

From Expert To Advocate! Tools For Evidence-Based Advocacy In Your Community

You are a powerful force in your community. As a service provider and/or community leader you see clearly where more progress can be made. How can you build the evidence base to change policies and increase resources to save more lives?

To get started, here are a few tools to assess gaps in service delivery and resource allocation, while increasing community and citizen ownership. These tools are just a sample of how to build your evidence base for effective advocacy. The process of developing your evidence base with your community can be as important as the end product.

Go to <http://www.action.org/take-action/toolkits/advocacy-tools> to learn more about how to develop these tools and use them for maximum impact.

SCORE CARDS PASS OR FAIL?

How is your community program working? Being able to see clearly and concisely what is working and what isn't is important for reaching out to decision makers, the media, and to recruit new supporters for your cause. Score cards are popular visual tools for presenting an analysis of service performance. Two common types, citizen report cards and community score cards, can describe clearly which programs are working well and what needs improvement.

What & Why ▶

Citizen report cards use individual survey questionnaires to provide user feedback on the quality, efficiency, and accessibility of services. Using this survey data, a quantitative report card can show clear areas for improvement or gaps between rhetoric and reality.

Community score cards bring stakeholders together to collectively monitor and evaluate the crucial elements of a local health program by agreeing on desired outputs/outcomes and then evaluating the program's performance based on a standardized scoring system. These clear and visual representations of how well a program is delivering services—based on the community's input and experience—are valuable for advocacy in both local and national context.

The Basics: How to Create a Score Card ▶

1. Conduct preparatory ground-work—define the scope of research using community input
2. Organize a community gathering, or individual dissemination
3. Develop an input tracking matrix
4. Score community or individual performance
5. Analyze results and organize data
6. Host a meeting between community and staff or policymakers & media

Impact ▶

The Citizen Report Card at the Community Level (CRCCL) pilot project was initiated in Uganda in 2004, combining both the citizen and community score card approaches.¹ The project enhanced community-based monitoring of the primary health care sector by establishing performance criteria, collecting both user and health service provider information, and assessing the quality of health services. After tabulating the results and creating a scorecard, providers and the community convened a meeting to discuss results and identify avenues of reform.



PUBLIC EXPENDITURE TRACKING SURVEYS (PETS) FOLLOW THE MONEY!

By “following the money” from start to finish through a public expenditure tracking survey (PETS), CSOs can carefully monitor programs and public spending in targeted areas to uncover inefficiencies, delays, and leakages in spending. Citizens can then elicit action to improve gaps between budgets on paper and financial flows on the ground.

What & Why ▶

Using a PETS methodology, civil society can monitor a public budget by tracking its flows towards programmed services and goods to identify potential gaps and misallocations. Through PETS, civil society is empowered to identify potential corruption or breakdowns in the system, problems of service delivery, and improve budget efficiency.

The Basics: How To Follow The Money Using PETS ▶

1. Define the objective and scope of your tracking (facility level, geographical region, etc.)
2. Map the flow of funding through the system, and gather data for each level

3. Identify the issues (ie. problems, trends, potential causes)
4. Recommend solutions
5. Disseminate and advocate

Impact ▶

PETS can identify bottlenecks—such as spending delays and leakages—to achieving high quality health services. A PETS exercise in Chad found that less than 1% of the non-wage budget officially allocated to health centers actually made it to service delivery points. Had resources reached these centers, more than double the amount of patients could have received primary care services.² Analyzing the distribution and timeliness of public spending can increase awareness about program effectiveness and issues related to inequity, and open a dialogue for how to improve.



SOCIAL AUDITS

WHAT'S WORKING? WHAT'S NOT?

While Ministries of Health and related departments are essential to delivering health services—such as immunizations—they rely on community partners to hold them accountable. Civil society organizations (CSOs) and community members often play a watchdog role by providing feedback on the quality of health services. This makes CSOs a critical partner in ensuring a system works.

What & Why ▶

Social auditing is a process that builds community participation and helps to improve programming, policies, and institutions by analyzing a program's intended and unintended social impact.

Rather than relying solely on government to evaluate their own services, doing independent research through surveys, case studies, and interviews can give a more accurate picture of how well a program is performing or a service is being delivered.

The Basics: How Do You Conduct A Social Audit ▶

1. Clarify the objectives of the program, policy or institution you are auditing
2. Identify key stakeholders and their specific responsibilities—especially marginalized populations
3. With stakeholders, define performance indicators & develop an audit plan (data sources, data collection types)

4. Meet regularly to collect and discuss performance indicators and agree upon recommendations
5. Share evaluation with program you are evaluating and agree on collective next steps for improvement. Form an independent review body to see if changes are being implemented
6. Share the audit with all stakeholders

Impact ▶

A social audit in Bangladesh assessed the effectiveness of the Hospital Improvement Initiative (HII), a pilot project implemented by the Bangladeshi government in five hospitals in Sylhet division from 1998 to 2003.³ Over time, 600 patients and 1,200 households were surveyed, yielding information on progress made in terms of patient waiting and consultation time, overall hospital satisfaction, and the use of hospital services. A better understanding of the user experience helped the government prioritize future hospital improvement programs.

Footnotes

1. Reinikka, Ritva, and Jakob Svensson. "An impact evaluation of a citizen/community report card on performance in health care delivery in Uganda." (2004).
2. Koziol and Tolmie. The World Bank Group. Using Public Expenditure Tracking Surveys to Monitor Projects and Small-Scale Programs. (2010).
3. Andersson, N., Cockcroft, K., and K. Omer. 2011. Impact of a hospital improvement initiative in Bangladesh on patient experiences and satisfaction with services: two cross-sectional studies. BMC Health Services Research 2011, 11 (Suppl 2): S10.

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Want more information? Need advice for how to put these tools into ACTION? Go to: <http://www.action.org/take-action/toolkits/advocacy-tools>

ACTION is a global partnership of advocacy organizations working to influence policy and mobilize resources to fight diseases of poverty and improve equitable access to health services.

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