HOLDING A MIRROR TO THE GOVERNMENT!

EXPERIENCES WITH CITIZEN REPORT CARDS
OVERVIEW OF PRESENTATION

- The *Context* – Why Citizen Report Cards?
- The *Concept* – What is a Citizen Report Card?
- The *Method* – How Citizen Report Cards are designed
- The *Impact* – Major outcomes of Citizen Report Cards
- The *Lessons* – Critical experiences & takeaways
CONTEXT: WHY CITIZEN REPORT CARDS?

➡️ Lack of Accountability
- When the government holds a monopoly over service provision, citizens are unable to find alternatives if service is ineffective.

➡️ Lack of Responsiveness
- As service providers, governments only take into account a supply-side perspective and do not account for the experiences of actual users of their services (the demand side).

➡️ Lack of Incentive
- Within the government hierarchy, the incentives of individual services providers can be misaligned, which serves to block demand-driven improvements.
LESSONS FROM A SCHOOL REPORT CARD

- Power of MEASUREMENT
- Power of COMPARISON
- An Opportunity for REFLECTION
- A trigger for CHANGE & IMPROVEMENTS

<table>
<thead>
<tr>
<th>SUBJECT</th>
<th>MAX. Marks</th>
<th>Highest Marks</th>
<th>Actual marks</th>
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<tr>
<td>English</td>
<td>100</td>
<td>82</td>
<td>82</td>
</tr>
<tr>
<td>Math</td>
<td>100</td>
<td>85</td>
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<td>Social Studies</td>
<td>150</td>
<td>125</td>
<td>125</td>
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<td><strong>Total</strong></td>
<td><strong>500</strong></td>
<td><strong>415</strong></td>
<td><strong>336</strong></td>
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**Rank in class: 16/30**
CONCEPT: WHAT IS A CITIZEN REPORT CARD?

Background Work and Preliminaries

Implementation of Citizen Report Card

Continuous Benchmarking and Periodic Review

Successful Citizen-Driven Reform

Creation of Institutional Self-Monitoring Mechanisms

Dialogue with and response of service providers

Engagement with stakeholders

Engagement in various forms of advocacy

Dissemination of findings

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THE CRITICAL "9"

- Interest in Higher Levels of Govt.
- Political Setting
- Decentralization
- Ability to Seek Feedback
- Ability to Voice Experiences
- Orientation & Responsiveness of Service Providers
- Quality of Media
- Skills for Survey & Advocacy
- Presence of Activism of CSOs

PAF Ti Srilanka

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Elements of the CRC Process

- **Preliminary Work:** Identify the issues, ascertain feasibility of CRC, define scope of action, design survey, and frame the sample.

- **Implementation of CRC:** Collect user feedback, engage with service providers, rate services, analyze and interpret data, and produce reports.

- **Setting an Agenda for Reform:** Actively engage all stakeholders (users, citizens, service providers, policymakers, etc.), disseminate findings, and promote advocacy (civil society, media, etc.).

- **Benchmarking and Reform:** Affect citizen-driven reform and maintain a continuous benchmarking process through periodic review.

- **Self-Monitoring Institutions:** Encourage service providers to be accountable and monitor their own effectiveness without requiring external impetus.

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METHOD: STAGES IN CITIZEN REPORT CARD

DEFINING SCOPE OF ACTION

PREPARATIONS AND COLLECTING CITIZEN FEEDBACK

RATING OF SERVICES

DIALOGUE AND RESPONSE OF AGENCIES

CITIZEN ENGAGEMENT IN REFORM

PERIODIC BENCHMARKING AND PUBLIC REVIEW
Who can implement a CRC?

- Individual Civil Society Organizations – PAC & TIB
- Civil Society Partnerships – People’s Voice Project, PANE
- Independent Multi-Stakeholder Consortiums – Kenya, Tanzania
- Governments – Internal (Vietnam) & Open (Delhi)

Are there tools to supplement a CRC?

- Depending on the needs and scale of the community monitoring project, a Community Score Card (CSC) can be undertaken either in place of or to supplement a CRC
- CRCs are best suited for gathering large-scale feedback (e.g., a city), while CSCs are designed for small-scale projects (e.g., a village school)
IMPACT:
THE POWER OF MEASUREMENT & COMPARISON

CITIZEN REPORT CARDS AND HEALTH
Tajikistan - Gauging Satisfaction with Different Dimensions of Health Services

Explanation of diagnosis & treatment
Medical equipment
Quality of hospital room & bed
Waiting time
Attitude & respect shown by staff
Availability of staff
Cost of medicine and treatment
Transparency of fees and costs
Overall

Very Good
Somewhat Good
Somewhat Bad
Very Bad
Kyrgyzstan - Rating Various Aspects of Service at Oblast Hospitals

<table>
<thead>
<tr>
<th>Aspect</th>
<th>Score out of 5</th>
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<tbody>
<tr>
<td>Staff Attitude</td>
<td>4.1</td>
</tr>
<tr>
<td>Cleanliness of ward</td>
<td>4.19</td>
</tr>
<tr>
<td>Cleanliness of conveniences</td>
<td>3.98</td>
</tr>
<tr>
<td>Availability of equipments</td>
<td>4.13</td>
</tr>
<tr>
<td>Availability of Medicines</td>
<td>3.98</td>
</tr>
<tr>
<td>Care for patients</td>
<td>4.16</td>
</tr>
<tr>
<td>Skill of personnel</td>
<td>4.2</td>
</tr>
<tr>
<td>Distance to facility</td>
<td>3.59</td>
</tr>
<tr>
<td>Costs</td>
<td>3.78</td>
</tr>
<tr>
<td>Effectiveness of Treatment</td>
<td>4.1</td>
</tr>
<tr>
<td>Overall score</td>
<td>4.03</td>
</tr>
</tbody>
</table>

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## Bangalore- Public Hospitals 1999 (general households)

<table>
<thead>
<tr>
<th>The bribery matrix</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Proportion in sample claiming to have paid a bribe (%) (1994)</td>
<td>17</td>
</tr>
<tr>
<td>Proportion in sample claiming to have paid a bribe (%) (1999)</td>
<td>24</td>
</tr>
<tr>
<td>Average payment per transaction in Rupees (1994)</td>
<td>396</td>
</tr>
<tr>
<td>Average payment per transaction in Rupees (1999)</td>
<td>289</td>
</tr>
</tbody>
</table>

**Major finding:**
Percentage of users paying a bribe has increased, while amount of bribe (in Rupees) has decreased
Bangalore Government Hospitals - Quality/Reliability

Some Findings

- 99% of slum respondents report doctor’s chamber as clean
- 34% report presence of doctors at the time of visit
- 37% said all the required medicines were available
- 11% report being given expired medicine
- 69% completely satisfied with the time taken by the government hospital staff to attend to them

Follow up

- Board of visitors constituted
- Help desk for patients
- Constant internal reform from the health department and health authorities
LESSONS: MAJOR POINTS OF INFLUENCE

- Counting and discussing instead of just shouting
- Presenting strengths and weaknesses – “pat” & “slap”
- Enables policy makers set policy priorities
- Helps agency managers assess service efficiency
- Provides a bridge for civil society to dialogue on citizens’ priorities
- Transmits the voice of the poor without intermediation by representatives
contact & other information

⒜ E-learning course on CRC at www.citizenreportcard.com
⒝ Cd copies available if you want to copy it
⒝ Film on CRC available - few copies - copy if required from my laptop
⒟ Paf website - www.pafglobal.org
⒠ Email - sita@pafglobal.org