providers’ compensations. This will establish a link between the results of the ‘social audit’ and local government officials’ and service providers’ compensation scheme and will enhance government responsiveness to citizens.

**Lesson 14:** Social accountability initiatives should be mainstreamed into the overall existing government operations and institutions, at regional, woreda and kebele levels by closely linking them to the ongoing government programs, like PSCAP, good governance and BPR with regard to the responsiveness and accountability of service providers. Developing and integrating social accountability curricula into the civil service and government officials training programs can accomplish this. On the other hand, building capacities of community focal groups, community-based organizations, and member-based organization such as service users committees that form community interest groups should strengthen citizens’ rights to adequate services and to hold service providers accountable. These ‘interest groups’ can then lobby their elected representatives to allocate sufficient resources towards basic service delivery in line with the communities’ preferences.

**Recommendation:** On the supply side, social accountability trainings can be given at the same time with good governance package training. Alternatively, training on social accountability principles and practices can be made a requirement for public officials and civil servants. Simultaneously, social accountability trainings should involve local civic groups, traditional and religious leaders, service users committees, and community members.

**Lesson 15:** Cross-departmental synergies need to be unblocked and capitalized upon to allow resources to flow freely among sectors in order to ensure optimal service delivery response to citizens with the available resources.

**Recommendations:** Decision-makers from each relevant service sector and higher level officials will need to participate in interface meetings and be involved in the development and execution of Joint Action Plans.

**Gender & Marginalized Groups**

**Lesson 16:** Gender needs to be consciously incorporated into the design of any social accountability initiative and this need to go beyond counting numbers (i.e., number of female participants).

**Recommendation:** A good way forward would be formulating gender-disaggregated indicators for each sector and service.

**Lesson 17:** Pro-active steps need to be taken to include disadvantage groups in any and every social accountability programming. The litmus test for inclusiveness should be inclusion of the disadvantaged, the invisible, and the unheard voices.
Recommendation: Focal groups at the community level should deliberately incorporate all disadvantaged groups. The focal group for this segment of the community should be given intensive training and asked to assess the quality and coverage of the basic services they receive from the government. Their service ratings should be given a higher weight when consolidating the service delivery performance ratings and ensure the Joint Action Plan deliberately incorporate preferences of the disadvantaged groups.
Annex 1: The Evaluation Terms of Reference

1. Introduction

Over the last 2 years, the first phase of the Ethiopia Protection of Basic Services Program (PBS1) included new efforts to build experience of social accountability in Ethiopia. To this end, the Government and development partners agreed to a process (a ‘road-map’) that would include piloting, evaluation and, once lessons were learned, the roll-out / scaling up of successful approaches. As part of PBS1, Component 4 on Social Accountability, financed by a Multi-Donor Trust Fund supported by five donor partners, was designed this way to allow Ethiopia to test a range of new accountability approaches utilizing a range of CSO types, in a range of contexts. For a number of reasons largely outside Government control, the piloting process did not start until January 2008 and the process of implementing the roadmap is yet to be completed. Government commitment to the roadmap was signaled, however, by the expansion of the pilots from 6 to 12. The social accountability pilots were completed in June 2009.

While the roll-out on social accountability is contingent on the successful completion of this process, Government and development partners have agreed that it is vital to ensure continuity and capitalize on investment to date in Component 4 activities. Accordingly, the second phase of the Program (PBS II) envisages a new phase of social accountability (Part C2). A primary characteristic of Part C2 of Sub-Program C on Transparency and Accountability of PBS II is to continue a channel of funding to civil society that enhances the capacity of citizens to engage meaningfully with financial transparency and social accountability processes.

Learning from the lessons and experiences of PBS I, the objectives of the Social Accountability component are: (i) to complete the roadmap (after the review and as endorsed by the Steering Committee); and (ii) to enhance and institutionalize capacity for social accountability in Ethiopia. In meeting these objectives, it is critical to link to the broader Transparency and Accountability Sub-Program objectives, which aims to promote accountability in decentralized finances and services. These should be articulated in the activities proposed and the approaches to implementation. Recognition of the good governance package and the ongoing accountability efforts in PBS basic service sectors (health, education, water supply and sanitation, agriculture and rural roads) are also critical.

2. Purpose of the Consultancy

The purpose of this assignment is to: a) evaluate the activities of PBS I Social Accountability Component (C4), b) make recommendations based on lessons learnt and experience with implementation, and c) under the guidance of the Steering Committee to make recommendations for, and develop the design for scaling up social accountability interventions under the Social Accountability component of PBS II.

3. Scope of Work

In an inception period, activities will focus on completion of the next stage of the agreed road map i.e. understanding the lessons of social accountability activities carried out up to end-June 2009 and on the preparation and design of social accountability activities to be undertaken in years 2 and 3 of PBS II. At the start of this inception year an evaluation of Social Accountability activities (pilots and capacity building) financed under PBS I will be conducted. This will provide a comprehensive picture of the lessons of the past and point toward the scope, nature and arrangements for developing activities in the future. This entails a number of distinct activities and outputs that together form the Final Evaluation/Review of PBS I Component 4 pilots, to be followed by the Design of the Phase II Social Accountability under Part C2 of PBS II.
This Terms of Reference sets out the scope of this consultancy, which will be undertaken in two distinct phases: evaluation and design. It includes:

**Evaluation Phase 1**

a) **A Social Impact Assessment** that will investigate changes in capacity and engagement of citizens and officials in a range of woredas piloting different social accountability tools and approaches, and their impact on service delivery. The draft methodology for this assessment will be developed as part of the Technical Proposal and agreed by the Steering Committee.

b) **A Comprehensive Analysis** of the tools, approaches and actors involved to date (pointing towards the strengths, weaknesses, opportunities, etc. of social accountability activities in differing contexts). This will include identification of any gaps in the lesson learning process. Considerations will include effectiveness of, and factors contributing to the effectiveness of:

   a. the different types of participating CSOs  
   b. external methodologies and locally developed and/or adapted approaches  
   c. external tools and locally developed/adapted tools  
   d. training formats and techniques  
   e. information dissemination

c) **A Review of the Implementation Arrangements** adopted in the Social Accountability component including the managing agent model, the multi-stakeholder Steering Committee, and the Technical Oversight Committee (a sub-committee of the Steering Committee); and their respective roles, responsibilities and relationships.

d) **An Inventory of Assets** – people, processes and products – that have been developed during the implementation of the Social Accountability component under PBS1, which can be taken forward into scaled up activities in Years 2 and 3 of PBS II. Drawing on the Comprehensive Analysis above, this piece of work will develop an accessible inventory and database of all resources – human and material - generated during the last 18 months so that the asset base of social accountability activities under PBS1 can provide a firm foundation for the scaling up and capacity building activities envisaged in Years 2 and 3 of PBS II.

**Design Phase 2**

e) **A Survey and Screening of Institutions** at national and regional levels (institutional scoping study). To expand the types of non-state actors involved in the implementation of social accountability activities, a scoping study is proposed of academic, training and development organizations that could become the vehicle for two key functions of social accountability activities in Years 2 and 3 of PBS II: the institutionalization of social accountability practices, products and skills developed during PBS I; and the coordination and implementation of a scaled up program of capacity building support to citizens through their representative organizations. This is intended to broaden significantly the types of actors involved in these activities, to consider where long-term capacity lies and to ensure the objective of sustainability is included in PBS II. This study would focus on the 4 large regions, (Oromiya, Tigray, Amhara, and SNNP), and at national level.

f) **A Design of Social Accountability Phase 2**. Concluding the Evaluation/Review stages described above, and based on the lessons learnt, and the inventory and surveys, the consultants will recommend the objectives, content, scope, actors, approach, and implementation arrangements for developing Phase 2 envisaged in the road map. It should also set out how effective approaches could be developed in the differing regional contexts, and how these can be better linked to the roll-out of the financial transparency and accountability instruments. A detailed TOR for this design area of work will be developed by the consultant as a part of their work plan and agreed by the Steering Committee.
4. Approach
In order to streamline learning, ensure independent evaluation and facilitate quick and efficient take-up, it is proposed that, this consultancy should:

a) collaborate closely with the Transparency and Accountability Working Group, and the Steering Committee as necessary;

b) cover all the proposed evaluation tasks described in paragraph 3 above, including the social impact assessment, analysis of tools and approaches, review of implementation, management and governance, take on discrete tasks such as the inventory of assets and the institutional Survey & Screening study, and finally provide recommendations, design and eventually, implementation plans, for the Phase II activity; and

c) be undertaken by a firm able to provide the necessary skills and experience to conduct the activities and fulfill the objectives set out in this Terms of Reference.

5. Activities
The Evaluation and Design consultancy will deliver the activities as described in these TOR and developed by the Steering Committee. This includes:

- Providing leadership, facilitation, qualified technical assistance and capacity building assistance (local and international) for activities to be undertaken under the Evaluation Phase;
- Ensuring that a realistic plan for delivery of outputs is developed with the Steering Committee and adhered to;
- Ensuring that appropriate methodologies are developed in consultation with key stakeholders in respect of the key tasks outlined in this TOR;
- Facilitating appropriate participation of key stakeholders in the evaluation of PBS 1 Social Accountability Activities, and design of Phase 2; and
- Exemplary record keeping and documentation management, using IT systems as appropriate.

6. Outputs
The consultants will be responsible for the following deliverables over the Inception period:

a. Inception Report: At the beginning of the consultancy, the consultant will submit an Inception Report to the Steering Committee for discussion and endorsement. This will include more detailed terms of reference, budgets and timelines of the core tasks and explicit methodologies for taking the tasks forward.

b. Progress Reports: The consultant will provide the Steering Committee with a progress report summarizing progress made in executing agreed work plan and related timetable, including any identified impediments that may require actions/decisions from the Steering Committee and/or World Bank as the key entity providing quality oversight.

c. Survey & Screening of Institutions study: The consultant will deliver a comprehensive survey of institutions with potential for delivering a broader program of social accountability activities in Yrs 2 & 3. The study will include an overview of institutions (government, private, civil society, academic/training) in the four main regions and nationally and a capacity assessment in relation to broader project management, and in relation to social accountability work. This will form the basis of a capacity building phase in advance of Phase 2 roll-out. The survey will also include recommendations for the process of making final selection of institutions for participation in Phase 2.
d. **Draft Evaluation Report** including items (a) to (f) in Section 3 above. The consultant will deliver a draft report which includes a comprehensive assessment of the piloting and capacity building activities conducted under PBS I, in five parts:

- Executive Summary synthesizing key findings, issues, and recommendations
- social impact assessment
- comprehensive analysis of tools and approaches
- review of implementation arrangements
- inventory of people, products and processes (captured on customized database)

e. **Final Evaluation Report** (including key recommendations for PBS II). The consultant will deliver a final report which addresses the comments of the Steering Committee, within two weeks of receiving SC comments.

f. **Evaluation Feedback events as part of Design consultation phase.** This is intended to build ownership of Phase 2 so that key stakeholders at the regional level help to shape the design from the outset, and do so on the basis of documented and well-presented findings from the evaluation phase.

g. **Database of materials, skilled human resources developed and accessible.** This ensures that the assets developed through PBS 1 Social Accountability component are recorded and available for the implementation of Phase 2.

h. **Design of PBS II Social Accountability program for Years 2 and 3, including scale up of pilot activities and capacity building.** Based on comments from the Steering Committee, the feedback discussions at regional level, the consultancy will develop a detailed Terms of Reference for the elaboration of options and recommendations for the design of the social accountability scale up and capacity building of PBS II. This will include, as agreed:

- the approach to scaling-up citizen engagement activities with citizens, kebeles and woredas
- the role of the region in coordination and management
- the mechanisms for capacity building
- proposals for appropriate sharing information and coordination with the C3 component
- options and recommendations for the ongoing management and governance of social accountability activities conducted under PBS
- a proposed budget
- proposed results-based monitoring and evaluation arrangements
- operational framework for scaling up social accountability interventions, including related implementation arrangements.

i. **Implementation plan for Phase 2.** This should set out a detailed plan for implementing the agreed design for Phase 2, including detailed budgets, procurement plans, terms of reference for implementation, results monitoring mechanisms, governance mechanisms, plans for capacity building and capturing lessons learned.

7. **Reporting**

The consultants will report to the Social Accountability Steering Committee (SC) for all technical matters. Communication with the Steering Committee is generally to be made through the designated Secretary of the SC unless otherwise agreed. On all contractual matters, the EDC will report to the PBS World Bank Task Team Leader or a designated member of the Bank team.

8. **Required Experience and Skills**
The Consultancy will deploy a multi-disciplinary team, including both Ethiopian and international expertise. It is expected the Team Leader responsible for overall delivery will be based in Addis Ababa for the most part of the assignment. Members of the Team will have the following skills and experience:

- Capacity to provide substantive direction, leadership, facilitation and analytical guidance on the accountability initiatives included in Inception Phase of Component 4 of PBS1;
- Exemplary relationship, management and facilitation skills in a complex context of decentralized government, diverse civil society and multi-donor participation;
- Sound experience in the successful implementation and/or management of accountability and participatory governance initiatives, in collaboration with government and non-government entities;
- Specific technical skills in social accountability instruments and processes, social impact assessment, organizational capacity assessment and building, project design and development, IT and documentation management;
- Sophisticated planning approaches and strong fiduciary management systems required for effective implementation of a consultancy of this scope;
- Sound knowledge of, and some prior working experience on, governance, public sector, and civil society issues in Ethiopia.

9. **Timeline.**

The contract for the Evaluation and Design Consultancy will be for a period of approximately 7 months to enable effective completion of all tasks, in preparation for a new oversight and implementation mechanism for PBS Phase 2 in Years 2 and 3.

It is envisaged that the consultant should be available to start work on December 1, 2009. Indicative dates for key outputs to be submitted to the Steering Committee are:

<table>
<thead>
<tr>
<th>Key stages</th>
<th>Expected delivery date</th>
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<tbody>
<tr>
<td>Phase 1- Inception Report</td>
<td>End December or 1 month after contract start date</td>
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<tr>
<td>Survey &amp; Screening Study</td>
<td>End February 2010</td>
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<tr>
<td>Draft Evaluation Report</td>
<td>End February 2010</td>
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<tr>
<td>Final Evaluation Report</td>
<td>Mid March 2010</td>
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<td>Progress Report</td>
<td>End March 2010</td>
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<td>Phase 2</td>
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<tr>
<td>Draft Design for Phase II</td>
<td>Mid May 2010</td>
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<tr>
<td>Finalized Design and implementation plan for Phase II</td>
<td>End May 2010</td>
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10. **Data, Local Services, Personnel and Facilities to be provided by the Bank**

The Bank will provide relevant background project documentation to enable the Consultants to effectively carry out their tasks. It will also facilitate the scheduling of initial meetings with relevant stakeholders, including the Steering Committee.
## Logical Framework

<table>
<thead>
<tr>
<th>Objectives, Outcomes, Outputs &amp; Inputs</th>
<th>Verifiable Indicators of Performance</th>
<th>Sources &amp; Means of Verification</th>
<th>Critical Assumptions</th>
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<tbody>
<tr>
<td><strong>Objective:</strong></td>
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| Strengthened use of social accountability tools, approaches and mechanisms by (a) citizens, (b) civil society organizations (CSOs), (c) local government officials and (d) service providers as a means to make basic service delivery more effective, efficient, responsive and accountable. | - Degree of citizens’ aware of their rights to demand quality public basic services and to hold accountable basic services providers  
- Degree of citizens and civic groups engagement with public basic service providers to ensure basic services reflect citizens’ priorities  
- Degree of service providers’ awareness as to their responsibility and accountability to citizens/service users.  
- Degree of collaboration and partnerships among public actors and citizens in the provision of basic public services. | - Review of Administrative Reports of Service Providers  
- Focus Group Discussions  
- Citizen Survey  
- Key Informant Interviews | - Local governments and service providers receive adequate non-payroll budget  
- There is political space for civic organizations and citizens to participate in government policy making and service delivery |

| **Outcome 1:** Increased citizens’ awareness of their rights, responsibilities and entitlements to better quality public basic services. | - Number of citizens given awareness about their rights to demand improved public basic services and to hold public basic services providers accountable  
- % of citizens surveyed that indicate their awareness about their right to demand improved public basic services and to hold service providers accountable has been raised | - Focus Group Discussions  
- Key Informant Interviews  
- CSO Interviews  
- Citizen Survey | - There is political will for rights-based discourse and implementation of social accountability project by a wide range of CSOs and civic groups |

<p>| <strong>Outcome 2:</strong> Increased empowerment of citizens to participate in, negotiate with, and hold | - % of citizens that indicate they can voice their needs, opinions and concerns to | - Focus Group Discussions |  |</p>
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| accountable services providers and public policy-makers | service providers and local government officials  
• % of citizens surveyed that indicate that they can obtain information on plans and budgets of public basic services |  
• Citizen Survey  
• Project Document Reviews | |
| Outcome 3:  
Increased involvement of citizens & communities in planning, budgeting implementation and monitoring of the quality and quantity of, access to basic public services. |  
• % of citizens surveyed that indicate participation in public basic service planning, budgeting and implementation  
• Degree to which citizens are involved in public basic services planning, budgeting, implementation and monitoring |  
• Focus Group Discussions  
• Key Informant interviews  
• CSO/IPO Interviews  
• Citizen Survey  
• Project Document Reviews | |
| Outcome 4:  
Increased capacity of policy-maker and public service providers to respond to community & citizens’ needs and preferences. |  
• % of citizens surveyed that indicate service providers are increasingly responsive  
• Degree to which public basic service providers are responsive to community and citizen requests and demands |  
• Focus Group Discussions  
• Key Informant interviews  
• CSO/IPO Interviews  
• Citizen Survey  
• Project Document Reviews | Service providers have sufficient budget and resource and budget allocation flexibility to respond to citizens’ demands on a timely manner |
| Output 1:  
International best practices on social accountability disseminated widely to citizens, public officials and civil society organizations, |  
• Number of international best practices seminars/workshops and study tours organized and facilitated by the Managing Agent  
• Number of citizens, civic groups, CSOs, CBOs, and public officials that have participated in social accountability best practices seminars, workshops and |  
• Key Informant Interviews  
• Project Document Reviews | |
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| **Output 2:** Best practices in social accountability understood & adopted by the lead civil society organizations and their implementing partners | • Number of CSOs/IPOs that indicate they have understood and implemented social accountability international best practices  
• Number of CSOs/IPOs that have developed and used locally-based social accountability tools | • Key Informant interviews  
• CSO/IPO Interviews  
• Project Document Reviews |                      |
| **Output 3:** Social Accountability tools developed with indicators of basic service performance | • Social accountability tools completed by participating citizens and service providers  
  o Community Score Cards  
  o Citizen Report Cards  
  o Participatory Budgeting | • Review of Project Document  
• CSO/IPO Interviews |                      |
| **Output 4:** Project Management Unit (PMU) establish by lead CSOs to oversee and manage the implementation of social accountability tools at the grassroots level. | • Number of CSOs that had established and used PMU to implement and oversee social accountability projects | • CSO/IPO Interviews  
• Project Document Reviews |                      |
| **Output 5:** Community facilitators trained on how to train citizens and community groups on using social accountability tools to assess performance of public basic services | • Number of community facilitators trained and used by CSOs/IPOs | • CSO/IPO Interviews  
• Project Document Reviews |                      |
| **Output 6:** Services providers trained on completing self-assessment of their | • Number of CSOs/IPOs that have trained service providers on how to complete | • Key Informant interviews  
• CSO/IPO Interviews |                      |
<table>
<thead>
<tr>
<th>Objectives, Outcomes, Outputs &amp; Inputs</th>
<th>Verifiable Indicators of Performance</th>
<th>Sources &amp; Means of Verification</th>
<th>Critical Assumptions</th>
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<td>basic services delivery performance</td>
<td>self-assessment</td>
<td>• Project Document Reviews</td>
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<td></td>
<td>• Number of service providers personnel trained on self-assessment tools</td>
<td>• Focus Group Discussions</td>
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<td>• Number of service providers that have completed self-assessment</td>
<td>• Key Informant interviews</td>
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<td>• CSO/IPO Interviews</td>
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<tr>
<td>Output 7: Community groups and citizens mobilized and given awareness training about their rights to effective public basic services and social accountability.</td>
<td>• Number of community groups provided awareness training/workshop about their rights to demand improved public basic services and to hold service providers accountable</td>
<td>• Focus Group Discussions</td>
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<td>• Key Informant interviews</td>
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<td>• CSO/IPO Interviews</td>
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<tr>
<td>Output 8: Community groups and citizens complete social accountability tools.</td>
<td>• Number of community groups that have completed community score cards (CSC) assessing the performance of service providers</td>
<td>• Focus Group Discussions</td>
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<td>• Number of citizens that have completed Citizen Report Cards (CRC)</td>
<td>• Key Informant interviews</td>
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<td>• Number of citizens that have participated in Public Expenditure Tracking (PET)</td>
<td>• CSO/IPO Interviews</td>
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<td>• Citizen Survey</td>
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<td>• Project Document Reviews</td>
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<tr>
<td>Output 9: Interface meetings between citizens and service providers conducted.</td>
<td>• Number of dialogues and interface meetings between citizens and services providers</td>
<td>• Focus Group Discussions</td>
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<td>• Number of interface meeting that resulted in reform agenda/action plans for service delivery improvements</td>
<td>• Key Informant interviews</td>
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<td>• CSO/IPO Interviews</td>
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<td>• Citizen Survey</td>
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</tbody>
</table>
| **Output 10:** Reform agenda action plans developed and agreed on between citizens (service users) and public basic service providers | • Number of community groups that have participated in developing reform agendas and action plans  
• Number of communities where joint service improvement action plan implementation monitoring task forces were established | • Focus Group Discussions  
• Key Informant interviews  
• CSO/IPO Interviews  
• Citizen Survey  
• Project Document Reviews | |
| **Input 1:** Creation of Steering Committee made of government, civil society and development partner representatives | • Composition of Steering Committee | • Key Informant Interviews | |
| **Input 2:** Selection of Managing Agent to oversee the implementation of social accountability pilot projects | • Capability & expertise of the Managing Agent | • CSO/IPO Interviews  
• Project Document Reviews | |
| **Input 3:** Selection and contracting of Civil Society Organizations | • Number & types of CSOs/IPOs selected | • | |
| **Input 4:** Allocation and disbursement of funds for Social Accountability activities | • Timeliness of disbursement of funds | • | |
| **Input 5:** Exposure and sensitization of CSOs/IPOs and government officials and service providers to social accountability concepts, objectives and practices | • Number of workshops and seminars  
• Number of study tours | • | |
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102

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### Annex 4: List of projects, lead CSOs, tools applied, and sectors by region and woreda

<table>
<thead>
<tr>
<th>Project title</th>
<th>Lead CSO</th>
<th>Region/ City</th>
<th>Woreda</th>
<th>Sectors covered</th>
<th>Tools applied</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joint Tigray Social Accountability Initiative</td>
<td>Relief Society of Tigray</td>
<td>Tigray</td>
<td>Aheferom, Werie Leke?, Mereb Leke, Degua Tembien, Keltie Awulalo, Raya Azebo</td>
<td>Potable Water, Agri-Irrigation &amp; Extension</td>
<td>Community Score Cards (CSC), Participatory Budgeting (PB)</td>
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<tr>
<td>Community Empowerment for Ensuring Accountability: An Approach for Improved Basic Service Delivery of the Pro-Poor Public Services</td>
<td>Women’s Association of Tigray</td>
<td>Tigray</td>
<td>Alamata, Kola Tembien, Medebay Zana, Sharti Samre</td>
<td>Education</td>
<td>CSC</td>
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<tr>
<td>Improved Basic Services through Community Participation facilitated by Faith-Based Organizations</td>
<td>Ethiopian Interfaith Forum for Development Dialogue and Action</td>
<td>Tigray</td>
<td>Ganta Afeshum, Gulomekeda</td>
<td>Education</td>
<td>CSC</td>
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<td>Dialogue and Information Flow for Accountability and Transparency</td>
<td>Amhara Development Association</td>
<td>Amhara</td>
<td>Debre Markos (Guzamen), Dengela, Farta, Metema</td>
<td>Health and Education</td>
<td>CSC, PB</td>
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<tr>
<td>Enhancement of Community-Based Services Protection Projects</td>
<td>Facilitator for Change Ethiopia</td>
<td>Amhara</td>
<td>Bure</td>
<td>Education</td>
<td>CSC</td>
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<td>Promotion of Social Accountability of the Primary Education Services</td>
<td>Jerusalem Children and Community Development Organization</td>
<td>Amhara</td>
<td>Nifas Mewcha (Lay Gayint), Bahir Dar</td>
<td>Education</td>
<td>Citizen Report Cards (CRC)</td>
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<td>Marginalized Citizens’ Monitoring Basic Service Delivery under the PASDEP</td>
<td>Rift Valley children and Women’s Development Association</td>
<td>Amhara</td>
<td>Ephrata Gidem?</td>
<td>Education</td>
<td>CSC, CRC, Budget Literacy (BL), Budget Tracking (BT)</td>
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<tr>
<td>Enhancing Citizen’s Engagement in Ethiopia’s Education Sector</td>
<td>Action for Self Reliance</td>
<td>Oromia</td>
<td>Woliso, Sebeta Hawas</td>
<td>Education</td>
<td>CSC</td>
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<td>Citizens Engagement for Transparency, Responsiveness and Accountability</td>
<td>Derash Relief and Development Association</td>
<td>Oromia</td>
<td>Fedis</td>
<td>Water, Health and Education</td>
<td>CSC, PB</td>
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<td>Kombolcha and Haromaya</td>
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<td>Oromia</td>
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<td>Enhancement of Community-Based Services Protection Projects</td>
<td>Facilitator for Change Ethiopia</td>
<td>Oromia</td>
<td>Jimma town, Dawo, Becho, Seden Sodo, Sebeta Hawas</td>
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<td>Piloting the Social Accountability Approach in Selected woredas</td>
<td>Illu Women and Children Integrated Development Association</td>
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<td>CSC</td>
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<td>Promotion of Social Accountability of the Primary Education Services</td>
<td>Jerusalem Children and Community Development Organization</td>
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<td>Education</td>
<td>CRC</td>
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<td>Promotion of Social Accountability through Collaboration, networking and Empowerment of Citizens</td>
<td>Oromia Development Association</td>
<td>Oromia</td>
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<td>Lagahida, Ejere</td>
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<td>Sawena, Zeway Dugda, Mulo</td>
<td>Water</td>
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<td>Enhancing Citizen’s Engagement in Ethiopia’s Education Sector</td>
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<td>Hawassa, Chencha</td>
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<td>citizens</td>
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<td>Engagement for Transparency, Responsiveness and Accountability for Basic Services</td>
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<td>Enhancing Citizen’s Engagement in Ethiopia’s Education Sector</td>
<td>Action for Self Reliance</td>
<td>Addis Ababa</td>
<td>Nefas Silk, Lideta, Addis Ketema, Arada, Kirkos*</td>
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* These are sub-cities
Annex 5: Field Data Collection Instruments

- Focus Group Discussion Checklists
- Key Informant Interviews Checklist
- Structured Citizens’ Perception Survey Questionnaires
- Checklist for CSO Interviews
- Asset Inventory Form
A: Social Impact

1. Understanding the Objectives, Concepts and Applications of Social Accounting Practices
   1.1 Did you participate in awareness raising workshop regarding social accountability in basic service delivery? If Yes,
   - Was the concept of social accountability and its objectives explained to you by the implementing partner?
   - Were the different social accountability tools and how they are used described and/or explained to you?
   - Were you trained in selecting indicators for tracking and assessing the status of basic services?
   - Were you given step-by-step instruction on how to assess the status of basic services using one or the different types of social accountability tool such as community scorecard, citizen report card and/or other assessment tools?
   - Were you given training on how to dialogue with service providers in interface meetings?
   1.2 Are the concepts, objectives, applications of social accountability practices introduced by ESAP clear and well understood by:
   - Citizens, community groups and/or basic public service users
   - Local government officials, service providers and local elected councils
   1.3 Are the implementation procedures/steps of social accountability practices introduced by ESAP properly understood and followed in the term of:
   - selection, adaption and applications of social accountability tools appropriate for the sector,
   - capacity building and awareness creation,
   - selection of participating stakeholders,
   - selection of sectors and sites for the pilot project,
   - evaluation of basic service using the selected social accountability tool,
   - self-evaluation service providers with regard to service delivery performance using the selected social accountability tools,
   - rules of engagement in interface meetings between service users and service providers and formulation of reform agendas and action plans, and
   - implementation, overseeing and monitoring of agreed-on reform agendas and action plans

2. Outcomes: What were the outcomes/results of ESAP in terms of:
   2.1 Increased awareness of service users to voice their rights to obtain quality basic services and to hold responsible and accountable the service providers
2.2 Increased awareness of service providers to deliver quality basic services and to be responsive and accountable to service users.

2.3 Improved capacity of service users to monitor and assess the quality of basic services and to engage with service providers constructively to improve the quality and quantity of basic services.

2.4 Improved capacity of service providers to monitor and assess the quality of basic service delivery and to constructively engage with service users to explain the limitations and planned improvements.

2.5 Improved capacities of marginalized citizens to raise their voice and assess public service delivery.

2.6 Improved capacities of service users and service providers to prioritize issues and establish reform agenda and action plans at interface meetings to improve the quality of basic services.

2.7 Improved quality of interactions and transactions among service users, service providers, local government officers and CSOs

B: TOOLS, APPROACHES & ACTORS

3. Tools

3.1 What social accountability tool did the CSO/IPO use in the different sectors?

3.2 Were the selected social accountability tools properly designed and easy to use?

3.3 What were some of the short comings, if any, of these social accountability tools when used for evaluating the quality of education services, health services, water and sanitation services and/or agricultural services?

3.4 Were multiple tools used in assessing the performance of the same basic service?

3.5 What were the benefits of applying multiple tools simultaneously to assess the provision of the same basic service?

3.6 Which tools attracted the maximum positive dialogues between you as the service users, and the service providers during interface meetings?

3.7 Which tools are friendly and simple to use?

3.8 Which tools are most cost-effective to use to assess the quality and quantity of basic services?

3.9 Are the selected performance indicators easily understood and easy to monitor?

3.10 How were the performance indicators selected?

4. Approaches/Processes

4.1 What approaches/processes did the CSO/IPO use in implementing the social accountability pilot activities in each woreda and kebele?

4.2 What approach/process was used for launching the social accountability pilot activities?

4.3 What entry points were used in each region, woreda and kebele in the implementation of the social accountability pilot activities?
4.4 How easy was it to establish presence and implement the social accountability activities in each woreda and kebele in terms of time, cost and acceptance by regional, woreda and kebele officials and community leaders?

4.5 How are the social accountability implementation approaches/processes used by CSOs/IPOs related to or different from other government program implementation approaches/processes (like decentralization, PSCAP, good governance package, financial transparency, etc)?

4.6 In retrospect, what implementation approach/process should have been used to facilitate quick acceptance and implementation of the pilot social accountability activities?

5. Actors

5.1 What were the roles and responsibilities of the following actors?
- The Managing Agent (GTZ-IS)
- The implementing CSO/IPO/NGO
- Regional government officials
- Woreda officials
- Kebele Officials
- Community Leaders
- Religious Leaders
- The regional and woreda bureau of finance and economic development (BOFED)
- The Regional and Woreda Capacity Building bureaus responsible for PSCAP, decentralization, good governance, financial transparency and accountability and administrative reforms

5.2 Did these actors fulfill their roles and responsibilities to your expectation?

C. IMPLEMENTATION ARRANGEMENTS

6. Review of Implementation Arrangements:

6.1 What management / organizational structures were used in the implementation, management, monitoring and reporting regarding the pilot social accountability activities?

6.2 Was the organizational arrangement and relationships among the different organizations (i.e., federal, regional, woreda and kebele government bureaus/offices, donors and NGOs/CSOs, etc.) clearly delineated and well understood?

6.3 How did you find the roles and responsibilities of the regional, woreda and kebele governments in the implementation of the social accountability pilot activities?

6.4 How did you find the role and responsibility of the Managing Agent in capacity building, transfer of best practices, and overseeing the implementation of the social accountability pilot activities?

6.5 What social accountability implementation mechanisms and arrangements were established at woreda and kebele levels:
- To mobilize and capacitate community groups to use social accountability tools
- To mobilize and capacitate service providers to use self-assessment tools
• To mobilize and organize interface meetings between service users and service providers

6.6 What constraints and bottlenecks were faced in the implementation of the social accountability pilot activities?

6.7 How were these bottlenecks and obstacles overcome? Who helped in resolving these bottlenecks and obstacles?

6.8 What follow-up and feedback mechanisms were established and used throughout the implementation of the pilot social accountability activities?

6.9 What suggestions do you have to improve the institutional arrangements during the scaling-up of social accountability practices in phase 2?

D. RECOMMENDATIONS

7. What is your suggestion in making social accountability practices sustainable, integrated/mainstreamed and institutionalized?

7.1 Integrating social accountability practices into the normal functions of woreda and kebele activities _________

7.2 Creating separate social accountability council ______

7.3 Which of the following association/social institutions should be involved in the implementation of social accountability activities?

• Women’s associations/organization __

• Youth associations __

• *Iddir* or village association __

• Other __
CHECKLIST FOR FOCUS GROUP DISCUSSIONS – NON-ESAP

SECTION A

Section A-1

1. Understanding the Concepts of Citizens’ Rights to Quality Public Basic Services and to hold Service Providers accountable

1.1 Are you awareness of your rights to demand improved public basic services and to hold accountable public basic services providers? If yes,

- How did you learn about your rights and responsibilities?
- Did you attend workshops, seminars or conferences to learn about your citizenship rights and responsibilities?
- How do you interact with public basic providers to demand better basic services?
- Were you given orientation on how to approach public basic service providers to demand better basic services and to obtain information about public basic services?

1.2 Do you understand clearly the concepts of citizens’ rights to improved public basic services and citizens’ rights to hold service providers accountable for their service delivery performance?

1.3 Are there processes and mechanisms in place to collect citizens’ complaints, needs and priorities? If yes, what mechanisms are in place?

- Suggestion boxes ____
- Ombudsman Offices ___
- Citizen surveys ___
- Council Hearings ___
- Other ____ (please specify)

Section A-2

1.4 Do you feel your awareness to exercise your rights and to demand improved public basic service has increased? If yes, please provide examples.

1.5 Do you believe that service providers’ awareness regarding their responsibility to deliver quality basic services and to be held accountable by citizens has improved? If yes, please give specific examples.

1.6 Do you as service users have the capacity to monitor and assess the quality of public basic services and to engage with service providers constructively to improve the quality and quantity of public basic services? If yes, how was this capacity obtained?

1.7 Do you believe marginalized citizens have the capacity to raise their voice and assess the quality and accessibility of public basic services? If yes, please give examples.

1.8 Do you know how public basic services are prioritized by service providers? If yes, how do they prioritize public basic services?

- Through consultation with community groups ____
- Through Citizen Surveys ___
1.9 Can you cite some examples in which you have exercised your rights? In terms of:
- Participating in service delivery decision making;
- Accessing information on service delivery budgets, plans, etc;
- Requesting for improved basic services and on timely response from service providers;
- Others (please explain).

Section B

Section B-1

1.10 Does your community use specific means to assess the performance of service providers? If yes,
- What means does your community use to assess the performance of service providers?
- By whom are these means developed or established?
- Is your community trained on how to use these means? and by whom are they trained?

1.11 Do you know what specific mechanisms or procedures service providers use to assess their performance of service delivery? If yes,
- What mechanisms/procedures do they use to assess their service delivery performance?
- By whom were these mechanisms/procedures developed and established?
- Are service providers trained to use these mechanisms/procedures? By whom are they trained?

Section B-2

1.12 Does your community identify and prioritize its public basic service needs? If yes, what processes and mechanisms does it use to identify and prioritize its public basic service needs?
- Workshops
- Focus group discussions
- Annual budget hearings chaired by the local government councils (LGCs)
- Citizen surveys
- Other

Section B-3

1.13 What are the roles and responsibilities of the following actors in making sure citizens including marginalized groups get quality public basic services?

Government Actors
- Federal government officials
- Regional government officials
- Woreda officials
- Kebele Officials
- The regional and Woreda Bureau of Finance and Economic Development (BOFED)
- The Regional and Woreda Bureau of Capacity Building (BOCB)

**Civic Groups**
- Community Leaders
- Religious Leaders
- Community Associations (e.g., Women Associations, Youth Associations, Ider, etc.)
- Other

1.14 In your opinion did these actors fulfill their roles and responsibilities? If yes, please explain.

**SECTION C**

1.15 What management / organizational structures are in place to ensure citizens’ and communities’ service priorities are addressed?

1.16 Are these management /organizational structures effective and always functional?

1.17 What mechanisms and arrangements are in place and in use:
  - For mobilizing and capacitating community groups to voice their priorities
  - For capacitating service providers to assess and improve their service delivery performance
  - For mobilizing and organizing interface meetings between service users and service providers to discuss and develop service improvement action plans
  - For monitoring, recording and disseminating information on service improvement performances

**SECTION D**

2. What is your suggestion for ensuring citizens’ and communities’, including marginalized groups, and basic service priorities are addressed effectively?
CHECKLIST FOR KEY INFORMANT INTERVIEWS (KII)-ESAP

A: Social Impact

1. Understanding the Objectives, Concepts and Applications of Social Accounting Practices

1.1 Did you participate in awareness raising workshop regarding social accountability in basic service delivery? If Yes,

- Was the concept of social accountability and its objectives explained to you by the implementing partner?
- Were the different social accountability tools and how they are used described and/or explained to you?
- Were you trained in selecting indicators for tracking and assessing the status of basic services?
- Were you given step-by-step instruction on how to assess the status of basic services using one or the different types of social accountability tool such as community scorecard, citizen report card and/or other assessment tools?
- Were you given training on how to dialogue with service providers in interface meetings?

1.2 Are the concepts, objectives, applications of social accountability practices introduced by ESAP clear and well understood by:

- Citizens, community groups and/or basic public service users
- Local government officials, service providers and local elected councils

1.3 Are the implementation procedures/steps of social accountability practices introduced by ESAP properly understood and followed in the term of:

- selection, adaption and applications of social accountability tools appropriate for the sector,
- capacity building and awareness creation,
- selection of participating stakeholders,
- selection of sectors and sites for the pilot project,
- evaluation of basic service using the selected social accountability tool,
- self-evaluation service providers with regard to service delivery performance using the selected social accountability tools,
- rules of engagement in interface meetings between service users and service providers and formulation of reform agendas and action plans, and
- implementation, overseeing and monitoring of agreed-on reform agendas and action plans

2. Outcomes: What were the outcomes/results of ESAP in terms of:

2.1 Increased awareness of service users to voice their rights to obtain quality basic services and to hold responsible and accountable the service providers
2.2 Increased awareness of service providers to deliver quality basic services and to be responsive and accountable to service users.

2.3 Improved capacity of service users to monitor and assess the quality of basic services and to engage with service providers constructively to improve the quality and quantity of basic services.

2.4 Improved capacity of service providers to monitor and assess the quality of basic service delivery and to constructively engage with service users to explain the limitations and planned improvements.

2.5 Improved capacities of marginalized citizens to raise their voice and assess public service delivery.

2.6 Improved capacities of service users and service providers to prioritize issues and establish reform agenda and action plans at interface meetings to improve the quality of basic services.

2.7 Improved quality of interactions and transactions among service users, service providers, local government officers and CSOs

B: TOOLS, APPROACHES & ACTORS

3. Tools

3.1 What social accountability tool did the CSO/IPO use in the different sectors?

3.2 Were the selected social accountability tools properly designed and easy to use?

3.3 What were some of the shortcomings, if any, of these social accountability tools when used for evaluating the quality of education services, health services, water and sanitation services and/or agricultural services?

3.4 Were multiple tools used in assessing the performance of the same basic service?

3.5 What were the benefits of applying multiple tools simultaneously to assess the provision of the same basic service?

3.6 Which tools attracted the maximum positive dialogues between you as the service users, and the service providers during interface meetings?

3.7 Which tools are friendly and simple to use?

3.8 Which tools are most cost-effective to use to assess the quality and quantity of basic services?

3.9 Are the selected performance indicators easily understood and easy to monitor?

3.10 How were the performance indicators selected?

4. Approaches/Processes

4.1 What approaches/processes did the CSO/IPO use in implementing the social accountability pilot activities in each woreda and kebele?

4.2 What approach/process was used for launching the social accountability pilot activities?

4.3 What entry points were used in each region, woreda and kebele in the implementation of the social accountability pilot activities?
4.4 How easy was it to establish presence and implement the social accountability activities in each woreda and kebele in terms of time, cost and acceptance by regional, woreda and kebele officials and community leaders?

4.5 How are the social accountability implementation approaches/processes used by CSOs/IPOs related to or different from other government program implementation approaches/processes (like decentralization, PSCAP, good governance package, financial transparency, etc)?

4.6 In retrospect, what implementation approach/process should have been used to facilitate quick acceptance and implementation of the pilot social accountability activities?

5. **Actors**

5.1 What were the roles and responsibilities of the following actors?

- The Managing Agent (GTZ-IS)
- The implementing CSO/IPO/NGO
- Regional government officials
- Woreda officials
- Kebele Officials
- Community Leaders
- Religious Leaders
- The regional and woreda bureau of finance and economic development (BOFED)
- The Regional and Woreda Capacity Building bureaus responsible for PSCAP, decentralization, good governance, financial transparency and accountability and administrative reforms

5.2 Did these actors fulfill their roles and responsibilities to your expectation?

C. **IMPLEMENTATION ARRANGEMENTS**

6. **Review of Implementation Arrangements:**

6.1 What management / organizational structures were used in the implementation, management, monitoring and reporting regarding the pilot social accountability activities?

6.2 Was the organizational arrangement and relationships among the different organizations (i.e., federal, regional, woreda and kebele government bureaus/offices, donors and NGOs/CSOs, etc.) clearly delineated and well understood?

6.3 How did you find the roles and responsibilities of the regional, woreda and kebele governments in the implementation of the social accountability pilot activities?

6.4 How did you find the role and responsibility of the Managing Agent in capacity building, transfer of best practices, and overseeing the implementation of the social accountability pilot activities?

6.5 What social accountability implementation mechanisms and arrangements were established at woreda and kebele levels:

- To mobilize and capacitate community groups to use social accountability tools
- To mobilize and capacitate service providers to use self-assessment tools
• To mobilize and organize interface meetings between service users and service providers

6.6 What constraints and bottlenecks were faced in the implementation of the social accountability pilot activities?

6.7 How were these bottlenecks and obstacles overcome? Who helped in resolving these bottlenecks and obstacles?

6.8 What follow-up and feedback mechanisms were established and used throughout the implementation of the pilot social accountability activities?

6.9 What suggestions do you have to improve the institutional arrangements during the scaling-up of social accountability practices in phase 2?

D. RECOMMENDATIONS

7. What is your suggestion in making social accountability practices sustainable, integrated/mainstreamed and institutionalized?

7.1 Integrating social accountability practices into the normal functions of woreda and kebele activities

7.2 Creating separate social accountability council

7.3 Which of the following association/social institutions should be involved in the implementation of social accountability activities?

• Women’s associations/organization __

• Youth associations __

• Iddir or village association __

• Other __
CHECKLIST FOR KEY INFORMANT INTERVIEWS (KII)-NON-ESAP

SECTION A

1. Understanding the Concepts of Citizens’ Rights to Public Basic Services & to Hold Service Providers Accountable

1.1 Are you aware that citizens have a right to demand quality public basic services and to hold service providers accountable? If yes,
   - How did you come to know that citizens have the right to demand quality basic services and to hold service providers accountable?
   - Did you attend workshops/seminar to learn about it? If yes, who hosted the workshop/seminar?
   - How do you communicate or interact with citizens to learn about their needs and demands and about your performance?
   - Were you given training on how to respond to citizens and services users? If yes, by whom?

1.2 Do you know if citizens are aware of their rights to demand for improved public basic services and to hold public service providers accountable? If yes, how did come to know that citizens are aware of their rights?

1.3 Are you aware that you are accountable to citizens and civic groups for your service delivery performance? If yes,
   - Do you report your service delivery performance and challenges to civic groups and citizens? If yes, how do you report to citizens?
     - Through workshops/seminars organized by the local government
     - Posting of budgets at Kebele offices, and service departments
     - Other
   - Do you respond to citizens’ / service users’ complaints? If yes, how do you respond?
     - By taking immediate corrective action
     - By taking up the issue to higher levels to get resolution
     - other

1.4 Are there processes/mechanisms in place to receive citizens’ /service users’ complaints? If yes, what mechanisms are in place?
   - Suggestion boxes,
   - Ombudsman Offices,
   - Other

Section A-1

1.5 Do service users exercise their rights and demand improved public basic services? If yes, what forums do they use?
1.6 Are service providers aware that they are responsible to deliver quality basic services and to be responsive and accountable to service users? If yes, how do they respond to criticisms of their service delivery performance?

1.7 Do citizens / service users have the capacity to monitor and assess the quality of basic services and to engage with service providers constructively to improve the quality and quantity of public basic services?

1.8 Do service providers have the capacity to monitor and assess the quality of basic service delivery and to constructively engage with service users to explain the limitations and planned improvements?

1.9 Do marginalized citizens have the capacity to raise their voice and assess public service delivery?

1.10 How are basic service delivery priorities set by the service providers?
   - Through consultations with citizens and communities
   - By expert of service providers
   - Other

**SECTION B**

**Section B-1**

1.11 Do citizens and community groups use specific means to assess the performance of service providers? If yes,
   - What means do citizens and community groups use to assess the performance of service providers?
   - By whom are these means developed or established?
   - Are citizens and community groups trained on how to use these means? and by whom are they trained

1.12 Do service providers use specific mechanisms or procedures to assess their performance of service delivery? If yes,
   - What mechanisms/procedures do they use to assess their service delivery performance?
   - By whom were these mechanisms/procedures developed and established?
   - Are service providers trained to use these mechanisms/procedures? By whom are they trained?

**Section B-2**

1.13 What processes or forums are there for determining citizens’ and communities’ priorities with respect to specific services in education, health, water/sanitation and agriculture?
   - Workshops
   - Focus group discussions
   - Annual budget hearings chaired by the local government councils (LGCs)
- Citizen surveys
- Other

**Section B-3**

1.14 What are the roles and responsibilities of the following actors in making sure citizens including marginalized groups get quality public basic services?

**Government Actors**
- Federal government officials
- Regional government officials
- Woreda officials
- Kebele Officials
- The regional and Woreda Bureau of Finance and Economic Development (BOFED)
- The Regional and Woreda Bureau of Capacity Building (BOCB)

**Civic Groups**
- Community Leaders
- Religious Leaders
- Community Associations (e.g., Women Associations, Youth Associations, Ider, etc.)
- Other

1.15 In your opinion did these actors fulfill their roles and responsibilities?

**Section C**

**Section C-1**

1.16 What management / organizational structures are in place to ensure citizens’ and communities’ service priorities are addressed?

1.17 Are these management /organizational structures effective and always functional?

1.18 What mechanisms and arrangements are in place and in use:
- For mobilizing and capacitating community groups to voice their priorities
- For capacitating service providers to assess and improve their service delivery performance
- For mobilizing and organizing interface meetings between service users and service providers to discuss and develop service improvement action plans
- For monitoring, recording and reporting implementation of and the results of implementations of service improvement action plans

**Section D**

What is your suggestion for ensuring that citizens’ and communities including marginalized groups service priorities are addressed effectively?
Structured Questionnaire to be Administered to Individuals - ESAP

1. Code No_______________________________
2. Kebele _______________
3. Woreda _____________
4. Zone __________
5. Region/City Administration__________
6. Gender:   1. Male ____ 2. Female _____
7. Level of Education:
   1. Cannot read and write ________ 2. Only read & write ______
   3. Attended primary (1-8 grades) ______4. Attended 9-12 grades ______
   5. Attended tertiary level above 12 grade ______
8. Category of service Users:
   1. Users of agricultural extension services (farmers) ______ 2. Students ______
   3. Parents of students ________ 4. Water and sanitation users ______
   5. Patients ________6. Parents of patients ______
9. Were you given orientations/awareness creation on your constitutional rights to demand/voice to get adequate and proper delivery of basic public services (water & sanitation, health services, education and agricultural inputs and extension services before participation in SAPP)?  1. Yes _________ 2. No _________
10. If yes to questionnaire No. 9 above, have you participated in the assessment of basic service delivery through Social Accountability Pilot Projects (SAPP) 1. Yes ______ 2. No ______
11. Have these orientations and awareness creation contributed to improvement in your perception and understanding your rights to demand/voice for adequate and proper delivery of public basic services (education, health, water & sanitation and agricultural input packages)? 1. Yes _____ 2. No ______
12. Have you been part of any process to establish indicators to assess the status of basic service delivery? 1. Yes ______ 2. No ______
13. Were you given capacity and skills on the use of social accountability tools in assessing the adequacy and quality of basic public service delivery? 1. Yes _____ 2. No _____
14. What types of tools did you use?
   1. Citizen’s report card ______ 3. Participatory budgeting ______
   2. Community score card ______ 4. Public expenditure tracking ______
15. Which types of tools did you find more friendly:
   1. Citizen’s report card_______ 3. Participatory budgeting ______
   2. Community score card ______ 4. Public expenditure tracking ______
16. Has your participation in such exercises (SAPP) contributed to asserting your rights and raising your empowerment as a citizen?  1. Yes _____  2. No ___

17. Please indicate the levels of contributions of SAPP exercises to the accessibility, adequacy and quality of the public basic service delivery components by sectors

**17.1  Education**

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Levels/Degree of Contributions of SAPP Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Noting at All</td>
</tr>
<tr>
<td>1. Additional class rooms built</td>
<td></td>
</tr>
<tr>
<td>2. Provision of more text books</td>
<td></td>
</tr>
<tr>
<td>3. Separate toilets for girls &amp; boys built</td>
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<tr>
<td>4. Additional tutorial classes given to weak students</td>
<td></td>
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<tr>
<td>5. School playground built</td>
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<tr>
<td>6. School fence built/repaired</td>
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<tr>
<td>7. Availability of drinking water in the school improved</td>
<td></td>
</tr>
<tr>
<td>8. School supplies &amp; equipment improved/ increased</td>
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</tbody>
</table>

**17.2  Health**

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Levels/Degree of Contributions of SAPP Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Noting at All</td>
</tr>
<tr>
<td>1. Adjustments were made in working hours staff to meet the special needs of service users (e.g. weekends, holidays, nights etc.)</td>
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<tr>
<td>2. Child delivery service was introduced where it was absent</td>
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<td>3. Clinic beds, bed sheets &amp; blankets were made available to patients who used to bring their own</td>
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<tr>
<td>4. Supplies/availabilities of drugs improved</td>
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<td>5. More qualified &amp; experienced health (doctors, nurses) officers assigned</td>
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<td>6. Laboratory facilities &amp; detergents improved</td>
<td></td>
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<tr>
<td>7. Water and sanitation facilities improved</td>
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</table>
## 17.3 Water and Sanitation

<table>
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<tr>
<th>Indicators</th>
<th>Levels/Degree of Contributions of SAPP Activities</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Noting at All</td>
</tr>
<tr>
<td>1. Water distribution (timely, adequacy &amp; quality) improved</td>
<td></td>
</tr>
<tr>
<td>2. Equipment repair &amp; maintenance improved</td>
<td></td>
</tr>
<tr>
<td>3. Construction of new water points built</td>
<td></td>
</tr>
<tr>
<td>4. Construction of new water sources</td>
<td></td>
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<tr>
<td>5. Distances to water points reduced</td>
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<tr>
<td>6. Fences were built around water points</td>
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<tr>
<td>7. New garbage collections built</td>
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<tr>
<td>8. Dumping facilities &amp; sites put in place</td>
<td></td>
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<tr>
<td>9. Sewerage and drainage facilities improved</td>
<td></td>
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<tr>
<td>10. More community latrines built</td>
<td></td>
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<tr>
<td>11. Municipalities increased sucking community latrines by vehicles</td>
<td></td>
</tr>
<tr>
<td>12. Have more latrines built by individuals</td>
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## 17.4 Agriculture

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<tr>
<th>Indicators</th>
<th>Levels/Degree of Contributions of SAPP Activities</th>
</tr>
</thead>
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<tr>
<td></td>
<td>Noting at All</td>
</tr>
<tr>
<td>1. Number of extension agents increased</td>
<td></td>
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<tr>
<td>2. Number of farmers visited by extension agents per day/week increased</td>
<td></td>
</tr>
<tr>
<td>3. Number of farmers trained increased</td>
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<tr>
<td>4. Facilities for training farmers increased</td>
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<tr>
<td>5. Adequacy and supplies of agricultural inputs improved (fertilizers, selected seeds, pesticides, etc) improved</td>
<td></td>
</tr>
<tr>
<td>6. Timely delivery of agricultural improved</td>
<td></td>
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<tr>
<td>7. Supplies of tree seedlings improved/ increased</td>
<td></td>
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<tr>
<td>8. Seed supplies of horticulture improved</td>
<td></td>
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<tr>
<td>9. Supplies of veterinary drugs improved</td>
<td></td>
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<tr>
<td>10. Additional vet staff provided</td>
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</table>

18. Have the dialogue and engagements established between service users and service providers at the interface meetings contributed to changes in accessibility, quality and adequacy of basic service delivery  1. Yes ______  2. No. _______

19. Has the capacity of service providers to improve delivery of basic service been enhanced the results of interface dialogues?  1. Yes______  2. No ________
20. Indicate the levels of contributions of SAPPs to relations between local governments, CSOs/IPOs and service users and providers (in terms mutual trust, understanding, collaborations, etc)

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<thead>
<tr>
<th></th>
<th>Improved</th>
<th>No Change</th>
<th>Worse</th>
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<tbody>
<tr>
<td>After implementation of SAPP</td>
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21. Have SAPP activities contributed to ways of identification and application to improve effective women participation after implementation of SAPP?

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<th></th>
<th>Improved</th>
<th>No Change</th>
<th>Worse</th>
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<tr>
<td>After implementation of SAPP</td>
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22. Have the SAPP activities contributed to meeting specific needs of women in health facilities after the implementation of SAPP?

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<th></th>
<th>Improved</th>
<th>No Change</th>
<th>Worse</th>
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<tr>
<td>After participation in SAPP</td>
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23. Have the SAPP activities contributed to improvements in relationship between girl students and teachers after the implementation of SAPP?

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<thead>
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<th></th>
<th>Improved</th>
<th>No Change</th>
<th>Worse</th>
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<tr>
<td>After participation in SAPP</td>
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24. Have the SAPP activities contributed to improvement in accessibility, quality and adequacy of basic service delivery to marginalized groups in the community?

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<tr>
<th></th>
<th>Improved</th>
<th>No Change</th>
<th>Worse</th>
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<tr>
<td>After participation in SAPP</td>
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25. What is your suggestion in making SA exercise sustainable and institutionalized?
   1. Integrating/mainstreaming SA into the normal functions of woreda and kebele activities
   2. Creating separate SA council
   3. Involving community based organizations like:
      • Iddirs
      • Youth associations
      • Women associations
      • Others

26. Do you recommend scaling up SAPP and applying to other woredas?
   1. Yes  2. No

27. What mechanism of monitoring and evaluation do you recommend to sustain SA?
Structured Questionnaire to be Administered to Individuals in Non-SAPP Areas

1) Code No_______________________________
2) Kebele _______________
3) Woreda ____________
4) Zone ___________
5) Region/City Administration___________
6) Sex: 1. Male ____ 2. Female _____
7) Level of Education:
   1. Cannot read and write _______ 4. Attended 9-12 grades _______
   2. Only read & write _______ 5. Attended tertiary level _______
   3. Attended primary (1-8 grades) _______
8) Category of service Users:
   1. Users of agricultural extension services (farmers) ____ 4. Water and sanitation users _______
   2 Students ______ 5. Patients _______
   3. Parents of students ______ 6. Parents of patients _______
9) Do you know that it is your constitutional rights as a citizen to demand/voice for proper provision of basic services (like education, health, water & sanitation, and agricultural extension services)? 1. Yes _________ 2. No _________ 3. Don’t Know
10) Are you consulted on improvement and investment of basic services in your kebele like education, health, water & sanitation and agricultural development projects 1. Yes ______ 2. No ______
11) Have you access to information on your kebele's development plan, budget allocation and expenditures? 1. Yes ______ 2. No _______
12) Have you means of submitting your complaints on problems of getting adequate and proper basic services like health, education, water and sanitation and agricultural extension services?
   1. Yes ______ 2. No _______
13) If yes to question No. 12 how do you submit your complaints and problems?
   13.1 Individually by yourself to sector service providers -- health, education, water and sanitation and agricultural extension service________
   13.2 Together with neighbors and other service users to sector service providers _______
   13.3 Through mass-based organizations like Iddirs, women & youth associations _______
   13.4 Through users associations like water & irrigation committees, PTA, agricultural cooperatives, and health committees _______
   13.5 Through kebele and woreda counselors________
   13.6 Others, ______________________________________________________________
   13.7 Through all the above ______________
14) If yes to question No. 12 but did not complain or demand for better services, why did you not express your demand/complaints?

14.1 Because I do not know the means of submission of my complaints ________
14.2 Because I feel I do not get responses ________
14.3 Because I am afraid of reprisals ____________
14.4 Any other reasons __________________________

15) When you submit your complaints and problems do you get quick and effective responses from service providers within

15.1 7 days ________
15.2 15 days ________
15.3 21 days ________
15.4 30 days ________
15.5 Not all ________

16) Are there users committees/associations like: Yes No Do not Know

16.1 Health committee ________ ________ ________
16.2 Education committee ________ ________ ________
16.3 Water & sanitation committee ________ ________ ________
16.4 Agricultural extension committee ________ ________ ________
16.5 Irrigation Committee ________ ________ ________

17) If Yes to question 16 above, are these users committees active and effective to demand and raise their voice for proper and adequate of basic services?

17.1 Health committee ________ ________ ________
17.2 Education committee ________ ________ ________
17.3 Water & sanitation committee ________ ________ ________
17.4 Agricultural extension committee ________ ________ ________
17.5 Irrigation Committee ________ ________ ________

18) If your complaints and problems regarding basic public services are not attended and solved by service providers after submitting complaints through various means listed under 13 above, what next steps do you take to demand proper service?

18.1 Do nothing _________________
18.2 Submit appeal to woreda sector departments _____________
18.3 Submit appeal to woreda & kebele administration ___________
18.4 Submit appeal to woreda and kebele counsel & assembly __________

19) Do the different sector service providers conduct regular/occasional service users’ survey on to learn about the adequacy, coverage, satisfaction and complaints on provision of basic services?

Yes No Don’t Know
20) If yes to question No. 19, do the service providers take positive steps to respond to complaints and to resolve the problems expressed during such surveys on users?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Do not Know</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

20.1 Health

20.2 Education

20.3 Water & sanitation

20.4 Agricultural Extension service

21) Are there any forums/meetings that are regularly/occasionally organized by woreda and kebele administrations, to hear citizens voice on proper and adequate basic services?

1. Yes _____ 2. No _____ 3. Don’t Know

22) Are there any forum/meetings that are regularly organized by community/mass based organizations like Iddirs, youth association, parent associations, and women associations to discuss complaints and problems on provision of basic public services?

1. Yes _____ 2. No _____

23) Please indicate the degree of responses and timely actions being taken when complaints on problems are /submitted on of basic service by users through different means?

### 23.1 Education

<table>
<thead>
<tr>
<th>Nature of complaints/problems</th>
<th>Degree of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No comment</td>
</tr>
<tr>
<td>1. Requirements for additional class rooms</td>
<td></td>
</tr>
<tr>
<td>2. Requirements for provision of more text books</td>
<td></td>
</tr>
<tr>
<td>3. Requirements for separate toilets for girls &amp; boys</td>
<td></td>
</tr>
<tr>
<td>4. Requirements for additional tutorial classes to be given to weak students</td>
<td></td>
</tr>
<tr>
<td>5. Requirements for school playground</td>
<td></td>
</tr>
<tr>
<td>6. Requirements for school fence building /repairs</td>
<td></td>
</tr>
<tr>
<td>7. Requirements for availability of drinking water in the school improved</td>
<td></td>
</tr>
<tr>
<td>8. Requirements for school supplies &amp; equipment improved</td>
<td></td>
</tr>
</tbody>
</table>

### 23.2 Health

<table>
<thead>
<tr>
<th>Nature of complaints/problems</th>
<th>Degree of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No comment</td>
</tr>
<tr>
<td>1. Requirements for adjustments in working hours of staff</td>
<td></td>
</tr>
</tbody>
</table>
to meet the special needs of service users (e.g. weekends, holidays, nights etc.)

2. Requirements for child delivery service where it was absent

3. Requirements for clinic beds, bed sheets & blankets to patients who used to bring their own

4. Requirements for supplies/availabilities of drugs

5. Requirements for more qualified & experienced health (doctors, nurses) officers to be assigned

6. Requirements for laboratory facilities & detergents

7. Requirements for improved water and sanitation facilities improved

### 23.3 Water and Sanitation

<table>
<thead>
<tr>
<th>Nature of complains/problems</th>
<th>Degree of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Requirements for improvement of water distribution (timely, adequacy &amp; quality) improved</td>
<td>No comment</td>
</tr>
<tr>
<td>2. Requirements for improvement of equipment repair &amp; maintenance improved</td>
<td></td>
</tr>
<tr>
<td>3. Requirements for improvement of construction of new water points</td>
<td></td>
</tr>
<tr>
<td>4. Requirements for improvement of construction of new water sources</td>
<td></td>
</tr>
<tr>
<td>5. Requirements for improvement of reduced distances to water points</td>
<td></td>
</tr>
<tr>
<td>6. Requirements for improvement of fences around water points</td>
<td></td>
</tr>
<tr>
<td>7. Requirements for improvement of new garbage collections</td>
<td></td>
</tr>
<tr>
<td>8. Requirements for improvement of dumping facilities &amp; sites put in place</td>
<td></td>
</tr>
<tr>
<td>9. Requirements for improvement of improved sewerage and drainage facilities</td>
<td></td>
</tr>
<tr>
<td>10. Requirements for more community latrines</td>
<td></td>
</tr>
<tr>
<td>11. Requirements for municipalities increased sucking community latrines by vehicles</td>
<td></td>
</tr>
<tr>
<td>12. Requirements for more latrines by individuals</td>
<td></td>
</tr>
</tbody>
</table>

### 23.4 Agriculture

<table>
<thead>
<tr>
<th>Nature of complains/problems</th>
<th>Degree of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Requirements for improvement of water distribution (timely, adequacy &amp; quality) improved</td>
<td>No comment</td>
</tr>
<tr>
<td>2. Requirements for improvement of equipment repair &amp; maintenance improved</td>
<td></td>
</tr>
<tr>
<td>3. Requirements for improvement of construction of new water points</td>
<td></td>
</tr>
<tr>
<td>4. Requirements for improvement of construction of new water sources</td>
<td></td>
</tr>
<tr>
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<td>6. Requirements for improvement of fences around water points</td>
<td></td>
</tr>
<tr>
<td>7. Requirements for improvement of new garbage collections</td>
<td></td>
</tr>
<tr>
<td>8. Requirements for improvement of dumping facilities &amp; sites put in place</td>
<td></td>
</tr>
<tr>
<td>9. Requirements for improvement of improved sewerage and drainage facilities</td>
<td></td>
</tr>
<tr>
<td>10. Requirements for more community latrines</td>
<td></td>
</tr>
<tr>
<td>11. Requirements for municipalities increased sucking community latrines by vehicles</td>
<td></td>
</tr>
<tr>
<td>12. Requirements for more latrines by individuals</td>
<td></td>
</tr>
</tbody>
</table>
1. Requirements for increased number of extension agents  
2. Requirements for increased number of farmers visited by extension agents per day/week  
3. Requirements for increased number of farmers trained  
4. Requirements for facilities for training farmers increased  
5. Requirements for improved adequacy and supplies of agricultural inputs improved (fertilizers, selected seeds, pesticides, etc)  
6. Requirements for timely delivery of agricultural inputs improved  
7. Requirements for supplies of tree seedlings improved/increased  
8. Requirements for seed supplies of horticulture improved  
9. Requirements for supplies of veterinary drugs improved  
10. Requirements for additional vet staff provided  

24) Are there ways of effective women participation in woreda/kebele development committees?  
   1. Yes _______  2. No _______ 3. Don’t Know  

25) Are there means of effective women participation in basic services like?  
   Yes  No  Don’t Know  
   25.1 Health  
   25.2 Education  
   25.3 Water & sanitation  
   25.4 Agricultural Extension service  

26) Are there activities in basic services to meeting specific needs of women in health, education, water & sanitation and agricultural extension services?  
   Yes  No  Don’t Know  
   26.1 Health  
   26.2 Education  
   26.3 Water & sanitation  
   26.4 Agricultural Extension service  

27) Are there activities to improvements in relationship between girl students and teachers in schools?  
   1. Yes _______  2. No _______ 3. Don’t Know _______  

28) What mechanism of monitoring and evaluation do you recommend to sustain public basic service deliveries?  

29) Are there activities to improve accessibility, quality and adequacy of public basic service delivery to marginalized groups in the community?  
   1. Yes _______  2. No _______  

30) What is your suggestion for institutionalizing service users’ feedback and input for improving public basic services delivery?
Check-list for CSOs/IPOs Interviews

A. **Social Impact**

1. **Understanding the Concepts and Objectives of Social Accountability**
   - How do you understand the concepts and uses of social accountability practices?
   - Are the objectives of the Ethiopian Social Accountability Pilot (ESAP) program clear and well defined?
   - Has the ESAP achieved its objectives?
   - Has the ESAP raised understanding and awareness of citizens to demand their rights for provision of basic public services (education, health, water & sanitation and agricultural extension packages)?
   - Has ESAP raised awareness of citizens and changed their attitudes towards public officials and service providers?
   - Has ESAP raised awareness of service providers regarding their roles and responsibilities and their accountability to citizens/service users?
   - How has the delivery of basic services changed as a result of ESAP activities?
   - What do you feel about citizens/users responsibility?

2. **Responsiveness of service providers:**
   - Do you think service providers were responsive enough?
     a. Please illustrate
   - Did you or your community group face back-lash from local officials and/or service providers?
     a. If yes, please illustrate
   - Were service providers actively and enthusiastically engaged in the interface meetings and the drawing up of reform agenda/action plans?

3. **What do you feel is the contribution of ESAP?**
   - Better service standards
   - Interest and engagement of citizens with service providers to improve basic service delivery?
   - Openness of service providers to citizens’ oversight and evaluation of basic services delivery?
   - Increased responsiveness of the service providers?
   - Increased citizens’ eagerness to raise voice and demand rights? For improved basic service delivery?
   - How can you say this is ESAP contribution? (not PSCAP, Good governance, FTA impact)

4. **Which sector showed maximum response and why? (Ask organization working with more than one sector)**

5. **Was there any spillover effect on the non-ESAP sectors and/or woredas/kebeles?**
   - Have been approached by service providers to implement social accountability tools in non-pilot sectors?
   - Have been asked to implement social accountability activities in non-pilot woredas/kebeles by local government officials?
133

- Have been approached by non-pilot community groups to implement social accountability activities in their kebele?

B. TOOLS, APPROACHES & ASSETS
6. What social accountability tools (i.e., community scorecard, citizen report card, public expenditure track, participatory planning and budgeting, etc.) did your organization select/adopt?

7. For what sector(s) (i.e., education, health, water/sanitation, and agriculture) did you use these tools?

8. Why did you select to use each of these social accountability tools?

9. What do you think of the tools?
   - What criteria did you use to the tools you used?
   - Do you feel the social accountability tools given to you were most appropriate for the sector and the work?
   - What are the challenges you faced in applying the tools?
   - Which tools would you rate the best and why?

10. What approach/process did you use to launch the social accountability project?

11. What challenges and obstacles did you faced during the launching and implementation of ESAP with respect to acceptance by and engagement of the following actors?
   - Citizens/Users
   - Regional officials
   - Kebele/Woreda officials
   - Service Providers/Line Department staff

12. What approach/process did you use:
   - For regional and local government officials sensitization
   - For community mobilization
   - For selection of participants
   - For training of service providers

C. INSTITUTIONAL ARRANGEMENTS
13. Why do you think your organization was selected?
   - Prior experience on advocacy for improved Basic Services?
   - Technical knowledge of sector
   - Good rapport with community and/or officials
   - All of the above
   - Any other reasons?

14. What do you think of the structure of ESAP?
   - What support the implementing partners (IPOs) successfully obtained from the grantee CSOs and what support did you fail to get?
   - How did disputes and misunderstandings get resolved (a) between Managing Agent & CSOs, and (b) between CSOs & IPOs?
• To what extent did each CSOs/IPOs and Managing Agent attempted to link the social accountability activities to other government led capacity building and reform programs like PSCAP, Decentralization, Financial Transparency?
  a. Please explain how?
• What do you think of the Steering Committee, Management Agency role and responsibilities?
• What was the role of local government in facilitating effective application of ESAP?
• How fast and smooth was the disbursement of funds from the donor to CSOs and IPOs through the Managing Agent?
• How effective was the flow of information, monitoring and progress reports and communications to and from the Managing Agent?
• Was feedback and technical support received from the Managing Agent?

15. Are you satisfied with the trainings and technical support you received from the Managing Agent and/or the lead CSO?
• On the Issues of Social Accountability
• On the Social Accountability tools
• On International Best Practices
• On the training you provided to citizens/community groups and service providers and community facilitators?
• Are you confident your trainees, citizens and officials can implement the social accountability activities and apply the tools on their own?

16. What suggestions would you make to improve the institutional structure/arrangements for future?

17. What is your suggestion in making social accountability practices sustainable, integrated/mainstreamed and institutionalized?
• Integrating social accountability practices into the normal functions of woreda and kebele activities _________
• Creating separate social accountability council _______
• Which of the following association/social institutions should be involved in the implementation of social accountability activities?
  i. Women’s associations/organization __
  ii. Youth associations __
  iii. Iddir or village association __
  iv. Other __

D. INVENTORY OF ASSETS
18. What material, systems and human capital have you developed during the course of implementation the pilot social accountability project that could be adopted for Phase 2?
• Project Management Unit
• Training Material on Social Accountability Tools
• Community and religious leaders trained
• Community Facilitators/Trainers trained
• Interface meetings facilitators trained
• Reform agenda/action plan oversight and monitoring task forces
• Etc. please fill out the attached questionnaire
Asset Inventory Survey Form

Form No. ----

**Instruction:** Please complete the following to indicate the asset base (people, processes and products) that have been created in the course of PBS I - ESAP implementation in the areas of your organization’s operation.

Abbreviations/ Acronyms used: PBS I = Protection of Basic Services Pilot Phase, ESAP = Ethiopian Social Accountability Project, CSO = Civil Society Organization, GO = Government Organization

I. Identification (Respondent Institution’s Particulars)

1. Name of actor ____________________________ (Lead CSO, Partner CSO, GO, kebele/community, others/specific)
2. Location ________________________________ (Region, Town/ City, etc)
3. Contact address: Tel: ______________, Fax: ______________, P.O. Box: ______________, E-mail __________________
4. Main sectors of engagement ________________________________ (in the case of implementing CSOs and service providers)
5. Coverage: woreda _____________, kebele/community __________, number of beneficiaries/ citizens ____________
6. Number of staffs (at present):
   6.1. Technical staffs: Male ________ Female _________ Total ____________
   6.2. Support staffs: Male ________ Female _________ Total ____________

II. Assets created during the 18 months of the ESAP implementation

7. Available human resource/ personnel that were involved in the implementation of the ESAP
   7.1. Skilled personnel: Male __________ Female __________ Total ____________
   7.2. Skilled personnel by qualification:

<table>
<thead>
<tr>
<th>Qualification</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7.3. Support personnel: Male ________ Female ________ Total ____________

8. Description of process of implementation
   8.1. Planning stage including site selection: (how inclusive was the process, citizens participation, etc.)
   ____________________________________________________________

8.2. Implementation stage: What specific SA tools/ methods were adopted?
   ____________________________________________________________

8.3. Follow-up/ monitoring mechanisms used:
   ____________________________________________________________

9. Materials developed during the implementation
   9.1. Reports, training materials (manuals and/or tool-kits) produced:

<table>
<thead>
<tr>
<th>Category of material</th>
<th>Title including year</th>
<th>Brief description of purpose/ objectives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reports</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Manuals/ tool-kits</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
9.2. Training of trainers provided (CSOs, GOs, community members/ citizens) at different levels:

Training of CSOs: training courses provided and number of trainees

<table>
<thead>
<tr>
<th>Training courses</th>
<th>Number of trainees</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
</tr>
</tbody>
</table>

Training of GOs: training courses provided and number of trainees

<table>
<thead>
<tr>
<th>Training courses</th>
<th>Number of trainees</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
</tr>
</tbody>
</table>

Training of kebele/ community: training courses provided and number of trainees

<table>
<thead>
<tr>
<th>Training courses</th>
<th>Number of trainees</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
</tr>
</tbody>
</table>

9.3. Trainings provided and number of trainees from the different partners (CSOs, GOs, community members/ citizens) at different levels:

Training of CSOs: training courses provided and number of trainees

<table>
<thead>
<tr>
<th>Training courses</th>
<th>Number of trainees</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
</tr>
</tbody>
</table>

Training of GOs: training courses provided and number of trainees

<table>
<thead>
<tr>
<th>Training courses</th>
<th>Number of trainees</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
</tr>
</tbody>
</table>

Training of kebele/ community: training courses provided and number of trainees

<table>
<thead>
<tr>
<th>Training courses</th>
<th>Number of trainees</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
</tr>
</tbody>
</table>

9.4. Fixed assets procured and put in place:

<table>
<thead>
<tr>
<th>Type/ description</th>
<th>Quantity</th>
<th>Value in Birr (USD)*</th>
<th>Location</th>
</tr>
</thead>
</table>

* Approximate value (please specify currency)

10. Please describe the status (the actual situation on the ground, etc) of the different assets (human capital, process, and products) you have developed in the course of SA pilot phase, and in what ways the assets could be adopted for phase 2 (e.g., availability and feasibility); with emphasis on:
10.1. Project management unit,  
10.2. Developed training materials on social accountability tools  
10.3. Community and religious leaders trained,  
10.4. Community facilitators/ trainers trained,  
10.5. Interface meeting facilitators trained,  
10.6. Implementation arrangement, and monitoring and evaluation mechanisms, etc established
## Annex 6: Number of Citizens Surveyed, FGDs and Key-Informants by Region and Woreda/Town

### ESAP Areas – Structured Survey

<table>
<thead>
<tr>
<th>Region</th>
<th>Zone</th>
<th>Woreda/ Town</th>
<th># of Kebeles</th>
<th># of Citizens</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oromia</td>
<td>East Shoa</td>
<td>Fantalle</td>
<td>2</td>
<td>8 8 16</td>
</tr>
<tr>
<td></td>
<td>East Hararghe</td>
<td>Kombolcha</td>
<td>2</td>
<td>5 9 14</td>
</tr>
<tr>
<td></td>
<td>Jimma Special Zone</td>
<td>Jimma town</td>
<td>2</td>
<td>6 6 12</td>
</tr>
<tr>
<td></td>
<td>Jimma</td>
<td>Gomma</td>
<td>2</td>
<td>6 6 12</td>
</tr>
<tr>
<td></td>
<td>Illu Aba Bora</td>
<td>Mettu woreda</td>
<td>2</td>
<td>6 6 12</td>
</tr>
<tr>
<td></td>
<td>West Wollega</td>
<td>Ghimbi</td>
<td>2</td>
<td>5 7 12</td>
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<tr>
<td></td>
<td>Arsi</td>
<td>Zuway Dugda</td>
<td>2</td>
<td>6 6 12</td>
</tr>
<tr>
<td></td>
<td>Sabbata Special Zone</td>
<td>Sabbata Hawas</td>
<td>2</td>
<td>6 5 11</td>
</tr>
<tr>
<td>Somali</td>
<td>Shinille</td>
<td>Shinille</td>
<td>2</td>
<td>11 5 16</td>
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<tr>
<td>Harari</td>
<td>Harari</td>
<td>Hakim</td>
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<td>8 8 16</td>
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<td></td>
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<td>6 2 8</td>
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<tr>
<td>Amhara</td>
<td>Awi</td>
<td>Dangila</td>
<td>2</td>
<td>7 3 10</td>
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<tr>
<td></td>
<td>North Shoa</td>
<td>Ephrata Gidem</td>
<td>2</td>
<td>3 5 8</td>
</tr>
<tr>
<td>Tigray</td>
<td>Eastern Tigray</td>
<td>Ganta Afeshoum**</td>
<td>2</td>
<td>5 4 10</td>
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<tr>
<td></td>
<td>Southern Tigray</td>
<td>Raya Azebo</td>
<td>2</td>
<td>9 5 14</td>
</tr>
<tr>
<td></td>
<td>Mekelle Special Zone</td>
<td>Makalle town</td>
<td>2</td>
<td>7 3 10</td>
</tr>
<tr>
<td>Beni- Shangul Gumuz</td>
<td>Assosa</td>
<td>Assosa</td>
<td>3</td>
<td>9 9 18</td>
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<tr>
<td>SNNPR</td>
<td>Sidama</td>
<td>Hawasa/ Hayikdar</td>
<td>2</td>
<td>4 7 11</td>
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<tr>
<td></td>
<td>Hadiya</td>
<td>Misha</td>
<td>2</td>
<td>6 6 12</td>
</tr>
<tr>
<td>Addis Ababa</td>
<td>Addis Ababa</td>
<td>Addis Ketema*</td>
<td>2</td>
<td>7 6 13</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Arada*</td>
<td>2</td>
<td>7 5 12</td>
</tr>
<tr>
<td>Dire Dawa</td>
<td>Dire Dawa</td>
<td>Dire Dawa town</td>
<td>2</td>
<td>7 9 16</td>
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<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td>44</td>
<td>144 130 275</td>
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</tbody>
</table>

* These are sub-cities; ** One case missing, sex not reported

### Non-ESAP areas - Structured Survey

<table>
<thead>
<tr>
<th>Region</th>
<th>Zone</th>
<th>Woreda/ Town</th>
<th># of Kebeles</th>
<th># of Citizens</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oromia</td>
<td>West Hararghe</td>
<td>Chiro</td>
<td>2</td>
<td>11 5 16</td>
</tr>
<tr>
<td></td>
<td>Illu Aba Bora</td>
<td>Bilo Nopha</td>
<td>2</td>
<td>7 6 13</td>
</tr>
<tr>
<td></td>
<td>Jimma Sepcial Zone</td>
<td>Jimma town</td>
<td>2</td>
<td>6 5 11</td>
</tr>
<tr>
<td></td>
<td>East Shoa</td>
<td>Liban Chuqala</td>
<td>2</td>
<td>6 5 11</td>
</tr>
<tr>
<td>Somali</td>
<td>Shinille</td>
<td>Erer-Gota</td>
<td>1</td>
<td>1 5 6</td>
</tr>
<tr>
<td>Harari</td>
<td>Harari</td>
<td>Jini-Ela</td>
<td>1</td>
<td>5 3 8</td>
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<tr>
<td></td>
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<tr>
<td>Amhara</td>
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<td>Mecha</td>
<td>2</td>
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* These are sub-cities; ** One case missing, sex not reported

### ESAP Areas: Key-Informants and FGDs

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**Total**: 44 104 120

* Sub-cities

### Non-ESAP Areas: Key-Informants and FGDs

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**Total**: 25 57 74

* Sub-cities
Annex 7: Template for Database of ESAP Assets

Name of CSO/ IPO _______________________________________________________

I. Identification (Institution's Particulars)

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<th>S/N</th>
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II. Number of project staffs assigned by the CSOs/ IPOs by category of trainee

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IV. Training materials, manuals/ guides, and main reports produced by CSO/ IPO and category of reports

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V. Physical assets

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* Approximate