

Systematic review brief

Public Sector Management



Does promoting citizen engagement in the governance of public services lead to improved service delivery and quality of life?

Improving the governance of public institutions and service delivery in low- and middle-income countries is an important strategy for creating sustainable development. This is recognised in Sustainable Development Goal 16, which aims to develop effective, accountable and transparent institutions at all levels.¹

Interventions to increase citizen engagement in governance and service provision processes have the potential to create improvements in access to public services, quality of service delivery and well-being outcomes across a range of sectors. Despite this positive potential, governance interventions face challenges in realising, demonstrating and attributing improvements towards key outcomes.

Acknowledging the need to base policy and programmatic decisions on rigorous evidence, this 3ie systematic review seeks to determine whether and how engaging citizens in the planning, management and oversight of public services (such as health care, social protection or physical infrastructure) has an impact on service quality and access, or improves citizens' quality of life.

Highlights

- Promoting citizen engagement in public service delivery can often stimulate active citizenship and improve access to and quality of services. However, citizen engagement alone might not lead to changes in well-being.
- Interventions to increase citizens' pressure on politicians to improve public services seem able to effect change only in particular circumstances, and not on service delivery.
- Citizen engagement is particularly effective when the service in question is delivered directly to citizens by front-line staff (such as in health care), rather than indirectly (such as with infrastructure).
- To realise positive outcomes when services are delivered indirectly, citizen engagement interventions may need to work in partnership with local civil society groups with recognised social capital.

Participation, inclusion, transparency and accountability

The review focuses on four mechanisms through which governance interventions aim to influence outcomes:²

- Participation involves efforts to include citizens in the design, management and delivery of policies and programmes. For example, a participation intervention could include input into planning and budgeting processes for local services, or it could include local citizens taking over the management of common natural resources.
- Inclusion refers to increasing marginalised groups' capacities and opportunities to engage in the management or oversight of public services. Interventions in this category directly target marginalised groups in the community, such as women, specific ethnic groups or poorer people.
- Transparency changes happen when people or organisations release and publicise information openly and clearly. Relevant interventions might include public awareness campaigns to inform citizens about their rights to public services or the performance of service providers and government bodies, which enable citizens to demand improvements.
- Accountability is the process of holding people or organisations responsible for performing to particular standards. Interventions could include feedback or monitoring mechanisms for citizens to examine the performance of governments or service providers.

The review presents and examines outcomes along an indicative theory of change that theorises how strengthening PITA mechanisms through citizen engagement can

influence well-being outcomes across a range of sectors.

The theory of change was simplified to facilitate meta-analysis along the causal chain (Figure 1). Interventions aim to improve citizens' opportunities or capacities for participation, inclusion, transparency or accountability in the governance of public services, which can lead to increased civic engagement with service providers, more realistic expectations of service delivery and more responsive service providers.

Such changes have the potential to create improved efficiency, effectiveness and equity of public service delivery, which can lead to increased use of and satisfaction with public services by citizens. These tangible improvements can then translate to improved well-being outcomes and increased perceptions of state legitimacy and effectiveness.

Figure 1: Results chain of citizen engagement interventions

User engagement

Provider response

Service access

Service use

Well-being (quality of life)

State-society relations



Main findings

The review identifies five intervention types designed to strengthen citizen engagement through PITA mechanisms to improve public services: rights information provision; performance information provision; citizen monitoring and feedback mechanisms; participatory planning; and community-based natural resource management.

Figure 2 provides brief details of these interventions, the number of studies found and the primary mechanism (participation, inclusion, transparency and/or accountability) through which the intervention aimed to create change.³

The authors undertook a metaanalysis of impact evaluations conducted on these interventions to determine their effects along the causal chain. They simultaneously conducted a qualitative framework synthesis incorporating an examination of related qualitative data to identify key barriers, facilitators and moderating factors to understand why interventions were more or less successful in given contexts.

The meta-analysis found that citizen engagement interventions for all types of services were typically able to stimulate active citizenship and realise effects on the first step of the causal chain. For example, they increased

participation in oversight and planning meetings and contributions to community funds. Positive effects were generally smaller and less consistent on triggering corresponding positive responses from service providers, such as staff performance and public spending.

Citizen engagement interventions also had some effects at the next level of the causal chain: they tended to create positive outcomes in terms of access to and quality of services. However, they did not systematically increase service use or have consistent impacts on well-being outcomes, such as improvements in health, nutrition and poverty.

Figure 2: Types of citizen engagement interventions covered in the review

Rights information provision

Provides information about citizens' rights to access services or to participate in public service governance

Number of studies: 5

PITA mechanism: transparency and inclusion (when marginalised groups are specifically targeted)

Performance information provision

Provides citizens with information about the performance of politicians or public service providers, including through the use of report cards

Number of studies: 6

PITA mechanism: transparency

Citizen monitoring and feedback mechanisms

Interventions to allow citizens to communicate feedback, concerns or priorities around service delivery to providers and/or to monitor the delivery of public services; this includes community scorecards and social audits

Number of studies: 10

PITA mechanism: accountability and inclusion (when marginalised groups are specifically targeted)

Participatory planning

Interventions to introduce or facilitate citizens' participation in public institutions' decision-making processes, priority setting or budget allocation decisions, including through participatory budgeting

Number of studies: 8

PITA mechanism: participation and inclusion (when marginalised groups are specifically targeted)

Community-based natural resource management

Devolution of some part of the management of a natural resource to a community group, whilst the government retains some powers, such as water user associations or community-based forest management organisations

Number of studies: 7

PITA mechanism: participation

Integrating the meta-analysis and the framework synthesis revealed breaks in the causal chain for certain interventions and how the nature of the service targeted influenced the effectiveness of citizen engagement. For example, promoting citizen pressure on politicians through performance information was generally not effective at improving public services; while politicians' performance improved in some specific cases, the long causal chain contained too many opportunities for politicians to claim plausible deniability to influence service delivery.

Interventions on services delivered directly by front-line staff, such as health care, were better able to elicit positive responses from service providers with corresponding improvements in service quality, than those targeting services delivered to citizens indirectly, pure public goods such as infrastructure.

Accountability interventions were more successful when they were implemented through a local civil society group with recognised social capital. There was some evidence that it was able to positively affect the quality of even indirectly delivered services by reducing the power differential between citizens and service providers. The duration of effects, however, depended on the group's sustained involvement over time.

Citizen engagement interventions were more effective when implemented through a phased, facilitated approach that included front-line service providers in the process. This created a collaborative approach to problem-solving with the potential to be mutually empowering for citizens and providers, rather than creating confrontation. Where front-line providers did not support the interventions, they were at times able to undermine, partially or fully block implementation.

The effectiveness of interventions that fully devolved the management of scarce natural resources to citizen groups was influenced by the type and intensity of the targeted local resource, the clarity of the relevant national policy context and the existence of complementary programmes to mitigate losses associated with reduced resource use.

Citizen engagement interventions were more effective where the barrier to service delivery in a given context, particularly for inclusion measures, was correctly identified and targeted. For example, providing information to citizens about their right to access a service had limited effects where blockages further up the service delivery supply chain were the real cause of limited access to or quality of the service. Many interventions did not develop measures to include vulnerable groups and few studies measured disaggregated impacts, yet in at least one case, a citizen engagement intervention worsened equity outcomes.



Implications for policy and programming

- Although citizen engagement interventions can stimulate citizens' active participation in service delivery governance and improve access to and quality of service provision, they may require complementary interventions that address other locally-identified bottlenecks, such as within the service delivery supply chain, to have systematic effects on well-being outcomes.
- Interventions to improve services through citizen engagement are less effective when they target indirectly provided services or public goods, such as roads. Engaging with local civil society groups with existing social capital could, however, increase citizens' power to influence these indirectly provided services.
- Interventions aiming to promote citizens' pressure on politicians to improve service provision are not likely to realise effects on public services.
- Citizen engagement interventions that reach out to and work with service providers at the point of service delivery may be better able to ensure their buy-in and encourage a collaborative approach to improving services.
- When transferring the responsibility of service management to community groups, such as through community-based natural resource management (NRM), care should be taken to ensure the intervention is fully implemented so communities are not simply shouldering the burden of NRM, but also are empowered to realise the benefits of resource control. Complementary livelihoods support should be considered where ensuring resource sustainability requires reductions in its use.
- Specific mechanisms to include vulnerable groups, addressing key local barriers, are required if interventions seek to realise equitable outcomes.
- Implementers should consider diagnostic tools at the programme design stage to determine barriers to service delivery throughout the supply chain in order to identify the most appropriate form of intervention for that context.

Implications for research

- A mixed-methods approach to evaluation can be useful for enabling greater understanding of the mechanisms that facilitate or hinder effective interventions.
- Stronger conclusions, synthesis and replication would all be facilitated by more careful reporting of what was actually implemented and the comparison conditions.
- Cross-study learning would be assisted by the use of more standardised outcomes.
- More studies are required that focus on equity and gender concerns and that engage in cost-effectiveness analysis.
- Future synthesis would be valuable on interventions that examine the supply side of public service provision and on the effectiveness of particular intervention types.





What is a systematic review?

3ie-funded systematic reviews use rigorous and transparent methods to identify, appraise and synthesise all of the qualifying studies and reviews addressing a specific review question. Review authors search for published and unpublished research and use a theory-based approach to determine what evidence may be generalised and what is more context specific. Where possible, cost-effectiveness analysis is done. The result is an unbiased assessment of what works, for whom, why and at what cost.

About this brief

This brief was authored by Jennifer Doherty and Ada Sonnenfeld. The authors are solely responsible for all content, errors and omissions.

About this review

This brief is based on 3ie Systematic Review 43, Does incorporating participation and accountability improve development outcomes? Meta-analysis and framework synthesis, by Hugh Waddington, Ada Sonnenfeld, Juliette Finetti, Marie Gaarder and Jennifer Stevenson. It synthesises evidence from 50 impact evaluations and 36 associated qualitative and project documents. The review also finds 11 ongoing studies. The included evidence corresponds to 35 unique studies in 34 countries from East Asia and the Pacific, Europe, Latin America, Sub-Saharan Africa and South Asia. Funding for this systematic review was provided by the United States Agency for International Development.

Endnotes

¹UNDP, 2016. UNDP support to the implementation of Sustainable Development Goal 16: promote peaceful and inclusive societies, provide access to justice and build effective, accountable and inclusive institutions. New York: United Nations Development Programme.

² Social Impact and RTI International, 2016. DRG Cross Sectoral Programming Support Project: DRG integration case study synthesis. Washington, DC: United States Agency for International Development. Available at: https://usaidlearninglab.org/sites/default/files/resource/files/case_study_ synthesis_report_-_light_version_7.14.16.pdf> [Accessed 2 February 2018].

³ Some studies included study arms comprising different intervention types.



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