

*Citizen Voice and Action for Government Accountability
and Improved Services:
Maternal, Newborn, Infant and Child Health Services*

GPSA Knowledge Platform Webinar: Systems strengthening, shifting of local power dynamics and women's empowerment: New evidence on the impact of social accountability in Indonesia

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<https://bit.ly/2T3imQ3>

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Aim

Increase understanding of how a realist approach in evaluation enabled a different kind of learning and findings in a social accountability evaluation

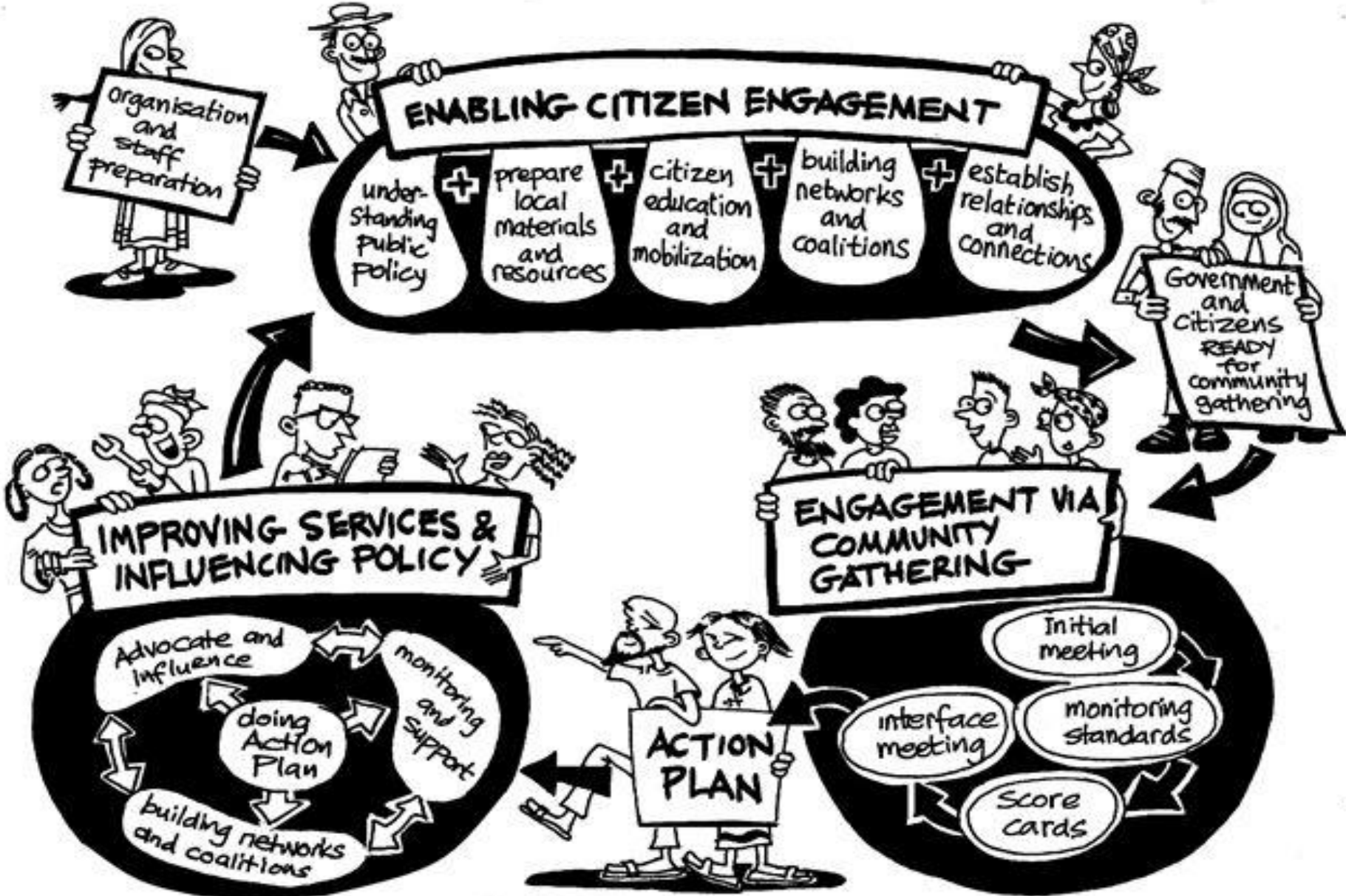
Webinar 1: The project, the evaluation approach, the outcomes

Webinar 2: Focus on evaluation methodology

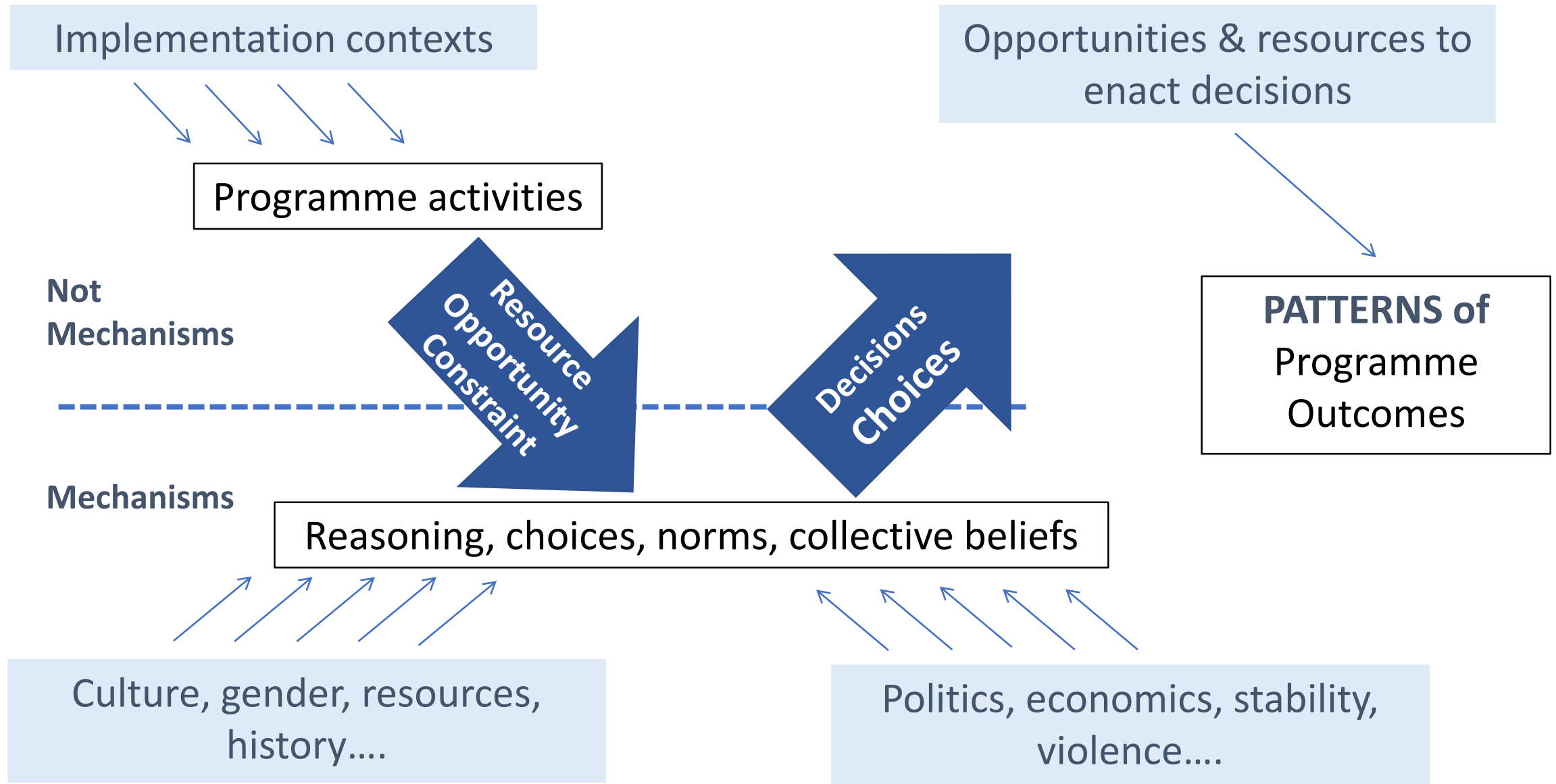
The project

- Wahana Visi (World Vision Indonesia)
- Citizen Voice and Action ‘+’ for maternal and infant child health
- 4 year project with concurrent evaluation
- 3 provinces in eastern Indonesia, high maternal and infant mortality rates and poor service quality
- 60 villages, staggered implementation (30 villages each in Phase 1 & 2)
- 9 staff – Project Manager, Team Leader in each province, 2 facilitators in each province, MEL lead.
- Volunteer facilitators at village level (312 trained over the project)
- Health cadres (volunteers) at village level – not project specific, support MNCH service delivery + participate in project activities
- Funded by World Bank and WVA (evaluation)

CVA PROCESS



A realist approach to understanding programs



Evaluation purposes and key questions

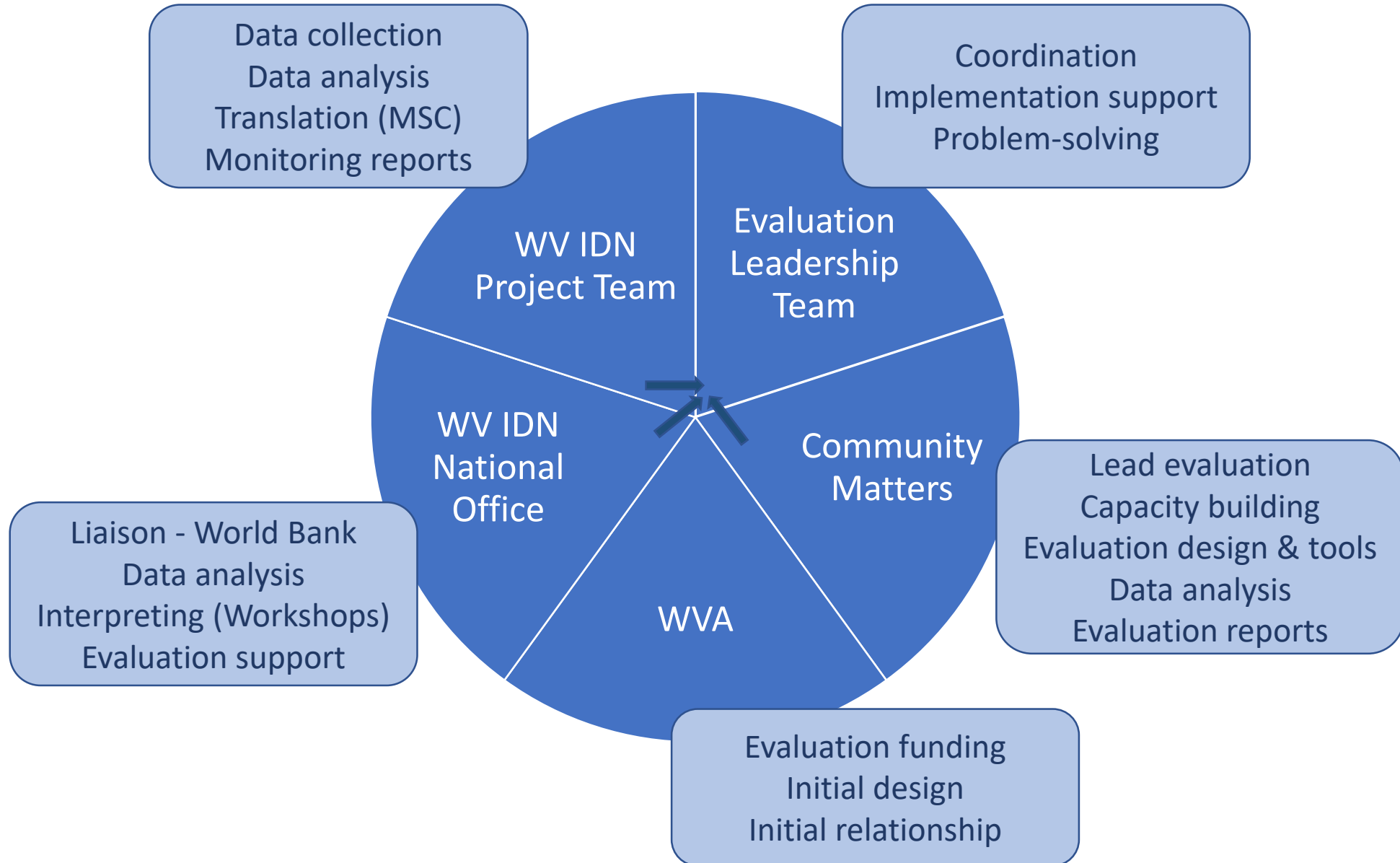
Purposes

- Determine the outcomes of the GPSA-funded CVA project for maternal, infant and child health services in 3 districts of NTT, Indonesia, within the time frame of the project.
- Improve understanding of the circumstances in which, and mechanisms by which, CVA++ improves the provision and quality of maternal, infant and child health services.
- Inform refinements to Citizen Voice and Action methodology
- Improve the capacity of WV IDN in realist evaluation.

Key Evaluation questions

- What are the outcomes of the CVA for MNCHN project? How and why do outcomes vary across contexts?
- In what contexts is GPSA most effective? In what ways do contextual factors affect the outcomes of the GPSA project?
- What participation is required for the program to be effective, and what is required to enable that participation?

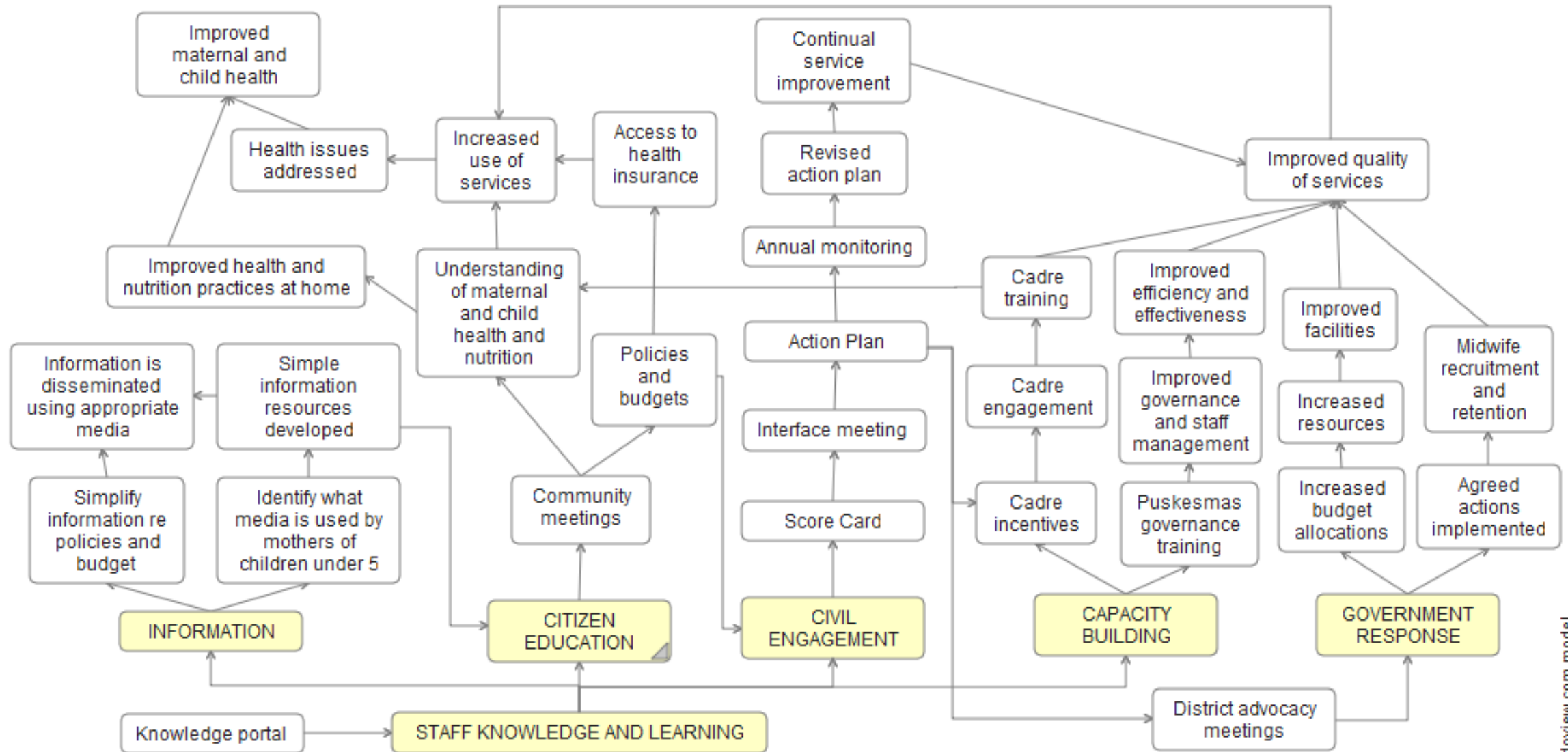
Collaborative evaluation - Roles



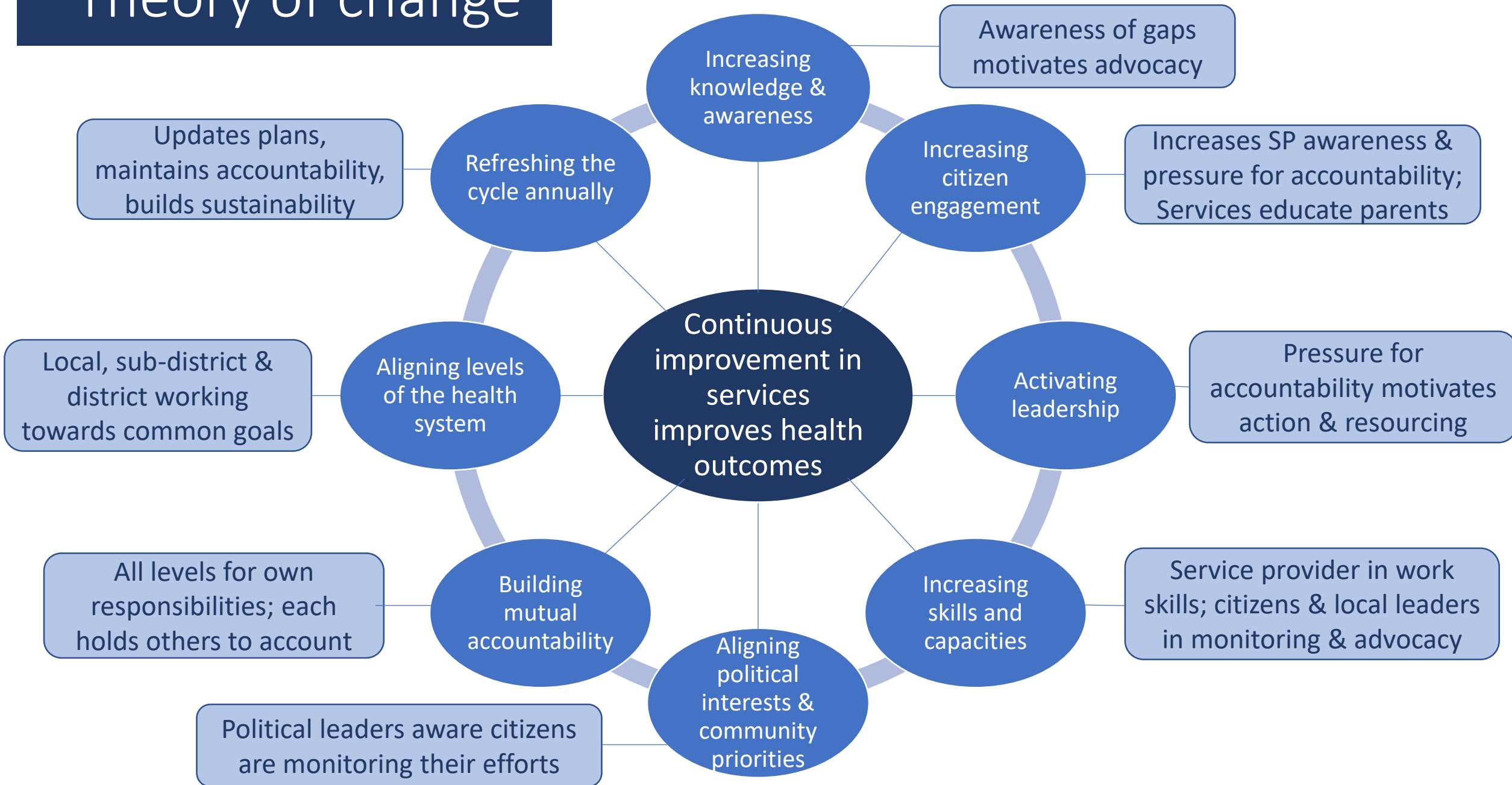
Theory of action

GPSA Indonesia: CVA++ for Maternal, infant and child health

OVERALL THEORY OF ACTION



Theory of change



Instruments

DATA COLLECTED ANNUALLY

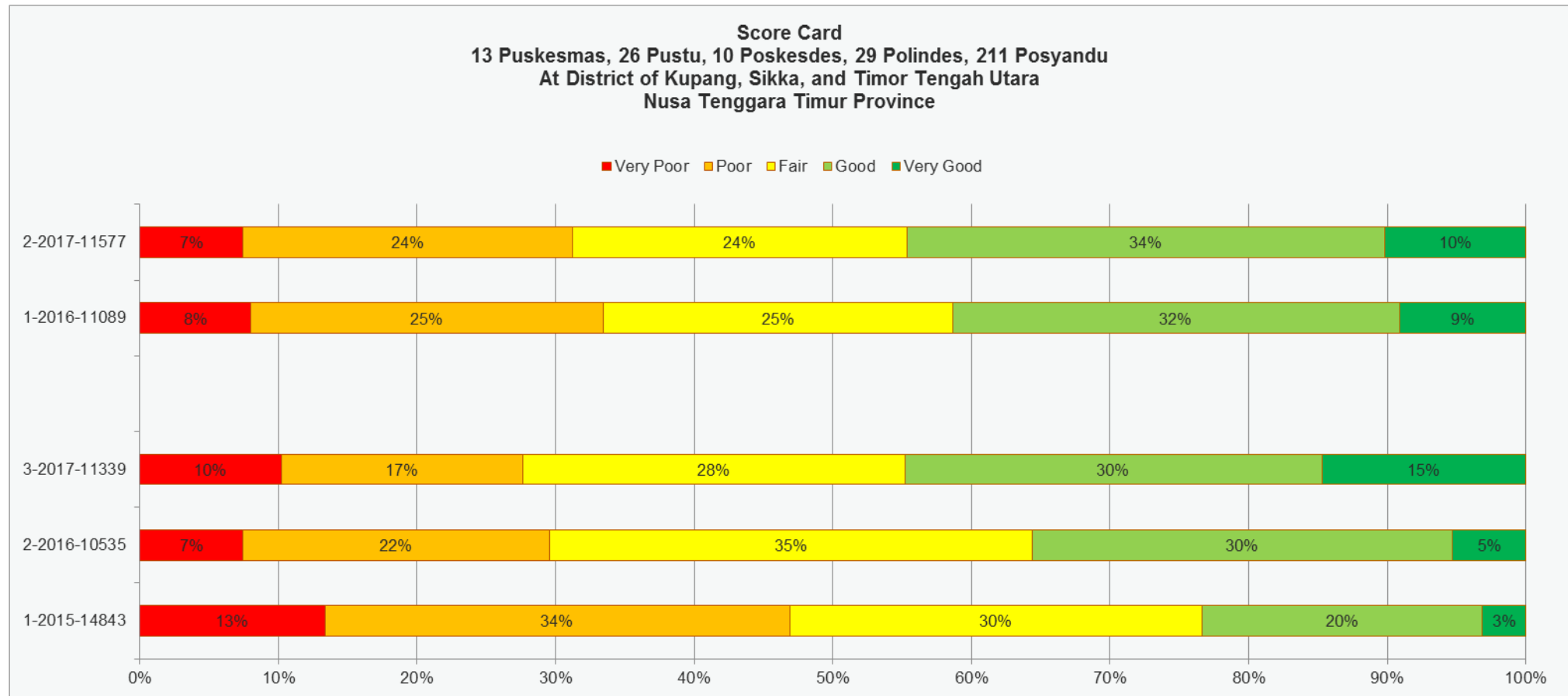
- Standards monitoring data (staff): *Do services meet government standards? In what ways, and in what ways not? In what districts/villages?*
- Citizen report card monitoring data: *Are citizens satisfied with services? In what ways? In what ways not?*
- Household survey: *Do citizens understand the services available to them? And what should be provided to them, under the standards?*
- Officials and cadres survey: *Do volunteers and officials understand the services available? And what should be provided, under the standards?*
- Modified MSC stories – 24 villages: *What outcomes are attributed to the program, which are seen as most significant, and how do respondents believe they came about?*
- Nested case studies: *MSC 'high & low performing villages'*
- Process monitoring data: *Participation in which project processes, by gender*

Findings: Standards monitoring data

- Scores out of 10. Cut off score of 7.5 = 'meeting the standards'
- Local health posts (Posyandu):
 - On average, scores improved from 6.4 to 7.6 across the project
 - Number of services meeting the standards improved from 26% (2015) to 56% (2017)
 - One district: all standards improved. Two districts: six of 8 standards improved
- Birthing centres (Polindes/Pustu):
 - On average, scores improved from 7.4 to 7.8
 - Number of services meeting the standard improved from 77% (2015) to 85% (2018)
 - One district: 5 standards improved; 2 improved and 1 decreased in 2 Districts
- Community health centres/hospitals (Puskesmas)
 - On average, scores improved from 8.1 to 9.3
 - One district, all 12 standards improved; 2 districts – 6 of 12 standards improved

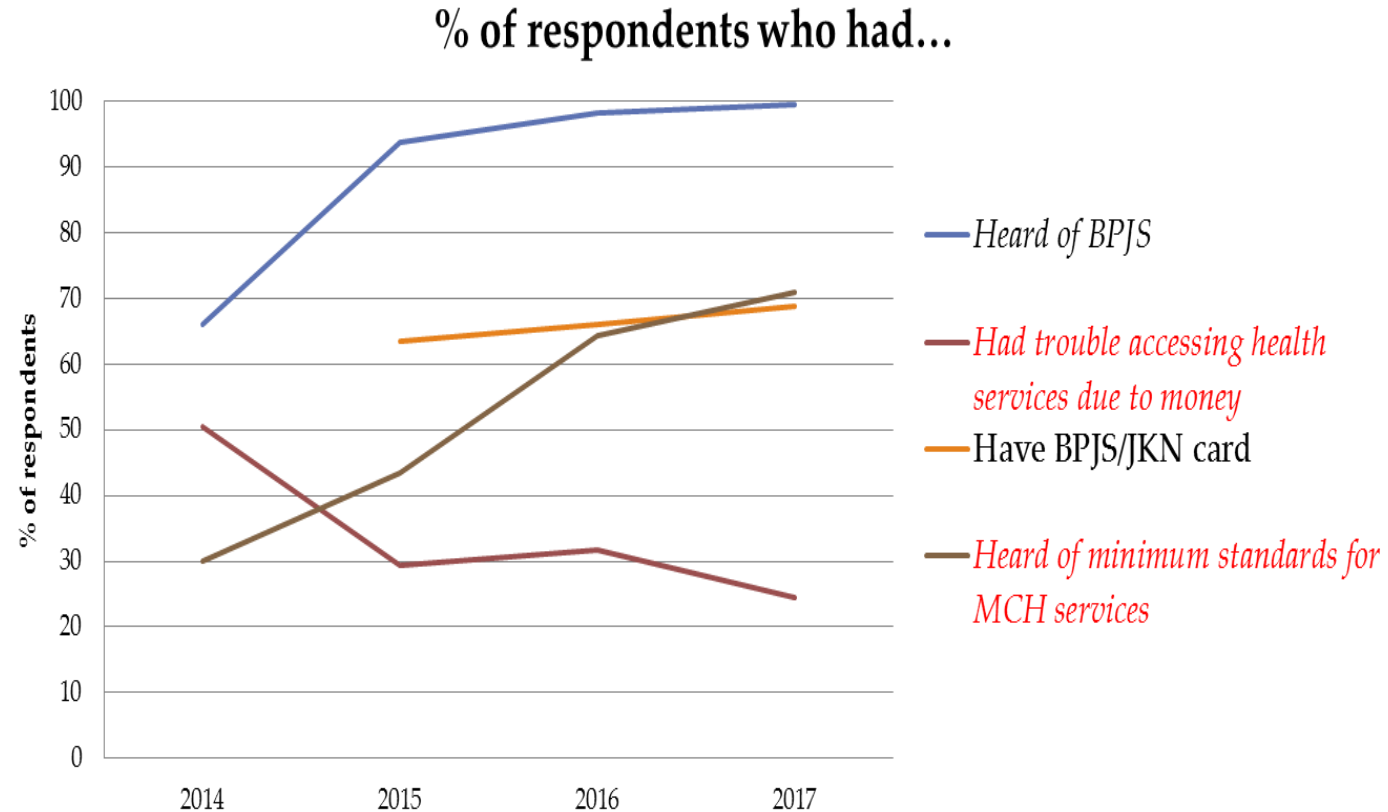
Increased Community's Satisfaction

- 45% participants rated 'good and very good' for MCH services at village through sub-district level in 2017 compared to 23% in 2015;
- 27% participants rated 'poor and very poor' for MCH services in 2017 compared to 47% in 2015.



Improved awareness: minimum service standards

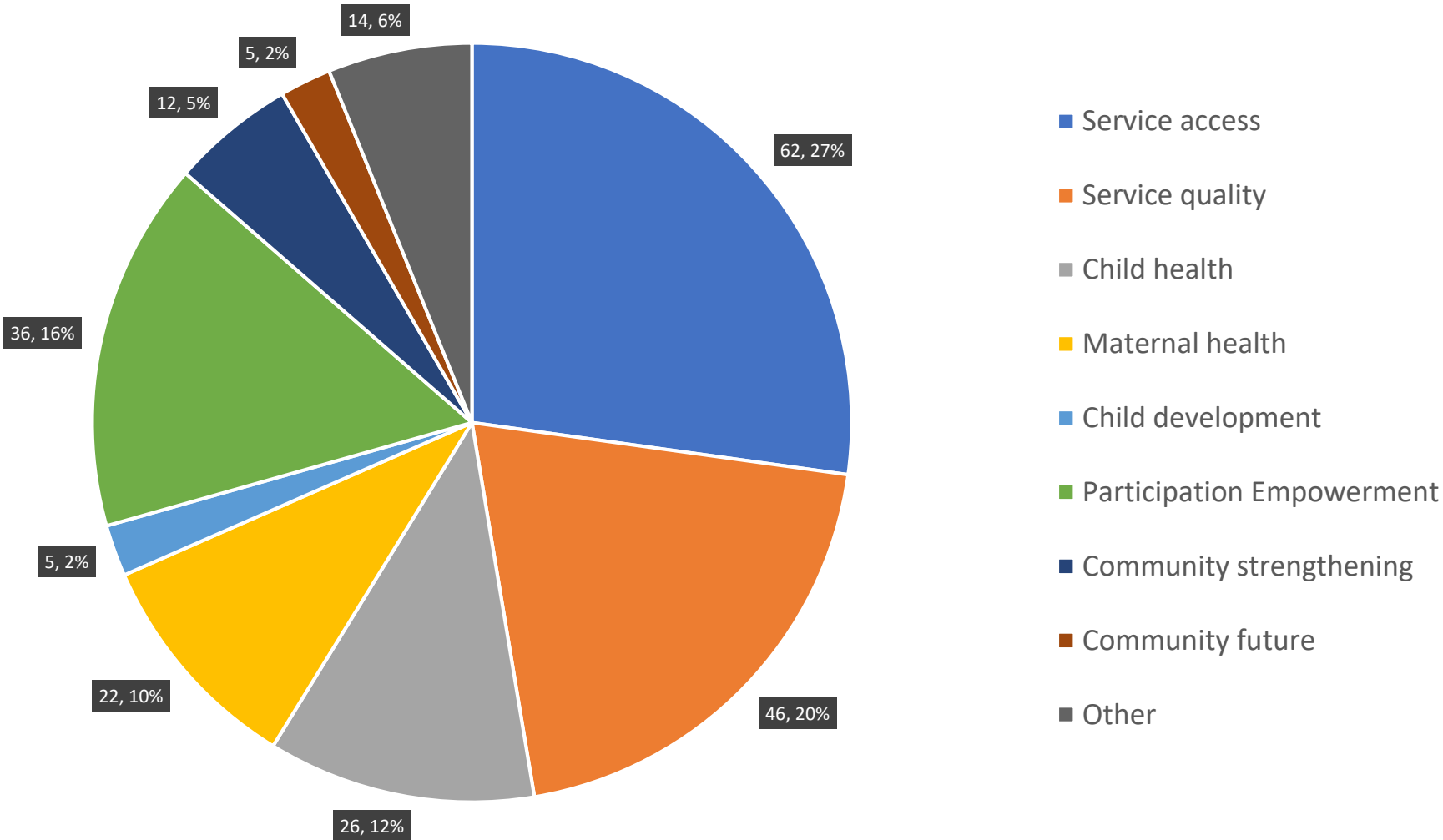
40% increase in respondents (U-5 parents, cadres, and village authorities) who have heard of MNCHN minimum standard



“Now we know that there are standards that have been regulated by the government for MCH services in Posyandu, Polindes and Puskesmas. We are grateful to conduct a monitoring based on the standard. I hope we don’t have negative perception on this activity, but instead using the moment for self-reflection to improve our service” (Head of Village of Waihawa, Sikka)

MSC Stories: Additional outcomes

Higher level outcomes, all districts 2018



"..there is no case of maternal and child mortality, this may be because raise of the visitation of pregnant women and toddlers to Posyandu, (Puskesmas Head)

...I think the most important change is the delivery in health facility. Yes because it involves human life, because the childbirth at home is very dangerous or risky. (Cadre, TTU)

So the more significant changes since WVI come in [name of] Village is the number of children with poor nutrition has been reduced (Midwife, Sikka)

Challenges:

- Sustainability
- Capacities of communities and cultures
- Government's support and openness

Improving knowledge and awareness

“Improving knowledge and awareness of policies and budgets affecting MNCHN:

Improved understanding of rights and entitlements and improved understanding of shortfalls in resources and services motivates citizens to advocate for gaps to be filled and quality to be improve”

- Knowledge of policies and budgets
- Knowledge of health services
- Knowledge of health service standards
- Knowledge of maternal and child health
- **By citizens**
- **By service providers**
- **By local government officials**
- Increased motivation
- Increased confidence
- Increased understanding of role
- Advocacy
- Changed roles
- Changed behaviours

Refined CMOs (Draft)

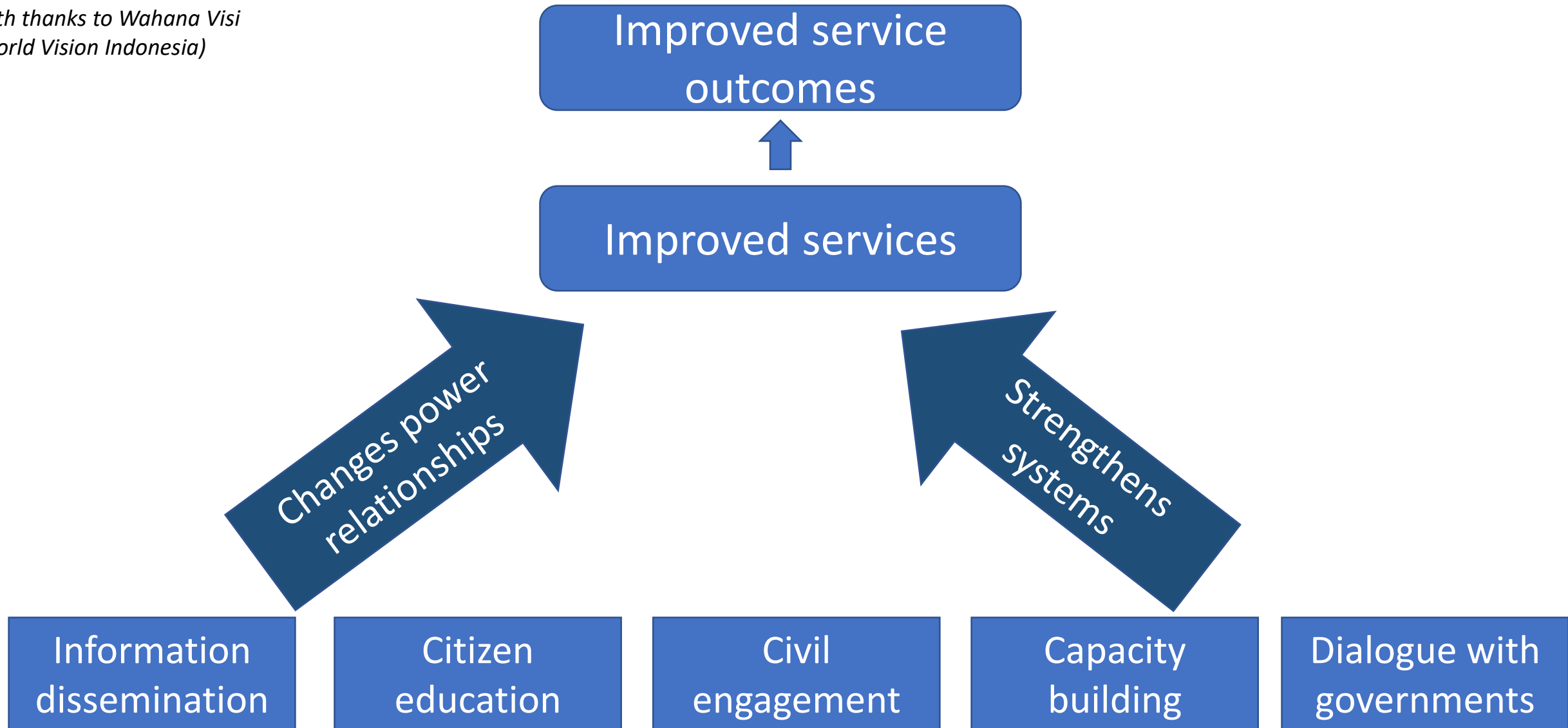
| Context | Mechanism | Outcome |
|--|---|---|
| <p>Improved knowledge of policies, budgets, service standards and rights</p> <p>Improved knowledge of planning processes in health services and local/district government</p> <p>Improved understanding of MCH and roles services play in good child health outcomes</p> | <p>Understanding of pathways to improved health outcomes</p> <p>Understanding of importance of participation and advocacy</p> | <p>Citizens participate in processes to develop shared positions.</p> <p>Citizens, service providers and local facilitators advocate for gaps to be filled and quality to improve</p> |
| <p>Consistent support and encouragement from multiple sources</p> <p>Trained facilitators at local level</p> <p>Multi-stakeholder, group processes to develop shared positions</p> | <p>Increased confidence</p> | <p>Service managers and local government representatives advocate to higher levels of systems for the things identified as priorities in local meetings.</p> |

Women's empowerment

- Not a direct objective of the project, so not directly investigated
 - More women than men involved in all aspects of the project
 - Group processes strengthen confidence
 - Separate meetings for women where the context required it
- *... the head of this village is great, so he gathered all proposals from mothers as well as for other programs. ... previously they only hear men voice, but after they getting used to the approach taken in the Citizen Voice and Action program, from there they do not afraid to express things that are good or not good, they also had the courage to speak in the public forum in the village, hamlet and village musrenbang. (Village facilitator 1).*
 - *Previously, we find less of discussion if you want to build Posyandu or other else, because the mother and cadres are not very active, but now mothers are very active, they already know and aware of their rights and their role in the village to contribute ideas and opinions in village meetings, they are active in proposals for Posyandu, incentive and so on. That's important, so we invite them to discuss together before start to do everything in the village... because before they just hear only the fathers who talk, but after getting started with CVA approach, we are courage to convey things that are good or not good, then followed up in the community forum like Village Forums (musdus and musrenbang). (Village Head)*

How CVA improves service quality and service outcomes

*With thanks to Wahana Visi
(World Vision Indonesia)*



How CVA changes power relationships

Triggers internal accountability systems

Authorities take actions to address gaps or improve standards

Facilitates discussion between stakeholders

Informs leaders

Harder to dismiss than individual opinion

Citizen based, not 'service self interest'

Builds citizen confidence to speak up

Empowers women: voices heard

Legitimizes claims, authorises action

Addresses multiple issues

'Service to service' advocacy / negotiation

Criteria for judgements transparent

Organises collective opinion

Direct relationship to government policy

Multiple types of authority and resources

Use of standards and score cards

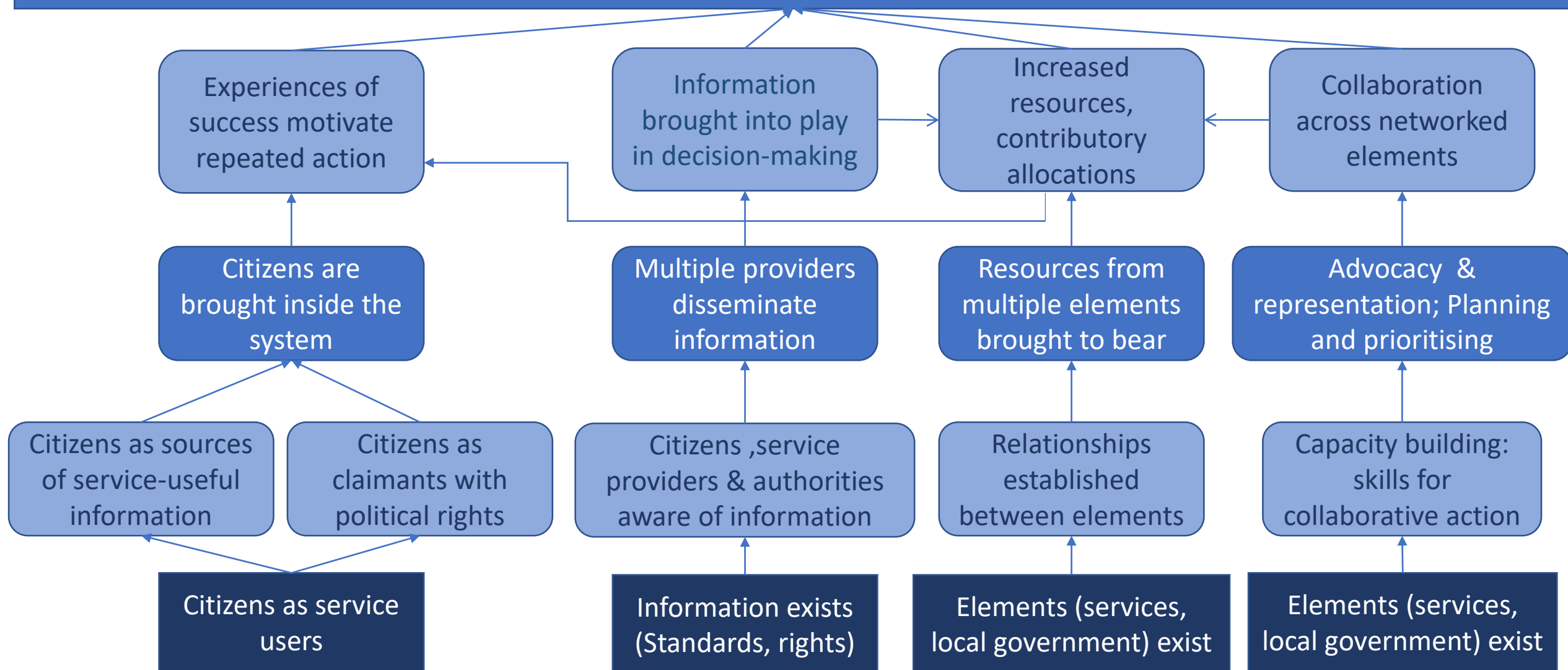
Structured, transparent, participatory processes

Use of government standards

Involves multiple authorities

How CVA strengthens systems

Boundaries of system expanded to include citizens and local government; component elements strengthened; relationships established between elements of system; stronger information and resource flows within system; positive feedback loops



Future directions within World Vision

- Wahana Visi is interested to apply findings to implementation of future social accountability projects
 - Yet to be discussed exactly how
- Interested to use realist evaluation in other Wahana Visi projects
 - Helps us to think through what data we should collect annually to improve project implementation
 - Consortium project on ending violence against children – hoping to use a realist evaluation for that
- Future directions for research in social accountability to be discussed in the second webinar.