Annotated bibliography: Social power, participation and accountability in health

Rene Loewenson, Kemi Tibazarwa

Training and Research Support Centre
In the Regional Network for Equity in Health in East and Southern Africa (EQUINET)

With the
Community of Practitioners on Accountability and Social Action in Health (COPASAH)

May 2013

Supported in part by a grant from Open Society Foundation
# Table of contents

Executive Summary ......................................................................................................................... 2

1. Introduction ......................................................................................................................................... 3

2. Methods .................................................................................................................................................. 4

3. Annotated bibliography .......................................................................................................................... 5
   3.1 Social power in health ....................................................................................................................... 5
   3.2 Social participation in health .............................................................................................................. 27
   3.3 Social accountability in health .......................................................................................................... 59
   3.4 Social power, participation and accountability in generating knowledge in health .................................................. 98

---

**Cite as:** Loewenson R, Tibazarwa K (2013) Annotated bibliography: Social power, participation and accountability in health, TARSC, EQUINET with COPASAH, May 2013, Harare.
Executive Summary

This annotated bibliography was prepared as a resource for people working on different dimensions of social power, social participation and social accountability in health. A universal health system values and ensures the right to health care, entitling all citizens in a country to access the same range of services according to their need and pay for these services according to their income. Achieving this calls for more than technical solutions. It demands public leadership and people’s power to assert social needs and interests, to influence the allocation of societal resources towards health needs and to challenge the distribution of power and resources that block this. Social power, participation and accountability are thus central concepts in building people centred health systems.

This social dimension of health systems is a central concern for the three organisations/consortia involved in the production of this annotated bibliography. It was commissioned by the Community of Practitioners on Accountability and Social Action in Health (COPASAH) and prepared by Training and Research Support Centre (TARSC) within the Regional Network for Equity on Health in East and Southern Africa (EQUINET).

The annotated bibliography captures English language literature, and includes materials that are open access in full online. It focuses with a few exceptions on materials published post 2000 and is based on materials accessed through the use of social power / accountability / participation in health as key words in online searches and literature forwarded from COPASAH members. The limitations of the compilation are discussed.

A general introduction is provided. This document does not attempt to review or provide a systematic synthesis of the papers included, neither in the introductory section nor in the brief overview introducing each section. This would need to be the subject of further thematic and content analysis.

The bibliography is presented in four parts.
- Section 1 presents 42 papers on social power in health,
- Section 2 presents 62 papers on social participation in health,
- Section 3 presents 75 papers on social accountability in health, and
- Section 4 presents 49 papers on the use of these three concepts in knowledge generation.
1. Introduction

This annotated bibliography was prepared as a resource for people working on different dimensions of social power, social participation and social accountability in health. A universal health system values and ensures the right to health care, entitling all citizens in a country to access the same range of services according to their need and pay for these services according to their income. Achieving this calls for more than technical solutions. It demands public leadership and people’s power to assert social needs and interests, to influence the allocation of societal resources towards health needs and to challenge the distribution of power and resources that block this. Social power, participation and accountability are thus central concepts in building people centred health systems.

This social dimension of health systems is a central concern for the three organisations/consortia involved in the production of this annotated bibliography. It was commissioned by the Community of Practitioners on Accountability and Social Action in Health (COPASAH) and prepared by Training and Research Support Centre (TARSC) within the Regional Network for Equity on Health in East and Southern Africa (EQUINET). COPASAH ([www.copasah.net](http://www.copasah.net)) is a global community of practitioners in the field of community monitoring for accountability in health. Members exchange experiences and lessons learned and share resources, capacities and methods for the production and dissemination of conceptual, methodological and practical outputs towards strengthening social accountability in health. TARSC ([www.tarsc.org](http://www.tarsc.org)) is a non-profit organisation that provides training, research and information for civil society and public sector (state, parliament). TARSC has implemented this work, drawing on resources of and within the Regional Network on Equity in Health in east and southern Africa (EQUINET). EQUINET ([www.equinetafrica.org](http://www.equinetafrica.org)) is a network of institutions in east and southern Africa that generate knowledge, perspective, dialogue, networking and action to advance equity in health.

This annotated bibliography presents open access literature available online on the concepts of social power, social participation and social accountability in health. It has been compiled as a resource for work on building people-centred health systems and building social justice in health. Given time and resource limitations (the work was commissioned and implemented over a four week period) and the large and growing body of literature, this document does not claim to be an exhaustive presentation of all the literature. It only captures English language literature. It explicitly includes only materials that are open access in full online, so that the full papers will be accessible to readers, and provides the websites where they can be found as of May 2013. It focuses with a few exceptions on materials published post 2000 and is based on materials accessed through use of social power/ accountability/participation in health as key words in online searches and literature forwarded from COPASAH members. This is a subset of all materials available, including that in the grey literature. It does not seek to provide an analysis of the literature sourced and is not a systematic review. It thus presents the papers sourced and their summaries as a resource, on the understanding that it will provide information for such analytic review and that it is a resource that can be updated over time. The papers included will also be made available in the searchable online database on the EQUINET website at [http://www.equinetafrica.org/bibl/](http://www.equinetafrica.org/bibl/).

The bibliography is presented in four parts. Section 1 presents literature on social power in health, section 2 on social participation, section 3 on social accountability and section 4 on the use of these three concepts in knowledge generation.
2. Methods

This paper is based on a desk search of published literature conducted in May 2013. The review sought to include all open access published literature available on line covering English language documents on social power, participation and accountability in health. The lens was wide, and included training resources, analytic papers, reports and descriptive papers and opinion pieces. It was focused primarily on work in low and middle income countries and communities. The papers included did not include blogs and news media articles, given their temporary online nature, or published books, unless the whole book was available online. Documents that were not open access online (i.e. where the full paper could not be accessed online) were excluded. The review covered materials published after 2000, except for a few selected materials post 1990 that were identified by a COPASAH steering group member. A number of documents sourced and provided were found to be not open access (i.e. only abstracts could be accessed) and so not included, but the reference lists for these documents were then reviewed to assess if they included relevant open access publications post 2000.

We used key word searches in Google Scholar, Google and pubmed, using ‘social power’ OR ‘social participation’ OR ‘social accountability’ + ‘health’. We also searched for materials with ‘social participation’ OR ‘participatory’ OR ‘social accountability’ + ‘research’. A listing of recommended materials in line with the focus of the paper was also sourced and provided by three COPASAH steering committee members. Further search was done using the key words above of existing materials on the searchable EQUINET database and the relevant entries included. Finally the reference lists of systematic reviews was reviewed for new documents that met the inclusion criteria not already in the list.

The shortfalls of the methods are noted. Limitations of time and resources meant that the search was not exhaustive, did not include literature in languages other than English, and excluded relevant materials that may have been accessed through other search terms and other online databases. In excluding publications that were not open access it excluded peer reviewed journal papers that required a subscription for access. This inclusion criteria of being open-access was used so that the papers included would be accessible to readers not having access to academic libraries. It is noted that not all websites retain publications on a permanent database so that some url links may become broken over time.

A list of all publications sourced using these terms was prepared (340 in total). These were reviewed and those not meeting the inclusion criteria excluded, usually because the full document was not open access or review of the abstract indicated that it was not relevant. A total of 228 papers are included in this annotated bibliography. The full papers were used to provide for each:

- author(s), title, date and type of publication
- publication citation (details)
- keywords
- abstract
- country and publisher:
- the website (url) where the full publication can be found (as of May 2013):

The bibliography is presented in the subsequent section. Each entry shows the fields completed as noted above and the subsections are organised alphabetically. While there is some overlap in concepts, or papers may cover more than one field, the papers are located in the section that most reflects their focus, are not repeated, and relevance to other areas noted in the keywords.
3. Annotated bibliography

3.1 Social power in health

This section provides publications sourced on social power in health. The term ‘empowerment’ is often used, but with different values informing practice and different understanding of what it means. The publications reflect debates on the understanding and analysis of social power, the way it used in work on participation in health, and the implications for health, health systems and the determinants of health.

The papers raise that the ways issues brought to social participation are conceptualised can affect whether social power is built in the process. Some papers describe processes that have been used to build different collective forms of power within communities, including self reflective consciousness and ‘power within’, power to engage and to act and transform. A human rights based approach is presented in number of papers as one way for building social power of rights holders in making claims for their entitlements. Some of the papers explore the concept of social power in a context of wider debates on and processes for building systems for participatory democracy. Finally a number of the papers present options for how to assess whether social power is changing within interventions, and whether it is making a difference to health and social outcomes.

Author: ALAMES; Cebe; CUT Brasil; Medicos Del Mundo; CTA Argentina; CEAP Brazil; People’s Health Movement; et al
Title: Debate and Action About the Social Determinants of Health: The Position of the Civil Society Movements
Date of Publication: October 2011
Publication type: Resolution
Publication details: ALAMES; CUT (2011). Debate and Action About the Social Determinants of Health: The Position of the Civil Society Movements. EQUINET, Harare, for ALAMAS, 2 pages
Keywords: Social power, Latin America, social participation, ideology, public health
Abstract: According to this statement by Latin American social medicine and civil society organisations at the World Conference on Social Determinants of Health, the fundamental cause of the inequalities within and between nations is the neoliberal economy, infused with an exclusively speculative desire for unlimited profit. The organisations call for the establishment of global alliances between progressive governments and social movements, and meaningful social participation, to generate support for and create health systems and social security systems that are universal, free, integral, and public, with coverage for all people for all services.
Country: Latin America
Publisher: Associación Latinoamericana de Medicina Social (ALAMES); EQUINET, Harare
URL: http://www.equinetafrica.org/bibl/docs/ALAgov231011.pdf

Author: Baba, A; Ulola, M; Assea, M; Ngule, D; Azanda, N; Institut Panafricain de Santé Communautaire (IPASC), DR Congo
Title: EQUINET PRA report: Acceptability and accessibility of HIV testing and treatment services in Bembeyi, Bunia, North eastern DR Congo
Date of Publication: April 2009
Publication type: Report
Publication details: Baba, A; Ulola, M; Assea, M; Ngule, D; Azanda, N; Institut Panafricain de Santé Communautaire (IPASC), DR Congo (2009). EQUINET PRA report: Acceptability and accessibility of HIV
testing and treatment services in Bembeyi, Bunia, North eastern DR Congo. EQUINET PRA project reports, EQUINET, Harare, 28 pages

**Keywords:** Social power, social participation, DR Congo, IV, AIDS, community based sensitisers, stigma,

**Abstract:** This report describes the outcome of an intervention based on participatory reflection and action (PRA) by IPASC in EQUINET in the DR Congo in addressing the stigma around HIV testing and management. In Bunia and Aru, North eastern DRC, people living with HIV and AIDS (PLWHA) cannot access testing or treatment services unless they travel to Bunia town, some distance away. Discrimination from community members towards PLWHA is further identified as a reason for people not coming for HIV testing, and for discouraging other prevention activities. A PRA approach was used within the communities to examine and act on negative perceptions around HIV testing and treatment, to support improved demand for and uptake of these services, to make more effective use of available resources and services. Barriers identified were acted on by the communities and resources negotiated to address transport issues. The PRA work showed that a major lesson learned for Primary Health Care responses to AIDS is that communities are able to make significant changes in barriers to testing and treatment if organised to do so, particularly using participatory processes. Community based sensitisers are an important resource in the community and can produce a measurable change in attitudes that discourage early testing and treatment. Information is indeed power and an important entry point to addressing disabling conditions within the community and to building cohesion around addressing wider service problems. PHC interventions for AIDS that do not invest in these dimensions in an empowering way undermine the effective use of other resources and the necessary synergy between communities and health services needed to manage a chronic condition such as AIDS.

**Country:** Democratic Republic of Congo

**Publisher:** EQUINET, Harare

**URL:** [http://www.equinetafrica.org/bibl/docs/PRA%20Rep%20IPASC%20May09.pdf](http://www.equinetafrica.org/bibl/docs/PRA%20Rep%20IPASC%20May09.pdf)

**Author:** Beeker, C; Guenther-Grey, C; Raj, A

**Title:** Community Empowerment Paradigm Drift and the Primary Prevention on HIV/AIDS

**Date of Publication:** April 1998

**Publication type:** Academic paper


**Keywords:** Social power, international, HIV primary prevention

**Abstract:** This paper discusses the relevance of empowerment to community interventions for persons at risk for HIV, particularly women. Long discussed in the public health arena, the concept of empowerment has only recently entered the discourse on the primary prevention of HIV/AIDS in the United States. Despite its broad appeal, empowerment has not been systematically incorporated into theory-based interventions, which may reflect a lack of consensus on the meaning of empowerment, how to measure it, and the intervention strategies it implies. In this paper, the origins of empowerment are reviewed; community empowerment as an intervention framework is described and its core assumptions defined. There is some evidence of the growing influence of empowerment and related concepts in recent HIV-related policy, research, and programs funded through the Centers for Disease Control and Prevention. However, adoption of an empowerment framework for HIV prevention will require further theory and measurement development, as well as changes in how public health researchers and practitioners work with the communities they serve.

**Country:** USA, international

**Publisher:** Social Science and Medicine, Elsevier

**Author:** Brock, K; Cornwall, A; Gaventa, J.

**Title:** Power, Knowledge and Political Spaces in the Framing of Poverty Policy

**Date of Publication:** 2001

**Publication type:** Book

**Publication details:** Brock, K; Cornwall, A; Gaventa, J (2001). Power, Knowledge and Political Spaces in the Framing of Poverty Policy Institute for Development Studies (IDS), Sussex

**Keywords:** Social power, Participatory research, international, poverty policy

**Abstract:** This book explores the dynamics of the making and shaping of poverty policy. It takes as its starting point a critique of linear versions of policy-making, highlighting the complex interplay of power, knowledge and agency in poverty policy processes. The authors argue that the policy process involves a complex configuration of interests between a range of differently positioned actors, whose agency matters, but whose interactions are shaped by power relations. Making sense of contemporary poverty policy requires a closer exploration of the dynamics within and beyond the arenas in which policies are made and shaped. It also requires an understanding of how particular ways of thinking about poverty have gained ascendancy, coming to determine the frame through which poverty is defined, measured and tackled. To do so calls for an historical perspective, one that situates contemporary poverty policy with regard to antecedent visions and versions. The paper provides an overview of differing narratives on the causes of and solutions to poverty, especially as they have emerged in dominant development discourses. Making sense of participation in the policy process requires that the authors identify and explore ‘policy spaces’ in which alternative versions of poverty may be expressed by a variety of voices, and the dynamics of inclusion and exclusion that surround them. The authors examine two broad kinds of policy spaces – those that are found in invited forums of participation created ‘from above’ by powerful institutions and actors, and those more autonomous spaces created ‘from below’ through more independent forms of social action. By examining how different narratives of poverty and different actors interact in such spaces – as well as how they may be excluded from them – one can better understand the ways in which power and knowledge frame the policy process.

**Country:** International

**Publisher:** Institute for Development Studies (IDS), London

**URL:** [http://www.ntd.co.uk/idsbookshop/details.asp?id=644](http://www.ntd.co.uk/idsbookshop/details.asp?id=644)

---

**Author:** Chambers, R

**Title:** Transforming Power: From Zero-Sum to Win-Win?

**Date of Publication:** November 2006

**Publication type:** Discussion paper


**Keywords:** Social power, international

**Abstract:** This article serves as a platform on which the author (on invitation) describes in detail his approach to power. The key messages that emerged from this document are: that there is nothing inherently bad about power ‘over’ others – it depends on how it is used; that in many ways power over others does not have to be a zero-sum game; and that perspectives and strategies for transforming power from below, vital as they are, should not distract from the potentials for transformations from above. The approach to power as described by the author is based on an understanding of power as capability, and thus as potentially infinitely expanding, as well as on a normative preference for cooperation rather than competition. The author introduces concepts of ‘uppers’ (a person who in a context is dominant or superior to a lower in that same context) and ‘lowers’ (a person who in a context is subordinate or inferior to an upper in that same context).

**Country:** International
Abstract: Since the late 1990s, development institutions have increasingly used the language of rights in their policy and practice. This special issue on feminist perspectives on politics of rights explores the strategies, tensions and challenges associated with ‘rights work’ in a variety of settings. Articles on the Middle East, Africa, Latin America, East and South Asia explore the dilemmas that arise for feminist praxis in these diverse locations, and address the question of what rights can contribute to struggles for gender justice. Exploring the intersection of formal rights – whether international human rights conventions, constitutional rights or national legislation – with the everyday realities of women in settings characterized by entrenched gender inequalities and poverty, plural legal systems and cultural norms that can constitute formidable obstacles to realizing rights. The contributors suggest that these sites of struggle can create new possibilities and meanings – and a politics of rights animated by demands for social and gender justice.

Country: International
Publisher: Institute of Development Studies, Sussex
URL: http://www.ntd.co.uk/idsbookshop/details.asp?id=1001

Author: Cornwall, A; Coelho, VS
Title: Spaces for Change? The Politics of Citizen Participation in New Democratic Arenas
Date of Publication: January 2007
Publication type: Book
Keywords: Social power, Social participation, Latin America, Europe, Africa, democracy, case studies
Abstract: This book provides a clear and comprehensive introduction to the developments which have brought about a new, global wave of inclusiveness and democracy. From Brazil to Bangladesh, a new form of participatory politics is springing up. Featuring contributions detailing how such movements have worked in Latin America, Europe and Africa, the book analyses the impact they have had on the democratic process. By opening up the political sphere in this way, the authors contend, these grassroots movements truly have created "spaces for change".

Country: Latin America, Europe, Africa
Publisher: Zed Books Limited, London
URL: http://books.google.co.uk/books?hl=en&lr=&id=LB-dw7Dx0KMC&oi=fnd&pg=PR7&dq=Brazil+participatory++research+health&ots=wI5TcrIIMC&sig=ZQr-qq8WJ4BfdH2xnH0tK3-gmV8#v=onepage&q=Brazil%20participatory%20research%20health&f=false

Author: De Vos, P; De Ceukelaire, W; Malaise, G; Pérez, D; Lefèvre, P; Van Der Stuyft, P
Title: Health Through People’s Empowerment: A Rights-Based Approach to Participation
Date of Publication: 2009
Publication type: Academic paper

Keywords: Social power, Social participation, international, health rights, analysis

Abstract: This paper focuses on three issues when analysing human rights and health: the importance of social class in community participation, the pivotal role of power, and the role of the state and concepts of claim holders and duty bearers in a rights-based approach to health. The concept of ‘health through people's empowerment’ is proposed to identify and describe the core aspects of participation and empowerment from a human rights perspective and to put forward common strategies. If marginalised groups organise, they can influence power relations and pressure the state into action. Such popular pressure through organised communities and people's organizations can play an essential role in ensuring adequate government policies to address health inequities and in asserting the right to health.

Country: International
Publisher: Health and Human Rights,

Author: Gaventa, J
Title: Finding the spaces for change: A power analysis
Date of Publication: November 2006
Publication type: Academic paper

Keywords: Social power, international, social participation, power cube approach

Abstract: This article forms a detailed analysis and discussion over the author’s perception of what social power means, what it implies to societies, and the ways in which, together with other aspects of social participation, can be optimised. A similar version of this article has been prepared for the Dutch CFA evaluation, ‘Assessing Civil Society Participation’, coordinated by Irene Guijt (2005) of Learning by Design, and supported by Cordaid, Hivos, Novib and Plan Netherlands and the Power, Participation and Change Programme of the Participation Group at the Institute of Development Studies. The author uses this opportunity to convey his thanks to the many colleagues from the ‘Civil Society Participation’ evaluation, the Participation Group, Just Associates, and others from whom he learned in using and discussing the ‘power cube’ approach.

Country: International
Publisher: Institute of Development Studies, Sussex

Author: Gaventa, J; Cornwall, A
Title: Power and Knowledge
Date of Publication: 2001
Publication type: Book Section

Keywords: social power, knowledge, action research

Abstract: This handbook has been updated to bring chapters in line with the latest qualitative and quantitative approaches in this field of social inquiry. Peter Reason and Hilary Bradbury have introduced new part commentaries that draw links between different contributions and show their interrelations. Participatory research has long held within it implicit notions of the relationships between power and
knowledge. Advocates of participatory action research have focused their critique of conventional research strategies on structural relationships of power and the ways through which they are maintained by monopolies of knowledge, arguing that participatory knowledge strategies can challenge deep-rooted power inequities. Other action research traditions have focused more on issues of power and knowledge within organizations, while others still have highlighted the power relations between individuals, especially those involving professionals and those with whom they work. This chapter explores the relationship of power and knowledge. It begins by exploring some of the ways in which power is conceptualized, drawing upon the work of Lukes, Foucault and others. It then turns to considering the ways in which differing traditions of participatory research seek to transform power relations by challenging conventional processes of knowledge production.

Country: International
Publisher: SAGE Publications

Author: Gibbon, M
Title: Social power, international, participatory research, health analysis action cycle, women’s health
Date of Publication: Undated
Publication type: Report
Publication details: Gibbon, M (undated) Social power, international, participatory research, health analysis action cycle, women’s health Sociological Research Online
Keywords: Social power, international, participatory research, women’s health
Abstract: This paper analyses the health analysis cycle as an empowering approach to development. It discusses what the terms power and empowerment within the development discourse mean. It considers the factors that contribute to empowerment and those that hinder it. The study involved the use of a participatory action research approach in a community setting. The relationships between women’s socio-economic circumstances, their ethnicity or caste and the process of empowerment are introduced through the use of case studies. The health analysis cycle is described in an annexe to this paper.

Country: International
Publisher: Sociological Research Online

Author: Glattstein-Young, G; London,L
Title: Community Health Committees as a vehicle for participation in advancing the right to health.
Date of Publication: September 2010
Publication type: Academic paper
Publication details: Glattstein-Young, G; London,L (2010). Community Health Committees as a vehicle for participation in advancing the right to health. Critical Health Perspectives 2(1), 2 pages
Keywords: Social power, Social participation, South Africa, health committees
Abstract: This paper explores whether community participation through health committees can advance the right to health in South Africa. The paper reports on 32 in-depth interviews with members of three Community Health Committees and health service providers in the Cape Metropolitan area. The common barriers to participation mentioned by participants included under-representation of marginalised groups, and the absence of a formal mandate giving Health Committees clear objectives and the authority to achieve them. A number of characteristics of Health Committees were identified that promoted meaningful participation: a facility manager who helps tip the balance of power from health professionals towards the community by sharing decision-making with the Health Committee and
by involving it in facility operations; a form of apprenticeship in which newer Committee members learn skills and procedures from more experienced members; intersectoral activity through the regular involvement of ward councilors and environmental health officers in Health Committee meetings and activities; a mechanism for the committee to be involved in reviewing and resolving patient complaints at health facilities; the use of media and information to increase their visibility in the clinic and in the community, to inform the community of Health Committee activities and broaden participation. Achieving small gains appeared to act as positive reinforcement to achieve bigger gains.

Country: South Africa
Publisher: People’s Health Movement, South Africa

Author: Goetz, A
Title: Governing Women: Women’s Political Effectiveness in Contexts of Democratization and Governance Reform
Date of Publication: December 2008
Publication type: Book
Keywords: Social power, international, gender, governance
Abstract: This book tackles the discussion on how best to cater for gender inequalities when it comes to governance; through a series of case studies of countries around the world. Though the proportion of women in national assemblies still barely scrapes 16% on average, the striking outliers – Rwanda with 49% of its assembly female, Argentina with 35%, Liberia and Chile with new women presidents this year – have raised expectations that there is an upward trend in women’s representation from which one may expect big changes in the quality of governance. But getting women into public office is just the first step in the challenge of creating governance and accountability systems that respond to women’s needs and protect their rights. Using case studies from around the world, the essays in this volume consider the conditions for effective connections between women in civil society and women in politics, for the evolution of political party platforms responsive to women’s interests, for local government arrangements that enable women to engage effectively, and for accountability mechanisms that answer to women. The book’s argument is that good governance from a gender perspective requires more than more women in politics. It requires fundamental incentive changes to orient public action and policy to support gender equality.

Country: International
Publisher: Routledge, Taylor and Francis Group
URL: http://www.routledge.com/books/details/9780415956529/

Author: Golooba-Mutebi, F
Title: When Popular Participation Won't Improve Service Provision: Primary Health Care in Uganda
Date of Publication: March 2005
Publication type: Academic paper
Keywords: Social power, social participation, Uganda, ethnographic research
Abstract: This article sets out to assess the views on participatory approaches to health care delivery in Uganda. Advocates of participatory approaches to service delivery see devolution as key to empowering people to take charge of their own affairs. Participation is portrayed as guaranteeing the delivery of services that are in line with user preferences. It is assumed that people are keen to participate in public affairs, that they possess the capacity to do so, and that all they need is opportunities. Using evidence from ethnographic research in Uganda, this article questions these views. It shows that, to succeed in the long term, devolution and participation must take place in the context of a strong state, able to ensure consistent regulation, and a well-informed public backed up by a participatory political culture.

Country: Uganda
Publisher: Development Policy Review
URL: http://www.academia.edu/1405338/When_popular_participation_wont_improve_service_provision_Primary_health_care_in_Uganda

Author: Guzzini, S
Title: Applying Bourdieu’s framework of power analysis to IR: Opportunities and limits
Date of Publication: 2006
Publication type: Discussion paper
Keywords: Social power, international, Bourdieu, power analysis
Abstract: This paper shows how Bourdieu’s framework of power analysis can be fruitfully used to keep a wider conceptualisation of power (‘Lukes-plus-Foucault’), and yet overcome a series of fallacies and problems that the analysis of power has encountered beforehand. More specifically, the paper shows that such a framework can accommodate both the agency-structure divide and the performative analysis of ‘power’. Bourdieu’s approach is not yet a guarantee to allow the two lineages of power analysis to meet in a more convincing way; the political theory lineage which stresses questions of governance, order and the ‘political’, and the social theory tradition which is interested in the role of power for understanding particular outcomes and modes of ‘domination’.

Country: International
Publisher: International Studies Association
URL: http://pendientedemigracion.ucm.es/info/sdrelint/ficheros_materiales/materiales051.pdf

Author: HEPS - Uganda
Title: EQUINET PRA report: Community empowerment and participation in maternal health in Kamwenge District, Uganda
Date of Publication: December 2007
Publication type: Report
Keywords: Social power, Uganda, social participation, maternal health, PRA tools
Abstract: This article reports on the findings of an interventional study applying PRA tools to improve maternal health care services. The Kamwenge Community Empowerment and Participation in Maternal Health Project aimed to contribute to the improvement of the health of expectant mothers in Kamwenge Sub-county, Kamwenge District. The authors aimed, through the use of PRA approaches, to increase demand for, access to and utilisation of maternal health services by expectant mothers. Using various PRA tools the project team worked with the community to prioritise, act and follow up on the
most critical barriers to maternal health at the three levels — health service, community and household. While a comparison of questionnaires before and after the intervention suggested that maternal health problems remained high and many barriers to access services persisted, positive change was perceived in ease of access to and affordability of services, in communication between community and health workers and the respect shown by health workers, in the support given by health workers and families, and in awareness and action on maternal health in the community. The strongest positive changes were noted in the communication between health workers and pregnant women, and this seemed to be the area of greatest impact of the intervention.

Country: Uganda
Publisher: EQUINET, Harare

Author: Hawn, C.
Title: Take Two Aspirin and Tweet Me in the Morning: How Twitter, Facebook, And Other Social Media are Reshaping Health Care
Date of Publication: April 2009
Publication type: Academic paper
Keywords: Social power, USA, social media, twitter

Abstract: This article discusses how technological advances, specifically social media, have revolutionised modern health-seeking behaviour and practice. The author also attempts to explore how these revolutionary changes impact on the quality, efficacy, and equitability of health care delivery. If you want a glimpse of what health care could look like a few years from now, consider “Hello Health,” the Brooklyn-based primary care practice that is fast becoming an emblem of modern medicine. A paperless, concierge practice that eschews the limitations of insurance-based medicine, Hello Health is popular and successful, largely because of the powerful and cost-effective communication tools it employs: Web-based social media. Indeed, across the health care industry, from large hospital networks to patient support groups, new media tools like weblogs, instant messaging platforms, video chat, and social networks are reengineering the way doctors and patients interact.

Country: USA
Publisher: Project HOPE: The People-to-people Health Foundation, Inc.
URL: http://content.healthaffairs.org/content/28/2/361.full

Author: Heinsohn, N; Alsop, R
Title: Measuring Empowerment in Practice: Structuring Analysis and Framing Indicator.
Date of Publication: February 2005
Publication type: Discussion paper
Keywords: Social power, international, community monitoring, measuring empowerment framework
Abstract: This paper presents an analytic framework that can be used to measure and monitor empowerment processes and outcomes. The measuring empowerment (ME) framework illustrates how to gather data on empowerment and structure its analysis. It can be used to measure empowerment at both the intervention level and the country level, as a part of poverty or governance monitoring. The paper defines empowerment as a person’s capacity to make effective choices; that is, as the capacity to
transform choices into desired actions and outcomes. The extent or degree to which a person is empowered is influenced by personal agency (the capacity to make purposive choice) and opportunity structure (the institutional context in which choice is made). Asset endowments are used as indicators of agency. These assets may be psychological, informational, organizational, material, social, financial, or human. Opportunity structure is measured by the presence and operation of formal and informal institutions, including the laws, regulatory frameworks, and norms governing behaviour. Degrees of empowerment are measured by the existence of choice, the use of choice, and the achievement of choice. The paper illustrates how the ME framework can be applied, using examples from four development interventions.

**Country:** International  
**Publisher:** The World Bank, Washington DC  

**Author:** Heywood, M.  
**Title:** South Africa’s Treatment Action Campaign: Combining Law and Social Mobilization to Realize the Right to Health  
**Date of Publication:** 2009  
**Publication type:** Academic paper  
**Keywords:** Social power, South Africa, access to treatment  
**Abstract:** This article summarizes the experience and results of a campaign for access to medicines for HIV in South Africa, led by the Treatment Action Campaign (TAC) between 1998 and 2008. It illustrates how the TAC mobilized people to campaign for the right to health using a combination of human rights education, HIV treatment literacy, demonstration, and litigation. As a result of these campaigns, the TAC was able to reduce the price of medicines, prevent hundreds of thousands of HIV-related deaths, but also to force significant additional resources into the health system and towards the poor. The article asks whether the method of the TAC has a wider application for human rights campaigns and, particularly, whether the protection of the right to health in law, and the obligation that it be progressively realized by the State, provides an opportunity to advance human rights practice.

**Country:** South Africa  
**Publisher:** Oxford Press, UK  
**URL:** [http://jhrp.oxfordjournals.org/content/1/1/14.short](http://jhrp.oxfordjournals.org/content/1/1/14.short)

**Author:** Hunjan, R; Pettit, J  
**Title:** Power: A Practical Guide for Facilitating Social Change  
**Date of Publication:** October 2011  
**Publication type:** Toolkit and training materials  
**Keywords:** Social power, international, handbook  
**Abstract:** This handbook, which accompanies the report and videos, is about taking action. It is a practical guide, which draws on the methods and tools that the authors used to build the capacity of others and to achieve social change. It is designed to be used collaboratively with others, to explore what can be achieved when working together to combine a range of different strategies and ways of analysing the issue. The key findings of this work, as well as a broader discussion on the importance of examining power, can be found in this report, Power and Making Change Happen, which demonstrates the practical outcomes of analysing power. This report is supplemented by a series of short video case
studies of how some of the organisations involved in the project benefited from the experience. The handbook is for people, within organisations, networks or within community groups, who want to explore power in relation to achieving change in the interests of the communities they are working with. Its purpose is to help facilitate discussions about issues concerning power in order to deepen our understanding of the causes of social problems and the various strategies that can be taken to achieve change.

**Country:** International  
**Publisher:** Carnegie United Kingdom Trust, Fife (UK)  

**Author:** Knowledge Network on Urban Settings  
**Title:** Our cities, our health, our future: Acting on social determinants for health equity in urban settings: Report to the Commission on Social Determinants of Health  
**Date of Publication:** 2008  
**Publication type:** Report  
**Publication details:** Knowledge Network on Urban Settings (2008), Our cities, our health, our future: Acting on social determinants for health equity in urban settings: Report to the Commission on Social Determinants of Health. WHO Centre for Health Development, World Health Organisation (WHO), Japan, pg 1-199  
**Keywords:** Social power, international, healthy urban governance, poverty, health inequalities  
**Abstract:** This report summarises the findings concerning the structural and intermediate social determinants of health in the urban setting, with a focus on slums and informal settlements. It has assembled a wealth of evidence; however, quantitative evidence of health inequalities within cities is seldom available and more research on this topic is needed to underpin policy development. There is evidence that investments in urban health can create major returns for the economy. Social systems based on democracy and strong equity policies have been successful in creating more equitable urban areas in a number of countries. Yet violence and crime affect the urban poor at all development levels and the stresses of poverty are a factor in poor mental health. Poor nutrition and lack of sufficient food is another challenge. Poor people often end up living in unsafe locations affected by flooding or industrial pollution. It is clear that, for people in slums and informal settlements, improving their living environment is essential. In order to ensure access to essential health care services, the health system needs to be designed on an equitable basis. Serious and sustained efforts must be made to give more decision-making powers to urban dwellers themselves rather than government officials or external support agencies. Healthy urban governance and integrated approaches to interventions are key pathways to reducing health inequity. Securing more resources for health investments in urban settings, coupled with fairer distribution of those resources, is vital. The report concludes with the sad fact that, if rich countries had met financial pledges they made over the last twenty years to tackle poverty, urban poverty would have already been eradicated.

**Country:** International  
**Publisher:** World Health Organisation (WHO), Japan  
**URL:** [http://www.who.int/social_determinants/resources/knus_final_report_052008.pdf](http://www.who.int/social_determinants/resources/knus_final_report_052008.pdf)

**Author:** Kretzmann, JP; McKnight, JL [Directors]  
**Title:** Discovering Community Power: A Guide to Mobilizing Local Assets And Your Organization’s Capacity  
**Date of Publication:** 2005  
**Publication type:** Toolkit and training materials

Keywords: Social power, international, community assets

Abstract: This guide is a framework for measuring the extent to which projects or organisations connect to assets in the community - whether they be physical assets, assets and skills in local organisations or the skills and knowledge of local people. It includes questions for evaluating project impacts on community capacity.

Country: International

Publisher: Kellog Foundation; Asset-Based Community Development (ABCD) Institute School of Education and Social Policy Northwestern University

URL: http://www.abcdinstitute.org/docs/kelloggabcd.pdf

Author: Laverack, G
Title: Improving health outcomes through community empowerment: a review of the literature
Date of Publication: March 2006
Publication type: Academic paper
Keywords: Social power, international, empowerment domains, case studies

Abstract: This paper reviews the literature on how empowerment can lead to an improvement in the health status of an individual, group, or community. There is a broad body of literature on empowerment, and this review has been designed to identify material, particularly case studies, that can be included within the following 'empowerment domains': Participation; Community-based organizations; Local leadership; Resource mobilization; Asking 'why'; Assessment of problems; Links with other people and organizations; Role of outside agents; and Programme management. The paper discusses the results of the literature review and provides examples, from both developed and developing countries, of how each of the 'empowerment domains' has led to an improvement in health outcomes. The results of the review should be of interest to the planners and practitioners of health, population and nutrition programmes that have a particular focus on empowerment.

Country: International

Publisher: Journal of Health, Population and Nutrition (JHPN)
URL: http://www.jhpn.net/index.php/jhpn/article/view/754

Author: Laverack, G; Labonte, R
Title: A planning framework for community empowerment goals within health promotion
Date of Publication: 2000
Publication type: Academic paper
Keywords: Social power, Fiji, international, health promotion

Abstract: This article presents a framework to assist planners, implementers and evaluators to systematically consider community empowerment goals within health promotion programming. Health promotion often comprises a tension between 'bottom-up' and 'top-down' programming. The former, more associated with concepts of community empowerment, begins on issues of concern to particular groups or individuals, and regards some improvement in their overall power or capacity as the important health outcome. The latter, more associated with disease prevention efforts, begins by seeking to involve particular groups or individuals in issues and activities largely defined by health...
agencies, and regards improvement in particular behaviours as the important health outcome. Community empowerment is viewed more instrumentally as a means to the end of health behaviour change. The tension between these two approaches requires a different orientation on the part of those responsible for planning more conventional, top-down programmes. This article 'unpacks' the tensions in the conventional, top-down programme cycle, by presenting a parallel 'empowerment' track. It presents nine identified 'domains' that represent the organizational influences on the process of community empowerment.

Country: Fiji, international
Publisher: Health Policy and Planning, Oxford University Press
URL: http://heapol.oxfordjournals.org/content/15/3/255.long

Author: Lykes, MB; Terre-Blanche, M; Hamber, B
Title: Narrating Survival and Change in Guatemala and South Africa: The Politics of Representation and a Liberatory Community Psychology
Date of Publication: March 2003
Publication type: Academic paper
Keywords: Social power, Guatemala; South Africa, community psychology
Abstract: This paper explores selected roles that community psychologists have played in this process of remembering the past and constructing new identities towards creating a more just future. With reference to two community groups (in Guatemala and South Africa) the authors show how efforts to “speak out” about one’s own experiences of political and military repression involve complex representational politics that go beyond the simple binary opposition of silencing versus giving voice. The Guatemalan group consisted of Mayan Ixil women who, together with the first author, used participatory action research and the PhotoVoice technique to produce a book about their past and present struggles. The South African group, working within the ambit of the Truth and Reconciliation Commission and in collaboration with the third author and others, explored ways of speaking about their roles in apartheid and post-apartheid society. Although both these initiatives can be seen as moments in on-going struggles to overcome externally-imposed repressive practices that censor the voices of marginalized communities, they also serve to dispel overly romanticized notions of “univocal” communities now liberated to express themselves in an unmediated and unequivocal fashion. The paper discusses how each group of women instead entered into subtly nuanced relationships with community psychologists involving a continual interplay between the authenticity of their self-representational accounts and the requirements of the discursive technologies into which they were being inducted and the material conditions within their sites of struggle. In both cases the group’s agenda also evolved over time, so that what emerged was not so much a particular account of themselves, or even the development of a particular “voice” for speaking about themselves, but an unfolding process—for the groups and for the community psychologists who accompanied them—of becoming active players in the postmodern, mediated world of self-representational politics and social struggle.

Country: Guatemala; South Africa
Publisher: American Journal of Community Psychology
URL: http://www.coedu.usf.edu/zalaquett/gua/guachildrennarratives.pdf

Author: Masi, CM; Suarez-Balcazar, Y; Cassey, MZ; Kinney, L; Piotrowski, ZH.
Title: Internet access and empowerment: a community-based health initiative
Date of Publication: July 2003
Publication type: Academic paper
Keywords: social power, international, internet
Abstract: This study set out to determine whether access to health information via in-home Internet technology can positively influence empowerment among residents of a low-income urban community. In-home Internet access and training were provided to volunteers, who, along with a comparison group, were interviewed prior to and 1 year after initiation of the program. Community-based participatory research methods were used to design and implement the intervention. The study was set in a 57-block area on the West Side of Chicago. Twenty-five community residents completed all phases of the technology intervention. Thirty-five randomly selected neighbours of these residents served as the comparison group. Members of the intervention group received Internet access via WebTV, training, technical support, and access to a community specific health-oriented web page during the course of the study. Intervention group members were similar to comparison group members in terms of empowerment at baseline. After receiving Internet access and training, empowerment related to health decision-making improved significantly in the intervention group. Similar changes did not occur in the comparison group. Affinity for and appreciation of information technology also increased in the intervention group but not in the comparison group. As a result, differences in attitudes toward technology increased between the 2 groups over time. Using community-based participatory research methods, the authors found that Internet access to community-specific and general health information can lead to increased empowerment and appreciation of information technology. These benefits accrued among the intervention group but not among a random group of their neighbours.
Country: International
Publisher: Journal of Gen Internal Medicine
URL: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1494891/

Author: Nyamu-Musembi, C
Title: Towards an Actor Oriented Perspective on Human Rights
Date of Publication: October 2002
Publication type: Discussion paper
Keywords: Social power, social participation, international, human rights
Abstract: This paper argues that rights are shaped through actual struggles informed by people’s own understandings of what they are justly entitled to. Examining rights from the perspective of actual struggles makes it possible for analysis to transcend accepted normative parameters of human rights debates, question established conceptual categories and expand the range of claims that are validated as rights. The chapter draws out these ‘actor-oriented perspectives’ in the course of reviewing key debates in the field of international human rights to show how they question underlying assumptions in these debates, and offer the possibility of breaking through the impasse that some of them have reached.
Country: International
Publisher: Institute of Development Studies, Sussex
Author: Pantazidou, M
Title: What Next for Power Analysis? A Review of Recent Experience with the Powercube and Related Frameworks
Date of Publication: August 2012
Publication type: Report
Keywords: Social power, international, powercube
Abstract: This paper brings together documented experiences of applying power analysis for social change. The paper draws emerging lessons from this growing stream of practice by looking across the actors, organisations and methodologies involved in power analysis in a diverse range of contexts and issues. It reviews a significant number of case studies, reports and other documents with particular emphasis on the Powercube framework and related concepts, and provides reflections on the usefulness of these power frameworks and concepts in relation to four areas of application: 1) context analysis; 2) strategy and action; 3) monitoring and evaluation; and 4) facilitation and learning. It further aims to facilitate learning and sharing both between experienced practitioners and new-comers to power analysis and to this end, it provides an annotated list and table of all documents reviewed. Finally, the paper highlights some challenges lying ahead for power analysis and invites the reader to contest emerging lessons and embark on new explorations from which more nuanced and contextualised reflections will emerge.
Country: International
Publisher: Institute of Development Studies, Sussex
URL: http://www.ids.ac.uk/files/dmfile/Wp400.pdf

Author: Pearce, J
Title: Power in Community: A Research and Social Action Scoping Review
Date of Publication: 2011
Publication type: Discussion paper
Keywords: Social power, international, scoping review
Abstract: This Scoping Review explores the academic debate on power and talks with communities about power. At a time when the state is proposing to “disengage” from society and hand “power” to communities, it reviews power in communities. The academic debate points to a paradigm shift in understanding power, from power over to power to. Although not all power over is dominating power, the latter remains the conventional form of power in practice. In talking to a range of groups in four socially varied communities across the north of England, it became clear that amongst those seeking change at the grass roots, most understand power in non-dominating forms, as about cooperation, listening, sharing and enabling others. Non dominating forms of power, it is argued, offer the best potential for building participation and connecting communities. However, they are not the most effective for acting on power. Those who use them reject the way power is conventionally exercised and can end up acting on the margins and giving up expectations of wider impacts. The Scoping Review asks, therefore, how can non dominating forms of power become effective in changing power and power structures without reproducing dominating power? This report forms just one from 44 different scoping studies. As a part of the development process for the Connected Communities programme, the AHRC supported 44 small scoping studies and research reviews in 2011 to address a wide range of underpinning issues. The aim of these reviews was to: stimulate debate and provide some early outputs from the programme; inform future discussions about its shape, focus and priorities; and be of value to
researchers undertaking research under the programme in the future. These reviews were commissioned follow an open call to which over 130 applications were received by the closing date in 2010.

Country: International
Publisher: Connected Communities

Author: Pedwell, C
Title: Just politics: Women transforming political spaces
Date of Publication: 2008
Publication type: Book
Keywords: Social power, social participation, international, women in politics
Abstract: This report focuses on two main themes: ways to increase women’s political participation and strategies for transforming political spaces. To increase women’s political participation it is necessary to address social and structural barriers to women’s participation in politics including poverty, policies of exclusion, women’s disproportionate responsibility for domestic labour, traditional gender roles and values, heightened security regimes and curtailed civil liberties, and the persistence of gender violence. And supporting initiatives to create safe spaces to enable women’s political participation is key to addressing such barriers. But while increasing the numbers of women in politics is crucial, it is not enough. Once in power, women need to become effective political actors so that they can transform political spaces and be held accountable alongside men for gender equity and social justice. Various support mechanisms can help elected women become effective political actors: training and mentoring programmes; creating safe political spaces; networking and political alliances; information-sharing initiatives; and meaningful engagement with the media. Accountability for addressing gender inequities cannot be demanded only from women representatives. Integrated and concerted action from governments, political parties, international institutions, civil society, social movements, and women’s and feminist groups is essential if political systems and processes are to become more transparent, participatory and accountable to women’s needs. For example, greater accountability can and has been achieved through effective lobbying of and engagement with policy makers and practitioners.

Country: International
Publisher: One World Action
URL: [http://www.gadnetwork.org.uk/storage/5.%20Just%20Politics.pdf](http://www.gadnetwork.org.uk/storage/5.%20Just%20Politics.pdf)

Author: Penderis, S
Title: Theorizing Participation: From Tyranny to Emancipation
Date of Publication: Undated
Publication type: Discussion paper
Keywords: Social power, international, concepts, social participation
Abstract: This paper provides an in-depth discussion of the concept of participation and its relevance to power. Throughout the world, participation has become a buzz-word in the contemporary development lexicon, used synonymously with deliberative democracy, good governance and citizenship, with much optimism and fervor. New forms of participatory institutions and interactive spaces are emerging, as
sites within which state and society can interact and engage in mutually reinforcing ways to address development challenges at the local level. The primary raison d’être for the practice of participation and public deliberation being heralded as indispensable to democratic nations is its role in legitimizing government actions and strengthening the political system. Extant discourse indicates mounting disillusionment with the nature and outcome of local state-society synergies. Numerous scholars are of the view that the very notion of participation is ambiguous and value-laden, surrounded by much conceptual confusion and inadequate grounding in development theory. Both practitioners and theorists are increasingly highlighting its marginalizing and divisive powers through its mechanistic use as a tool to validate pre-conceived policy initiatives. Despite this critique, however, the practice and acceptance of participatory approaches as the definitive solution for the challenges facing developing countries continues unabated. Within the bounds of this framework, this paper seeks firstly to conceptualize and locate participation within a more radical and politicized participatory discourse. Thereafter, the focus shifts to an analysis of participation as a spatial practice and an investigation into the dynamics of power relations which infuse spaces of public engagement. The final section explores the different levels of intensity and dimensions of participation to develop a framework that facilitates reflection of current institutionalized practices and the need to reshape spaces of interaction to enable empowered and meaningful participation.

**Country:** International

**Publisher:** The Journal of African & Asian Local Government Studies

**URL:** [www.jaalgs.net/journal/index.php/jals/article/download/21/18](http://www.jaalgs.net/journal/index.php/jals/article/download/21/18)

**Author:** Phillips, SD; Orsini, M

**Title:** Mapping the links: Citizen involvement in policy processes

**Date of Publication:** April 2002

**Publication type:** Discussion paper

**Publication details:** Phillips, SD; Orsini, M (2002). CPRN Discussion Paper No. F|21

**Keywords:** Social power, social participation, Canada, citizenship

**Abstract:** This paper explores ways in which to involve citizens in policy making is at the core of discussions over modernizing governance and building a stronger civil society. The renewed interest in citizen involvement is not a passing fad, but stems from shifts toward more horizontal models of governance and toward a more organized, diverse and empowered civil society. In addition, advances in communication technologies have created new potential for how citizens might be involved. While there is no shortage of talk about the need to reduce the democratic deficit and involve citizens in policy processes, there is seemingly little in the way of genuine progress at the federal level in Canada. Part of the problem is conceptual. Both citizen involvement and policy processes tend to be conceived of as one dimensional, so it is difficult to pinpoint which institutions are failing in what aspects of citizen involvement, or to consider multiple, complementary paths for involvement. This paper seeks to develop a fuller understanding of the multidimensional nature of citizen involvement and to assess the adequacy of contemporary practices of citizen involvement in Canada. The authors do this by mapping the links between eight dimensions of citizen involvement, three key political institutions, and six stages of the policy process. For each stage of policy, the authors assess the adequacy of existing political institutions in providing for the dimensions of citizen involvement important to that stage. Based on this assessment, the paper explores, in a practical way, how Canada’s institutions might be reformed to enhance citizen involvement. The focus of the paper is on the involvement of individual Canadians in policy processes. Nonetheless, the authors also demonstrate that the participation of civil society organizations is a vital, complementary process.

**Country:** Canada

**Publisher:** Canadian Policy Research Networks
URL:  http://www.equinetafrica.org/bibl/docs/ORSgov.pdf

Author: Rifkin, SB
Title: Ten best readings in community participation
Date of Publication: August 2001
Publication type: Academic paper
Keywords: social power, international, health, development
Abstract: This article reviews, in the opinion of the author, the 10 most influential reading on community participation and health development. The introduction notes that some of the articles do not address health directly but still do bring crucial interpretations to the topic. All articles view community participation as an intervention by which the lives of people, particularly the poor and marginalised can be improved. In addition, they all address the issue of the value of participation to equity and sustainability. The article considers the readings under four heading: concepts and theory; advocacy; critiques and case studies. It highlights the important contributions each reading makes to the understanding of participation in the wider context of health and health development. In conclusion, the article argues that participation has not met the objectives of planners and professionals, in good part, because it is questionable as to whether viewing participation as an intervention enables them to make correct assessments of its contribution to development. The bottom line is that participation is always about power and control, an issue planners and professionals do not want explicitly to address.

Country: International
Publisher: African Health Sciences, Kampala
URL: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2704450/

Author: Rifkin, SB
Title: A Framework Linking Community Empowerment and Health Equity: It Is a Matter of CHOICE
Date of Publication: September 2003
Publication type: Academic paper
Keywords: Social power, international, social participation, health equity
Abstract: This paper presents a framework to explore the relationship between health equity and community empowerment. It traces the progression of the concept of participation to the present term of empowerment and the links among empowerment, equity, and health outcomes. It argues that the relationship can best be described by using the acronym CHOICE (Capacity-building, Human rights, Organizational sustainability, Institutional accountability, Contribution, and Enabling environment). Based on the concept of development as freedom put forward by Amartya Sen, the paper describes how each factor illustrates the relationship between equity and empowerment in positive health outcomes, giving appropriate examples. In conclusion, it is suggested that these factors might form the basis of a tool to assess the relationship between equity and empowerment and its impact on health outcomes.

Country: International
Publisher: Journal of Health and Population Nutrition; Centre for Health and Population Research

Author: Schurmann, AT; Mahmud, S
Title: Civil Society, Health, and Social Exclusion in Bangladesh
Date of Publication: August 2009 J Health Popul Nutr, 27(4), 536–544.
Publication type: Academic paper
Publication details: Schurmann, AT; Mahmud, S (2009), Civil Society, Health, and Social Exclusion in Bangladesh. Health Popul Nutr, 27(4), 536–544
Keywords: Social power, Social participation, Bangladesh, health equity
Abstract: This paper examines the role of civil society in Bangladesh to understand why this potential has not been realised. Civil society has the potential to have a positive impact on social exclusion and health equity through active monitoring and increased accountability. Looking at two models of civil society action—participation in decentralized public-sector service provision and academic think-tank data analysis—this analysis examines the barriers to positive civil society input into public policy decision-making. The role of non-governmental organizations, political, cultural and economic factors, and the influence of foreign bilateral and multilateral donors are considered. The paper concludes that, with a few exceptions, civil society in Bangladesh replicates the structural inequalities of society at large.
Country: Bangladesh
Publisher: Journal of Health Population and Nutrition
URL: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2928100/

Author: Wallerstein, N; World Health Organisation (WHO)
Title: What is the evidence on effectiveness of empowerment to improve health?
Date of Publication: February 2006
Publication type: Report
Publication details: Wallerstein N (2006). What is the evidence on effectiveness of empowerment to improve health? Copenhagen, WHO Regional Office for Europe (Health Evidence Network - HEN report); 37 pages
Keywords: Social power, social participation, international, equity, health services
Abstract: This Health Evidence Network (HEN) synthesis report is on the effectiveness of empowerment strategies to improve health and reduce health disparities. The report shows that empowering initiatives can lead to health outcomes and that empowerment is a viable public health strategy. The key message from this review is that empowerment is a complex strategy that sits within complex environments. Effective empowerment strategies may depend as much on the agency and leadership of the people involved, as the overall context in which they take place.
HEN, initiated and coordinated by the WHO Regional Office for Europe, is an information service for public health and health care decision-makers in the WHO European Region. Other interested parties might also benefit from HEN. This HEN evidence report is a commissioned work and the contents are the responsibility of the authors. They do not necessarily reflect the official policies of WHO/Europe. The reports were subjected to international review, managed by the HEN team.
Country: Europe, International
Publisher: World Health Organisation (WHO), Regional Office for Europe
URL: http://www.equinetafrica.org/bibl/docs/WHOequity0301022007.pdf

Author: Wallerstein, N
Title: Empowerment to reduce health disparities
Date of Publication: 2002
Publication type: Academic paper
Keywords: Social power, social participation, New Mexico, health disparities
Abstract: This article presents a theoretical construct of empowerment and its importance for strategies to reduce health disparities. Powerlessness is explored as a risk factor in the context of social
determinants, such as poverty, discrimination, workplace hazards, and income inequities. Empowerment is presented and compared with social capital and community capacity as strategies to strengthen social protective factors. A case study of a youth empowerment and policy project in New Mexico illustrates the usefulness of empowerment strategies in both targeting social determinants, such as public policies which are detrimental to youth, and improving community capacities of youth to be advocates for social change. Challenges for future practice and research are articulated.

Country: New Mexico
Publisher: Scandinavian Journal of Public Health
URL: [http://sjp.sagepub.com/content/30/59_suppl/72.full.pdf+html](http://sjp.sagepub.com/content/30/59_suppl/72.full.pdf+html)

Author: Wallerstein, N
Title: What is the evidence on effectiveness of empowerment to improve health?
Date of Publication: February 2006
Publication type: Report
Publication details: Wallerstein, N (2006). What is the evidence on effectiveness of empowerment to improve health?
Keywords: social power, Europe, equity, health services
Abstract: This is a Health Evidence Network (HEN) synthesis report on the effectiveness of empowerment strategies to improve health and reduce health disparities. The report shows that empowering initiatives can lead to health outcomes and that empowerment is a viable public health strategy. The key message from this review is that empowerment is a complex strategy that sits within complex environments. Effective empowerment strategies may depend as much on the agency and leadership of the people involved, as the overall context in which they take place. HEN, initiated and coordinated by the WHO Regional Office for Europe, is an information service for public health and health care decision-makers in the WHO European Region. Other interested parties might also benefit from HEN. This HEN evidence report is a commissioned work and the contents are the responsibility of the authors. They do not necessarily reflect the official policies of WHO/Europe. The reports were subjected to international review, managed by the HEN team.

Country: Europe
Publisher: Health Evidence Network (HEN), World Health Organisation, Geneva

Author: Waylen, G
Title: Gendering governance
Date of Publication: November 2008
Publication type: Book Section
Keywords: Social power, social participation, international, gender, governance
Abstract: This book chapter discusses the various issues in gender and governance. Governance has become a central concept used by policymakers and politicians at the local, national, regional and global levels – as well as by political and other social scientists. Given this broad range of actors and the multiple institutions and disciplines in which it is used, governance is a notoriously ‘slippery’ and contested concept – with each ‘field’ tending to place greater emphasis on some characteristics associated with governance than others. However, most agree that the move towards the use of governance is the result of changes in the structures and processes of government and the emergence of new ways of thinking about governing. Yet gendered perspectives have been mostly absent from the growing literature on governance – ‘mainstream’ work has rarely gone beyond mentioning women’s
organisations as new policy actors. And to date, feminist critiques of this mainstream literature remain sparse. This chapter argues that, despite the lack of ‘gender’, the move from a focus on government to one on governance provides feminist political scientists with new opportunities. This broader understanding moves beyond government to interrogate a range of changing relationships – relationships between market and state, policy communities of state and non-state actors, and the arenas of the ‘public’ and the ‘private’. This chapter – along with recommendations for further work – prioritises producing gendered analyses of institutions; of the actors and the relationships between them; and, particularly, of the changing relationship between the market and state, and the role of citizens. So the aim should not be to throw out the concept of governance but to change the substance, to reflect gendered understandings. In fact, feminist and mainstream political sciences alike have much to gain from each other.

**Country:** International

**Publisher:** Cambridge University Press

**URL:** [http://www.cambridge.org/gb/knowledge/isbn/item1165164/?site_locale=en_GB](http://www.cambridge.org/gb/knowledge/isbn/item1165164/?site_locale=en_GB)

**Author:** Wiggins, N; Johnson, D; Avilac, M; Farquhard, SA; Michaele, YL; Riosf, T; Lopezg, A

**Title:** Using popular education for community empowerment: perspectives of Community Health Workers in the Poder es Salud/Power for Health program

**Date of Publication:** April 2009

**Publication type:** Academic paper

**Publication details:** Wiggins, N; Johnson, D; Avilac, M; Farquhard, SA; Michaele, YL; Riosf, T; Lopezg, A (2009), Using popular education for community empowerment: perspectives of Community Health Workers in the Poder es Salud/Power for Health program, Critical Public Health, 19 (1), 11-22

**Keywords:** Social power, USA, equity, community health workers, popular education

**Abstract:** This paper seeks to document the self-reported perceptions of the effects of the use of popular education on community health workers (CHWs) and their communities within the city of Oregon. Empowerment has been advanced as a strategy for eliminating remaining health disparities. Popular education promotes community empowerment by increasing individuals’ and communities’ awareness of their capacity and providing a framework and strategies through which participants can identify and resolve problems. Poder es Salud/Power for Health, a community-based participatory research project, sought to improve health and decrease disparities in African American and Latino communities in Multnomah County, Oregon, through the intervention of CHWs who used popular education. In-depth interviews were conducted with five CHWs involved in the project to explore their perceptions of the effects of the use of popular education on the CHWs and their communities. Results suggested that CHWs possessed a shared understanding of popular education. Effects on the CHWs included increases in community participation and identification, desire to advocate for the community, and sense of personal potential. Similarly, among communities, CHWs observed increases in level of participation in community events, quality and quantity of leadership, and sense of community solidarity. These results suggest that popular education, when used consistently throughout a health promotion program, can promote empowerment and thus contribute to eliminating health disparities.

**Country:** USA (Oregon)

**Publisher:** Taylor and Francis Groups

**URL:** [http://www.tandfonline.com/doi/abs/10.1080/09581590802375855](http://www.tandfonline.com/doi/abs/10.1080/09581590802375855)

**Author:** Woons, M

**Title:** Democratisation and Development in Tanzania: Complimentary or Contradictory Forces?

**Date of Publication:** April 2013

**Publication type:** Discussion Brief

Keywords: Social power, Tanzania, development, democracy

Abstract: This article uses Tanzania as a case study to discuss to what extent democratisation promotes development? Critics suggest the idea that democratisation fuels development has the relationship backwards. They feel that the authoritarian traits of newly developed states like South Korea, Taiwan, and Singapore played a critical part in explaining their development. Without denying such successes, this paper challenges the belief that democracy hampers development. In other words, development in authoritarian regimes is the exception and not the rule. The first section offers a brief overview of the terms development and democratisation. The second reviews the literature by comparing those who feel democratisation has a role to play in development and those who do not. Highlighting weaknesses found in the literature, the third section suggests that the best path to development in failed authoritarian states requires support for “bottom-up” democratisation. This approach is tested in the fourth section by looking at how well it explains Tanzania’s developmental challenges and successes. The conclusion discusses how bottom-up democratisation helps explain development in countries like Tanzania and offers a better road map even if the promised results fall short of the East Asian experience.

Country: Tanzania
Publisher: e-International Relations
URL: http://www.e-ir.info/2013/04/09/democratisation-and-development-in-tanzania-complimentary-or-contradictory-forces/

Author: Yemek, E; Idas, Economic Governance Programme
Title: Civil society influence on national governance
Date of Publication: 2008
Publication type: Report


Keywords: Social power, social participation, South Africa, participatory budgeting

Abstract: This report concerns the proceedings of a small working group session which involved three case studies which describe and analyse civil society organisation approaches to building political will for participatory governance. Although participatory governance offers important concrete benefits for citizens and state actors alike, there is often initial resistance from political actors and government officials who are unfamiliar with such approaches. The article report also discusses the benefits of participatory budgeting.

Country: South Africa
Publisher: Institute for Democracy in Africa
URL: http://www.equinetafrica.org/bibl/docs/IDAgov23082008.pdf
3.2 Social participation in health

With the wide range of conceptual understanding, approaches and intentions of the papers on social participation this brief text does not seek to provide a summary or synthesis of the section, but an introduction to it.

There is a diverse literature on social participation in health presented in this section, with papers that present conceptualization, analysis, describe experience or assess intervention at local, national and global level. A number of the papers present reflections on the conceptualization of participation and how it is organized, particularly in health systems but also at local and national government level. Papers present experiences of strengthening social participation in health, and there are guides and methods materials on this. Some papers reflect on the experiences to draw lessons on what enables or blocks social participation in health, from legal and policy frameworks, to governance, systems and mechanisms and the processes used within systems and communities for participation.

There is a diverse understanding of participation in the papers and the term is used to reflect a wide range of action from involvement in forums and action to co-determination. In many of the papers social participation is mediated through local leaders, activists, civil society and representatives. Some papers comment on the extent to which vulnerable and marginalized groups are included in participatory processes and address issues of equity in both social inclusion and social outcomes.

As in the previous section, a number of the papers present options for how to assess and measure whether participation is changing within interventions, and whether it is making a difference to health and social outcomes.

Author: Achoki TN, Beke A, Shilumani C
Title: Effectiveness of community participation in tuberculosis control
Date of Publication: October 2009
Publication type: Academic paper
Keywords: Social participation, South Africa, participatory research, TB control, interventions
Abstract: This study sought to determine the best approach of integrating community interventions for TB control. It evaluated the records of 3,110 new TB patients registered in three Local Service Areas (LSAs), from quarter 1 2004 to quarter 4 2005. It found that bacteriological coverage, smear conversion and treatment success rates dropped in the interventional LSA, while the control LSAs remained consistent. The defaulter rates dropped in all LSAs, while the proportion of unevaluated cases increased in the interventional LSA. However, patients registered in the clinics had better chance of successful treatment outcome compared to their hospital counterparts. The study concluded that community participation by itself is not adequate to improve the performance of a TB control programme. Enhancement of the program’s technical and organisational capacity is crucial, prior to engaging purely community interventions. Failure to observe this logical relationship would ultimately result in suboptimal performance. Therefore, the process of entrusting communities with more responsibility in TB control should be gradual and take cognisance of the various health system factors.
Country: South Africa
Publisher: South African Medical Journal (SAMJ)
Community participation as an interactive learning process: experiences from a schistosomiasis control project in Zimbabwe.

**Abstract:** This article reports on a schistosomiasis control project undertaken from 1994 to 1998 in Guruve District, Zimbabwe, based on the active involvement of local communities in the growing and application of the molluscicidal plant Phytolacca dodecandra as a supplement to other control measures such as chemotherapy and health education. The berries of *P. dodecandra* are highly molluscicidal to the intermediate host snails of schistosomiasis and is rapidly degradable in water. It was observed that plant care fluctuated during the study period. Only a few households participated in snail control activities, although 97% of respondents in a baseline survey had stated a willingness to take part. This invoked an investigation to explore the reality from a user perspective. Focus group discussions, semi-structured interviews and observations were used to solicit information. In spite of a cultural inclination for collective work, many reasons for low-level involvement emerged, inter alia the low perceived value of the project, demands for tangible benefits, inaccessible fields and weak leadership. This study shows that community participation is a complex process upon which a multiplicity of social and cultural determinants have an impact. If community participation is to become successful in development programmes it ought to be viewed as a mutual learning process where obstacles are identified and discussed and solutions shared among community members and project staff.

**Country:** Zimbabwe

**Publisher:** Acta Tropica, Elsevier


---

International Treatment Preparedness Summit, Cape Town, March 2003

**Abstract:** This meeting gathered activists from all continents to discuss how communities could work to improve treatment literacy. The document includes recommendations on the types of treatment literacy activities that should be developed and funded.

**Country:** South Africa

**Publisher:** GMHC Treatment Issues, Gay Men’s Health Crisis (GMHC)

**URL:** [http://www.thebody.com/content/art13423.html](http://www.thebody.com/content/art13423.html)

---

Community mobilisation key to success of 3 x 5

**Date of Publication:** December 2003

**Publication type:** Briefs

**Publication details:** Alcorn K (1 December 2003), Community mobilisation key to success of 3 x 5. [www.Aidsmap.com](http://www.Aidsmap.com)
Keywords: Social participation, Eastern and Southern Africa, community monitoring, HIV, community-based organisations,

Abstract: The WHO 3 x 5 plan envisages that community-based organisations, including groups of people living with HIV, will play a key role in scaling up treatment. This is not just a measure to plug gaps in the health services of heavily affected countries, but a response to evidence from early pilot programmes. These programmes have demonstrated that community participation is a key element in ensuring the acceptability of treatment. Making treatment part of the social fabric rather than a hidden enterprise is the only way to ensure long-term adherence. Before treatment is introduced, developing community capacity to carry out counselling for HIV testing will be essential. Basic symptom relief must also be taught, alongside nutritional support and skills in home care. Most important of all, treatment literacy – the basic understanding of HIV treatment – will need to be promoted, in order to convince people of the potential benefits of learning their HIV status. An early activity in any national programme should be assessment of community capacity. Where are the community-based organisations, how many of them exist, and what are they doing? Health districts will be encouraged to develop plans for community training and a community coordination committee. Once antiretrovirals arrive in a community, adherence counselling will need to be carried out by community members. It is hoped that people with HIV will play a leading role in this education process, as they have at MSF projects such as Khayelitsha in South Africa’s in Western Cape province. Expanding the cadre of community health workers who possess basic skills in dispensing medicines will be necessary. These workers will also be involved in distributing drugs and monitoring for side-effects, as well as record keeping and HIV testing. WHO also plans to fund community-based advocacy organisations that can galvanise government, NGO and private sector towards nationally agreed treatment plans. WHO recognises the importance of treatment advocacy networks in South Africa, Kenya and Thailand in forcing governments to act, and in developing treatment literacy campaigns that are owned by the community. By the end of 2005, WHO believes that formal medical outlets will need to have formed partnerships with 30,000 community-based organisations in up to 60 countries delivering large-scale treatment programmes if the `3 x 5’ target is to be reached.

Country: South Africa
Publisher: NAM publications
URL: http://www.aidsmap.com/Community-mobilisation-key-to-success-of-3-x-5/page/1417086/

Author: Asibu W; Chingoni J; Majawa D; Jambo H; Kambewankako T; Namakhoma I; Loewenson R; Country Minders for Peoples Development (CMPD) Malawi; REACH Trust Malawi; TARSC
Title: EQUINET PRA Report: Promoting and protecting health of orphans and vulnerable children in Monkey Bay, Malawi
Date of Publication: April 2009
Publication type: Report
Publication details: Asibu W; Chingoni J; Majawa D; Jambo H; Kambewankako T; Namakhoma I; Loewenson R; Country Minders for Peoples Development (CMPD) Malawi; REACH Trust Malawi; TARSC (2009), EQUINET PRA Report: Promoting and protecting health of orphans and vulnerable children in Monkey Bay, Malawi. EQUINET PRA paper, CMPD, TARSC, REACH: EQUINET, Harare, 33 pages
Keywords: Social participation, Participatory research, Malawi, East and Southern Africa, CMPD
Abstract: This report presents the experiences and learning from participatory action research implemented by Country Minders for Peoples Development (CMPD), (a Malawi non government organization) in EQUINET on the co-ordination of support from service providers and community organisations for protection of sexual and reproductive health of orphans and vulnerable children in Monkey Bay, Malawi. Through baseline and follow up surveys, key informant interviews, focus groups and participatory reflection and action (PRA) meetings the community identified the health needs and
coping strategies of orphans and vulnerable children and their consequent risk of health and SRH problems; mapped the services and resources available for orphans and vulnerable children, and their coverage of and gaps in meeting the identified needs. The work generated local dialogue to giving more attention to promoting outreach and uptake of services and to the intersectoral actions and CBOs that support this, if resources are to be accessed and used by vulnerable groups like orphans and vulnerable children.

Country: Malawi
Publisher: EQUINET, Harare
URL: http://www.equinetafrica.org/bibl/docs/CMPD%20PRA%20Report%20May09.pdf

Author: Atkinson JM; Vallely A; Fitzgerald L; Whittaker M; Tanner M
Title: The Architecture and Effect of Participation: A Systematic Review of Community Participation for Communicable Disease Control and Elimination. Implications for Malaria Elimination
Date of Publication: August 2011
Publication type: Academic paper
Keywords: Social participation, international, disease control, systematic review
Abstract: This paper reports the findings of an atypical systematic review of 60 years of literature in order to arrive at a more comprehensive awareness of the constructs of participation for communicable disease control and elimination and provide guidance for the current malaria elimination campaign. Of the 60 papers meeting the selection criteria, only four studies attempted to determine the effect of community participation on disease transmission. The studies showed statistically significant reductions in disease incidence or prevalence using various forms of community participation. The use of locally selected volunteers provided with adequate training, supervision and resources is crucial to the success of the interventions in these studies, the authors argue. After a qualitative synthesis of all 60 papers, they elucidate the complex architecture of community participation for communicable disease control and elimination. The authors stress the importance of ensuring that current global malaria elimination efforts do not derail renewed momentum towards the comprehensive primary health care approach. They recommend that the application of the results of this systematic review be considered for other diseases of poverty in order to harmonise efforts at building 'competent communities' for communicable disease control and optimising health system effectiveness.

Country: International
Publisher: Malaria Journal, BioMedCentral
URL: http://www.malariajournal.com/content/pdf/1475-2875-10-225.pdf

Author: Báez, C; Barron, P
Title: Discussion paper 39: Community voice and role in district health systems in east and southern Africa: A literature review
Date of Publication: June 2006
Publication type: Discussion paper
Keywords: social participation, East and Southern Africa, district mechanisms
Abstract: This study is a review of the literature and secondary evidence on community participation in central, eastern and southern Africa. It focuses in particular on South Africa, Mozambique, Malawi,
Zambia and Kenya, and presents and analyses evidence of the current situation with regard to the role of districts in promoting community participation and articulating community voice. This includes looking at how: community voice and roles at district level are structured and integrated into planning; the way districts carry out their functions enables or blocks participation; districts articulate and represent community interests at national level; and wider contexts and processes at national and district levels influence and explain these outcomes. The review identifies examples of enabling and blocking mechanisms for community participation at district level and to provide pointers for further research.

Country: East and Southern Africa
Publisher: EQUINET, Harare
URL: http://www.equinetafrica.org/bibl/docs/DIS39GOVbaez.pdf

Author: Bannerjee, A; Banerji, R; Duflo, E; Glennerstar, R; Khemani, S
Title: Pitfalls Of Participatory Programs: Evidence From a Randomized Evaluation In Education In India.
Date of Publication: September 2008
Publication type: Academic paper

Keywords: Social participation, India, education

Abstract: This paper evaluates three different interventions in India to encourage social participation in education: providing information, training community members in a new testing tool, and training and organizing volunteers to hold remedial reading camps for illiterate children. The authors find that these interventions had no impact on community involvement in public schools, and no impact on teacher effort or learning outcomes in those schools. However, the authors do find that the intervention that trained volunteers to teach children to read had a large impact on activity outside public schools -- local youths volunteered to be trained to teach, and children who attended these camps substantially improved their reading skills. These results suggest that citizens face substantial constraints in participating to improve the public education system, even when they care about education and are willing to do something to improve it.

Country: India
Publisher: National Bureau of Economic Research (NBER), Massachussets
URL: http://www.nber.org/papers/w14311

Author: Batte, A; Odoi-Adome, R; Faculty of Medicine, Makerere University
Title: Capacity building paper: Patient involvement in treatment decision making among women with breast cancer: Creating person-centred and equitable health service systems
Date of Publication: May 2006
Publication type: Capacity building paper
Publication details: Batte, A; Odoi-Adome, R; Faculty of Medicine, Makerere University (2006), Capacity building paper: Patient involvement in treatment decision making among women with breast cancer: Creating person-centred and equitable health service systems. EQUINET, Harare
Keywords: Social participation, Uganda, health services

Abstract: This study assessed patients’ involvement in treatment decision making among women with breast cancer in Mulago hospital, Uganda’s national hospital. Patients’ participation in the treatment decision making process is one of the patients’ rights considered under the patient’s autonomy in the health care delivery process. It is of great value therefore for health care providers and other parties involved in the health services provision to create space for patients’ involvement in their treatment.
Country: Uganda
Publisher: EQUINET, Harare
URL: http://www.equinetafrica.org/bibl/docs/CP11EHSbate.pdf

Author: Brieger, WR; Otusanya, SA; Oke, GA; Oshiname, FO; Adeniyi, JD
Title: Factors associated with coverage in community-directed treatment with ivermectine for onchocerciasis control in Oyo State, Nigeria.
Date of Publication: January 2002
Publication type: Academic paper
Publication details: Brieger, WR; Otusanya, SA; Oke, GA; Oshiname, FO; Adeniyi, JD (2002). Factors associated with coverage in community-directed treatment with ivermectine for onchocerciasis control in Oyo State, Nigeria. Tropical Medicine and International Health; 7(1): 11-18.
Keywords: Social participation, Nigeria, treatment
Abstract: This article describes the coverage results achieved when Community-directed distribution with ivermectin (CDTI) was introduced in four local government areas of Oyo State, Nigeria. CDTI has been adopted by the African Programme for Onchocerciasis Control (APOC) as its main strategy for achieving sustained high coverage in endemic communities. Using a household survey after the second distribution, researchers documented that 68.6% of the community overall received the drug, and as did 85.0% of those who were eligible (not pregnant, not sick and at least 5 years of age). Among the factors associated with having received ivermectin were the role of village leaders and volunteer community-directed distributors (CDDs). However women in many villages felt excluded from decision making and the concerns of migrant farm workers living in Yoruba farm settlements were not well understood by health staff or the majority population. The findings can provide guidance in re-orienting health workers to the importance of fostering participation and cohesion among all segments of the community, especially the inclusion of women and minority groups.

Country: Nigeria
Publisher: John Wiley and Sons

Author: Brock, K; McGee, R
Title: Mapping trade policy: Understanding the challenges of civil society participation
Date of Publication: May 2004
Publication type: Discussion paper
Keywords: Social participation, Uganda, Kenya, United Kingdom, civil society, trade
Abstract: This paper examines the way that a range of development actors view and engage with the arena of trade policy, focusing in particular on the challenges encountered by civil society actors participating in that arena. The dynamics of civil society participation in the trade arena – what might be achieved, and how – are very different from those that shape civil society participation in processes labelled poverty reduction; this paper explores the differences. To achieve this, the authors provide an overview of the international trade policy landscape, and discuss factors that shape participation at the interfaces of trade and development policy processes. The authors go on to present the views and perspectives of two sets of civil society actors – UK-based international non-government organisations, and Ugandan and Kenyan civil society organisations – about their experiences and strategies of engagement and participation. Finally the authors reflect on some of the challenges of civil society participation in the trade arena: structural complexity and inequities, the exclusion of alternatives to trade liberalisation narratives, and the dynamics of representation.
Country: Uganda, Kenya, United Kingdom  
Publisher: Institute for Development Studies, Sussex  
URL: [http://www.equinetafrica.org/bibl/docs/BROtrade.pdf](http://www.equinetafrica.org/bibl/docs/BROtrade.pdf)

**Author:** Campbell, C; Williams, B; Gilgen, G  
**Title:** Community Participation and Sexual Health – Is There a Relationship?  
**Date of Publication:** 2002  
**Publication type:** Report  
**Publication details:** Campbell, C; Williams, B; Gilgen, G (2002). id21 Development Research Reporting Service, Institute of Development Studies (IDS), Sussex  
**Keywords:** Social participation, South Africa, participatory research, sexual behaviour  
**Abstract:** This article explores whether there is a relationship between people’s degree of community involvement and participation and their sexual behaviour? The authors discuss how, if indeed this is the case, it may help to identify possible areas of HIV/AIDS intervention at community level. Researchers from the London School of Economics (LSE) investigated this relationship in a mining town in South Africa. Whereas some forms of community participation were associated with safer sexual behaviour and lower levels of HIV infection, others acted in the opposite way. The authors conclude that the findings highlight the need for further research.

Country: South Africa  
Publisher: Institute of Development Studies, Sussex  
URL: [http://www.eldis.org/id21ext/h6cc1g5.html](http://www.eldis.org/id21ext/h6cc1g5.html)

**Author:** Chambers, R; Kenton, N; Ashley, H [Editors]  
**Title:** Participatory Learning and Action 50: Critical reflections, future directions  
**Date of Publication:** October 2004  
**Publication type:** Book  
**Keywords:** Social participation, international, participatory research, equity  
**Abstract:** This paper presents the outcomes of a writers workshop held in April 2004 at the Institute for Development Studies that brought together the Participatory Learning and Action editorial team and several previous guest editors to share their wealth of experience of using participatory approaches. It provides a critique of the current state of play in participatory development. The question of ‘where are we now?’ inevitably leads to ‘where do we go next?’ From natural resource management, rights-based approaches and well-being, to literacy and communications, the 18 themed articles in this issue come from personal reflections and analysis. Each author speaks from her or his own field of experience. The articles challenge us to see how we can work more effectively together, to build on the successes of the past and to engage continuously in a process of reflection and action towards social justice.

Country: International  
Publisher: International Institute for Environment and Development (IIED), London  
URL: [http://pubs.iied.org/pdfs/9440IIED.pdf](http://pubs.iied.org/pdfs/9440IIED.pdf)

**Author:** CIVICUS  
**Title:** Bridging the gaps: Citizens, organisations and dissociation Civil Society Index summary report: 2008-2011  
**Date of Publication:** August 2011  
**Publication type:** Report

Keywords: Social participation, international, civil society, activism

Abstract: This report sets out the aims and areas of focus of the Civil Society Index (CSI) and describes findings that emerge from an analysis of the various CSI Analytical Country Reports. The report suggests from the findings that the understanding by governments and external funders of the civil society sector needs to expand to encompass non-formal movements, both traditional and online activism; and that new processes need to be instigated which better connect formal CSOs with these under-explored forms of participation, offering citizens new pathways for effective civic activism.

Country: International

Publisher: CIVICUS: World Alliance for Citizen Participation, Johannesburg


Author: Conway, K

Title: Booze and beach bans: turning the tide through community action in New Zealand.

Date of Publication: 2002

Publication type: Academic paper


Keywords: Social participation, New Zealand, alcohol

Abstract: Following an escalation in alcohol-related incidents in the New Zealand beach community of Piha, a community-driven response to address issues of community well-being and safety was initiated by concerned residents. A case study evaluation reported on the development of a community coalition involving community and statutory stakeholders and the successful implementation of local community action strategies. These included a beach alcohol ban, extensive local publicity and a community policing presence over successive summers. An examination of the case study suggests that inter-sectoral collaboration, and multiple level strategies through policy, promotion and enforcement activities are key factors in enabling communities to successfully reduce alcohol-related harm.

Country: New Zealand

Publisher: Health Promotion International, Oxford University Press

URL: http://heapro.oxfordjournals.org/content/17/2/171.long

Author: Cornwall, A; Gaventa, J

Title: From Users and Choosers to Makers and Shapers: Repositioning Participation in Social Policy

Date of Publication: 1999

Publication type: Discussion paper


Keywords: Social participation, international, social policies

Abstract: This article explores approaches to participation in social policy, within broader debates on the rights and responsibilities of citizenship. Drawing on studies of participation in a range of social policy arenas north and south, it explores the implications of a shift from a focus on clients or consumers of social policies to a more active engagement of citizens as agents in shaping social policies.

Country: International

Publisher: Eldis

Author: Department for Communities and Local Governance
Title: Guidance on community governance reviews
Date of Publication: March 2010
Publication type: Toolkit and training materials
Keywords: Social participation, UK, local governance
Abstract: This document presents guidance issued by the Secretary of State and the Local Government Boundary Commission for England under the Local Government and Public Involvement and Health Act 2007 giving effect to recommendations made in community governance reviews. The Implementation Plan for the Local Government white paper, Strong and Prosperous Communities1 (the 2006 white paper), sets out Communities and Local Government’s future approach. It proposes that guidance must be short, clear and practical, and that an open and inclusive approach to its preparation should be followed, involving the range of stakeholders who will be affected by or have an interest in it. This guidance aims to be clear and practical but also to encourage innovative and flexible local action.
Country: UK, International
Publisher: Department for Communities and Local Government, The Local Government Boundary Commission for England, UK

Author: Desmet, M; Chowdhury, AQ; Islam, MdK
Title: The potential for social mobilisation in Bangladesh: the organisation and functioning of two health insurance schemes
Date of Publication: 1999
Publication type: Academic paper
Keywords: Social participation, Bangladesh, health care financing
Abstract: The paper describes the level of community involvement in management of the two largest health insurance schemes in Bangladesh, in rural areas and in the non-government sector. It discusses the schemes' role as a mechanism for people's management of health care. A review of documents and key-informant interviews found that subscribers are not actively participating in scheme management. However, existing family groups, involved in credit programmes may serve as entry-points for interaction, sustained by the 'natural link' between health insurance as a means of spreading the risks of treatment costs and credit programmes as a means of decreasing the relative impact of illness on household income. The schemes' role could be enhanced, by improving their technical performance and protection of the poorer households; inclusion of hospital care in the coverage package; by simplification of scheme administration and concentrating the schemes at the level of community-based services, which may be self-financed and also self-managed by the community, given available sensitisation, training and interaction. A shift to episode-based co-payments would also introduce solidarity among patients and among individuals at higher risk, such as pregnant women and under-fives. Finally, action-research is needed to document the process of increased community involvement.
Country: Bangladesh
Publisher: Social Science and Medicine, ScienceDirect
URL: http://www.sciencedirect.com/science/article/pii/S02777953698003931
**Author:** Dolan, P; Cookson, R; Ferguson, B  
**Title:** Effect of discussion and deliberation on the public's views of priority setting in health care: focus group study  
**Date of Publication:** April 1999  
**Publication type:** Academic paper  
**Keywords:** Social participation, UK, community priorities, health services  
**Abstract:** This study set out to investigate the extent to which people change their views about priority setting in health care as a result of discussion and deliberation. A random sample of patients from two urban general practices was invited to attend two focus group meetings, a fortnight apart. There were differences between people’s views after they have had an opportunity for discussion and deliberation, measured by questionnaires at the start of the first meeting and the end of the second meeting. Respondents became more reticent about the role that their views should play in determining priorities and more sympathetic to the role that healthcare managers play. About a half of respondents initially wanted to give lower priority to smokers, heavy drinkers, and illegal drug users, but after discussion many no longer wished to discriminate against these people. The authors concluded that the public’s views about setting priorities in health care are systematically different when they have been given an opportunity to discuss the issues. If the considered opinions of the general public are required, surveys that do not allow respondents time or opportunity for reflection may be of doubtful value.  
**Country:** UK  
**Publisher:** British Medical Journal  
**URL:** [http://www.ncbi.nlm.nih.gov/pmc/articles/PMC27815/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC27815/)  

**Title:** EQUINET PRA report 8: Promoting partnership between Communities and Frontline Health Workers: Strengthening Community Health Committees in South Africa  
**Date of Publication:** January 2008  
**Publication type:** Report  
**Publication details:** Community Development Unit, Nelson Mandela Metropolitan University (2008), EQUINET PRA report 8: Promoting partnership between Communities and Frontline Health Workers: Strengthening Community Health Committees in South Africa. EQUINET PRA Project Reports, EQUINET, Harare, 28 pages  
**Keywords:** Social participation, South Africa, health care committees  
**Abstract:** The workshops summarised in this report provided an opportunity for health workers to discuss the roles and responsibilities of Community Health Committees and to recognise that these structures are sorely under-resourced. They recognised that as health workers they provided limited support for Community Health Committees. The community workshop provided an opportunity for community members to network together and to discuss issues of common interest. Mapping of neighbourhoods surrounding the health facilities provided an important opportunity for exploring the similarities and differences in the challenges and resources available to the local communities. There was an acknowledgement from community members that seldom is an opportunity provided for community members to discuss together in an in-depth way the problems affecting their communities. Community members became more aware of their commonalities, particularly those negatively affecting their communities, such as alcohol abuse, gangsterism and crime, teenage pregnancy. The health workers of sub-district B invested much energy into the process and expressed their eagerness to pursue PRA further and to work more closely to promote the CHCs.
Country: South Africa  
Publisher: EQUINET, Harare  
URL: http://www.equinetafrica.org/bibl/docs/CDU%20PRArep%20Final.pdf

Author: Foot, J; Hopkins, T  
Title: A glass half-full: How an asset approach can improve community health and well-being  
Date of Publication: March 2010  
Publication type: Report  
Keywords: Social participation, UK, community monitoring, health inequalities  
Abstract: This publication is aimed at those working with communities to challenge health inequalities, particularly in areas where this gap has widened despite implementing a range of ‘evidence based’ interventions. It presents an asset approach as a method to challenge health inequalities.  
Country: United Kingdom (UK)  
Publisher: Improvement and Development Agency.  
URL: http://www.local.gov.uk/c/document_library/get_file?uuid=fc927d14-e25d-4be7-920c-1add80bb1d4e&groupId=10171

Author: Freyens, P; Mbakuliyemo, N; Martin, M  
Title: How do health workers see community participation  
Date of Publication: 1993  
Publication type: Academic paper  
Keywords: Social participation, Rwanda, health workers  
Abstract: A survey of health workers in Rwanda suggested that they were reluctant to accept the involvement of lay people in the promotion and implementation of primary care programmes. Various obstacles to community participation were identified by the health workers. In a questionnaire survey of the 30 health centers of the Butare Health Region in southern Rwanda health workers’ were asked about their perceptions on community participation. Asked to categorize various aspects of community participation on the basis of their importance, the workers gave the following order of priorities: identifying one’s own problems, paying for drugs, community management of the ambulance, choosing basic health workers, suggesting a health program and helping to evaluate results, working on the environment, helping to manage the community health center, maintaining the health center, and suggesting better hours for consultations. 83% of health workers responded that communities should not take the initiative in health promotion activities. Poverty and a lack of financial resources for drugs, treatment, and environmental improvement; ignorance about the value of participation and of health care in general; and taboos, customs, and traditions producing resistance to change were cited by health workers as obstacles to community participation. Respondents endorsed continuing education for all people through discussions and home visits. Overall survey findings suggest that the respondents are rather opposed to the involvement of laypeople in promoting and implementing primary care programs. There was confusion about the notion of community, with the health workers tending to underestimate people's potential for action, and to insist upon the need for a hierarchical structure.  
Country: Rwanda  
Publisher: World Health Forum  
URL: http://apps.who.int/iris/bitstream/10665/49055/1/WHF_1993_14%283%29_p253-257.pdf
Author: Global Health Watch
Title: Mobilising health and social justice movements around an alternative World Health Report
Date of Publication: 2004
Publication type: Report
Keywords: Social participation, international, health advocacy, health disparities
Abstract: This paper discusses to what extent global civil society participates in international health advocacy. Whilst there have been some high-profile successes due to pressure from civil society, (for example with campaigns to improve access to medicines and to regulate the promotion of infant formula), there is a striking lack of involvement and pressure from civil society on broad health and health systems issues. Growing disparities in health care between the rich and the poor add a political and moral dimension to global health. Instead, a fragmented, disease- and issue-specific approach to health dominates advocacy as well as research and governance agendas, under-emphasising the underlying causes of ill-health. In addition, the values that underpin the goal of health equity are often undermined by development policies emphasising efficiency at the expense of fairness; market forces at the expense of planning based on population needs; and selective approaches to disease eradication at the expense of comprehensive strategies for promoting health. In addition, the diminished capacity and role of national governments and the public sector, particularly in poor countries, has further undermined the notion of social solidarity and democratic governance. Although there has been a recent and welcome shift by the World Health Organisation to highlight global inequity and reassert the principles of the Primary Health Care Approach, constant pressure from civil society is needed to hold national policy-makers and international organizations accountable to declared values. To be effective, civil society voices must be well informed, evidence-based, and united on fundamental issues.
Country: International
Publisher: Global Health Watch (GHW)
URL:  http://www.equinetafrica.org/bibl/docs/GHWgov.pdf

Author: Haddinott, J
Title: Participation and poverty reduction: an analytical framework and overview of the issues’
Date of Publication: January 2002
Publication type: Academic paper
Keywords: Social participation, international, poverty
Abstract: This paper examines the relationship between community participation and the efficacy of interventions designed to reduce poverty. It outlines a simple model that identifies three actors involved in the provision of anti-poverty interventions, financiers, providers and beneficiaries. The author uses the model to illustrate what happens when the poor move from being passive beneficiaries to being the providers of these interventions. Beneficiary participation has the potential to lower the cost of providing these interventions. It can ensure that they more closely reflect the preferences of the population that they are designed to serve. However, this benefit is contingent on the ability of communities to engage in collective actions. In fractionalized communities, or where trust and/or social capital are weak, there is a risk that community participation may result in the capture of benefits by local elites, to the detriment of the poor. Further, the author argues that the failure to delegate true decision making authority (allowing for de jure but not de facto participation), may result in beneficiaries being reluctant to act because of concerns that they will be subsequently overruled.
**Country:** International  
**Publisher:** Journal of African Economies  

**Author:** HEPS Uganda; Learning Network for Health & Human Rights; University of Cape Town; EQUINET  
**Title:** Regional meeting on health and human rights: Report of Proceedings, Kampala Uganda  
**Date of Publication:** 2010  
**Publication type:** Report  
**Publication details:** HEPS Uganda; Learning Network for Health & Human Rights; University of Cape Town; EQUINET (2010). Regional meeting on health and human rights: Report of Proceedings, Friday 8th October 2010, Kampala Uganda. EQUINET, Harare  
**Keywords:** Social participation, Uganda, health rights, mechanisms, meeting proceedings  
**Abstract:** This document reports on the proceedings of a regional meeting which The Learning Network for Health & Human Rights (South Africa) through University of Cape Town and HEPS-Uganda co-convened in Kampala Uganda on 8th October 2010 within the Regional Network for Equity in Heath in East and Southern Africa (EQUINET). The primary intention of the meeting was to enable the regional sharing of best practice around the right to health and community participation, as well as to explore the development of a toolkit / training manual on the Right to Health for Civil Society groups in the region. Discussions for the way forward included plans for future action on the toolkit, a human rights curriculum for health workers, and for community governance structures for health.

**Country:** Uganda  
**Publisher:** EQUINET, Harare  

**Author:** Heritage, Z; Dooris, M  
**Title:** Community participation and empowerment in Healthy Cities  
**Date of Publication:** 2009  
**Publication type:** Academic paper  
**Keywords:** Social participation, international, health promotion, healthy cities  
**Abstract:** This article explores how cities in the WHO European Healthy Cities Network have integrated community participation and empowerment within their development. Community participation and empowerment are core principles underpinning the Healthy Cities movement. An evaluation in 2002 demonstrated that community participation continues to be a high priority in most project cities. One-third of cities regularly consulted with large parts of their populations and another third undertook occasional consultations. Nearly 80% of cities had mechanisms for community representatives to participate in decision-making; and more than two-thirds of cities had initiatives explicitly aimed at empowering local people. Subsequent research in 2005 highlighted that community participation is an essential part of the process of good local governance, and empowerment remains at the heart of effective health promotion and thus fundamental values of Healthy Cities.  
**Country:** International  
**Publisher:** Health Promotion International, Oxford University Press  
**URL:** [http://heapro.oxfordjournals.org/content/24/suppl_1/i45.full](http://heapro.oxfordjournals.org/content/24/suppl_1/i45.full)
Author: Institute of Development Studies (IDS)
Title: What do we know about how to bring the perspectives of people living in poverty into global policy-making?
Date of Publication: November 2012
Publication type: Report
Keywords: social participation; international
Abstract: The paper reviews evidence from global consultations with people living in poverty as input to the global development agenda beyond 2015. The consultations reviewed are: Voices of the Poor (The World Bank 2000); a collection of Poverty Reduction Strategy Papers (The World Bank and the IMF 1999-ongoing); Citizens and Governance: Civil Society in the New Millennium (The Commonwealth Foundation and CIVICUS 1999); The 2011 Global Fund Partnership Forum e-Consultations (The Global Fund 2011). Previous global consultations with people living in poverty have promised new opportunities for those most marginalised to influence the decisions that affect their lives, and for relationships to be built between ordinary people and the institutions which make those decisions. However, for many these processes have been experienced as 'extractive' listening projects, as opposed to ongoing conversations – with people left feeling that their voice has been used for political ends which are not their own. There are considerable lessons to be learned about what to do, and what not to do. If the future of development is to be characterised by a tangible degree of 'ownership' by those who are affected by it, then it is crucial to learn these lessons.
Country: International
Publisher: Institute of Development Studies (IDS)

Author: International Federation of Health and Human Rights Organisations
Title: The UN Special Rapporteur on the Right to Health: A guide for civil society
Date of Publication: April 2009
Publication type: Toolkits and Training Materials
Keywords: Social participation, international, human rights
Abstract: This booklet was developed by IFHHRRO to aid civil society actors in becoming more involved in the work of the Special Rapporteur and on the role that health workers can play. The appointment of the first Special Rapporteur in 2002 and the resulting body of work on the right to health has proven to be a valuable catalyst for further action within the health and human rights movement. At the same time there remains much unawareness and misconception concerning the work of the Special Rapporteur and the ways in which civil society actors can be involved. The guide provides general information on the Special Rapporteur, and presents possibilities for contribution and follow-up to the three main areas of his work. It offers concrete assistance on how the annual reports, country missions and the individual complaints mechanism of the Special Rapporteur can be used by civil society.
Country: International
Publisher: International Federation of Health And Human Rights Organisation (IFHHRO), Amsterdam
URL: http://www.ifhhro.org/our-work/our-publications/352-un-special-rapporteur-on-the-right-to-health-a-guide-for-civil-society-
The articles in this issue on participatory learning and action focus on the recent approaches to adaptation to climate change utilising the priorities, knowledge and capacities of local people. Community-based adaptation (CBA) draws on participatory approaches and methods developed in both disaster risk reduction and community development work and sector-specific approaches. The emphasis now leans to policy processes and institutionalisation, issues of difference and power, assessing the quality and understanding the impact of participation, rather than promoting participation. Participatory Learning and Action reflects these developments and recognises the importance of analysing and overcoming power differentials which work to exclude the marginalised. This issue is divided into three sections: reflections on participatory processes and practice in community-based adaptation to climate change; participatory tool-based case studies; and participatory tools, with step-by-step descriptions of how to use them. The report also presents two important tools: communication maps, which help participants to understand communication patterns and relationships, and a tool called Rivers of Life, where participants reflect on personal experiences that have motivated them in their personal lives.

Country: International
Publisher: International Institute for Environment and Development (IIED)
URL: http://pubs.iied.org/pdfs/14573IIED.pdf

Constitution emboldens citizens to take part in budgeting

In Kwale at the Indian Ocean coast, citizens draw up budgets for their priorities in public spending. Despite being some of the most taxed citizens of the world, Kenyans have so far had little say in how their economy is managed. The Constitution of Kenya (2010) has, however, given much impetus to ordinary citizens participate in the management and decision-making process in governance socially, economically and politically. Participatory budgeting is a mechanism that civil society can use to decide how to allocate part of a municipal or public budget. The Kwale community engaged in 2012 in a needs assessment process after which the priority areas were identified before electing budget delegates at the ward level. Kwale County currently has 20 wards following the recent boundary demarcations by the Andrew Ligale-led Interim Independent Boundaries Commission. The 20 wards are in Matuga, Msambweni, Kinango and the newly created Lunga-Lunga constituencies. The ward delegates are charged with developing specific spending proposals which will later be presented to the community for validation. If the community approves of the proposals, the same are to be forwarded to the county government for consideration of implementation. If implemented, participatory budgeting is expected to benefit education, health, agriculture, roads and energy sectors.

Country: Kenya
Publisher: Pambazuka News, Kenya
URL: http://pambazuka.org/en/category/advocacy/86145
Author: Jewkes, RM; Murcott, A
Title: Community Representatives: representing the community?
Date of Publication: April 1998
Publication type: Academic paper
Keywords: Social participation, international, health promotion, community representative
Abstract: This paper notes that meanings of "community" are a subject of extensive debate in literatures of social analysis and to some extent health. Given that the word's meaning is not agreed, those working to promote "community participation" in health are forced to adjudicate on competing meanings in order to operationalise the notion. This raises questions about how this is done and what are the implications of particular choices for what may be achieved by the participating "community". This paper presents the findings of an empirical study which examined the manner in which ideas of "community" are operationalised by people engaged in encouraging community participation in health promotion in the context of the selection of members for health for all steering groups in healthy cities projects in the United Kingdom. It argues that the demands of the role of the "community representative" are such that particular interpretations of "community" achieve ascendance. The paper explores the consequences of the interpretation of "community" as part of the "voluntary sector" and argues that this may compromise one of the stated desired outcomes of community participation i.e. extending democracy in health decision-making.
Country: International
Publisher: Social Science and Medicine, Elsevier
URL: http://www.sciencedirect.com/science/article/pii/S0277953697002098

Author: Kaim, B
Title: Who Are We To Care? Exploring the Relationship Between Participation, Knowledge and Power In Health Systems
Date of Publication: April 2013
Publication type: Discussion paper
Publication details: Kaim, B (2013). Who Are We To Care? Exploring the Relationship Between Participation, Knowledge and Power In Health Systems. TARSC, Zimbabwe, and COPASAH
Keywords: Social participation, international, social power, health systems
Abstract: This paper is divided into three sections: The first focuses on how the interaction between people’s participation, knowledge and power effects the functioning of health systems. The following section pays particular attention to approaches that can be used to build a more just and equitable health system. The final section concludes by asking a series of questions to provoke and deepen our thinking on ways we can overcome obstacles to achieving this goal, at both community level and as we move from the local to the global as a strategy for change. Each section blends discussion on concepts and issues with descriptions of experiences and case studies from around the globe, especially from countries in Latin America, Asia and east and southern Africa, where a wealth of material describes the impact of neoliberalism and globalisation on health systems, and attempts to build alternatives.
Country: International
Publisher: TARSC, COPASAH Harare
**Author:** Kamuzora, P; Rutagumirwa, SK; Department of Development Studies, University of Dar Es Salaam (2006)

**Title:** Capacity building paper: Secondary school students’ voice in HIV/AIDS prevention interventions in Tanzania: A case study of Mbeya region

**Date of Publication:** February 2006

**Publication type:** Capacity building paper


**Keywords:** Social participation, Tanzania, youth, HIV, AIDS

**Abstract:** This paper reports on a study which set out to investigate how participatory HIV and AIDS prevention intervention are in secondary schools in the Mbeya region of Tanzania. Schools are appropriate a place for HIV/AIDS interventions. Students like other general youths are mostly at risk since they are sexually active and premarital sex among them is so high. In the past, two forms of interventions have been introduced to prevent HIV/AIDS transmission in secondary schools that is to say, programmes within and without the schools. Young people’s Participation may lead to issues being identified which might otherwise be overlooked. Tawil et al (1995) argued that, HIV/AIDS programmes that allow youth participation are more effective and tend to address the concerns and needs of young people better. Regular contact and cooperation in activity implementation as well as decision-making diminishes the distance between 'adult professional' and 'young person'. Young people can also make a valuable contribution in the project design phase. They are not stuck in the usual ways of thinking and 'how it's always been done'. Furthermore, youths are a great human resource and potential to add to organization or programme.

**Country:** Tanzania

**Publisher:** EQUINET, Harare

**URL:** [http://www.equinetafrica.org/bibl/docs/CBP1AIDSKamuzora.pdf](http://www.equinetafrica.org/bibl/docs/CBP1AIDSKamuzora.pdf)

---

**Author:** Kapiriri, L; Norheim, OF; Heggenhougen, K

**Title:** Public participation in health planning and priority setting at the district level in Uganda

**Date of Publication:** June 2003

**Publication type:** Academic paper


**Keywords:** Social participation, Uganda, decentralisation, priority setting

**Abstract:** This study set out to explore the experiences of the public and leaders with participatory planning and priority setting in health, in a decentralized district in Uganda. An exploratory qualitative approach, involving in-depth interviews with health planners at the national, district and community levels (n = 12), and five group discussions at community level with women (two groups), men, youths and adolescents (n = 51). The analysis adapted some principles from grounded theory. The five levels of the participation framework by Rifkin (1991) were used to assess the actual level of participation in the study population. Uganda has established structures for participatory planning. Within this context, district level respondents reported to have gained decision-making powers, but were concerned about the degree of financial independence they had. The national level respondents were concerned about the capacity of the districts to absorb their new roles. Actual involvement of the public in priority setting and poor communication between the different levels of the decentralization system, despite the existing structures, were additional concerns. Public participation is mainly through representatives. Majority participation is mainly at health benefits and programme activity levels. Decision-making,
monitoring and evaluation, and implementation are still dominated by the locally elected leaders due to reported economic, social and cultural barriers that hinder the participation of the rest of the public.

Country: Uganda
Publisher: Health Policy and Planning, Oxford University Press
URL: http://heapol.oxfordjournals.org/content/18/2/205.long

Author: La Bell, TJ
Title: From Consciousness Raising to Popular Education in Latin America and the Caribbean
Date of Publication: 1987
Publication type: Academic paper
Publication details: La Belle, TJ (1987). From Consciousness Raising to Popular Education in Latin America and the Caribbean. Comparative Education Review; 31 (2)
Keywords: Social participation, participatory research, international, popular education
Abstract: This article documents the ways in which popular education has emerged and what is known about its efficacy in the region during the last decade. It begins with a brief discussion of consciousness raising that is based primarily on Polo Freire’s influence. That section ends by providing several reasons why consciousness raising has been criticized and ultimately combined with other interventions (primarily the economic and political organisation of the poor) and why it now exists as an important component of what is termed “popular education”. Following a discussion of the characteristics and origin of popular education, the author describes participatory-investigation activities as the typical first step beyond consciousness raising, linking the latter to popular-education strategies. The author then offers an assessment of what is known about popular education’s accomplishments relative to its goals and aspirations.

Country: International
Publisher: University of Chicago Press
URL: http://www.jstor.org/stable/1188619

Author: Loewenson, R
Title: Public participation in health: Making people matter
Date of Publication: April 2003
Publication type: Report
Keywords: Social participation, Zimbabwe, inclusive health systems, review
Abstract: The 123 papers reviewed in this section describe a range of CSO actions in Health. The involvement of civil society organisations (CSOs) in health brings new institutional, technical, political and financial resources to health. How best can these resources be marshalled towards local, national and international health goals? Policies and programmes that seek to engage and utilise the resources within civil society for health need to be informed by evidence and experience of good practice. The growth of the scale and policy influence of CSOs, the relevance of civil society to the attainment of global and national health goals, and the increased formal interaction with CSOs within the UN system have, amongst other factors, stimulated a review of civil society roles in health within and beyond the WHO. If policy shifts in relations with CSOs are to be sustainable and relevant, they need to be backed by evidence and supported by dialogue. Towards this aim, the WHO Civil Society Initiative and Training and Research Support Centre (TARSC) present evidence from research on key areas of civil society engagement in health, to identify the knowledge emerging from current research in these areas and the issues informing future research on civil society and health. An overview of the methods used to select the research papers, definitions of civil society, overall findings and research issues arising is provided in
the first paper in this annotated bibliography. This is the second paper in the series and presents the
evidence from studies on civil society - state interactions in national health systems. It reviews studies of local and national forms of civil society—state interaction and collaboration in the different spheres of health governance and action (policy, health promotion, service provision, community outreach, resource mobilisation and monitoring health systems). It identifies the features within the state, health systems and civil society that produce positive and negative interactions. It also explores any comparative advantages or disadvantages for health system outcomes.

**Country:** Zimbabwe

**Publisher:** Training and Research Support Centre (TARSC), WHO Harare


**Author:** Loewenson, R; TARSC

**Title:** Discussion paper 1: Participation and accountability in health systems: The missing factor in equity?

**Date of Publication:** 2000

**Publication type:** Discussion paper

**Publication details:** Loewenson, R; TARSC (2000), Discussion paper 1: Participation and accountability in health systems: The missing factor in equity? EQUINET Discussion Paper 1 pp 1-27, EQUINET, Harare

**Keywords:** Social participation, Southern Africa, equity, health services

**Abstract:** This paper examines the features of social and governance systems that support vertical equity in health and their current application within health systems. It proposes measures and mechanisms that need to be included or strengthened within health systems to enhance equity in the relationship between citizen and state. Finally it suggests further work towards strengthening the social dimensions of equity in health. The paper draws from three main sources: published literature, findings of action research work in Zimbabwe and experiences shared and conclusions from an EQUINET/ TARSC/ WHO/ IDRC southern African regional meeting on public participation in Health systems held in May 2000 (EQUINET/ TARSC 2000). The participatory action research was carried out by TARSC in consultation with the Community Working Group on Health (CWGH) and the Ministry of Health and Child Welfare in four districts of Zimbabwe (2 rural and 2 urban councils) involving social groups from civil society, elected leadership, traditional leadership and health systems.

**Country:** Southern Africa, Zimbabwe

**Publisher:** EQUINET, Harare

**URL:** [http://www.equinetafrica.org/bibl/docs/DIS1gov.pdf](http://www.equinetafrica.org/bibl/docs/DIS1gov.pdf)

**Author:** Loewenson, R

**Title:** Public participation in health systems. Report of the EQUINET/TARSC Regional meeting, Harare, May 2000

**Date of Publication:** 2000

**Publication type:** Conference proceedings


**Keywords:** Social participation, Southern Africa, health services, equity

**Abstract:** This document reports on the TARSC/EQUINET meeting on public participation in health systems (May 17-19); which was held to exchange experience and information and identify key issues in relation to participation across various dimensions of health systems. The meeting sought to: understand better the various experiences of participation currently taking place; identify key and replicable features of 'promising practices' that could be more widely disseminated; and identify areas
for follow up investigation/ intervention/ action that can be taken forward, either through continued networking of delegates or other means. Participation of communities is widely argued to be to improve health outcomes and the performance of health systems. Despite this participation is often loosely designed and hardly evaluated for its contribution to health outcomes. Participation takes many forms, and reflects varying degrees of community control over decision making in health systems. These different levels of community authority depend also on where authority is located within health systems (over planning, resource allocation etc) and how far health workers and managers are willing to widen the inclusion of different social groups in decisions that have often been under their control.

**Country:** Southern Africa  
**Publisher:** EQUINET, Harare  
**URL:** [http://www.equinetafrica.org/bibl/docs/POL6GOVloe.pdf](http://www.equinetafrica.org/bibl/docs/POL6GOVloe.pdf)

**Author:** Loewenson, R; Chikumbirike, T; TARSC; CHESSORE; INESOR; CWGH  
**Title:** Meeting report: Impacts of participation and governance on equity in health systems, Harare, 28 September 2002, EQUINET Meeting report, pgs 1-13  
**Date of Publication:** September 2002  
**Publication type:** Report  
**Publication details:** Loewenson, R; Chikumbirike, TARSC; CHESSORE; INESOR; CWGH (2002). Meeting report: Impacts of participation and governance on equity in health systems, Harare, 28 September 2002. EQUINET, Harare  
**Keywords:** Social participation, Southern Africa, governance  
**Abstract:** This report presents a summary of the key areas for potential co-operation between Equinet GovERN and MSP; as discussed at the meeting on the impacts of participation and governance on equity in health systems in Harare in September 2002. This document has five sections: (1) Background and framework: The background to the work that sets out the steps, identified institutions and links, agreed goals, research questions and methods that guide the governance work. (2) Feedback from the pilot: Information arising out of the pilot work carried out in Zambia and Zimbabwe is reported, with key areas of learning from the pilot. A broad framework finalised at the meeting for the multi-country work is reported. (3) Review of the proposals: The section outlines the submitted proposals and research tools and changes agreed at the meeting. (4) Follow up: Logistic, timeline and administrative information about the next stage of GovERN and cross cutting issues for strengthening the multi-country work (5) Links with Municipal Services Project

**Country:** Southern Africa  
**Publisher:** EQUINET, Harare  
**URL:** [http://www.equinetafrica.org/bibl/docs/REPgov2.pdf](http://www.equinetafrica.org/bibl/docs/REPgov2.pdf)

**Author:** Lopez, LL; Magweva, FI; Mpofu, E; Duquesne University, Counselling for Health International (CHI) Trust; Pennsylvania State University  
**Title:** Discussion paper 40: A review of district health systems in east and southern Africa: Facilitators and barriers to participation in health  
**Date of Publication:** January 2007  
**Publication type:** Discussion paper  
**Publication details:** Lopez, LL; Magweva, FI; Mpofu, E; Duquesne University, Counselling for Health International (CHI) Trust; Pennsylvania State University (January 2007). Discussion paper 40: A review of district health systems in east and southern Africa: Facilitators and barriers to participation in health. EQUINET Discussion Paper 40, pg 1-27  
**Keywords:** Social participation, East and Southern Africa, district health systems
Abstract: The authors of this paper set out to review the available published and grey literature, with a focus on primary health care and the district health systems in sub-Saharan Africa, in order to explore the facilitators and barriers to community participation. They selected six African countries for deeper review and analysis: Botswana, Lesotho, Namibia, Rwanda, Swaziland and Tanzania. The work signals a need for more culturally informed interventions that draw from indigenous knowledge bases, with evidence-based data that is culturally relevant, and that contextualises poverty, health risks and systems in sub-Saharan Africa. This requires further deconstruction of current definitions of ‘district health system’, analysing social constructions of health systems, and finding out how they have been affected by global trends, market reforms and policy shifts, like decentralisation. A number of challenges remain, not the least of which is the prevailing perspective of the citizen as an object of health care or object of research, rather than the required perspective of citizen as participant and knower. The authors conclude that this perspective needs to change. In research and training, this change of perspective can help to promote health literacy, greater intentionality and a better understanding of local–central power relations, which will inform cross-disciplinary designs for future research.

Country: East and Southern Africa
Publisher: EQUINET, Harare
URL: http://www.equinetafrica.org/bibl/docs/DIS40ehsLOPEZ.pdf

Author: Masuku, D; Mhlanga, H; Ntini, S; Kaim, B
Title: EQUINET PRA Report: Unlocking the potential of the child: Improving Social Support and Health Care of Orphans and Vulnerable Children Through Increased Child Participation in Victoria Falls, Zimbabwe
Date of Publication: February 2010
Publication type: Report
Keywords: Social participation, participatory research, Zimbabwe, children
Abstract: This study used a mix of quantitative assessment and participatory action research methods (PRA) to explore and strengthen the participation of orphans and vulnerable children in primary health care (PHC) in Victoria Falls, a town in the north-western part of Zimbabwe. The AIDS epidemic has resulted in over 1 million orphans and many other vulnerable children in Zimbabwe. Most of these children remain in their communities, either in child-headed households or looked after by their extended family or members of the community. Due to early school dropout, child labour, economic insecurity and poor adult support, many of these children are susceptible to early onset of sexual activity and thereby to HIV infection. While there has been a massive response from local community groups, government, civic and international organisations to the plight of these children, many of these policies and programmes have been designed in a top-down manner, without taking into consideration the views of the children themselves. This lack of child participation in the planning, implementation and evaluation of programmes weakens their potential impact and undermines the inherent capacity, experience and skills of the children themselves. In this study reported, children, community representatives and health workers identified three priority health problems faced by these children. As a result of the work, community organisations involved mainstreamed psychosocial support activities into their actions, undertook a number of awareness campaigns, initiated and participated in child protection committees and started to meet monthly to strengthen coordination. The authors propose the creation of an enabling social environment that encourages child involvement in decision-making processes, the support of vulnerable children through structured platforms for the exchange of
information and experiences, provision of child friendly services, and promotion of effective communication between health workers, community members and children to support effective coverage of services.

Country: Zimbabwe
Publisher: EQUINET, Harare
URL: http://www.equinetafrica.org/bibl/docs/ZIMPRARepFeb2010.pdf

Author: Mansuri, G; Rao, V
Date of Publication: November 2012
Publication type: Report
Keywords: Social participation, community monitoring, international, decentralisation
Abstract: This document is a new Policy Research Report analyzing community development and decentralization projects, shows that such projects often fail to be sensitive to complex contexts – including social, political, historical and geographical realities – and fall short in terms of monitoring and evaluation systems, which hampers learning. Citing numerous examples, including projects and programs supported by the World Bank, the authors demonstrate that participatory projects are not a substitute for weak states, but instead require strong central support to be effective.

Country: International
Publisher: The World Bank Groups, Washington DC.

Author: Mansuri, G; Rao, V
Title: How can participatory development be improved?
Date of Publication: March 2013
Publication type: Report
Publication details: Mansuri, G; Rao, V (2013). How can participatory development be improved? Devex, USA
Keywords: Social participation, community monitoring, international, decentralisation
Abstract: The paper notes that reviews of the effectiveness of local participatory development indicate that elite capture in such interventions is widespread. This commentary introduces an analysis of community development and decentralization projects, which shows that such projects often fail to be sensitive to complex contexts – including social, political, historical and geographical realities – and fall short in terms of monitoring and evaluation systems, which hampers learning. Citing numerous examples, the authors demonstrate that participatory projects are not a substitute for weak states, but instead require strong central support to be effective.

Country: International
Publisher: Devex, USA
The objectives of this literature review have been to explore the meanings attaching to the concept of social exclusion and to start to consider their implications for policy/action in general and for the work of the WHO Commission in particular. In the first section of the review, explanations offered for the rise to prominence of the concept from the 1970s are considered. The next two sections focus on the ways in which social exclusion is defined highlighting how the concept takes on different – often ‘taken for granted’ - meanings, according to the theoretical, ideological, and personal perspectives in which it is embedded and the nature of some of the exclusionary processes at work around the globe. This is followed by two sections that consider in turn some of the quantitative approaches to measuring social exclusion and the insights offered by narratives or personal stories of social exclusion. The review then moves on to explore the relevance of the concept of social exclusion for our understanding of the causes of health inequalities and in particular for the theoretical model underpinning the work of the WHO Commission on Social Determinants of Health. The final section brings together the different strands of the review in order to outline a conceptual framework to guide the work of the WHO Social Exclusion Knowledge Network.
the different potential roles/functions of HFCs and the complex and multiple set of factors influencing their functioning, there is no ‘one size fits all’ approach to CPH via HFCs, nor to the evaluation of HFCs. However, there are plenty of experiences and lessons in the literature to use in optimizing HFCs.

Country: Low- and middle-income countries
Publisher: Oxford University Press, UK
URL: http://heapol.oxfordjournals.org/content/early/2011/12/08/heapol.czr077.full?keytype=ref&ijkey=SVuzQ0Y8N1kNLcw

Author: McKnight, JL
Title: Regenerating Community: The Recovery of a Space for Citizens.
Date of Publication: May 2003
Publication type: Discussion paper
Keywords: Social participation, USA, citizen associations
Abstract: This analysis describes a process of realization by the authors that they had been using an inaccurate “map” of society when using an “institutional assumption” that personal and community well-being was produced by institutional systems. This assumption led to a focus on management, technology, and funding and a de-facto classification of local residents as clients—the recipients of institutional services. The authors’ unrecognized premise was that well-being was determined by the sum of a resident’s consumption of services. But could service consumption by clients really change individual behaviour, social relationships, the physical and economic environment? Was there any place on the map for the residents and their own actions? Where did citizens and their collective relationships fit in affecting the determinants? The authors distinguish between non-profit institutions and local citizen associations to understand the basic determinants of well-being and avoid institutional assumptions. The authors abandoned civil society as a useful category and re-classified non-profit systems with the other systems of the state and the market. They focused instead on the citizen sector of associational life to understand it as a potential community resource for change in individual behaviour, social relations, the physical environment, and economic status. They raise that in city after city, a rich associational framework in older neighbourhoods. In Chicago’s mid-south neighborhood of Grand Boulevard, one of its very lowest in income, a neighbourhood inventory found 319 voluntary associations. In Chicago’s Westside Austin neighbourhood, 612 associations were counted. There are also hundreds of associational groups that gather without the formality of a name.

Country: USA
Publisher: Institute for Policy Research, Northwestern University, Evanston
URL: http://www.abcdinstitute.org/docs/abcd/regenerating.pdf

Author: McKnight, JL
Title: Community Capacities and Community Necessities: Opening remarks at the “From Clients to Citizens Forum”, Coady International Institute, St. Francis Xavier University, Nova Scotia, 8 July 2009.
Date of Publication: 2009
Publication type: Conference proceedings
**Keywords:** Social participation, international, abundance

**Abstract:** The opening remarks of the above-mentioned gathering claims that if ‘abundance’ is not included in society then government fails. Abundance includes; harbouring no limit to their gifts, their associations, and their hospitality. Health, safety, economy, environment, food, and children and care.

**Country:** International

**Publisher:** The Abundant Community, Canada

**URL:**
http://www.abundantcommunity.com/home/getting_started/community_capacities_and_community_neecessities.html

**Author:** Meier, BM; Pardue, C; London, L

**Title:** Implementing Community Participation Through Legislative Reform: A Study of the Policy Framework for Community Participation in the Western Cape Province of South Africa

**Date of Publication:** July 2012

**Publication type:** Academic paper

**Publication details:** Meier, BM; Pardue, C; London, L (2012). Implementing Community Participation Through Legislative Reform: A Study of the Policy Framework for Community Participation in the Western Cape Province of South Africa. Social Science Research Network (SSRN), working paper series

**Keywords:** Social participation, South Africa, human rights, community health committees

**Abstract:** With South African legislation supporting community involvement in the health system, early policy developments focused on Community Health Committees (HCs) as the principal institutions of community participation. A Draft Policy Framework for Community Participation in Health formalized participatory institutions in the Western Cape province. With the Draft Policy as a frame of analysis, the researchers conducted documentary policy analysis and semi-structured interviews on the evolution of community participation. Moving beyond the specific and unique circumstances of the Western Cape, this study analyses generalizable themes for community participation in the health system. The Draft Policy proposed a formal network of communication – from local HCs to the health system. However, this participation structure has struggled to establish itself and function effectively as a result of limitations in community representation, administrative support, capacity building, and policy commitment. Without legislative support for community participation, the enactment of superseding legislation is likely to bring an end to HC structures in the Western Cape. The authors conclude that attempts to realize community participation have not adequately addressed the underlying factors crucial to promoting effective participation, with policy reforms necessary: to codify clearly defined roles and functions of community representation, to outline how communities engage with government through effective and accountable channels for participation, and to ensure extensive training and capacity building of community representatives. Given the public health importance of structured and effective policies for community participation, and the normative importance of participation in realizing a rights-based approach to health, this analysis informs researchers on the challenges to institutionalizing participation in health systems policy and provides practitioners with a research base to frame future policy reforms.

**Country:** South Africa

**Publisher:** Social Science Research Network (SSRN)

**URL:**
**Author:** Morrison, J; Thapa, R; Hartley, S; Osrin, D; Manandhar, M; Tumbahangphe, T; Neupane, R; Budhathoki, B; Sen, A; Pace, N; Manandhar, DS; Costello, A

**Title:** Understanding how women’s groups improve maternal and new-born health in Makwanpur, Nepal: A qualitative study

**Date of Publication:** March 2010

**Publication type:** Academic paper

**Publication details:** Morrison, J; Thapa, R; Hartley, S; Osrin, D; Manandhar, M; Tumbahangphe, T; Neupane, R; Budhathoki, B; Sen, A; Pace, N; Manandhar, DS; Costello, A (2010). Understanding how women’s groups improve maternal and new-born health in Makwanpur, Nepal: A qualitative study. International Health; 2(1); 25-35

**Keywords:** Social participation, Nepal, women’s groups, maternal health

**Abstract:** This article reports on a qualitative study in Nepal on the impact of participatory learning and action within women’s groups on maternal and neonatal health. Women's groups, working through participatory learning and action, can improve maternal and newborn survival. The authors collected data from 19 women's group members, 2 group facilitators, 16 health volunteers, 2 community leaders, 21 local men, and 23 women not attending the women's groups, through semi-structured interviews, group interviews, focus group discussions and unstructured observation of groups. Participants took photographs of their locality for discussion in focus groups using photo-elicitation methods. When group members were compared with 11 184 women who had recently delivered, the authors found that they were of similar socioeconomic status, despite the context of poverty, and caste inequalities. Four mechanisms explain the women's group impact on health outcomes: the groups learned about health, developed confidence, disseminated information in their communities, and built community capacity to take action. Women's groups enable the development of a broader understanding of health problems, and build community capacity to bring health and development benefit.

**Country:** Nepal

**Publisher:** International Health, Elsevier


---

**Author:** Motzafi-Haller, P

**Title:** Locating the Agency of Marginalized People: Nomadic and Post-Nomadic Service Populations in Rajasthan, India

**Date of Publication:** 2012

**Publication type:** Report


**Keywords:** Social participation, social accountability, India, equitable public services

**Abstract:** Using ethnographic and survey data, this article explores the complex ways in which camp-dwellers on the margins of settled communities in Rajasthan, India, have interacted with state agents, services and systems of knowledge in a manner that articulates their limited but nonetheless significant agency. The author explores three arenas through which the state’s presence is felt in the lives of these marginalized people: access to land, to health services and to public schooling. The author argue that marginalized people are not merely the victims of centrist powers but exhibit a resourcefulness and flexibility that redefines group boundaries and the impact of state policies on their lives.

**Country:** India

**Publisher:** Journal of the Anthropological Society of Oxford, UK

**URL:** [http://www.isca.ox.ac.uk/fileadmin/ISCA/JASO/Motzafi-Haller.pdf](http://www.isca.ox.ac.uk/fileadmin/ISCA/JASO/Motzafi-Haller.pdf)
Author: Mubyazi, GM; Hutton, G
Title: Rhetoric and Reality of Community Participation in Health Planning, Resource Allocation and Service Delivery: a Review of the Reviews, Primary Publications and Grey Literature
Date of Publication: 2012
Publication type: Academic paper
Keywords: Social participation, low-income countries, mechanisms
Abstract: Introduction: This paper synthesises reports on community participation (CP) concept and its practicability in countries’ health service systems, much focus being on developing countries.
Methodology: The authors narratively reviewed the published and grey literature traced from electronic sources and hard copies as much as they could be accessed. Findings: CP is a concept widely promoted, but few projects/programmes have demonstrated its practicability in different countries. In many countries, communities are partially involved in one or several stages of project cycles - priority setting, resource allocation, service management, project implementation and evaluation. There is tendency of informing communities to implement the decisions that have already been passed by elites or politicians. In most of the project/programmes, professionals dominate the decision making processes by downgrading the non-professionals or non-technical people’s knowledge and skills. CP concept is greatly misinterpreted and sometimes confused with community involvement. In some cases, the community participates in passive manner. There is no common approach to translate CP into practice and this perpetuates debates on how and to what extent to which the community members should participate. Conclusion: Persistent misconceptions about CP perpetuate inequalities in many countries’ health systems, suggesting more concerted measures towards making a desired difference.
Country: Low-income countries
Publisher: Rwanda Journal of Health Sciences, Kigali Health Institute (KHI), Rwanda
URL: http://www.khi.ac.rw/index.php?option=com_docman&task=cat_view&gid=51&Itemid=129

Author: Mubyazi, GM; Mushi, AK; Shayo, E; Mdira, K; Ikingura, J; Mutagwaba, D; Malecela, M; Njunwa, KJ.
Title: Local Primary Health Care Committees and Community-Based Health Workers in Mkuranga District Tanzania: Does the Public Recognise and Appreciate Them?
Year of Publication: 2007
Publication Details: Mubyazi, GM; Mushi, AK; Shayo, E; Mdira, K; Ikingura, J; Mutagwaba, D; Malecela, M; Njunwa, KJ (2007) Local Primary Health Care Committees and Community-Based Health Workers in Mkuranga District Tanzania: Does the Public Recognise and Appreciate Them? Studies on Ethno-Medicine (Ethno-Med), 1(1): 27-35
Publication type: Academic paper
Keywords: social participation; Tanzania; primary health care, Governance
Abstract: This study explored the views of villagers on the existence and functioning of local primary health-care (PHC) committees, village health workers (VHWs), skilled staff at government health facilities and their responsiveness to community health needs in Mkuranga district, Tanzania.
Information was collected through group discussions with household members, PHC committees and district health managers, with clinical and nursing staff at peripheral government facilities, and officers in central and local government departments at district level. Some villagers behaved as if not to acknowledge the existence of VHWs and PHC committees at community level. There was a common report from the village respondents that some nurses behaved impolitely to antenatal clients.
Dissatisfaction with diagnostic and prescription skills of rural medical-aides and laboratory services was reported by the majority of the residents, albeit some health staff were not happy with villagers complaining while knowing the constrained health staff working conditions. To ensure a sense of public trust, ownership and use of the existing health service system, community members need regular and timely feedback on health service delivery constraints and the existing community based health organisations for them to effectively participate in health development matters.

**Country:** Tanzania  
**Publisher:** Kamla Raj Enterprise  

**Author:** Musuka, G; Chingombe, I  
**Title:** Civil society participation in programme implementation for intersectoral action on health equity and intersectoral action for health: A Case Study of the Health Civil Society Network in East and Southern Africa  
**Date of Publication:** March 2007  
**Publication type:** Report  
**Keywords:** Social participation, East and Southern Africa, parliamentary committees  
**Abstract:** This review presents evidence from published literature, and other secondary evidence in the east and southern African regions on a desk review of the role of parliaments and parliamentary portfolio committees on health in building equitable and people centred national health systems. This desk review was commissioned by the Health Systems Knowledge Network of the WHO Commission on the Social Determinants of Health in co-operation with the Regional Network for Equity in Health in east and southern Africa (EQUINET).  
**Country:** East and Southern Africa  
**Publisher:** EQUINET, Harare  

**Author:** Ngulube, T; Mdhluli, L; Gondwe, K; Njobvu, CA; CHESSORE  
**Title:** Discussion paper 21: Governance, participatory mechanisms and structures in Zambia’s health system: An assessment of the impact of Health Centre Committees (HCCs) on equity in health and health care  
**Date of Publication:** December 2004  
**Publication type:** Discussion paper  
**Publication details:** Ngulube, T; Mdhluli, L; Gondwe, K; Njobvu, CA; CHESSORE (2004), Governance, participatory mechanisms and structures in Zambia’s health system: An assessment of the impact of Health Centre Committees (HCCs) on equity in health and health care EQUINET Discussion Paper 21, EQUINET, Harare, pg. 1-86  
**Keywords:** Social participation, Zambia, health committees  
**Abstract:** This study undertaken by CHESSORE, as part of a collaborative multi-country study through EQUINET compared the performance of four ‘successful’ health centre committees (HCCs) with four poorly performing HCCs in districts with matching socioeconomic characteristics. The study also sought to identify the ideal desired features to successful community participation in the Zambian health system. This was done using a semi-structured questionnaire, along with key in-depth interviews, PRA
tools, stakeholder workshops, outcome mapping techniques and the collection of available data at health facilities. The HCCs were still in existence at all sampled health facilities. Those that performed well during the earlier survey had continued to perform well, despite facing challenges such as hostility from the health system. The innovations introduced were still in place and functioning. However, on average HCCs were known to no more than 20% of community residents. HCCs were better known among the less poor socioeconomic groups than among the poorest groups in society. The better performing HCCs were also performed well with respect to participation in decision making, priority setting, monitoring expenditure and quality of services. Some HCCs had acquired authority to make own decisions on certain things. The better performing HCCs kept their user fees lower and provided for other alternatives to cash payments than the poor performing HCCs. All key stakeholders at district level, whether from HCCs, frontline health workers and from the DHMT were unanimous to say that HCCs have made an impact and their value to the health system was acknowledged. However, this impact was limited in terms of the desired equity goals and coverage. There was consensus too that HCCs had little or no impact among vulnerable groups and in important decision making roles at the health centre, especially in relation to clinical care services. Channels of communication have been developed between the health system and HCC in health promotion and provision of preventive services. Even then, there were still problems in the flow of information, which was usually one way from the health system to communities, with feedback being rare infrequent and ineffective.

Country: Zambia  
Publisher: EQUINET, Harare; Centre for Health Science & Social Research (CHESSORE), Lusaka  
URL: [http://www.equinetafrica.org/bibl/docs/DIS21gov.pdf](http://www.equinetafrica.org/bibl/docs/DIS21gov.pdf)

Author: Oxman, AD; Lewin, S; Lavis, JN; Fretheim, A  
Title: SUPPORT Tools for evidence-informed health Policymaking (STP) 15: Engaging the public in evidence-informed policymaking  
Date of Publication: December 2009  
Publication type: Academic paper  
Keywords: Social participation, international, health policy  
Abstract: The importance of engaging the public (both patients and citizens) at all levels of health systems is widely recognised. They are the ultimate recipients of the desirable and undesirable impacts of public policies, and many governments and organisations have acknowledged the value of engaging them in evidence-informed policy development. The potential benefits of doing this include the establishment of policies that include their ideas and address their concerns, the improved implementation of policies, improved health services, and better health. Public engagement can also be viewed as a goal in itself by encouraging participative democracy, public accountability and transparency. The article suggests three questions that can be considered with regard to public participation strategies: What strategies can be used when working with the mass media to inform the public about policy development and implementation? What strategies can be used when working with civil society groups to inform and engage them in policy development and implementation? What methods can be used to involve consumers in policy development and implementation?

Country: International  
Publisher: Health Research Policy and Systems, BioMedCentral  
URL: [http://www.health-policy-systems.com/content/7/S1/S15](http://www.health-policy-systems.com/content/7/S1/S15)
**Author:** Pedwell C; Perrons D  
**Title:** The Politics of Democratic Governance: Organising for Social Inclusion and Gender Equity  
**Date of Publication:** 2007  
**Publication type:** Conference proceedings  
**Publication details:** Pedwell C; Perrons D (2007), The Politics of Democratic Governance: Organising for Social Inclusion and Gender Equity. Proceedings for March 2007 seminar in London,  
**Keywords:** Social participation, international, gender, seminar proceedings, One World Action  
**Abstract:** This report is based on a two-day seminar organised by One World Action in London in March 2007. Democratic governance involves developing institutions and processes that are more responsive to the needs of ordinary citizens. Political processes include both formal, organised politics and non-formal political activism by civil society organisations (CSOs) or social movements engaging with local and national governments. Most democratic states employ a system of representative democracy in which elected representatives are tasked with acting in the interest of constituents. In this context, calls for the development of more participatory forms of democracy have been voiced. The two-day seminar brought together activists at the forefront of democracy building in various countries with policymakers to focus on how poor and marginalised people can have a voice in the decisions that affect their lives. Participants examined the challenges marginalised groups face in organising, engaging with and transforming political processes. Looking at examples from a range of international contexts, the presentations and discussions considered the potential of new strategies and forms of political engagement that aim to build equitable, gender-sensitive, democratic and accountable governance.  
**Country:** International  
**Publisher:** One World Action  

**Author:** Rifkin, SB; Lewando-Hundt, G; Draper, AK  
**Title:** Participatory Approaches in Health Promotion and Health Planning: A Literature Review  
**Date of Publication:** June 2000  
**Publication type:** Report  
**Publication details:** Rifkin, SB; Lewando-Hundt, G; Draper, AK (2000). Participatory Approaches in Health Promotion and Health Planning: A Literature Review. Health Development Agency  
**Keywords:** Social participation, UK, ethnic minority  
**Abstract:** This document was commissioned by the Health Education Authority (HEA) as part of its Forward Research Programme to examine health inequalities, social capital, community participation and the evaluation of social action programmes. It gives a focus on particular population groups such as black and minority ethnic communities and older people.  
**Country:** UK, international  
**Publisher:** Health Development Agency, London  
**URL:** [http://www.uel.ac.uk/ihhd/programmes/documents/reviewcd.pdf](http://www.uel.ac.uk/ihhd/programmes/documents/reviewcd.pdf)

**Author:** Solar, O; Irwin, A  
**Title:** Social Determinants, Political Contexts and Civil Society Action: A Historical Perspective on the Commission on Social Determinants Of Health  
**Date of Publication:** 2006  
**Publication type:** Academic paper  
Keywords: Social participation, international, social determinants of health, literature review
Abstract: This article evaluates opportunities for action on social determinants of health (SDH) requires a historical perspective. Plans for addressing SDH should be developed with an awareness of past similar efforts and factors that contributed to their success or failure. The study was a review of published historical literature on analysis and action on SDH, in particular from the Latin American social medicine movement. Conclusion comments state that opportunities exist today for significant progress in addressing SDH through national action and global mechanisms such as the Commission on Social Determinants of Health. Historical analysis suggests that civil society participation will be crucial for the success of these efforts.
Country: International
Publisher: Health Promotional Journal of Australia
URL: http://www.bvsde.paho.org/bvsacd/cd65/social.pdf

Author: Tenbensel, T
Title: Interpreting public input into priority-setting: the role of mediating institutions.
Date of Publication: November 2002
Publication type: Academic paper
Keywords: Social participation, international, health priority-setting
Abstract: This article is presented as a discussion about public participation in health priority-setting; and begins by highlighting how traditionally discussions on this have tended to assume that the best type of information about public values is that in which the public 'speaks for itself'. However, wherever public input has been used in priority-setting, the way in which it is used is far from transparent. Those jurisdictions that have initiated priority-setting processes have been characterised by the substantial involvement of 'mediating bodies that take on the role of interpreting information about public values. The information that they interpret is usually presented in a highly ambiguous form and does not 'speak for itself'. This article argues that these bodies are essential, but that their decision-making processes are necessarily opaque and should not be judged according to the criterion of transparency.
Country: International
Publisher: Health Policy, Elsevier
URL: http://www.sciencedirect.com/science/article/pii/S0168851002000179

Author: Training and Research Support Centre; CWGH; Ministry of Health and Child Welfare Zimbabwe; EQUINET
Title: Supporting the role of Health Centre Committees: A training manual
Date of Publication: August 2011
Publication type: Toolkit and training materials
Publication details: TARSC; CWGH; MoHCW Zimbabwe; EQUINET (2011). Supporting the role of Health Centre Committees: A training manual. Training and Research Support Centre (TARSC), Harare, 65 pages
Keywords: Social participation, Zimbabwe, health centre committees
Abstract: This manual draws from work carried out since 2000 by Training and Research Support Centre and the Community Working Group on Health to establish and support the functioning of Health Centre Committees in Zimbabwe. From 2008 the CWGH has given particular emphasis to re-invigorating HCCs in Zimbabwe, and TARSC, through its health literacy and participatory action research training programme has given capacity and technical support to dialogue mechanisms between health workers and communities in Zimbabwe and in the region. This manual was produced as a tool to support capacity building of HCCs. The manual uses participatory methods as its approach to raise
community voice and build skills and knowledge on the evidence and experience generated within communities. The manual is not intended to be stand-alone material. Health Centre Committees will need to use it together with other materials, including Ministry of Health Village Health Worker Manual guidance and training materials, Health Literacy materials, and other health resources. The manual should also be a lever to draw on the knowledge and experience of the people in districts working in health, the health workers, local government personnel, the civil society organisations in the CWGH and other institutions and sectors; and clarify their different roles and responsibilities in contributing to improved health of the communities.

Country: Zimbabwe, international  
Publisher: Training and Research Support Centre (TARSC), Harare  

Author: Vaitilingam, R  
Title: Well-being: a new development concept  
Date of Publication: January 2009  
Publication type: Discussion paper  
Keywords: Social participation, international, well-being, concepts  
Abstract: This paper explores the meanings and implications of the well-being concept. Leading aid models focus on economic growth and poverty reduction, but the well-being approach aims for more comprehensive change, said a new group studying the problem. Well-being requires us to go beyond the macro statistics on growth, poverty and inequality and get a more fine-grained understanding of the distributions of resources and relationships that constitute the barriers to successful development in particular contexts. This is what development policy must engage in. The work of the group brought together four major bodies of thinking about development, each of which has been adopted with some success by developing countries and development agencies: theories of human need, Nobel laureate Amartya Sen’s ‘development as freedom’, the ‘participation’ and ‘livelihoods’ frameworks, and the work of social psychology on subjective well-being.  
Country: International  
Publisher: The Broker Online; IDP, Netherlands  
URL: [http://www.thebrokeronline.eu/Articles/Be-well](http://www.thebrokeronline.eu/Articles/Be-well)
3.3 Social accountability in health

The larger number of papers in this annotated bibliography are on social accountability in health, although issues of participation and power are also covered in a number of them. As for the prior section, a diversity of conceptual understanding, approaches and intentions of the papers means that this introductory text does not aim to provide a summary or synthesis of the section.

The term social accountability is applied in relation to health in a range of contexts and settings in the papers, on health financing, health service delivery, delivery on services that relate to social determinants of health, in relation to local and central government practice, the practices of private sector corporations and of political leaders.

A number of the papers report on mechanisms for accountability, such as joint health committees involving communities and health workers, and measures for accountability, such as social audits, participatory budgeting and community monitoring. A number of toolkits, guides and training materials for this are included. As for previous sections, few papers present evidence on measures for social accountability impact on health outcomes.

Author: Addai, E
Title: The Community Scorecard Approach For Performance Assessment: A WaterAid Ghana Briefing Paper
Date of Publication: November 2004
Publication type: Report
Keywords: social accountability, Ghana, community scorecard, water supplies
Abstract: This article describes Pro Net North’s experience of implementing a Community ScoreCard (CSC) process in five communities of Wa in Upper West region of Ghana while also giving a short introduction to the CSC methodology.
Country: Ghana
Publisher: WaterAidGhana, WaterAid
URL: http://www.wateraid.org/~/media/Publications/community-scorecard-approach-pronet.pdf

Author: Ahmad, R
Title: Governance, Social Accountability and the Civil Society
Date of Publication: 2008
Publication type: Academic paper
Keywords: Social accountability, international, governance, public services
Abstract: This paper reviews the current literature on social accountability as a means to achieve good governance and increased public participation for improved public service delivery. After a brief discussion on concept and tools of social accountability, this paper illustrates that such innovations have led to improvements in the performance of state agencies and actors in varying contexts across the developing countries. Increased donor-led efforts to converge good governance agendas and neo-liberal economics tend to overlook politics that is central to struggles for social accountability. The complete faith of the neo-liberal development paradigm in market-friendliness, devolution, and working through NGOs often disregards politics within which such policies have to operate and on which they are ultimately dependent. The overarching issues of poverty and redistribution should caution development
practitioners that such innovations and policy transfer[s] pertaining to social accountability might not become blunt instruments of 'traveled formalism' 

**Country:** International  
**Publisher:** Journal of Administration and Governance (JOAGG)  
**URL:**  

**Author:** Arrizón, AV; Andersson, NA; Ledogar, RA  
**Title:** Micro-regional planning: evidence-based community buy-in for health development in five of Mexico’s poorest rural districts  
**Date of Publication:** December 2011  
**Publication type:** Academic paper  
**Publication details:** Arrizón, AV; Andersson, NA; Ledogar, RA (2011). Micro-regional planning: evidence-based community buy-in for health development in five of Mexico’s poorest rural districts. BMC Health Services Research; 11(Suppl 2):S2  
**Keywords:** Social accountability, Mexico, health planning  
**Abstract:** This historical article describes development of protocols for evidence-based community mobilization in five local administrative units (municipios) in the Mexican state of Guerrero between 1992 and 1995. A sample of five to eight sentinel sites represented each of the most impoverished municipalities of the poorest five of the state’s seven regions. A 1992 baseline survey of diarrhoea and its actionable determinants provided the substrate for discussion with local planners and communities. Municipal planners used different strategies to promote participation. In one municipality, new health committees took control of water quality. In another, municipal authorities hired health promoters; a song promoted oral rehydration, and house-to-house interpersonal discussions promoted chlorination. In the poorest and most mountainous municipality, radio casera (home-made radio) soap operas used local "stars". In the largest and most disparate municipality, a child-to-family scheme relied on primary and secondary school teachers. The research team assessed outcomes at intervals and used the results to reinforce local planning and action. Diarrhoea rates declined in all five municipalities, and there were several positive intermediate outcomes from the communication strategies – changing knowledge, household practices and uptake of services. There was a strong link between specific contents of the communication package and the changing knowledge or practices. Apart from these evidence-based interventions, other factors probably contributed to the decline of childhood diarrhoea. But, by monitoring implementation of planning decisions and the impact this has at community level, micro-regional planning can stimulate and reinforce actions likely to improve the health of communities. The process empowered municipalities to get access to more resources from the state government and international agencies.

**Country:** Mexico  
**Publisher:** BioMedCentral  
**URL:** http://www.biomedcentral.com/1472-6963/11/S2/S2

**Author:** Atim, C  
**Title:** Social movements and health insurance: critical evaluation of voluntary, non-profit insurance schemes with case studies from Ghana and Cameroon.  
**Date of Publication:** April 1999  
**Publication type:** Academic paper
Keywords: social accountability, Ghana, Cameroon, health care financing
Abstract: This paper assesses the performance of voluntary, non-profit health insurance schemes and their potential contribution to health in the two African countries of Ghana and Cameroon. Based on fieldwork conducted in the two countries during the main rainy season (June-July) of 1996, the paper examines whether and in which way the presence or absence of a social movement component might affect the performance of voluntary, non-profit insurance schemes in attaining some key objectives of improving access to health care among the target population, as well as achieving equity, efficiency and financial viability. The paper makes this assessment by examining the performances of each of two case studies according to the criteria of social movement, efficiency, equity, access and financial results. Based on case studies of a community financing insurance scheme in Ghana and a mutual aid insurance association in Cameroon, the study concludes that the evidence is not sufficient to confirm that the presence or absence of such a social movement dynamic per se accounts for the perceived performance of either of the schemes. However, it is also argued that the dynamic of social movement could enhance the design and performance of a scheme, especially the efficiency and quality of health care. Such enhancement is possible provided that the scheme is set up in such a way as to benefit from the specific contribution of a movement component, in particular, if the scheme engages in direct negotiations with providers over the price and quality of care and makes direct payment contracts with such providers.
Country: Ghana, Cameroon
Publisher: Social Science and Medicine, Science and Direct
URL: http://www.sciencedirect.com/science/article/pii/S0277953698003906

Author: Bagire, VA; Tusiime, I; Nalweyiso, G; Kakooza, JB
Title: Contextual environment and stakeholder perception of corporate social responsibility practices in Uganda
Date of Publication: March/April 2011
Publication type: Academic paper
Keywords: Social accountability, Uganda, corporate social responsibility
Abstract: The debate on dimensions of corporate social responsibility (CSR) is ongoing. This study was conducted to examine perceptions of stakeholders towards CSR activities in Uganda prompted by many questions from students undertaking a Business Administration course on the distinction between marketing activities and CSR. A cross-sectional qualitative survey found that many companies are involved in CSR activities, particularly multinationals. The public awareness of CSR is high, but there is confusion as to what it is about. The process of CSR and the influence of contextual environment factors are puzzling. The flagship of CSR through advertisements has resulted in the public perceiving it more as marketing than philanthropy or ethical action. The study provided insights for further research in other contexts.
Country: Uganda
Publisher: John Wiley & Sons Ltd, Online Library
Author: Berlan, D; Shiffman, J
Title: Holding health providers in developing countries accountable to consumers: a synthesis of relevant scholarship
Date of Publication: 2011
Publication type: Academic paper
Publication details: Berlan, D; Shiffman, J (2011), Holding health providers in developing countries accountable to consumers: a synthesis of relevant scholarship Health Policy and Planning, 27 (4); 1–10
Keywords: Social accountability, Social power, international, health services
Abstract: This paper synthesizes relevant research on health provision in low-, middle- and high-income countries with the aim of identifying factors that shape health provider accountability to consumers, and discerning promising interventions to enhance responsiveness. Health care providers in low-income countries often treat consumers poorly. Many providers do not consider it their responsibility to listen carefully to consumer preferences, to facilitate access to care, to offer detailed information, or to treat patients with respect. A lack of provider accountability to health consumers may have adverse effects on the quality of health care they provide, and ultimately on health outcomes. Drawing on this scholarship, the authors develop a framework that classifies factors into two categories: those concerning the health system and those that pertain to social influences. Among the health systems factors that may shape provider accountability are oversight mechanisms, revenue sources, and the nature of competition in the health sector—all influences that may lead providers to be accountable to entities other than consumers, such as governments and external funders. Among the social factors explored by the authors are consumer power, especially information levels, and provider beliefs surrounding accountability. Evidence on factors and interventions shaping health provider accountability is thin. For this reason, the authors decide it not possible to draw firm conclusions on what works to enhance accountability. This being said, research does suggest four mechanisms that may improve provider responsiveness: (1) Creating official community participation mechanisms in the context of health service decentralization; (2) Enhancing the quality of health information that consumers receive; (3) Establishing community groups that empower consumers to take action; (4) Including non-governmental organizations in efforts to expand access to care. This synthesis reviews evidence on these and other interventions, and points to future research needs to build knowledge on how to enhance health provider accountability to consumers.
Country: International
Publisher: Oxford University Press, UK
URL: http://heapol.oxfordjournals.org/content/27/4/271.short

Author: Björkman, M; Svensson, J
Title: Power to The People: Evidence From a Randomized Field Experiment On Community-Based Monitoring In Uganda
Date of Publication: May 2009
Publication type: Academic paper
Keywords: social accountability, Community monitoring, Uganda, primary health care
Abstract: This paper presents a randomized field experiment on community-based monitoring of public primary health care providers in Uganda. Through two rounds of village meetings, localized nongovernmental organizations encouraged communities to be more involved with the state of health service provision and strengthened their capacity to hold their local health providers to account for performance. A year after the intervention, treatment communities are more involved in monitoring the
provider, and the health workers appear to exert higher effort to serve the community. The authors document large increases in utilization and improved health outcomes—reduced child mortality and increased child weight—that compare favourably to some of the more successful community-based intervention trials reported in the medical literature.

Country: Uganda
Publisher: Quarterly Journal of Economics, MIT Press

Author: Blair, H
Title: Participation and Accountability at the Periphery: Democratic Local Governance in Six Countries
Date of Publication: 2000
Publication type: Academic paper
Keywords: social accountability, low and middle-income countries, local governance
Abstract: Democratic local governance (DLG), now a major subtheme within the overall context of democratic development, promises that government at the local level can become more responsive to citizen desires and more effective in service delivery. Based on a six-country study sponsored by USAID (Bolivia, Honduras, India, Mali, the Philippines and Ukraine), this paper analyzes the two topics of participation and accountability, finding that both show significant potential for promoting DLG, though there seem to be important limitations on how much participation can actually deliver, and accountability covers a much wider range of activity and larger scope for DLG strategy than initially appears.

Country: Low-income countries
Publisher: World Development, Elsevier Science Limited
URL:  http://isites.harvard.edu/fs/docs/icb.topic980025.files/Wk%205_Sep%2030th/Blair_2000_Local%20Governance%20in%20Six%20Countries.pdf

Author: Bossert, TJ; Mitchell, AD.
Title: Health sector decentralization and local decision-making: Decision space, institutional capacities and accountability in Pakistan
Date of Publication: January 2011
Publication type: Academic paper
Publication details: Bossert, TJ; Mitchell, AD (2011), Health sector decentralization and local decision-making: Decision space, institutional capacities and accountability in Pakistan, Social Science and Medicine; 72 (1), 39-48
Keywords: Social accountability, Pakistan, local governance
Abstract: This study analyses relationships between different dimensions of health sector decentralization in Pakistan. Health sector decentralization has been widely adopted to improve delivery of health services. While many argue that institutional capacities and mechanisms of accountability required to transform decentralized decision-making into improvements in local health systems are lacking, few empirical studies exist which measure or relate together these concepts. Interviews were done with a sample of 91 health sector decision-makers in 17 districts of Pakistan, analyzing relationships between three dimensions of decentralization: decentralized authority (referred to as "decision space"), institutional capacities, and accountability to local officials within four broad health functions (strategic and operational planning, budgeting, human resources management, and service
organization/delivery) and on an overall/cross-function basis. This study found that decentralization is a varied experience—with some district-level officials making greater use of decision space than others and that those who do so also tend to have more capacity to make decisions and are held more accountable to elected local officials for such choices. These findings suggest that Pakistan’s decentralization policy should focus on synergies among dimensions of decentralization to encourage more use of de jure decision space, work toward more uniform institutional capacity, and encourage greater accountability to local elected officials.

Country: Pakistan
Publisher: Elsevier Limited - Science Direct
URL: http://www.sciencedirect.com/science/article/pii/S0277953610007550

Author: Catholic Relief Services
Title: Civil Society monitoring of PRSPs: Examples from Malawi and Zambia
Date of Publication: October 2003
Publication type: Slide presentation
Publication details: Catholic Relief Services (2003), Civil Society monitoring of PRSPs: Examples from Malawi and Zambia, 21 pages
Keywords: Social accountability, Community monitoring, Malawi, civil society
Abstract: This slide presentation begins by explaining the importance of Civil Society Organisation (CSO) monitoring, as well as what they should monitor. The presentation proceeds to inform the reader on how to monitor, using practical examples within sub-Saharan Africa to facilitate understanding; before embarking on a more detailed case study of the experience in Malawi.

Country: Malawi, Sub-Saharan Africa
Publisher: Catholic Relief Services
URL: http://www.equinetafrica.org/bibl/docs/CATgov.pdf

Author: Centre for Good Governance
Title: Social Audit: A Toolkit. A Guide for Performance Improvement and Outcome Measurement
Date of Publication: 2005
Publication type: Toolkit and Training Materials
Keywords: social accountability; community monitoring, international, social audit
Abstract: The social audit toolkit provides practical guidance and insights to its users working in government departments, community organisations and civil society groups for using social audit as a tool to identify, measure, assess and report on the social performance of their organisations. This toolkit has been designed keeping in view the needs of non-specialists interested in conducting social audit. The objective of Centre for Good Governance (CGG) in developing this toolkit is to provide not only a comprehensive but also an easy-to-use toolkit for government departments and others. This toolkit comprises two sections - Section I introduces the concepts, the purpose, history and goals of social audit which will help in understanding the framework of social audit; Section II describes how this toolkit is to be used in a sequential process for conducting social audit and the preparation of social audit reports.

Country: International
Publisher: Centre for Good Governance, Hyderabad
Author: Dasgupta, J
Title: Ten years of negotiating rights around maternal health in Uttar Pradesh, India
Date of Publication: 2011
Publication type: Report
Keywords: Social accountability, India, gender, rights, maternal health
Abstract: This paper reviews documents of the last ten years describing the experiences of a Non-Governmental-Organisation, SAHAYOG, in working with a civil society platform, the Healthwatch Forum, to develop ‘rights based’ strategies around maternal health. The paper builds an analysis using recent frameworks on accountability and gendered rights claiming to examine these experiences and draw out lessons regarding rights claiming strategies for poor women. The paper describes the deepening of SAHAYOG’s understanding of the manner in which poor and marginalized women negotiate their access to health care; and explores a health system intervention and the challenges of working from within civil society in alliance with poor and marginalized women. The findings from SAHAYOG’s experiences with poor Dalit women in Uttar Pradesh reveal the elements of social exclusion within the health system that prevent poor and marginalized women from accessing effective lifesaving care. Creating a voice for the most marginalised and carving space for its articulation impacts upon the institutions and actors that have a duty to meet the claims being made. However, given the accountability deficit, the analysis indicates the importance of going beyond the normative to developing actor-oriented perspectives within rights based approaches, to take into account the complexity of the negotiating process that goes into claiming any kind of entitlements.
Country: India
Publisher: BMC International Health and Human Rights, BioMedCentral
URL: http://jashodharadasgupta.files.wordpress.com/2012/08/ten-years-of-negotiating-rights-bmc-ihhr.pdf

Author: Dayal, R; Wijk, C; Mukherjee, N
Title: Methodology for Participatory Assessments: With communities, Institutions and Policy Makers. Linking Sustainability with Demand, Gender, and Poverty (Metguide).
Date of Publication: 2000
Publication type: Book; Toolkit and training materials
Keywords: Social accountability, Asia, Africa, Latin America, participatory assessment
Abstract: This document is an update, supplemented with learning gained from MPA applications worldwide during 1999-2002, of the original MPA Metguide published in March 2000. The Metguide (Methodology for Participatory Assessment with Communities, Institutions and Policy Makers) was developed by WSP and IRC in 1998 primarily for the purpose of investigating the links between the sustainability of community-margined water supply services and gender- and poverty-sensitivity of demand-responsive approaches used to establish the services. Since the completion of the global study in 1999, MPA has developed further as a tool for mainstreaming gender and social equity in large scale projects. Its applications have expanded from evaluation and monitoring to designing and planning new project interventions, and from dedicated water supply and sanitation projects into the realm of multi-sector project designs. This document presents the MPA as it is currently being used in Asia, Africa and Latin America. It consolidates the lessons learned in the process of its continuing development.
**Country:** Asia, Africa, Latin America  
**Publisher:** International Water and Sanitation Centre; The World Bank, Washington DC  

**Author:** Deva, S  
**Title:** Corporate Human Rights Accountability in India: What Have We Learned from Bhopal?  
**Date of Publication:** September 2012  
**Publication type:** Discussion paper  
**Publication details:** Deva, S (2012), Corporate Human Rights Accountability in India: What Have We Learned from Bhopal? Commentaries – Corporate Legal Accountability Portal, pp. 1-4  
**Keywords:** Social accountability, Social power, India, human rights  
**Abstract:** This paper reports that the Indian government seems to have learned few lessons from ‘Bhopal’ – a symbol of corporate impunity for human rights abuses – because it continues to pursue policies of economic development at the cost of human rights. The authors argue that any regulatory framework, in order to be effective, should understand the nuances of the changed power dynamics between states and multinational corporations and move beyond relying solely on states to hold non-state actors accountable.

**Country:** India  
**Publisher:** Social Science Electronic Publishing  

**Author:** Eberlei, W  
**Title:** Accountability in Poverty Reduction Strategies: The Role of Empowerment and Participation  
**Date of Publication:** May 2007  
**Publication type:** Academic paper  
**Publication details:** Eberlei, W (2007). The World Bank, Social Development Department Working Papers Series, Participation and Civic Engagement, Paper No. 4  
**Keywords:** Social accountability, social power, international, poverty  
**Abstract:** Poverty Reduction Strategies have promised stakeholder participation, but delivery has been weakened by exclusion of marginalised groups, the speed and depth and the ad hoc nature of participation events as well as macroeconomic and structural policies being off-limits. Most countries have started implementing their PRSP, with participation dwindling instead of being institutionalised. Some observers speak of a ‘participation gap’. The situation seems to be slightly more promising for participation in the monitoring and evaluation of PRS, as in many countries independent civil society monitoring or participatory monitoring arrangements are planned, although mostly not yet operational.

**Country:** International  
**Publisher:** The World Bank, Washington DC  

**Author:** Eyben, R  
**Title:** The Big Push Back [and push forward!]  
**Date of Publication:** 29 September 2009  
**Publication type:** Conference proceedings  
**Publication details:** Eyben, R (2009). The Big Push Back [and push forward!]. Institute Of Development Studies (IDS), UK  
**Keywords:** Social accountability, Community monitoring, international, development
Abstract: The Big Push Back, which took place on 22 September 2010, was convened by the Participation and Social Change team at the United Kingdom’s Institute of Development Studies. With over 70 attendees, the theme of the meeting was to reflect on and develop strategies for ‘pushing back’ against the increasingly dominant bureaucratisation of the development agenda and the pressure to design projects/programmes and report on performance in a manner that assumes all problems are bounded/simple. This is reported to result in research that is linear (cause-effect) based, at the expense of research that is emergent, i.e. a complex, only partially controllable process in which local actors may have conflicting views on what is happening, why and what can be done about it, where complexity is recognised and accountability promoted to those people international funds are supposed to serve. The meeting also called for collaboration with people inside funding and development agencies who are equally dissatisfied with the prevailing ‘audit culture’, and communication to build public understanding that some aspects of development work that cannot be reduced to numbers are also valuable.

Country: International
Publisher: Aid on the Edge

Author: Frimpong, P.
Title: Community participation in the Botswana Healthcare System
Year of Publication: undated
Publication type: Slide Presentation
Keywords: Social accountability, Social participation, Botswana, health care systems
Abstract: This poster presentation describes research which was conducted to investigate whether Botswana’s healthcare system incorporated community participation and to highlight the structures that the government has in the flow of information from its populace to the healthcare providers and the government and vice versa. Information concerning this ace to facilitate the research topic was sought through interviews with two medical health officers and one health promoter at the Ministry of Health in Botswana, Gaborone, Botswana. Results from this study show that, firstly, Botswana’s healthcare system does incorporate the views and opinions of its citizens and, secondly, that there is a structured system for information sharing between the society, healthcare providers and the government. This system of information sharing utilizes the traditional Kgotlasetting, health posts, clinics, local government, district officers and the ministry of Health. Overall, the presence of these structures to facilitate the involvement of the people, their views and opinions, illustrates the government’s understanding for a holistic approach to providing good healthcare and ensuring that the people have their health concerns addressed.

Country: Botswana
Publisher: University of Botswana

Author: Gailmard, S
Title: Accountability and Principal-Agent Models
Date of Publication: August 2012
Publication type: Book Section
Keywords: Social accountability, international, principal-agent theory
Abstract: This essay gives a basic overview of principal-agent theory and briefly reviews its application in two domains of political science: bureaucratic accountability to higher-level political actors, and electoral accountability of representatives to constituents. Principal-agent theory encapsulates a tradition of rational choice modelling, in which some actor(s) (the principal(s)) uses whatever actions are available, to provide incentives for some other actor(s) (the agent(s)) to make decisions that the principal most prefers. Because principal-agent theory focuses on the responsiveness of the agents decisions to the principal’s goals, and how this responsiveness is mediated by actions available to each actor as well as institutional settings in which they interact, it is a natural framework to study accountability in political institutions. In this essay, the author emphasizes that principal-agent theory is in fact a highly flexible family of models, rather than an overarching set of assumptions and results.

Country: International
Publisher: Oxford Handbook of Public Accountability
URL: http://www.law.berkeley.edu/files/csls/Gailmard_-_Accountability_and_Principal-Agent_Models(1).pdf

Author: Garg, S; Laskar, AR.
Title: Community-based monitoring: Key to success of national health programs
Date of Publication: April 2010
Publication type: Academic paper

Keywords: Social accountability, Community monitoring, India, accountability framework, National Rural Health Mission

Abstract: This paper discusses the performance and weaknesses in the existing health care monitoring system in India, including its strategic component of Community-Based Monitoring (CBM). The National Rural Health Mission (NRHM) was launched in 2005 by the UPA Government with the goal of improving the availability of and access to quality healthcare by people, especially for those in rural areas, the poor, women and children. In order to ensure that the services reach those for whom they are meant, the NRHM proposes an intensive accountability framework that includes CBM as a key strategy. The paper observes that the existing monitoring systems are inadequate to bring out optimal trend analysis of key performance indicators. Answers to these questions lie in community monitoring through involvement of local beneficiaries. At the moment, the monitoring of Health Programs suffers from numerous setbacks such as no dedicated cell for CBM at state or district level and lack of standardized reference manual for planning and monitoring. Multiplicity of registers and duplication of reports are still a common practice. Voluminous data are collected, which is rarely validated or used in planning. There is a mismatch between routine MIS and survey data. The 73rd and 74th amendments to the Constitution of India (April 1993) reiterates Government attempts to institutionalize CBM in health on a larger scale. Above all it is consistent with the right to health care approach till the grassroots level.

Country: India
Publisher: Indian Journal of Community Medicine
URL: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2940173/

Author: Gaventa, J
Title: Introduction: Exploring Citizenship, Participation and Accountability
Date of Publication: April 2002
Publication type: Discussion paper
Keywords: social accountability, international, citizenship

Abstract: In this Bulletin, researchers associated with the Centre share emerging work around themes related to the meanings of rights and citizenship, spaces and places for participation, and new forms of accountability as they are emerging in differing parts of the globe. Part I of the Bulletin explores further how these concepts, many of which are prevalently debated in Northern contexts, link to the meanings and expressions of rights and citizenship in a number of Southern countries. As rights of citizenship are voiced, they often enter institutional arenas or spaces for participation, some of which involve (or claim to involve) more deliberative and inclusionary forms of policy making and democratic governance. The nature and dynamics of participation in these spaces are examined, again from a number of contexts, in Changing understandings of rights and new arenas of participation in turn lead to a reconsideration of traditional relationships of accountability and responsibility amongst actors across differing spheres and levels.

Country: International
Publisher: Institute of Development Studies (IDS), London
URL: http://r4d.dfid.gov.uk/PDF/Outputs/CentreOnCitizenship/introduction_gaventa.pdf

Author: George, A
Title: Using Accountability to Improve Reproductive Health Care
Date of Publication: 2003
Publication type: Academic paper
Keywords: Social accountability, international, reproductive health services

Abstract: Accountability is best understood as a referee of the dynamics in two-way relationships, often between unequal partners. The literature on accountability distinguishes between political, fiscal, administrative, legal and constitutional accountability. This paper focuses on accountability mechanisms in health care and how they mediate between service providers and communities and between different kinds of health personnel at the primary health care level. It refers to case studies of participatory processes for improving sexual and reproductive health service delivery. Information, dialogue and negotiation are important elements that enable accountability mechanisms to address problems by supporting change and engagement between participants. In order to succeed, efforts towards better accountability that broaden the participation of users must take into account the social contexts and the policy and service delivery systems in which they are applied, address power relations and improve the representation of marginalised groups within communities and service delivery systems

Country: International
Publisher: Reproductive Health Matters, Elsevier Limited

Author: Goetz, A
Title: Political cleaners: Women as the new anti-corruption force?
Date of Publication: January 2007
Publication type: Policy paper
Publication details: Goetz, A. (2007) Women as the new anti-corruption force? 38 (1); 87-105(19)
Keywords: Social accountability, international, gender, corruption

Abstract: This article debates whether the gender of politicians might affect the level and the type of corruption. There is currently a myth in the making: that women are less corrupt than men. The myth of women's incorruptibility is grounded in essentialist notions of women's higher moral nature and an assumed propensity to bring this to bear on public life, and particularly on the conduct of politics. After
demonstrating that some of the recent studies about gender and corruption record perceptions about propensities to engage in corrupt behaviour, this contribution suggests rather that the gendered nature of access to politics and public life shapes opportunities for corruption. In addition, corruption can be experienced differently by women and men, which has implications for anti-corruption strategies. A gendered analysis of corruption is in fact a useful entry-point to the examination of the gendered nature of accountability failures, and of gender-specific gaps in current attempts to promote good governance.

**Country:** International

**Publisher:** Development and Change, Wiley Blackwell


**Author:** Goetz, A; Gaventa, J; Cornwall, A; Crook, R; Ehrichs, L; Hamilton, K; Howard, J; Jenkins, R. John, P; Lewis, J; Powis, B; McGarvey, N; Sommer, F; Speight, M; Stewart, E; Stoker, G

**Title:** Bringing Citizen voice and client focus into service delivery

**Date of Publication:** July 2001

**Publication type:** Report

**Publication details:** Goetz, A; Gaventa, J; Cornwall, A; Crook, R; Ehrichs, L; Hamilton, K; Howard, J; Jenkins, R. John, P; Lewis, J; Powis, B; McGarvey, N; Sommer, F; Speight, M; Stewart, E; Stoker, G (2001). Bringing Citizen voice and client focus into service delivery. IDS Working Paper 138, UK

**Keywords:** Social accountability, international, governance

**Abstract:** This paper examines over sixty studies of both public-sector reforms to foster stronger client focus in service delivery; and civil-society initiatives to demand improved services. This work was concerned to identify means of amplifying citizen 'voice' such that engagement with the state moves beyond consultative processes to more direct forms of influence over policy and spending decisions. The case studies upon which this research is based are drawn from around the world, from developing and developed countries. They are organised into 14 different types of 'voice' or 'responsiveness' mechanisms. Across different types of public service, the potential for citizen voice, and varying degrees of public sector responsiveness, can be surmised from features of service design and delivery such as the complexity of the technology involved in the service, the remoteness, geographical, social and educational, of providers, the extent to which the service is a shared good or an individually consumable product, or the social and environmental consequences of dramatic service break-down. Variations in voice and client focus are also explained by client characteristics: the social status of clients, their geographic concentration, and whether they have a sustained or one-off relationship with providers. The study concludes with policy-relevant findings on ways of enhancing citizen voice in decision-making, planning, and monitoring of public services. For citizen engagement with public service providers to move beyond consultation to real influence, citizens must enjoy rights to a more meaningful form of participation. This would include formal recognition for citizens' groups, their right to information about government decision-making and spending patterns, and rights to seek redress for poor-quality service delivery. Public sector providers, for their part, need assurances regarding the mandate and internal accountability of such groups.

**Country:** International

**Publisher:** Institute of Development Studies (IDS), Sussex

**Author:** Gogoi, A  
**Title:** Social Accountability: Tools, Techniques, Challenges and Learning  
**Date of Publication:** Undated  
**Publication type:** Slide presentation  
**Publication details:** Gogoi, A (Undated). Social Accountability: Tools, Techniques, Challenges and Learning. The White Ribbon Alliance for Safe Motherhood – India, 12 Slides  
**Keywords:** Social accountability, India, tools, maternal health  
**Abstract:** This powerpoint presentation serves as a toolkit providing information on the uses, techniques, as well as the challenges of implementing social accountability in the maternal health delivery system in India.  
**Country:** India  
**Publisher:** The White Ribbon Alliance for Safe Motherhood, India  

**Author:** Governance and Social Development Centre  
**Title:** Helpdesk Research Report: Evaluations of Voice and Accountability Instruments  
**Date of Publication:** April 2010  
**Publication type:** Report  
**Publication details:** Governance and Social Development Centre (2010). Evaluations of Voice and Accountability Instruments. Governance and Social Development Centre, 11 pages  
**Keywords:** Social accountability, international, community monitoring, participatory budgeting, community score cards, citizen report cards  
**Abstract:** This report includes a selection of reviews on accountability mechanisms, and is mainly focused on mechanisms which are more commonly analysed in the literature – namely, access to information, community score cards (CSCs), citizen report cards (CRCs), participatory budgeting/budget monitoring, and social audits. Whilst there is a vast literature on the importance of citizen voice and accountability in governance and development, there remain relatively few evaluations of the impact of donor programmes in this area. Several studies conclude there is a need for more evidence of why certain accountability mechanisms work well in certain contexts. There does not appear to be any research available which seeks to compare the results of different mechanisms, or attempts to draw any overall conclusions about which mechanisms are the most effective and why. Rather, the available evidence is mainly in the form of reviews of the outcomes of specific mechanisms, in specific cases. It should be noted that several other mechanisms - including user committees, community radio, citizens’ charters, ombudsmen, social accounting, and citizen’s juries – are also often cited as important instruments of social accountability, but that these appear to feature less prominently in recent reviews and evaluations.  
**Country:** International  
**Publisher:** Governance and Social Development Resource Centre  
**URL:** [http://www.gsdrc.org/docs/open/HD675.pdf](http://www.gsdrc.org/docs/open/HD675.pdf)

**Author:** Green, A; Ali, B; Naeem, A; Ross, D  
**Title:** Resource allocation and budgetary mechanisms for decentralized health systems: experiences from Balochistan, Pakistan  
**Date of Publication:** 2000  
**Publication type:** Academic paper

**Keywords:** Social accountability, Pakistan, decentralising health care budgeting

**Abstract:** This paper identifies key political and technical issues involved in the development of an appropriate resource allocation and budgetary system for the public health sector, using experience gained in Balochistan province, Pakistan. The resource allocation and budgetary system is a critical, yet often neglected, component of any decentralization policy. Current systems are often based on historical incrementalism that is neither efficient nor equitable. This article describes technical work to develop a system of resource allocation and budgeting that is needs-based, in line with policies of decentralization, and implementable within existing technical constraints. However, the development of technical systems, while necessary, is not a sufficient condition for the implementation of a resource allocation and decentralized budgeting system. This is illustrated by analysing the constraints that have been encountered in the development of such a system in Balochistan.

**Country:** Pakistan

**Publisher:** Bulletin of the World Health Organisation, the World Health Organisation

**URL:** [http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2560815/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2560815/)

**Author:** Health Economics and Systems Consulting

**Title:** Responding to HIV/AIDS in Africa: A comparative analysis of responses to the Abuja Declaration in Kenya, Malawi, Nigeria and Zimbabwe

**Date of Publication:** June 2004

**Publication type:** Report


**Keywords:** Social accountability, Kenya, Malawi, Zimbabwe, Nigeria, Abuja Declaration, HIV, AIDS

**Abstract:** This report is based on the research carried out in Kenya, Malawi, Nigeria and Zimbabwe and provides a comparative analysis of the achievements and challenges faced by four African countries in accountability in implementing the commitments made in the Abuja Declaration to reverse the accelerating rate of HIV infection, TB and other related infectious diseases. As countries continue to work towards meeting the commitments made in Abuja, the authors propose that it would be helpful to revise the framework for action and express the commitments in more specific terms. This, combined with greater transparency regarding budgets, increased participation from civil society, especially women, people living with HIV/AIDS (PLWHA) and community based organisations, will allow all sections of society as well as government and the international community to monitor progress more effectively.

**Country:** Kenya, Malawi, Zimbabwe, Nigeria

**Publisher:** ActionAid International, Johannesburg

**URL:** [http://www.equinetafrica.org/bibl/docs/HESaids.pdf](http://www.equinetafrica.org/bibl/docs/HESaids.pdf)

**Author:** Hofbauer H; Garza M

**Title:** The missing link: Applied budget work as a tool to hold governments accountable for maternal mortality reduction commitments

**Date of Publication:** May 2009

**Publication type:** Discussion paper

Keywords: Social accountability, Mexico, Tanzania, India, budgets,
Abstract: This brief explores the relevance of civil society budget analysis and advocacy (i.e., budget work) and its potential as a tool to hold governments accountable for their maternal mortality reduction commitments. In doing so, it discusses three recent examples of civil society groups engaged with budget analysis and advocacy: Fundar, Center for Analysis and Research in Mexico; Women’s Dignity in Tanzania; and the Center for Budget and Governance Accountability in India. The work of these organizations, and the lessons that the authors seek to draw from their experiences, underscore that the lack of real progress in reducing maternal mortality is unquestionably linked to the failure of governments to make maternal health a budgetary priority. Their findings reveal that even though resources to address this issue exist—and may continue to grow—they are not necessarily being allocated correctly or spent effectively.

Country: Mexico, Tanzania, India
Publisher: International Budget Partnership and the International Initiative on Maternal Mortality and Human Rights, USA
URL: http://righttomaternalhealth.org/sites/iimmhr.civicactions.net/files/Missing%20Link%20WEB-2.pdf

Author: Holzer, M; Kim, ST
Title: A Longitudinal Assessment of Municipal Websites Throughout the World
Date of Publication: 2006
Publication type: Report
Keywords: social accountability; international, municipal governance
Abstract: This research replicates a survey completed in 2003. The present survey evaluates the practice of digital governance in large municipalities worldwide in 2005. Both studies focused on the evaluation of current practices in government, and the emphasis of the research was on the evaluation of each website in terms of digital governance. Simply stated, digital governance includes digital government (delivery of public service) and digital democracy (citizen participation in governance). Specifically, the authors analysed security, usability, and content of websites, the type of online services currently being offered, and citizen response and participation through websites established by city governments.

Country: International
Publisher: National Centre for Public Productivity, USA

Author: IPPF South Asia Regional Office
Title: Social Audit Manual: A Guide to Support ‘Beneficiaries’ to become ‘Right Holders’
Date of Publication: October 2007
Publication type: Toolkit and training materials
Keywords: Social accountability, community monitoring, Asia, Africa, Latin America
Abstract: This manual is prepared as a guidance note for preparing stakeholders to effectively participate in social audit of sexual and reproductive health and rights (SRHR) programmes in Asia, Africa and Latin America. This manual is meant for not only those who are involved in planning, implementing and evaluating SRHR programmes but also for those who are beneficiaries of such programmes. In Social
Audit a set of tools are administered for conducting various investigations ranging from facility survey, mapping of services in a district, outcome documentation, exit interviews and focus group discussions with providers and users of SRHR services. Social audit, to be meaningful, should involve a cross section of civil society, partners from government and representatives of marginalized and vulnerable communities. To ensure participation of all stakeholders beyond tokenism, all of them should undergo orientation training in which they would be informed about the rationale and validity of the audit exercise. This manual will also help in conducting such training.

**Country:** Asia, Africa, Latin America

**Publisher:** International Planned Parenthood Federation (IPPF) South Asia Regional Office


**Author:** Joshi, A.

**Title:** Do They Work? Assessing the Impact of Transparency and Accountability Initiatives in Service Delivery

**Date of Publication:** 2012

**Publication type:** Discussion paper


**Keywords:** Social accountability, international, transparency initiatives

**Abstract:** This article sets out to review a variety of different transparency and accountability initiatives (TAI), so as to assess their impact. The authors attempt to systematically examine the evidence on the impact of such TAI in the field of public service delivery. TAI’s have emerged as a key strategy for improving public services, but the links between transparency and accountability and their impact on service delivery are often largely assumed. The main argument of the paper is that despite the popularity of such initiatives, there is little evidence to make emphatic claims about the conditions under which TAI will lead to effectiveness and impact. The article reviews a range of TAI to assess their impact. It finds a mass of evidence suggesting that a range of accountability initiatives have been effective in their immediate goals, and that there is also strong evidence of impact on public services in a range of cases, but that evidence of impact on the quality and accessibility of services is more mixed.

**Country:** International

**Publisher:** Department for International Development (DFID) - Research for Development

**URL:** [http://r4d.dfid.gov.uk/Output/188642/Default.aspx](http://r4d.dfid.gov.uk/Output/188642/Default.aspx)

**Author:** Khunte, P; Walimbe, A

**Title:** People are reclaiming the Public Health Service: Qualitative Report on Community Based Monitoring and Planning of Health Services in Maharashtra.

**Date of Publication:** 2012

**Publication type:** Report

**Publication details:** Khunte, P; Walimbe, A (2012). People are reclaiming the Public Health Service: Qualitative Report on Community Based Monitoring and Planning of Health Services in Maharashtra. SATHI, Pune, 33 pages

**Keywords:** social accountability, Maharashtra, health services

**Abstract:** This document presents the process of implementing 'Community Based Monitoring and Planning' (CBMP) in Maharashtra that has been initiated with support from the 'National Rural Health Mission' (NRHM). The CBMP experience shows that people's indifference is waning and 'government' clinics are becoming 'peoples' clinics. This document explains the emergence, scope, impact and future challenges of this concept, and presents views and opinions of various stakeholders, such as a member
of National Planning Commission, social activists, media persons, Health officials from state and district
teams, NGO and CBO activists, village level health functionaries and community members, about CBMP.
**Country:** Maharashtra
**Publisher:** SATHI, Pune
**URL:**
[http://www.municipalservicesproject.org/sites/municipalservicesproject.org/files/People_are_reclaiming_the_public_health_system.pdf](http://www.municipalservicesproject.org/sites/municipalservicesproject.org/files/People_are_reclaiming_the_public_health_system.pdf)

**Author:** Klugman, B;
**Title:** Accountability and participation in Africa
**Date of Publication:** 2004
**Publication type:** Discussion paper
**Publication details:** Klugman, B (2004). Accountability and participation in Africa. Women’s Health
Project, Johannesburg and EQUINET, Harare,
**Keywords:** Social accountability, Social participation, Sub-Saharan Africa
**Abstract:** The brief aim for this chapter was to review current experience in Africa with health sector
reforms (HSR) as they pertain to health service accountability to users. The chapter, in fact, focuses as
much on participation as on accountability, on the argument that the way in which community members
participate will determine whether or not health services are accountable to them.
**Country:** Sub-Saharan Africa
**Publisher:** Women’s Health Project, Johannesburg; EQUINET, Harare
**URL:**  [http://www.equinetafrica.org/bibl/docs/KLUgov01022007.pdf](http://www.equinetafrica.org/bibl/docs/KLUgov01022007.pdf)

**Author:** Kumar, S; Shah, P; Andhra Pradesh Rural Poverty Reduction Project
**Title:** Andhra Pradesh, India Community Score Cards manual
**Date of Publication:** May 2004
**Publication type:** Toolkit and training material
**Publication details:** Kumar, S; Shah, P (2004). Operational Manual for Implementing the Community
Scorecard Process. Andhra Pradesh Rural Poverty Reduction. Docstoc, 68 pages
**Keywords:** social accountability, India, community score cards
**Abstract:** The manual provides the context and background behind the application of the community
scorecard process. It outlines the rationale and features of the APRPRP within which the CSC process will
be applied and highlights its relevance and application in the project. It provides a quick overview of the
CSC process methodology within the project context and describes the main objectives and expected
outcomes from the application of this community-based monitoring and empowerment tool.
**Country:** India
**Publisher:** Docstoc

**Author:** Lee, K
**Title:** Civil Society Organizations and the Functions of Global Health Governance: What Role within
Intergovernmental Organizations?
**Date of Publication:** 2010
**Publication type:** Academic paper
**Publication details:** Lee, K (2010). Civil Society Organizations and the Functions of Global Health
pages
Keywords: Social accountability, global, WHO, health governance

Abstract: This paper considers the role of Civil Society Organizations (CSOs) in four health governance instruments under the auspices of the World Health Organization – the International Code on the Marketing of Breastmilk Substitutes, Framework Convention on Tobacco Control, International Health Regulations and Codex Alimentarius - and maps the functions they have contributed to. This paper examines the interaction of CSOs with intergovernmental health organizations (IGOs), defined as organizations ostensibly concerned with health in which states comprise their core membership. It briefly reviews four health governance instruments—the International Code on the Marketing of Breastmilk Substitutes, Framework Convention on Tobacco Control, International Health Regulations and Codex Alimentarius—under the auspices of the WHO, the United Nations (UN) specialised agency for health with 193 member states. The fourth is also a joint instrument under the Food and Agriculture Organization (FAO), another UN specialised agency with 191 member states. Following a brief overview of the engagement of CSOs by WHO, this paper draws on a framework by Haas (2003) to map their contribution to specific governance functions in relation to these four instruments. The paper discusses how effective CSO involvement has been, and draws conclusions about the opportunities and limitations CSOs represent for strengthening GHG. The paper draws conclusions about the opportunities and limitations CSOs represent for strengthening global health governance (GHG).

Country: International
Publisher: Global Health Governance
URL: http://summit.sfu.ca/item/10868

Author: Leppard, M; Rashid, S; Rahman, A; Akhter, M; Nasreen, H-E
Title: Voice and Accountability: The Role of Maternal, Neonatal and Child Health Committee
Date of Publication: September 2011
Publication type: Report
Keywords: Social accountability, Bangladesh, maternal and child health
Abstract: This paper describes a qualitative survey of the Bangladeshi Maternal and Child Health (MNCH) committee’s role towards social participation and social power. The study aims to explore how the MNCH committee encouraged community participation and how its communication activities empowered the community people to ensure the healthcare needs of the poor and disadvantaged people. A range of qualitative method was used in the study. In-depth interview, focus-group discussion, informal discussion, observation and document review were used as data collection method. This study conducted in two sub-districts of Nilphamari and Mymensingh districts of Bangladesh during February-April 2010. Thematic content analysis technique was followed. Findings reveal that the committee members took necessary steps to solve the maternal complication by referral, follow-up of referred cases, and providing financial support to the extreme poor if needed, and the committee helped increase the availability of healthcare service providers and improve the nature of services accessible to the community people.
Country: Bangladesh
Publisher: BRAC Education Programme
Author: Loewenson, R; Rusike, I; Zulu, M
Title: The impact of Health Centre Committees on health outcomes in Zimbabwe
Date of Publication: 2005
Publication type: Report
Keywords: Social accountability, Social participation, Zimbabwe, health committees
Abstract: This study sought to analyse and better understand the relationship between health centre committees in Zimbabwe as a mechanism for participation and accountability in health and specific health system outcomes, including representation of community interests in health planning and management at health centre level; provision of and access to primary health care services and community health knowledge and health seeking behaviour. A Case-Control study design was used, with four case sites with health centre committees and control sites selected in the same districts where there are no health centre committees with sufficient distance between catchment areas to avoid spill-over of results. The study shows that public sector clinics are the primary source of health care for communities in Zimbabwe, but are not well resourced in terms of basic supplies and staffing. Health Centre Committees appear from the study findings to be associated with improved health resources at clinic level and improved performance of the primary health care services.. Communities in areas with HCCs had a better knowledge of the organization of their health services from the indicators assessed, making services more transparent to them. There was also evidence of improved links between communities and health workers in these areas. The study suggests an association between HCCs and improved health outcomes, even in the highly under-resourced situation of poor communities and poorly resourced clinics. This positive contribution of HCCs to health outcomes calls for greater attention to strengthening these structures as an important component of primary health care and of the health system generally.
Country: Zimbabwe
Publisher: EQUINET, Harare
URL: http://www.equinetafrica.org/bibl/docs/LOEgov092005.pdf

Author: Macwan’gi, M; Ngwengwe, A; Institute of Economic and Social Research, University of Zambia
Title: Discussion paper 19: Effectiveness of District Health Boards in interceding for the community
Date of Publication: October 2004
Publication type: Discussion paper
Keywords: Social accountability, Social participation, Zambia, health committees
Abstract: The authors assessed the effectiveness of health governance structures in enhancing equity of access and community participation in the delivery of health care services in Zambia and examined the linkages between the health governance structures and community. They also sought to assess how the health governance structures represent and respond to community inter and needs; determine the extent to which the community is involved in the planning of health care services and resource allocation and propose option for enhancing equity of access and community participation in the delivery of health care services. A cross-sectional study design was used. Both qualitative and quantitative data were collected using various techniques; interviews, focus group discussion and review of records. Four districts (two rural and two urban) were covered in two provinces.
Country: Zambia
Publisher: EQUINET, Harare
URL: http://www.equinetafrica.org/bibl/docs/DIS19gov.pdf
Author: Maru, V
Title: Allies unknown: Social accountability and legal empowerment
Date of Publication: 2010
Publication type: Academic paper
Keywords: Social accountability, international, law
Abstract: This essay suggests that two strands of social action which have hitherto developed separately - legal empowerment and social accountability - ought to learn from one another. Legal empowerment efforts grow out of the tradition of legal aid for the poor; they assist citizens in seeking remedies to breaches of rights. Social accountability interventions employ information and participation to demand fairer, more effective public services. The two approaches share a focus on the interface between communities and local institutions. The legal empowerment approach includes the pursuit of redress from the wider network of state authority. The essay suggests that social accountability interventions should couple local community pressure with legal empowerment strategies for seeking remedies. Legal empowerment programs, for their part, often under-emphasize injustices related to essential public services such as health and education, perhaps in part because they tend to wait for communities and individuals to raise problems. Instead, legal empowerment programs should learn from social accountability practitioners' use of aggregate data as a catalyst for community action. Legal empowerment organizations would also benefit from adopting the attention to empirical impact evaluation that has characterized experimentation in social accountability.
Country: International
Publisher: Harvard School of Public Health François-Xavier Bagnoud Center for Health and Human Rights

Author: Mataure, M; Public Affairs and Parliamentary Support Trust
Title: Discussion Paper 16: Parliamentary functions and reforms and their application in promoting health equity in Southern Africa
Date of Publication: 2003
Publication type: Discussion paper
Keywords: Social accountability, Southern Africa, parliament
Abstract: This paper explores the various ways in which parliaments can be used to promote health equity. The Portfolio Committees responsible for Health in the Parliaments of South Africa and Zimbabwe have managed to carry out the oversight function through their investigations and have influenced the legislative process. Committees have been given powers to study the bills, conduct public hearings and engage experts on any subject matter under investigation and to support amendments to bills in order to promote health equity. To this end the South African National Assembly portfolio Committee on Health has effected amendments to such bills like the Occupational Diseases in Mines and Works Amendment Bill 2002. There is evidence that involving the Portfolio Committees in the budget process has been beneficial to both the electorate and the Executive. A number of ways are discussed in which such interaction with parliament can benefit health equity. Firstly, Parliaments are in charge of their rules which they can revise to become more efficient and effective when they commit themselves to reforms. Secondly, in the region there is a vibrant civil society that raises questions and compels Parliaments to address issues. Parliaments now offer space for stakeholder input through the use of public hearings, Parliament constituency centres and on site visits. Parliaments provide an
opportunity for pro equity legislative analysis by allowing participation by stakeholders in bill analysis during committee scrutiny. Networking, both nationally and internationally, between Parliaments and with NGOs provides useful information and technical advice which Parliaments can use to carry out its functions effectively. Constraints have also been identified. These include the economic situation, lack of information on the part of Parliament, limitation in public participation and the fact that recommendations made by Parliament are not binding on the executive and not always implemented.

**Country:** Southern Africa

**Publisher:** TARSC (Harare), EQUINET (Harare), GEGA

**URL:** [http://www.equinetafrica.org/bibl/docs/DIS16gov.pdf](http://www.equinetafrica.org/bibl/docs/DIS16gov.pdf)

**Author:** McGee, R; Gaventa, J

**Title:** Shifting Power? Assessing the Impact of Transparency and Accountability Initiatives

**Date of Publication:** November 2011

**Publication type:** Academic paper


**Keywords:** Social accountability, international, social power, governance

**Abstract:** This paper arises from a review of the impact and effectiveness of transparency and accountability initiatives which gathered and analysed existing evidence, discussed how it could be improved, and evaluated how impact and effectiveness could be enhanced. This paper takes the discussion further, by delving into what lies behind the methodological and evaluative debates currently surrounding governance and accountability work. It illustrates how choices about methods are made in the context of impact assessment designs driven by different objectives and different ideological and epistemological underpinnings. The authors argue that these differences are articulated as methodological debates, obscuring vital issues underlying accountability work, which are about power and politics, not methodological technicalities. In line with this argument, there is a need to re-think what impact means in relation to accountability initiatives, and to governance and social change efforts more broadly. This represents a serious challenge to the prevailing impact paradigm, posed by the realities of unaccountable governance, unproven accountability programming and uncertain evidence of impact. A learning approach to evaluation and final impact assessment would give power and politics a central place in monitoring and evaluation systems, continually test and revise assumptions about theories of change and ensure the engagement of marginalised people in assessment processes. Such an approach is essential if donors and policy makers are to develop a reliable evidence base to demonstrate that transparency and accountability work is of real value to poor and vulnerable people.

**Country:** International

**Publisher:** Institute of Development Studies (IDS), London

**URL:** [http://www.ids.ac.uk/files/dmfile/Wp383.pdf](http://www.ids.ac.uk/files/dmfile/Wp383.pdf)

**Author:** McNeil, M; Carmen, M

**Title:** Demanding Good Governance: Lessons from Social Accountability Initiatives in Africa

**Date of Publication:** June 2010

**Publication type:** Book


**Keywords:** Social accountability, Africa, governance

**Abstract:** This book elaborates on the meaning and impact of social accountability in African societies, through a series of case-studies from the continent. Social accountability refers to the wide range of citizen actions to hold the state to account, as well as actions on the part of government, media, and
other actors that promote or facilitate these efforts. Social accountability strategies and tools help empower ordinary citizens to exercise their inherent rights to hold governments accountable for the use of public funds and how they exercise authority. The case studies demonstrate that although social accountability approaches are strongly influenced by many underlying legal, social, cultural, and economic factors, they can still be implemented in difficult political environments (for example, in Zimbabwe). They point to the overriding problem of access to information (Ghana, Malawi, and Zimbabwe) and the low readability of information when it is available (Benin). They demonstrate what can happen when governments and civil society work together to institute accountability measures (Nigeria) and the implementation challenges they face in environments ranging from decentralized (Tanzania) to more centralized (Senegal).

**Country:** Africa  
**Publisher:** The World Bank Group  
**URL:**  

**Author:** Médecins sans Frontières (MSF) South Africa; The Department of Public Health at the University of Cape Town; The Provincial Administration of the Western Cape, South Africa  
**Title:** Antiretroviral Therapy in Primary Health Care: Experience of the Khayelitsha Programme in South Africa. Case Study  
**Date of Publication:** July 2003  
**Publication type:** Report  
**Publication details:** Médecins sans Frontières (MSF) South Africa; The Department of Public Health at the University of Cape Town; The Provincial Administration of the Western Cape, South Africa (2003). Antiretroviral Therapy in Primary Health Care: Experience of the Khayelitsha Programme in South Africa. Series on the Perspectives and Practice in Antiretroviral Treatment; Antiretroviral Therapy in Primary Health Care. The World Health Organisation, 16 pages  
**Keywords:** Social accountability, South Africa, AIDS, antiretroviral therapy  
**Abstract:** This documents provides reports on the Khayelitsha experience with HIV and AIDS primary health care clinics. In April 2000, in collaboration with the Provincial Administration of the Western Cape, MSF set up three HIV/AIDS dedicated clinics within Khayelitsha’s primary health care centers. The Khayelitsha ARV treatment project was initiated to demonstrate that treating HIV/AIDS with antiretroviral (ARV) drugs in a primary health care setting and in a resource-limited environment is feasible and replicable. In addition, it aimed to prove that developing countries can provide affordable HIV/AIDS care with low-cost ARV drugs. After two years, the programme has produced invaluable lessons, which are outlined in this paper.  
**Country:** South Africa  
**Publisher:** The World Health Organisation, Geneva  
**URL:**  

**Author:** Mejía-Acosta, A; Joshi, A; Ramshaw, G  
**Title:** Taking stock of the literature: Desk Review on Democratic Accountability and Service Delivery  
**Date of Publication:** January 2013  
**Publication type:** Discussion paper  
**Publication details:** Mejía-Acosta, A; Joshi, A; Ramshaw, G (2013). Taking stock of the literature: Desk Review on Democratic Accountability and Service Delivery. International Institute for Democracy and Electoral Assistance (International IDEA)  
**Keywords:** Social accountability, international, mechanisms
Abstract: This paper seeks documents how different modalities of democratic accountability are linked to improved service delivery. This paper addresses a double democratic challenge: to strengthen formal and legal mechanisms that allow citizens to articulate and voice their policy concerns, and to encourage elected and non-elected representatives to effectively respond to the provision of public services. The first part of the paper explores the concept of democratic accountability, and discusses the different approaches identified in the existing literature, including social and political accountability approaches. It also discusses the roles of different agents and multiple political arenas. The second, empirical part of the report offers a detailed review of 16 case studies in which citizens or politicians have held government officials accountable for the delivery of public services. These cases are analysed according to the proposed four dimensions of democratic accountability. Based on these evaluations, the paper highlights key accountability dimensions that contribute to improved delivery of government services and advances policy recommendations for democracy promotion.

Country: International
Publisher: International Institute for Democracy and Electoral Assistance, Stockholm
URL: http://www.idea.int/development/taking-stock-of-the-literature-desk-review-on-democratic-accountability-and-service-delivery.cfm

Author: Mishra, S; Suar, D
Title: Do stakeholder management strategy and salience influence corporate social responsibility in Indian companies?
Date of Publication: 2010
Publication type: Report
Publication details: Mishra, S; Suar, D (2010), Do stakeholder management strategy and salience influence corporate social responsibility in Indian companies?, Social Responsibility Journal, 6 (2), 306 - 327
Keywords: Social accountability, India, corporate social responsibility
Abstract: Purpose – This study aims to examine whether strategy towards primary stakeholders and their salience influence corporate social responsibility towards the corresponding stakeholders. Design/methodology/approach – Data were collected through a questionnaire from 150 senior level managers including CEOs. The stakeholder management strategy, salience, and corporate social responsibility were assessed in the context of employees, customers, investors, community, natural environment, and suppliers. Findings – The favourable strategy towards stakeholders increases the corresponding corporate social responsibility towards them. The salience of all stakeholder groups also enhances the corresponding corporate social responsibility. When salience and strategy are considered, the salience of a particular stakeholder group suppresses the effect of strategy fully or partially on corporate social responsibility. Research limitations/implications – The salience of a stakeholder is a potent antecedent of corporate social responsibility compared with strategy towards that stakeholder. Originality/value – A questionnaire is developed to assess corporate social responsibility in the Indian context, and the link between strategy, salience, and corporate social responsibility is established.

Country: India
Publisher: Emerald Group Publishing Limited
URL: http://www.emeraldinsight.com/journals.htm?articleid=1864472&show=abstract

Author: Molyneux, S; Atela, M; Angwenyi, V; Goodman, C
Title: Community accountability at peripheral health facilities: a review of the empirical literature and development of a conceptual framework
Date of Publication: 2012
Publication type: Academic paper
Publication details: Molyneux, S; Atela, M; Angwenyi, V; Goodman, C (2012), Community accountability at peripheral health facilities: a review of the empirical literature and development of a conceptual framework (2012), Health Policy and Planning, 27 (7), 541–554

Keywords: Social accountability, low and middle-income countries, public accountability

Abstract: This paper summarises the results of a systematic review of published material on public accountability in low and middle-income countries. Public accountability has re-emerged as a top priority for health systems all over the world, and particularly in developing countries where governments have often failed to provide adequate public sector services for their citizens. One approach to strengthening public accountability is through direct involvement of clients, users or the general public in health delivery, here termed ‘community accountability’. The potential benefits of community accountability, both as an end in itself and as a means of improving health services, have led to significant resources being invested by governments and non-governmental organizations. A systematic search identified 21 papers from low- or middle-income countries describing at least one measure to enhance community accountability that was linked with peripheral facilities. Mechanisms covered included committees and groups (n = 19), public report cards (n = 1) and patients’ rights charters (n = 1). The authors highlight from the evidence in the papers the lack of data on the impact of community accountability mechanisms linked to peripheral facilities and present a conceptual framework and a set of ideas that might contribute to future studies.

Country: Low and middle-income countries
Publisher: Oxford University Press
URL: http://heapol.oxfordjournals.org/content/27/7/541.full.pdf+html

Author: Moynihan, DP
Title: Participatory Budgeting
Date of Publication: 2007
Publication type: Report


Keywords: Social accountability, social participation, international, participatory budgeting

Abstract: This publication presents a series of case studies on the experiences of participatory budgeting across the different regions of the world. Participation is important in developing countries as a means of improving the performance and accountability of bureaucracies and improving social justice. There are two basic criteria for participation: it should be broadly representative of the population and should involve meaningful discourse that affects public decision-making. Reviews of participation in Poverty Reduction Strategy Paper (PRSP) processes show that these criteria have not been met in most cases. However citizen involvement in budgeting has been more successful. Citizen participation made local service delivery more efficient and effective in the country cases reviewed. In most of the case studies, NGOs analysed the budget and mobilised citizens. These NGOs seek to represent the poor and disseminate their views to the government. They do not offer direct citizen involvement, but without their involvement participation would be reduced. Budget participation can influence governments even where they have not embraced direct involvement of citizens in decision-making. This depends on NGOs communicating analyses of spending choices, public service effectiveness, and budget execution to the public, media, and elected officials. A key policy implication for donors is therefore targeted support to civil society. However, donors and NGOs often overlook the importance of government administrations in implementing participation.

Country: International
Publisher: The World Bank, Washington
URL: http://siteresources.worldbank.org/PSGLP/Resources/ParticipatoryBudgeting.pdf
Author: Mubyazi G.
Title: Understanding mechanisms for integrating community priorities in health planning, resource allocation and service delivery: results of a literature review
Date of Publication: October 2003
Publication type: Report
Keywords: Social accountability, Social participation, developing countries, mechanisms
Abstract: Community participation is widely advocated as a mechanism to allow health service users to be involved in the design, implementation and evaluation of activities, with the aim of increasing the responsiveness, sustainability and efficiency of health programmes. This exploratory study reviewed nearly 100 studies, mainly from the developing world. Topics covered include the link between community participation, governance and equity in health; and the factors explaining poor community involvement, despite increasing emphasis on decentralisation. It explored how the mechanism of community participation is understood. The author notes that some of the most successful community-based health initiatives have been those that received financial support from external agencies within limited pilot timeframes. It concludes that, in order to scale up successful projects to national level, it is essential to ensure political support, supporting laws, and resource support.
Country: Low-income countries
Publisher: EQUINET, Harare
URL: http://www.equinetafrica.org/bibl/docs/DIS13gov.pdf

Author: Murthy, N
Title: Decentralized health planning: lessons from two districts in India
Date of Publication: 1998
Publication type: Academic paper
Keywords: social accountability, India, decentralised health planning
Abstract: The Government of India’s experiments in decentralized health planning present special program planning challenges. This paper, through a case study of two districts, highlights the challenges and draws lessons for effective implementation of district health policy.
Country: India
Publisher: Journal of Health and Population in Developing Countries
URL: http://www.longwoods.com/content/17489

Author: Murthy, RK
Title: Strengthening accountability to citizens on gender and health
Date of Publication: 
Publication type: Academic paper
Keywords: Social accountability, international, gender, health
Abstract: This paper reviews the practice of accountability to citizens on gender and health, assesses gaps, and recommends strategies. Accountability refers to the processes by which those with power in the health sector engage with, and are answerable to, those who make demands on it, and enforce
disciplinary action on those in the health sector who do not perform effectively. In this paper, four kinds of accountability mechanisms have been used by citizens to press for accountability on gender and health. These include international human rights instruments, legislation, governance structures, and other tools, some of which are relevant to all public sector services, some to the health sector, some to gender issues, and some to gender-specific health concerns of women. There are few instances wherein private health sector and donors have been held accountable. Rarely have accountability processes reduced gender inequalities in health, or addressed ‘low priority’ gender-specific health needs of women. Accountability with respect to implementation and to marginalized groups has remained weak. This paper recommends that: (1) the four kinds of accountability mechanisms be extended to the private health sector and donors; (2) health accountability mechanisms be engendered, and gender accountability mechanisms be made health-specific; (3) resources be earmarked to enable government to respond to gender-specific health demands; (4) mechanisms for enforcement of such policies be improved; and (5) democratic spaces and participation of marginalized groups be strengthened.

Country: International
Publisher: Global Public Health, Routledge, Taylor and Francis Groups

Author: Naidoo, P; Ntuli, A
Title: The Equity Gauge: An Approach to Monitoring Equity in Health and Health Care in Developing Countries
Date of Publication: 2000
Publication type: Report
Keywords: Social accountability, Social participation, South Africa, Equity Gauge
Abstract: This paper summarises the proceedings of the working meeting on Equity Gauge projects; held in South Africa in the year 2000. An Equity Gauge is an approach to promoting equity which includes monitoring of key indicators, coupled with advocacy and community participation to ensure that information is acted upon. In August 2000 about 70 people from twenty countries came together in South Africa for a working meeting. Fourteen “Equity Gauge” projects made presentations, highlighting their main areas of focus, key stakeholder involvement and major activities. The foci of the Gauges represented at the meeting can be broadly grouped as follows: three have a city-wide focus, two an emphasis on community involvement, two an emphasis on resource allocation, and the remaining six are national survey related. A technical advisory team, providing expertise in measurement and data analysis, advocacy, and community participation, offered suggestions as to how the various Gauges could be strengthened. As a result of the discussions which took place during the meeting greater clarity on the essential components of an “Equity Gauge” has been achieved. Planning has now begun on developing a Global Equity Gauge Alliance which will promote equity by, among other things, providing support and technical expertise to current and emerging gauges.

Country: South Africa
Publisher: Health Systems Trust
URL: http://www.equinetafrica.org/bibl/page.php?record=455

Author: Ongala, J; Kasipul Division Home Based Care Stakeholders Group (KDHSG), Kenya
Title: PRA project report 5: Strengthening communication between people living with HIV and clinic health workers in Kaisipul Division, Kenya
Date of Publication: 2008
Publication type: Report

Keywords: Social accountability, Social participation, participatory research, Kenya, HIV

Abstract: The authors implemented the work reported here as part of a multicountry programme exploring different dimensions of participatory approaches to people centred health systems in East and Southern Africa, through Training and Research Support Centre (TARSC) and Ifakara Tanzania in the Regional network for equity in health in east and southern Africa (EQUINET). They used participatory approaches to facilitate a programme of work aimed at: Improving communication and understanding between HIV positive clients and the HIV clinic personnel in HIV clinics; raising HIV positive clients’ voices and participation in improving the HIV clinic services in the division; promoting networking to overcome isolation, increasing exchange and co-operation through conducting. Participatory approaches, while challenging and time intensive, were perceived by health workers, clients and the facilitators to be a powerful means to enhancing communication, overcoming power imbalances that are barriers to good health or effective use of services and to encouraging the sustainable, “bottom up” community involvement on health visioned in Kenya health policy documents. Real changes were made to the services more client-friendly, including installed suggestion box, re-streamlined queuing and filling system, taking of vital signs, interpreter involvement, and ordering of bulk drug supply, while clients formed a network that would sustain the communication and reduce social isolation of people living with HIV (PLWHIV).

Country: Kenya
Publisher: EQUINET, Harare

Author: Open Society Foundation; Accountability and Monitoring in Health Initiative
Title: Practitioners Convening on Community Monitoring for Accountability in Health'
Date of Publication: 2011
Publication type: Conference proceedings
Publication details: Open Society Foundation; Accountability and Monitoring in Health Initiative (2011). Application for the ‘Practitioners Convening on Community Monitoring for Accountability in Health'. Open Society Foundation - Public Health Program; Accountability and Monitoring in Health Initiative, 6 pages
Keywords: social accountability, international, Community monitoring
Abstract: This document informs readers about the legacy of the Accountability and Monitoring in Health Initiative1 (AMHI) supporting civil society groups to use community monitoring as a mechanism for ensuring greater government accountability and transparency in health care to its citizens at the local, national, regional and global levels. The absence of spaces and opportunities for practitioners of community monitoring for accountability in health to come together to share and collectively reflect on their experiences and to think creatively about the field and its future has been identified as a critical gap that is hampering the advancement of the field. The report presents deliberations at meeting to address this gap with experienced practitioners in community monitoring for accountability in health in July 18 – 20, 2011 in South Africa.

Country: International
Publisher: Affiliated Network for Social Accountability (ANSA)
URL: http://www.ansa-africa.net/uploads/documents/events/Application_Form_Practitioners_Convening_AMHI_20100510.pdf
Author: People’s Health Movement  
Title: Report of the Second National Health Assembly - 23 - 25 March 2007, Bhopal, Madhya Pradesh, India  
Date of Publication: September 2007  
Publication type: Conference proceedings  
Keywords: Social accountability; Community monitoring, India, health rights  
Abstract: This document describes the proceedings of the Second National Health Assembly (NHA2) held in Bhopal from 23rd to 25th March 2007; which was the first assembly after the formation of JSA. A lot of preparation and mobilization was done for NHA-2. The JSA Workshop on Campaign Material Preparation for NHA 2 was held in Bangalore from 24 - 25 February 2006. The National workshop on NHA 2 and JSA-NCC (national coordination committee) meeting was held in Secunderabad from July 14-16, 2006. The NHA-2 Preparatory Workshop was held in Bhopal from 4-6 January 2007. Twenty workshops were held on various topics in two parallel sessions on 24th March 2007. The sessions covered were tribal health, children’s right to food – action for children under six, health rights of positive people, panchayati raj institutions (local self govt. institutions) and health, sex selective abortion, mental health, environment and mining, Public Health Act, micronutrients, pulse polio, urban health, alternate health practices and sustainable development, human resources for health care, sexuality minorities and sex workers, violence against women, disability, community based monitoring of National Rural Health Mission, Bhopal gas tragedy and patents and IPRs.  
Country: India  
Publisher: People’s Health Movement  
URL:  http://www.phmovement.org/en/node/391

Author: Potts H: Essex University, December 2008  
Title: Participation and the Right to the Highest Attainable Standard of Health  
Date of Publication: December 2008  
Publication type: Report  
Publication details: Potts, H (2008), Participation and the Right to the Highest Attainable Standard of Health. Essex University Human Rights Centre, Essex,  
Keywords: Social accountability, Social participation, international, human rights  
Abstract: In this manuscript, the author describes a framework and set of illustrative indicators - "which are essential for the effective monitoring and evaluation of participation" - to assist governments with the obligation of participation in health planning. The author also highlights how barriers to participation include physical and economic barriers to attendance and the legitimacy of representation; and proceeds to suggest practical solutions for these later two phenomena. Active and informed participation is an integral component of health systems, as well as the right to the highest attainable standard of health. Despite its critical importance, health and human rights have not given participation the attention it deserves. While some health researchers have made more headway than those working in human rights, neither community has a widely accepted understanding of what the process of participation means in practice. This monograph is an accessible, practical, timely and original introduction to the process of participation; the need for a variety of participatory mechanisms; the relationship between fairness and transparency of the process; the relationship between participation and accountability and participation in accountability.  
Country: International  
Publisher: University of Essex Human Rights Centre, Essex  
URL:  http://www.essex.ac.uk/hrc/research/projects/rth/docs/Participation.pdf
Author: PRIA Global Partnership
Title: Democratic Accountability in Local Governance Institutions Experiences from South Asia
PRIA Global
Date of Publication: 2011
Publication type: Report
Keywords: social accountability, South Asia, local government
Abstract: This paper aims to analyse the processes of establishing diverse forms of social accountability mechanisms, their application and their outcomes in varying political and socio-economic contexts of different South Asian countries. The countries in focus here are India, Bangladesh, Nepal and Sri Lanka, where despite the existence of democracy, whether sixty years old or only a decade, the people’s experiences remain largely similar in terms of the democratic deficits they face in the form of poor accountability and lack of transparency in public institutions, non-participatory methods of designing policies, and corrupt and inefficient institutions. Hence, in the given scenario the relevance of social accountability mechanisms becomes even more pronounced as it offers citizens opportunities to engage with government and monitor the delivery of public services which are quite critical to the development of South Asia’s poor citizens of. The study is based on primary research conducted through tools like focused group discussions with stakeholders, interviews with community leaders and government officials in the countries in focus. The study aims to explore the factors responsible for making social accountability initiatives successful; the role participation can play in the empowerment of the people; the ways different forms of social accountability initiatives interact and create new models of accountability; and if social accountability initiatives can be instrumental in making local governance institutions accountable. To capture these processes effectively, the scope of this study is limited to local governance institutions.
Country: South Asia
Publisher: PRIA Global Partnership, New Delhi

Author: Ramiro, LS; Castillo, FA; Tan-Torres, T; Torres, CE, Tayag, JG; Talampas, RG; Hawken, L
Title: Community participation in local health boards in a decentralized setting: cases from the Philippines
Date of Publication: December 2001
Publication type: Academic paper
Keywords: Social accountability, Social participation, Philippines, health boards
Abstract: This study of four cases analyzed the role of local health boards in enhancing community participation and empowerment under a decentralized system in the Philippines. Local government units (LGUs) with functioning local health boards were compared with LGUs whose health boards were not meeting regularly as mandated by law. The study found that there were more consultations with the community, fund-raising activities, health initiatives and higher per capita health expenditure in LGUs with functioning local health boards. Only the mayors and municipal health officers felt empowered by devolution. In general, awareness of devolution and their potential roles in health decision-making was low among members of the community. These findings can be attributed to the socio-cultural and
historical traditions of centralized governance with little popular participation, overall attitudes of the community and board members, perceptions of health as primarily a medical matter, economic circumstances of LGUs, and insufficient preparation for devolution. Recommendations are suggested in response to these findings.

Country: Philippines
Publisher: Health Policy and Planning, Oxford University Press
URL: http://heapol.oxfordjournals.org/content/16/suppl_2/61.long

Author: Ringold, D; Holla, A; Koziol, M; Srinivasan, S
Title: Citizens and Service Delivery: Assessing the Use of Social Accountability Approaches in Human Development Sectors
Date of Publication: 2012
Publication type: Report
Keywords: Social accountability, health, citizens, service delivery, international
Abstract: This report reviews international evidence on implementation of measures for social accountability. In many low and middle income countries, poor quality of public service delivery driven an agenda for better governance and accountability. This has raised interest in the idea that citizens can contribute to improved quality of service delivery by holding policy-makers and providers of services accountable. Various “social accountability” tools aim to inform citizens and communities about their rights, the standards of service delivery they should expect, and actual performance; and facilitate access to formal redress mechanisms to address service failures. This report reviews how citizens – individually and collectively – can influence service delivery through access to information and opportunities to use it to hold providers accountable. It focuses on measures that support the use of information and grievance redress mechanisms.. It synthesizes experience to date; and identifies what resources are needed to support more effective use of social accountability tools and approaches. The report concludes that the relationships between citizens, policy-makers, program managers, and service providers are complicated, not always direct or easily altered through a single intervention, such as an information campaign or scorecard exercise..

Country: International
Publisher: The World Bank Publications, Washington D.C.
URL: http://books.google.co.uk/books?hl=en&lr=&id=OHYWa00SYjoC&oi=fnd&pg=PR5&dq=India+social+accountability+in+health&ots=7aJ1hKjA__&sig=PXudECdu_7EX9K-uyfz2eU52vA#v=onepage&q=India%20social%20accountability%20in%20health&f=false

Author: Robino, C
Title: Community Based Monitoring System
Date of Publication: Undated
Publication type: Toolkit and training material
Publication details: Community Based Monitoring System (Undated). International Development Research Centre, Canada. CIVICUS, PG Exchange
Keywords: social accountability, Africa, Asia, Latin America, toolkit
Abstract: This document provides a detailed description on the uses and challenges of The Community-Based Monitoring System (CBMS). The author begins by describing it as an organized way of collecting, analyzing, and verifying information at the local/community level to be used by local governments,
national government agencies, non-governmental and civil society organizations for planning, budgeting, and implementing local development programs. CBMS also serves to monitor and evaluate the performance of government agencies. Piloted in the Philippines in 1994, with the support of International Development Research Centre (IDRC), CBMS is now being implemented in 14 countries of Africa, Asia, and Latin America. Through its report on the countries in the case studies provided, the author illustrates how informed public investment is a key to reducing poverty and addressing inequalities in society, and how CBMS requires timely and accurate data to measure progress and plans for investment. Accurate data is also necessary for scientific analysis and policy application.

**Country:** Africa, Asia, Latin America

**Publisher:** PG Exchange

**URL:** [http://www.pgexchange.org/images/toolkits/PGX_F_CBMS.pdf](http://www.pgexchange.org/images/toolkits/PGX_F_CBMS.pdf)

**Author:** Rusike, I

**Title:** Civil society promotion of equity and the social determinants of health through involvement in the governance of health systems: the case of the Community Working Group on Health in Zimbabwe

**Date of Publication:** March 2007

**Publication type:** Report


**Keywords:** Social accountability, Social participation, Zimbabwe, civil society

**Abstract:** This report outlines the work of the Community Working Group on Health (CWGH) in Zimbabwe. Stakeholders who formed the CWGH took processes to different districts for locals to drive the agenda and programmes. The CWGH members also invited the associations of health professionals and representatives of government, churches, the private sector, Non-Governmental Organisations and traditional health providers to meet with them to identify conflict or consensus over community views and strategies on health. District Committees were set up and tasked to identify their main health-related problems and develop solutions for them. The committees coordinate local activities, including education and health action and link the community with all service providers.

**Country:** Zimbabwe

**Publisher:** World Health Organisation (WHO) Knowledge Network

**URL:** [http://www.who.int/social_determinants/resources/csdh_media/civil_soc_intersec_zim_2007_en.pdf](http://www.who.int/social_determinants/resources/csdh_media/civil_soc_intersec_zim_2007_en.pdf)

**Author:** Sarker, AE; Hassan, AM

**Title:** Civic Engagement and Public Accountability: An Analysis with Particular Reference to Developing Countries

**Date of Publication:** 2010

**Publication type:** Academic paper

**Publication details:** Sarker, AE; Hassan, AM (2010). Civic Engagement and Public Accountability: An Analysis with Particular Reference to Developing Countries, Public Administration and Management (PAM), 15 (2), 381-417

**Keywords:** Social accountability, low income countries, civil society

**Abstract:** This paper sets out to perform two tasks, namely to (a) explore and analyze cross-cultural evidence of social accountability in the developing world and (b) evaluate the claims of the advocates of social accountability in view of the socio-economic and political dynamics. The role of civic engagement
in ensuring public accountability has become a catchword in recent years. There is a consensus that social accountability mechanisms based on civic engagement can hold public officials accountable by complementing state accountability mechanisms. However, there are a number of contextual factors facilitating as well as inhibiting the effectiveness of social accountability. These are explored by the authors as described above.

**Country:** International, low-income countries

**Publisher:** Southern Public Administration Education Funding (SPAEF)


**Author:** Seldadyo, H; De Haan, J

**Title:** The Determinants of Corruption: A Literature Survey and New Evidence

**Date of Publication:** 2006

**Publication type:** Report


**Keywords:** social accountability, international, law, corruption

**Abstract:** This paper examines 70 economic and non-economic determinants of corruption. Using Factor Analysis technique, the authors generate five new indexes on the basis of these determinants, examine the robustness of the determinants as well as the new indexes. The authors find that one of the generated-indexes, namely regulatory capacity, is the most robust variable in explaining corruption.

**Country:** International

**Publisher:** University of Groningen, the Netherlands


**Author:** South Asia Sustainable Development Department

**Title:** Case Study 1: Andhra Pradesh, India. Improving Health Services through Community Score Cards.

**Date of Publication:** August 2007

**Publication type:** Report

**Publication details:** South Asia Sustainable Development Department (2007). Case Study 1: Andhra Pradesh, India. Improving Health Services through Community Score Cards. Social Accountability Series: South Asia Sustainable Development Department, World Bank. Note No. 1

**Keywords:** Social accountability, India, community monitoring, service delivery

**Abstract:** The current initiative was one of six pilot projects launched by the South Asia Sustainable Development Department of the World Bank aimed at the application of specific social accountability tools in different contexts of service delivery through the trust fund for Capacity Building and Piloting of Social Accountability Initiatives for Community Driven Development in South Asia. This note summarizes the findings, processes, concerns, and lessons learned from the Andhra Pradesh pilot. Social accountability refers to a broad range of actions and mechanisms that citizens, communities, independent media, and civil society organizations use to hold public officials and public servants accountable. Social accountability tools include participatory budgeting, public expenditure tracking, citizen report cards, community score cards, social audits, citizen charters, people’s estimates, and so forth. These mechanisms are being increasingly recognized world-wide as a means of enhancing democratic governance, improving service delivery, and creating empowerment.

**Country:** India

**Publisher:** South Asia Sustainable Development Department of the World Bank, The World Bank

Author: Singh, R; Vutukuru, V; Accountability Initiative 2010
Title: Enhancing Accountability in Public Service Delivery through Social Audits: A Case Study of Andhra Pradesh, India
Date of Publication: August 2010
Publication type: Toolkits and training materials
Keywords: Social accountability, Community monitoring, India, social audit
Abstract: This paper examines the effectiveness of social audit as a tool to enhance accountability by measuring the impact of social audit on the implementation of National Rural Employment Guarantee Scheme, the flagship employment guarantee program of the Government of India, in the state of Andhra Pradesh, using a mix of quantitative and qualitative methods.
Country: India
Publisher: Knowledge.nrega.net – Ministry of Rural Development Government of India
URL: http://knowledge.nrega.net/855/1/Accountability_Initiative_A_case_study.pdf

Author: Subrahmanian, R
Title: Matching services with local preferences: managing primary education services in a rural district of India
Date of Publication: 1999
Publication type: Report
Keywords: social accountability, India, school times, preference homogeneity
Abstract: This paper reports on a research carried out in a village of Raichur district in India; where poor households `preferences' with reference to school timings are analysed with a view to reflecting on their implications for education policy and management. In India, the pressing concern in education is with bringing in at least 32 million children estimated to be out of school, to meet the goal of Universal Elementary Education. Support for decentralisation of public services is widespread because of the equity and efficiency benefits associated with it. In particular, decentralisation is seen to facilitate the matching of services with local preferences, thus increasing the chances for policy goals to be met. This proposition is examined in the context of research carried out in a village of Raichur district in India. The paper attempts to address the following concerns: how homogeneous are local preferences? What if these run counter to policy interests? Can aspects of services be selectively decentralised, or does the 'production' of the sector as a whole require to be re-thought? The paper concludes with some thoughts on the importance of processes of 'preference' articulation, and the need to recognise preferences implicit within policy intentions.
Country: India
Publisher: Development in Practice
URL: http://www.developmentinpractice.org/journals/matching-services-local-preferences-managing-primary-education-services-rural-district-indi

Author: The Training for Health Equity Network
Title: THEnet’s Evaluation Framework for Socially Accountable Health Professional Education
Date of Publication: 2011
Publication type: Report

Keywords: social accountability, international, health education

Abstract: This document provides the first version of THEnet’s Evaluation Framework for Socially Accountable Health Professional Education. It allows schools to get a sense of where they are on the road towards greater social accountability and in their ability to increase impact on health and health services. This first version of the Framework centers on medical education. However, the Framework focuses on core common elements and was tested across health disciplines at two of THEnet schools, and the authors believe it can serve as a foundation to evaluate other health professional education as well. THEnet’s Evaluation Framework also serves as a starting point for its collaborative research activities. Hence, it also helps identify research and data gaps to strengthen the evidence base.

Country: International
Publisher: The Training for Health Equity Network, Brussels
URL: http://www.thenetcommunity.org/system/files/articles/The%20Monograph.pdf

Author: Training and Research Support Centre (TARSC)
Title: Community views on the essential health benefit in Zimbabwe
Date of Publication: 2012
Publication type: Report


Keywords: social accountability, Zimbabwe, health services

Abstract: This document reports on the results of a cross-sectional study conducted in Zimbabwe to understand the community’s views on the essential health benefit. An assessment was thus implemented in late 2012 by Training and Research Support Centre, working with community based researchers from various civil society organisations. The assessment aimed to determine community, local leaders and frontline workers views on key areas relevant to the framing of the Essential Health Benefit (EHB) as input to policy dialogue in this area so that the final design would be responsive to community views. The EHB is also a means to hold service providers accountable for their delivery on service entitlements. The assessment aimed more specifically to determine priority public health problems the EHB should address and any important features of their distribution by social and economic groups that services need to respond to. Also, it aimed to determine the services for health promotion, prevention, PHC, treatment and care, rehabilitation and palliative care that communities expect to see in place at community, primary and district level that would (i) address these priority health needs (ii) fulfill the constitutional right to health services. Lastly, it aimed to determine the roles and contributions of ministry of health, other ministries, other agencies and of communities (households, communities and leaders) in providing these services.

Country: Zimbabwe
Publisher: Training and Research Support Centre (TARSC)

Author: Training and Research Support Centre (TARSC); Civic Forum on Housing (CFH)
Title: Accountability and Social Action in Health A case study on solid waste management in three local authority areas of Zimbabwe
Date of Publication: March 2013
Publication type: Report
Publication details: TARSC; CFH (2013). Accountability and Social Action in Health A case study on solid waste management in three local authority areas of Zimbabwe, TARSC, COPSAH, Harare

Keywords: social accountability, Zimbabwe, solid waste management

Abstract: This case study shares the evidence and experience of the research, activities and the lessons learnt by the Training and Research Support Centre (TARSC) and Civil Forum on Housing (CFH) during a participatory research project in Zimbabwe. Solid waste management is a major challenge to most urban local authorities in Zimbabwe. Rapid urbanisation in the last decade, coupled with economic decline and social disruption, placed considerable strain on local authorities’ resources, resulting in their failure to provide adequate services to residents. By 2009, residents were discontent about waste management and the social problems created by waste dumping. To build capacity, strengthen accountability and facilitate sustainable options at the local level on solid waste management, Training and Research Support Centre (TARSC) and Civil Forum on Housing (CFH) used participatory research in 2010 to map the situation. Training and working with community-based researchers, TARSC and CFH identified actions for communities, the private sector and service organisations in three local authority areas of Zimbabwe (Chitungwiza, Epworth and Mutare). Researchers and civil society organisations met with the local authorities and industry and identified areas for follow-up action. The community-based researchers implemented civic education on social waste management and clean-up campaigns. As civil society, the researchers also engaged with local authorities and the private sector on waste recycling and reuse, monitored and raised issues with the local authority on waste disposal and used community feedback meetings to raise awareness and provide feedback and review of actions.

Country: Zimbabwe, Southern Africa

Publisher: Training and Research Support Centre (TARSC)


Author: United Nations Development Fund for Women (UNIFEM)

Title: Who answers to women? Gender and accountability: Progress of the world’s women, 2008/2009

Date of Publication: 2008

Publication type: Report


Keywords: Social accountability, international, gender

Abstract: This report makes recommendations on five areas where strengthening accountability to women is urgent: politics, access to public services, economic opportunities, justice, and the distribution of international assistance for development and security. It presents evidence that, despite formal guarantees of equality, progress for many women, particularly the poorest and most marginal, has been far too slow. Who answers to women? Accountability failures that reinforce gender-based inequality include legal systems that turn a blind eye to injustices experienced by women; public services responding to women’s needs in relation to narrowly defined traditional roles; and markets limiting women to vulnerable or low-return employment. The achievement of gender equality depends upon building the accountability of power holders to women and making them answerable for meeting commitments to women’s rights and gender equality. A framework for gender-responsive accountability – containing two essential elements – is proposed: women are participants in all oversight processes; and accountability systems must make the advancement of gender equality and women’s rights one of the standards against which the performance of officials is assessed. This is both a political and a
technical project. Improving accountability to women requires stronger mandates, clearer performance indicators, better incentives and sustained advocacy efforts.

Country: International
Publisher: United Nations Development Fund for Women (UNIFEM)
URL:  http://www.unifem.org/progress/2008/media/POWW08_Report_Full_Text.pdf

Author: UNESCO Bangkok
Title: Social Audits for strengthening accountability: Building blocks of human rights based programming
Date of Publication: 2007
Publication type: Toolkit and training materials
Keywords: Social accountability, community monitoring, Thailand, development programmes, management techniques
Abstract: This note is an attempt to analyze the instrumental value of social audits in guiding programming from the perspective of human rights-based approaches (HRBAs). In the documentation of experiences and programmes1 that incorporated HRBAs in several Asia-Pacific countries between the years 2004-2005, it was found that various forms of social audits have been successfully employed to enlist duty bearer accountability and in claiming entitlements. In diverse situations relating to the State’s obligations in regard to policy planning/implementation, service providers’ responsibilities in relation to delivery of services, or in securing meso (middle)-level duty bearers’ accountability towards their stakeholders, it has been observed that social audits have been effectively deployed under various names and to varying effect. Some of the Lessons Learned Project (LLP) case studies that explicitly recorded the use of social audits are: the right to food and the campaign under the right to information in India; the strategies adopted by Action Aid Nepal (AAN) to empower dalits to mobilize against discrimination and exploitation; the role of media organisations in the Philippines in developing capacities to empower rights holders to claim rights; and the strategies used by Javanese farmers in Indonesia to analyze and influence local budgetary allocations. In this note, the attempt to analyze the use of social audits from the HRBA perspective includes setting boundaries on the definitions of social audits; offering a framework for categorization of different kinds of social audits; and then applying them via some illustrations and examples. Illustrations have been used primarily from documented case studies under the LLP, but globally available examples, where relevant, have also been reviewed.

Country: Thailand
Publisher: UNESCO Asia and Pacific Regional Bureau for Education, Bangkok
URL:  http://unesdoc.unesco.org/images/0015/001570/157021e.pdf

Author: van der Gaag, N; Rowlands, J
Title: Speaking Out: Case studies on how poor people influence decision-making
Date of Publication: November 2009
Publication type: Book
Keywords: Social accountability, Social participation, international, Malawi
Abstract: This paper from Oxfam focuses on how the right-to-be-heard concept can strengthen public participation in policy making and accountability. Recommendations for those supporting poor and marginalised people to lobby for changes in their situation include recognising that change is long-term, understanding that attitudinal change is important, putting local priorities first, working at a number of levels and building alliances, bringing people face to face, taking different perspectives into account,
recognising that international agencies can play an advocacy role, understanding that NGOs are important as role models of accountability and integrity. A number of case studies are used to illustrate these points including the fostering of local accountability in Malawi.

**Country:** International, Malawi

**Publisher:** Oxfam GB, Oxford; Practical Action Publishing


**Author:** Vass, JR

**Title:** The role of HIV/AIDS committees in effective workplace governance of HIV/AIDS in South African small and medium-sized enterprises (SMEs)

**Date of Publication:** 2008

**Publication type:** Academic paper


**Keywords:** Social accountability, social participation, international, AIDS, committees, workplace governance

**Abstract:** This study assessed the role of workplace HIV/AIDS committees as a means of workplace governance on HIV/AIDS. In-depth qualitative case studies were conducted in five South African small and medium-sized enterprises (SMEs) that were actively implementing HIV/AIDS policies and programmes. Companies commonly implemented HIV/AIDS policies and programmes through a workplace committee dedicated to HIV/AIDS or a generic committee dealing with issues other than HIV/AIDS. Management, through the human resources department and the occupational health practitioner often drove initial policy formulation, and had virtually sole control of the HIV/AIDS budget. Employee members of committees were mostly volunteers, and were often production or blue collar employees, while there was a notable lack of participation by white-collar employees, line management and trade unions. While the powers of workplace committees were largely consultative, employee committee members often managed in an indirect manner to secure and extend social protective rights on HIV/AIDS to employees, and to monitor their effective implementation in practice. Workplace committees represented one means to facilitate more effective workplace HIV/AIDS governance, but the increased demands on collective bargaining as a result of anticipated rises in AIDS-related morbidity and mortality might prove to be beyond the scope of such voluntary committees in the longer term.

**Country:** International

**Publisher:** SAHARA Journal (Journal of Social Aspects of HIV/AIDS Research Alliance), Africa Journals Online


**Author:** Wiseman, V; Mooney, G; Berry, G; Tang, KC

**Title:** Involving the general public in priority setting: experiences from Australia

**Date of Publication:** March 2003

**Publication type:** Academic paper

**Publication details:** Wiseman, V; Mooney, G; Berry, G; Tang, KC (2003). Involving the general public in priority setting: experiences from Australia. Social Science and Medicine; 56(5): 1001-1012.

**Keywords:** Social accountability, Australia, participatory budgeting

**Abstract:** The discussion over whether community preferences have a legitimate role to play in priority setting has been highly polarised. The one group who appears not to be consulted in this debate is the citizens themselves. A sample of 373 citizens attending two medical clinics in central Sydney were surveyed about whether the general public has a legitimate role to play in informing priority setting in
health care. Respondents were presented with three different levels of priority setting: across health care programmes, across medical procedures, and at a global level. To assist respondents in understanding the choices and trade-offs involved, they were given information about current levels of funding and the cost-effectiveness of each alternative. Of particular interest was the question of whether their willingness to use public preferences depended on the level of priority setting. Respondents were also asked about who else's preferences should be used to inform priority setting at each level. The results suggest that the public overwhelmingly want their preferences to inform priority-setting decisions in health care. This was seen to be particularly important in informing decisions about how to prioritise across broad health care programmes and about the criteria to be used to allocate funds across different population groups. In contrast, the preferences of medical professionals and health service managers were rated most highly in relation to the prioritisation of different treatments and medical procedures. In most cases, however, respondents did not advocate the use of one particular group's preferences. Even when public preferences were considered to be important, it was felt that any decision-making process needed to be informed by the preferences of a range of groups. The preferences of politicians were viewed as least important in priority setting in health care.

Country: Australia
Publisher: Social Science and Medicine, Elsevier

Author: World Bank
Title: Enhancing transparency and accountability through citizen feedback Lessons from the E-ISR Plus Pilot
Date of Publication: 2013
Publication type: Report
Keywords: Social accountability, international, community monitoring
Abstract: This paper reports on some of the works of The External Implementation Status and Results Plus (E-ISR+) system; which is a feedback, transparency, and accountability tool for the World Bank. E-ISR+ is intended to disclose current project information to external stakeholders, to obtain feedback from non-state players on project progress and results, and to systematically reflect external feedback in implementation reporting. In doing so, it incorporates concepts from social accountability, third-party monitoring, and participatory monitoring and evaluation to emphasize increased transparency, accountability, and stakeholder involvement in World Bank projects. The main sections of the ISR became accessible to the public, reflecting the Bank’s new access to information policies and an effort to open up more information about Bank operations to the external public. Moreover, reflecting the overall trend toward more open development, the ISR process tests a new pilot effort in several African countries. E-ISR+ is designed to contribute to an improved environment for accountability generally within the host country and particularly where civil society monitoring strengthens the ability to hold government and other institutions answerable for their expected roles in a project. An improved environment for transparency and accountability is a long-term goal; it is also dependent on variable factors.

Country: International
Publisher: The World Bank Group
Abstract: This article raises the need for a human-rights-based accountability framework in addressing maternal health. The majority of women who die as a result of pregnancy-related complications have lived lives marked by poverty, deprivation and discrimination. From the moment of their births, these women often face a funnel of narrowing choices whereby they are unable to exercise meaningful agency with respect to what they will do with their lives, how much they will be educated, with whom they will partner, when they will have sex, whether they will use contraception, and finally what care they will get when they are pregnant or delivering, even when their lives hang in the balance. Adopting a rights-based approach to women’s health demands opening spaces for women to exercise choices and subverting the social – and power – relations that deny them their full humanity. Accountability in a rights-approach to maternal health relates to obligations to “respect, protect and fulfil” a wide array of civil and political rights, as well as economic and social rights, and goes far beyond the health sector. The article focuses on the specific issue of how to promote accountability for fulfilling – for taking proactive steps to progressively realize – women’s rights to maternal health if one seeks to transform the discourse of rights into practical health policy and programming tools that can affect development practice – and in turn to transform health systems to better meet women’s needs.
### 3.4 Social power, participation and accountability in generating knowledge in health

Concepts of social power, social participation and social accountability are used in various forms of knowledge generation. In these papers the work is used not only to generate power, participation and accountability, but with the explicit intention of generating new knowledge. This new knowledge is intended to be used in shaping decisions, within that setting and in some cases more widely.

The papers in this section reflect the different approaches for this, largely through participatory action research, community based research and community level monitoring. The papers present examples of the different methods used, including photography, social audits, asset mapping, and observational monitoring. They include a means for community reflection and analysis on the evidence, and some for wider dissemination and engagement on the knowledge produced. More than a set of paper on research methods, the papers included also reflect on relationships between communities and other producers of knowledge, and the theories, ethics, practices and tensions that inform this work. The papers raise issues of power, privilege, participation and the role of research in knowledge for social change. Some of the papers in this section provide a critique of the methods, and reflect on how the knowledge is more widely generalised and shared and institutionalised within information and planning in local governance and in health systems.

**Author:** Abraham, M; Purkayastha, B  
**Title:** Making a difference: Linking research and action in practice, pedagogy, and policy for social justice: Introduction  
**Date of Publication:** 2012  
**Publication type:** Academic paper  
**Keywords:** Participatory research, international, equity, gender  
**Abstract:** In this introductory article, the authors begin by briefly tracing the methodological background to linking research and action, focusing particularly on action research, participatory research, and feminist research. The authors provide an outline of the articles that showcase through specific case studies how sociologists link research and practice in diverse contexts including health, culture, education, labour, migration, violence against women, and polling. The authors comment that linking research and action has implications for knowledge creation, distribution, shifting power relations for achieving social change, and, ultimately, challenging social structures for social justice.  
**Country:** International  
**Publisher:** SAGE Publications  
**URL:** [http://csi.sagepub.com/content/60/2/123.full.pdf+html](http://csi.sagepub.com/content/60/2/123.full.pdf+html)

**Author:** Braa, J; Titlestad, OH; Sæbø, J  
**Title:** Participatory health information systems development in Cuba: The challenge of addressing multiple levels in a centralized setting  
**Year of Publication:** Undated  
**Publication Details:** Braa, J; Titlestad, OH; Sæbø, J (Undated). Participatory health information systems development in Cuba: The challenge of addressing multiple levels in a centralized setting. EQUINET, Harare.  
**Publication type:** Discussion paper
Keywords: Social participation; Cuba, Africa; Asia; Health Information Systems, knowledge systems

Abstract: This paper addresses issues of user participation in a large centralistic organization. It is based on one year experience of developing a computerized health information system within the Cuban health services. Relevant literature suggests that participative methods may be less feasible in centralistic environments. This paper confirms this by describing how participation in Cuba is restricted by political and organizational constraints. There is however documentation that participatory approaches may be very rewarding where such constraints are overcome. Experiences from a broad range of health units and organizational levels in the Cuban project show a trend of weakening centralistic control with regard to hierarchical level and geographic distance, and thus more autonomous organizational units and participating individuals at lower level farther from Havana. The research reported is carried out within a framework of a larger network of similar health information projects being carried out in Africa and Asia, and the case of Cuba is being compared with experience from these countries.

Publisher: University of Oslo, Oslo
Country: Cuba, Africa, Asia
URL: http://www.equinetafrica.org/bibl/docs/TITequity.pdf

Author: Buchanan, DR; Miller, FG; Wallerstein, N
Title: Ethical Issues in Community-Based Participatory Research: Balancing Rigorous Research with Community Participation in Community Intervention Studies
Date of Publication: December 2006
Publication type: Academic paper
Publication details: Buchanan, DR; Miller, FG; Wallerstein, N (2006). Ethical Issues in Community-Based Participatory Research: Balancing Rigorous Research with Community Participation in Community Intervention Studies
Keywords: Community based research, international, intervention studies, ethics
Abstract: The purpose of this paper is to identify potential sources of tension between the values of scientific rigor and community participation in Community Based Participatory Research (CBPR). The paper highlights that CBPR lies at the nexus of two major underlying ethical concerns—respect for community autonomy and the fair allocation of limited public resources—which have generated considerable controversy about appropriate criteria for evaluating CBPR grant proposals. The complexity of evaluating CBPR proposals is compounded by the multiple purposes that it serves: (1) an ethical function of demonstrating respect for community autonomy; (2) a research method for eliciting ideas for interventions to improve population health; and (3) an intervention in itself, seeking to enhance the capacities of community participants. The authors conclude that growing use of CBPR raises two new ethical issues that deserve greater public attention: first, the problem of securing informed consent and demonstrating respect for community autonomy when the locus of research shifts from the individual to community level; and second, fair distribution of scarce public resources when practical constraints make the most rigorous research designs for assessing the effects of community interventions virtually impossible. In light of recent federal initiatives, it is critical to achieve a common understanding of appropriate ethical and scientific standards for assessing the merits of CBPR.

Country: International
Publisher: Policy and Practice
**Author:** Campbell, JR  
**Title:** Participatory Rural Appraisal as qualitative research: distinguishing methodology issues from participatory claims  
**Date of Publication:** 2001  
**Publication type:** Report  
**Keywords:** participatory research, international, social participation,  
**Abstract:** Anthropologists and many others are making increasing use of participatory research methods in a variety of applied contexts. While aware of the potential advantages of such methods, this paper outlines a number of methodological issues that need to be carefully considered. Such issues, when taken together with the problem of combining participatory with qualitative and quantitative research, argue strongly not only for caution in using the methods but also for the need to undertake basic research on participatory methods themselves. This paper looks at the development of participatory rural appraisal (PRA) in development research, and critically examines three methods—interviewing, visualisation, and ranking/scoring—in terms of their relation to established qualitative research. It then turns to the problems that arise from using PRA techniques. Finally, the validity and reliability of PRA are discussed in relation to arguments about sequencing/triangulating research techniques, an argument which is shown to be as problematic as the unexamined use of PRA.  
**Country:** International  
**Publisher:** Human Organisation  
**URL:** [http://www.ctu.edu.vn/institutes/mdi/ntth/VN/PRA/PRA-003.htm](http://www.ctu.edu.vn/institutes/mdi/ntth/VN/PRA/PRA-003.htm)  

---  

**Author:** Castleden, H; Garvin, T  
**Title:** Modifying Photovoice for community-based participatory Indigenous research  
**Date of Publication:** January 2008  
**Publication type:** Academic paper  
**Keywords:** Participatory research, Canada, photojournalism, social power, knowledge systems  
**Abstract:** This paper reports on the experience of applying Photovoice to an Indigenous population in Canada. Scientific research occurs within a set of socio-political conditions, and in Canada research involving Indigenous communities has a historical association with colonialism. Consequently, Indigenous peoples have been justifiably sceptical and reluctant to become the subjects of academic research. Community-Based Participatory Research (CBPR) is an attempt to develop culturally relevant research models that address issues of injustice, inequality, and exploitation. The work reported here evaluates the use of Photovoice, a CBPR method that uses participant-employed photography and dialogue to create social change, which was employed in a research partnership with a First Nation in Western Canada. Content analysis of semi-structured interviews (n = 45) evaluated participants’ perspectives of the Photovoice process as part of a larger study on health and environment issues. The analysis revealed that Photovoice effectively balanced power, created a sense of ownership, fostered trust, built capacity, and responded to cultural preferences. The authors discuss the necessity of modifying Photovoice, by building in an iterative process, as being key to the methodological success of the project.  
**Country:** Canada  
**Publisher:** Social Science and Medicine, Elsevier Limited  
**URL:** [http://webmedia.unmc.edu/Community/CityMatch/EMCH/20110331/ModifyingPhotoVoice.pdf](http://webmedia.unmc.edu/Community/CityMatch/EMCH/20110331/ModifyingPhotoVoice.pdf)
Abstract: This article reports on a questionnaire survey that was used to obtain information on the use of participatory appraisal (PA) from veterinarians working in Africa. The term 'participatory appraisal' refers to a range of methods for data collection, learning and facilitation, which enable local people to play an active role in defining, analysing and solving their problems. A low overall response rate of 28.6% was achieved. Within Africa, response rates varied from 15.6% from government veterinarians to 47.6% from veterinarians working with non-governmental organisations. Information is presented on preferred methods, specific uses, levels of training and perceived advantages and disadvantages of PA. While PA was considered by many informants to be a valuable approach to working with communities to analyse and solve local animal health problems, respondents also identified constraints to the wider use of PA. These constraints included lack of financial resources, low availability of relevant training courses and materials, lack of time to attend training courses, and negative attitudes among colleagues. The author concludes that greater institutional awareness of the role of PA in the development of Veterinary Services is required. Such awareness might be achieved by wider dissemination of experiences related to the use of PA and the development of veterinary-orientated training courses for centrally-based personnel and workers in the field. The latter should include attention to appropriate attitudes and behaviour for veterinary professionals who are attempting to develop services according to the priorities and capacity of the community.

Country: Africa
Publisher: Office international des epizooties revue scientifique et technique
URL: http://www.oie.int/doc/ged/D9324.PDF
Author: Community Monitoring Programme.
Title: Quarterly Community Assessment of the Socio-economic Situation in Zimbabwe: Health and Education
Date of Publication: March 2013
Publication type: Report
Keywords: Community monitoring, Zimbabwe, health, education
Abstract: This report is one of a series of quarterly monitoring of social and economic conditions at community level. This community based monitoring on health and education conditions was carried out in March 2013. It assessed the situation with respect to education, health care and conditions that affect health, including living and community environments. The report is compiled from community reports from 240 sentinel sites in 57 districts from all provinces of Zimbabwe, with an average 4.2 reports per district. Community monitoring of social and economic conditions has been carried out every three months since 2003. The quarterly rounds cover: Health and Education, Income and Employment, Production and Assets. All rounds also cover food security monitoring. Monitors based in sentinel wards from civil society organizations report on specific areas of social and economic conditions at community level. Information on a district is compiled from three to four sentinel sites. These reports are thus not statistical sample surveys, but regular community assessments of the social and economic conditions at community level. They provide information on how things are changing across time or how things differ across areas. The Community Monitoring is implemented through civil society organisations based within districts and community based monitors to inform the work of the organisations implementing it, to support informed civil society and public sector dialogue with evidence on conditions at community level. This round is the ninth time quarterly monitoring has been done of health and education, with previous rounds having been done annually from 2004 to 2012.
Country: Zimbabwe
Publisher: Training and Research Support Centre (TARSC)

Author: Gibson, N
Title: Participatory Action Research Approaches and Methods
Date of Publication: November 2010
Publication type: Book, Toolkit and Training Materials
Publication details: Gibson, N (2010). Gateways, International Journal of Community Research and Engagement, 3; 185-186
Keywords: Participatory research, international, knowledge systems
Abstract: This book captures developments in Participatory Action Research (PAR), exploring the justification, theorisation, practice and implications of PAR. It offers a critical introduction to understanding and working with PAR in different social, spatial and institutional contexts. The authors engage with PAR’s radical potential, while maintaining a critical awareness of its challenges and dangers. The book explores the intellectual, ethical and pragmatic contexts of PAR; the development and diversity of approaches to PAR; recent poststructuralist perspectives on PAR as a form of power; the ethic of participation; and issues of safety and well-being. Part two is a critical exploration of the politics, places and practices of PAR. Contributors draw on diverse research experiences with differently situated groups and issues including environmentally sustainable practices, family livelihoods, sexual health, gendered experiences of employment, and specific communities such as people with disabilities, migrant groups, and young people. The principles, dilemmas and strategies associated with participatory
approaches and methods including diagramming, cartographies, art, theatre, photovoice, video and geographical information systems are also discussed. It reflects on how effective PAR is, including the analysis of its products and processes, participatory learning, representation and dissemination, institutional benefits and challenges, and working between research, action, activism and change.

Country: International
Publisher: Gateways, International Journal of Community and Engagement, University of Technology Sydney (UTSePress Publications)

Author: Gladwin, CH; Peterson, JS; Mwale, AC
Title: ‘The quality of science in participatory research: a case study from eastern Zambia’
Date of Publication: 2002
Publication type: Academic paper
Keywords: participatory knowledge, Zambia, farmers
Abstract: Recent discourse in the development field has been directed to the question of how to maintain and enhance the quality of science in agricultural research using participatory methods. Discussion has also focused on the question of how to combine microlevel research/extension efforts using participatory methods with scientific methods employing rigorous and statistical testing techniques. Is there a tradeoff between researchers’ use of microlevel, gender-sensitive, ethnographic, participatory methods and a commitment to “the scientific method,” with its conventional assumptions about sampling, data collection, hypothesis testing, and use of standard measures of statistical significance? If there is such a tradeoff, which of the two methods should be given the greater attention? Should scientific and rigorous testing methods take precedence in the agricultural science community over use of farmer-sensitive participatory methods? Should scientific rigor be sacrificed for ethnographic accuracy, or vice versa?

Country: Zambia
Publisher: Elsevier Science, Limited

Author: Graneheim, UH; Lundman, B
Title: Qualitative content analysis in nursing research: concepts, procedures and measures to achieve trustworthiness
Date of Publication: 2004
Publication type: Academic paper
Keywords: Participatory research, international, concepts
Abstract: This paper provides an overview of important concepts (manifest and latent content, unit of analysis, meaning unit, condensation, abstraction, content area, code, category and theme) related to qualitative content analysis; illustrates the use of concepts related to the research procedure; and proposes measures to achieve trustworthiness (credibility, dependability and transferability) throughout the steps of the research procedure. Qualitative content analysis as described in published literature shows conflicting opinions and unsolved issues regarding meaning and use of concepts, procedures and interpretation. Interpretation in qualitative content analysis are discussed.
**Country:** International  
**Publisher:** Nurse Education Today, Elsevier Limited  

**Author:** Hausmann-Muela, S  
**Title:** The community counts: a participatory approach to social audits  
**Date of Publication:** December 2011  
**Publication type:** Academic paper  
**Keywords:** Community monitoring, Latin America, international, evolving methodology  
**Abstract:** This Supplement marks CIET’s 25 years of experience in developing and conducting social audits. Over this period, the methodology has evolved, from the early sentinel community surveillance and community-based service-delivery surveys, through reiterative survey and feedback cycles that propose service changes and monitor their effects, to randomised controlled trials - that measure the impact of interventions. The systematic and rigorous social audit methods provide evidence from communities that encourage health planners to plan with and for the communities. While the methods have evolved and matured over the past quarter century, with social audits covering a wide range of topics in many countries, the underlying philosophy of CIET’s social audits has endured.

**Country:** Latin America, international  
**Publisher:** BioMedCentra  
**URL:** [http://www.biomedcentral.com/1472-6963/11/S2/I1](http://www.biomedcentral.com/1472-6963/11/S2/I1)

**Author:** Higgins, DL; Maciak, B; Metzler, M; CDC Urban Research Centres  
**Title:** CDC Urban Research Centers: Community-Based Participatory Research to Improve the Health of Urban Communities  
**Date of Publication:** January 2001  
**Publication type:** Academic paper  
**Publication details:** Higgins, DL; Maciak, B; Metzler, M (2001). Journal of Women's Health and Gender-Based Medicine; 10(1): 9-15  
**Keywords:** Participatory research, USA, violence, women  
**Abstract:** This document primarily describes the Southwest Detroit Partnership to Prevent Intimate Violence Against Latina Women (LA VIDA) Partnership as an example of how the Urban Research Centres (URCs) identify and initiate prevention research on urban health problems affecting women.  
**Country:** USA  
**Publisher:** Journal of Women's Health and Gender-Based Medicine, Mary-Anne Liebert Incorporated Publishers  
**URL:** [http://online.liebertpub.com/doi/abs/10.1089/152460901750067070](http://online.liebertpub.com/doi/abs/10.1089/152460901750067070)

**Author:** Higgins DL, Metzler M  
**Title:** Implementing community‐based participatory research centres in diverse urban settings.  
**Date of Publication:** September 2001  
**Publication type:** Academic paper; Toolkit and training materials  
**Keywords:** Participatory research, international, urban health, implementation, Urban Research Centres
Abstract: This issue of the Journal of Urban Health contains descriptions of the implementation of community-based participatory research (CBPR) activities at three Urban Research Centres (URCs) funded through an initiative of the Centres for Disease Control and Prevention (CDC). Now in their sixth year, the URCs have each formed research partnerships among community-based organizations (CBOs), universities, private organizations, and public health agencies. The articles describe the first 4 years of the development of the URCs, the process of conducting participatory research and an overview of the urban health issues that are being addressed. The authors describe the implementation of CBPR-partnerships in the context of urban settings, demonstrating that this approach can be used both to establish new participatory research centres and to guide the transition of traditional research centres to more participatory entities. The goal is to provide community representatives, public health researchers, and funding agencies with information about how research can be done with equitable opportunities for all partners to contribute. Drawing on the expertise of all partners increases understanding of the factors and processes leading to poor health outcomes and informs the development of interventions to improve community health.

Country: International
Publisher: Journal of Urban Health
URL: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3455913/pdf/11524_2006_Article_46.pdf

Author: IDS Participation
Title: Notes for participants in whose reality counts? Very short (1-2 day) PRA/PLA-related familiarisation workshops in 2006
Date of Publication: 2006
Publication type: Toolkits and training materials
Keywords: Participatory research, international, rapid rural appraisal, knowledge systems
Abstract: These notes provide information for participatory reflection and action training noting that there is no substitute for longer training and exposure which includes field experience. RRA originally stood for Rapid Rural Appraisal, but its approach and methods are also used in urban and other contexts. “Relaxed” is better than “Rapid“. PRA originally stood for Participatory Rural Appraisal, but its applications are in many, many contexts besides rural, and good practice is empowering and far more than just appraisal. PLA stands for Participatory Learning and Action. As a term it is often used interchangeably with PRA. PRA/PLA is a seemingly interchangeable term which continues to evolve and spread so fast that no definition can or should be final. Many make a distinction between RRA and PRA/PLA. For them, RRA is about finding out. It is data collecting. Good PRA/PLA, which evolved out of RRA, is in contrast empowering, a process of appraisal, analysis and action by local people themselves. There are methods which are typically RRA methods (observation, semi-structured interviews, transects etc) and others which are typically PRA/PLA methods (participatory mapping, diagramming, using the ground in various ways, making comparisons etc, often in small groups). PRA/PLA methods can be used in an RRA (data collecting or extractive) mode.

Country: United Kingdom
Publisher: Institute of Development Studies (IDS), United Kingdom
URL: http://www.equinetafrica.org/bibl/docs/IDSmon.pdf
**Community-Based Participatory Research From the Margin to the Mainstream: Are Researchers Prepared?**

Author: Horowitz, CR; Robinson, M; Seifer, S  
Title: Community-Based Participatory Research From the Margin to the Mainstream: Are Researchers Prepared?  
Date of Publication: 2009  
Publication type: Academic paper  
Keywords: Participatory research, international, health services, equity  
Abstract: This article reviews how, despite an increasing arsenal of effective treatments, there are mounting challenges in developing strategies that prevent and control cardiovascular diseases, and that can be sustained and scaled to meet the needs of those most vulnerable to their impact. Community-based participatory research (CBPR) is an approach to conducting research by equitably partnering researchers and those directly affected by and knowledgeable of the local circumstances that impact health. To inform research design, implementation and dissemination, this approach challenges academic and community partners to invest in team building, share resources, and mutually exchange ideas and expertise. CBPR has led to a deeper understanding of the myriad factors influencing health and illness, a stream of ideas and innovations, and there are expanding opportunities for funding and academic advancement. To maximize the chance that CBPR will lead to tangible, lasting health benefits for communities, researchers will need to balance rigorous research with routine adoption of its conduct in ways that respectfully, productively and equally involve local partners. If successful, lessons learned should inform policy and inspire structural changes in healthcare systems and in communities.  
Country: International  
Publisher: Circulation, American Heart Association  
URL: [http://circ.ahajournals.org/content/119/19/2633.full.pdf+html](http://circ.ahajournals.org/content/119/19/2633.full.pdf+html)

**Community-based Participatory Research: Policy Recommendations for Promoting a Partnership Approach in Health Research**

Author: Israel, BA; Schulz, A J; Parker, E.; Becker, AB  
Title: Community-based Participatory Research: Policy Recommendations for Promoting a Partnership Approach in Health Research  
Date of Publication: 2001  
Publication type: Academic paper  
Keywords: Participatory research, USA, global, policy, knowledge systems  
Abstract: This article presents key principles of community-based participatory research (CBPR), discusses the rationale for its use, and provides a number of policy recommendations at the organizational, community and national levels aimed at advancing the application of CBPR. Community-based participatory research in public health focuses on social, structural, and physical environmental inequities through active involvement of community members, organizational representatives, and researchers in all aspects of the research process. Partners contribute their expertise to enhance understanding of a given phenomenon and integrate the knowledge gained with action to benefit the community involved. While the issues addressed in this article draw primarily upon experiences in the United States, the emphasis throughout this article on the establishment of policies to enhance equity that would serve both to increase the engagement of communities as partners in health research, and to reduce health disparities, has relevant applications in a global context.  
Country: USA, global  
Publisher: Taylor and Francis Limited, London  
Author: Jameel A, Poverty Action Lab
Title: Governance Review Paper J-PAL Governance Initiative
Date of Publication: May 2011
Publication type: Report
Keywords: Participatory research, international, community monitoring
Abstract: This governance review paper focuses on principal-agent problems as key areas of research. First, how can citizens exercise greater control over politicians and policy through elections and participatory institutions? Second, which incentive schemes and institutional features can encourage civil servants to do their jobs properly, without leakages? In each of these areas, the authors review the state of knowledge as it exists today and, in doing so, identify what the authors believe are the key gaps in knowledge and priority areas for research.
Country: International
Publisher: Abdul Latif Jameel Poverty Action Lab

Author: Jegede, S
Title: African ethics, health care research and community and individual participation
Date of Publication: April 2009
Publication type: Academic paper
Keywords: Social power, Africa, ethics, knowledge systems
Abstract: This article discusses the appropriateness of western bioethics in the African setting. It focuses on the decision-making process regarding participation in health research as a contested boundary in international bioethics discourse. An ethnomethodological approach is used to explain African ethics, and African ethic is applied to the decision-making process in the African community. An HIV/AIDS surveillance project is used as a case study to explore the concept of communitarianism. The article argues that what exists in Africa is communal or social autonomy as opposed to individual autonomy in the West. As a result, applying the western concept of autonomy to research involving human subjects in the African context without adequate consideration for the important role of the community is inappropriate. It concludes that lack of adequate consideration for community participation in health research involving human subjects in Africa will prevent proper management and lack truly informed consent.
Country: Sub-Saharan Africa
Publisher: Journal of Asian and African Studies, SAGE Publications
URL: http://jas.sagepub.com/content/44/2/239.abstract

Author: Kemmis, S; McTaggart, R
Title: Participatory Action Research: Communicative Action and the Public Sphere
Date of Publication: 2005
Publication type: Book section
Publication details: Kemmis, S; McTaggart, R (2005). Participatory Action Research: Communicative Action and the Public Sphere. In: Denzin, NK and Lincoln, YS, Chapter 10, Strategies of Qualitative

**Keywords:** Participatory research, international, methods

**Abstract:** The authors’ present a view of participatory action research. They give a short overview of the evolution of action research and key approaches to action research, the sites and settings where they are most frequently used, several criticisms that have been advanced for each, and key sources to explore them. The approaches identified were a somewhat eclectic mix—participatory research, classroom action research, action learning, action science, soft systems approaches, and industrial action research. The authors summarize those approaches and the influence of each approach on the field. The papers presents “myths, misinterpretations, and mistakes” to move toward reconceptualising research itself as a social practice. Thinking about research as a social practice leads to an exploration of Habermas’s notion of the public sphere as a way of extending the theory and practice of action research. The authors hope that this argument shows more clearly how participatory action research differs from other forms of social inquiry, integrating more clearly its political and methodological intentions.

**Country:** International

**Publisher:** SAGE publications


**Author:** Lilja, N; Bellon, M

**Title:** Some common questions about participatory research: a review of the literature

**Date of Publication:** 2008

**Publication type:** Academic paper

**Publication details:** Lilja, N; Bellon, M (2008). Some common questions about participatory research: a review of the literature; 18 (4-5): 479-488

**Keywords:** Participatory research, international, review, implementation

**Abstract:** This article reviews, through reference to the published literature, some key questions about participatory research. When should participatory research be used? How should participatory research be applied? What about quality of science in participatory research? Are there any institutional issues associated with the use of participatory research? And what are the benefits and costs of participatory research? The article is not a comprehensive literature review on participatory research, it is not meant to set standards for participatory research, nor to define what constitutes 'good' participatory research, but rather it seeks to summarise the realities of implementing participatory research, as discussed and debated by several published authors, and to provide some useful background for this special issue.

**Country:** International

**Publisher:** Routledge, London

**URL:** [http://www.tandfonline.com/doi/pdf/10.1080/09614520802181210](http://www.tandfonline.com/doi/pdf/10.1080/09614520802181210)

**Author:** Lilja, N; Dixon, J; Eade, D [Editors]

**Title:** Participatory Research and Gender Analysis: New Approaches

**Date of Publication:** August 2010

**Publication type:** Book


**Keywords:** Participatory research, international, agricultural development research, gender-sensitive

**Abstract:** This book was published as a special issue of Development in Practice, and it discusses opportunities afforded by effective knowledge pathways linking researchers and farmers, underpinned by participatory research and gender analysis. It sets out practices and debates in gender-sensitive
participatory research and technology development, concentrating on the empirical issues of implementation, impact assessment, and institutionalisation of approaches for the wider development and research community. It includes six full-length chapters and eight brief practical notes and is enhanced by an annotated resources list of relevant publications, organisations, and websites adding to the portfolio of approaches and tools discussed by the contributors. Most of the 33 contributing authors work in the specialised agencies that form part of the Consultative Group on International Agricultural Research (CGIAR).

**Country:** International  
**Publisher:** Development in Practice, Routledge, London  
**URL:** [http://www.routledge.com/books/details/9780415577687/](http://www.routledge.com/books/details/9780415577687/)

**Author:** Loewenson, R; Loewenson, T; Kaim, B; Chigama, M; Juma, S; Musingye, J; Baatjies, D; Zulu Lishandu, A; Ulola, M; Ally Joe, S; Masuku, D; Ongala, J; Muhinda, A; Masaigana, M; Ryklief, A; Mbwili, C; Baba, A; Nelson, W; Mbuyita, S; EQUINET (2010)  
**Title:** Keeping an eye on Equity: Community visions of equity in health  
**Date of Publication:** 2009  
**Publication type:** Book  
**Publication details:** Loewenson, R; Loewenson, T; Kaim, B; Chigama, M; Juma, S; Musingye, J; Baatjies, D; Zulu Lishandu, A; Ulola, M; Ally Joe, S; Masuku, D; Ongala, J; Muhinda, A; Masaigana, M; Ryklief, A; Mbwili, C; Baba, A; Nelson, W; Mbuyita, S; EQUINET (2009). Keeping an eye on Equity: Community visions of equity in health. EQUINET, Harare, 68 pages  
**Keywords:** Social participation, East and Southern Africa, community photography, equity in health, participatory research, knowledge systems  
**Abstract:** Given that photographs speak louder than words, this book presents photographs taken by community photographers in seven east and southern African countries, namely: the Democratic Republic of Congo, Tanzania, Zimbabwe, Kenya, Uganda, South Africa and Zambia. The authors called the photographers the ‘Eye on equity’ team because the work was part of EQUINET’s participatory action research work. Implemented through institutions in east and southern Africa, this work investigated, documented and implemented actions to understand and promote equity in health. Photography was added as another tool to build and strengthen people centred health systems and people’s empowerment in health. The book presents images of equity in health and of actions to improve health. These are the stories of insiders: of members, health workers and health activists in the communities that are shown in the photographs. The photographs are being used to stimulate discussion of health issues and actions. The book thus introduces both the realities and the work underway. It opens discussion on community photography as a means of keeping an eye on equity and as a tool for change. The web version is for onscreen viewing. For a hard copy of the book please contact admin@equinetafrica.org.  
**Country:** East and Southern Africa  
**Publisher:** EQUINET, Harare  

**Author:** Loewenson, R; Flores, W; Shukla, A; Kagis, M; Baba, A; Ryklief, A; Mbwili-Muleya, C; Kakde, D.  
**Title:** Raising the profile of participatory action research at the 2010 Global Symposium on Health Systems Research  
**Date of Publication:** July 2011  
**Publication type:** Discussion paper
Publication details: Loewenson, R; Flores, W; Shukla, A; Kagis, M; Baba, A; Ryklief, A; Mbwili-Muleya, C; Kakde, D (Jul 2011), Raising the profile of participatory action research at the 2010 Global Symposium on Health Systems Research. MEDICC rev., 13 (3),

Keywords: Social participation, international, participatory action research, knowledge systems

Abstract: This paper provides an analysis of the role of participatory action research in providing equitable health. By involving citizens and health workers in producing evidence and learning, participatory action research has potential to organize community evidence, stimulate action, and challenge the marginalization that undermines achievement of universal health coverage. The paper summarizes and analyzes results of two sessions on this research model convened by the authors at the First Global Symposium on Health Systems Research in Montreux Switzerland, November 16-19, 2010. In so doing, it reviews case studies and experiences discussed, particularly their contribution to universal health coverage in different settings. The paper also reflects on challenges faced by participatory action research, and outlines recommendations from the two sessions, including creation of a learning network for participatory action research.

Country: International

Publisher: Medical Education Cooperation with Cuba (MEDICC), Cuba
URL: http://www.medicc.org/mediccreview/articles/mr_207.pdf

Author: Mahmood, MA; Khan, KS; Kadir, MM; Ali, S; Tunio, R; Barney, N

Title: Utility of participatory rural appraisal for health needs assessment and planning. Pakistan Medical Journal

Date of Publication: July2002

Publication type: Academic paper


Keywords: Participatory research, Pakistan, health planning

Abstract: This article reports on the experience in Pakistan of a PRA project set up to initiate community involvement and to understand the needs of health care from a community perspective. PRA was conducted with groups of men and women from three rural areas in a district of Sindh, Pakistan using a life cycle framework. The community members identified various stages of their life with the associated health issues. This research was empowering to community members as it facilitated community involvement. The respondents took charge of the process of identification of health needs at PRA sessions. PRA helped identify health problems considered prevalent and important by the community. More importantly, it helped potential service providers and the community to initiate community involvement in planning. The authors conclude that PRA is not only an effective tool for assessment and analysis of health issues but also a vehicle to promote community involvement. Additionally, participatory methods contribute to understand the context of quantitative data generated for planning purposes.

Country: Pakistan

Publisher: Journal of Pakistan Medical Association

URL: http://www.jpma.org.pk/full_article_text.php?article_id=2279
Abstract: This report begins by reviewing the various problems inherent in the use of widely available governance indicators, and proceeds to discuss the approaches offered to mitigate some of these data deficiencies. As the following sections show, while the progress in developing governance indicators is significant, a great deal of business remains unfinished. Though the proliferation of governance indicators has increased our understanding of development phenomenally, it has also made us much more aware of our technical limitations. Thus, the proud sense of intellectual discovery should not undermine the need to be more humble about the findings. It is useful to remember that governance is essentially a qualitative phenomenon, the quantification of which would always be subject to considerable empirical limitations. Researchers have so far attempted to use proxy indicators for measuring governance, a concept that purports to capture several complex and multi-faceted dimensions. The author also remarks how critical it is to avoid a pre-occupation with quantification and a neglect of equally important social, political, and historical processes. There is a need to combine historical, sociological, and political imagination with empirical certainty. In order to form relevant hypotheses and to test innovative causal mechanisms, one needs to complement the wealth of empirical information with the broader historical and political information.

Country: International
Publisher: United Nations Development Programme (UNDP)

Author: Matsunaga, DS; Enos,R; Gotay, CC; Banner, RO
Title: Participatory research in a native Hawaiian community: The Wai'anae cancer research project
Date of Publication: October 1996
Publication type: Academic paper
Publication details: Matsunaga, DS; Enos,R; Gotay, CC; Banner, RO (1996). Participatory research in a native Hawaiian community: The Wai'anae cancer research project. Cancer, 78 (S7); 1582–1586
Keywords: Participatory research, Hawaii, knowledge systems
Abstract: This project tested the effectiveness of a culturally appropriate intervention as a means of increasing breast and cervical cancer screening practices among Native Hawaiian women on the Wai'anae Coast of the island of O'ahu. Community participation was a key component of a cancer control research project in this Native Hawaiian community. The Wai'anae Cancer Research project was community driven, with Native Hawaiian community representatives involved in all phases of the project, from grant proposal development to data interpretation. A community health centre administered the grant award from the National Cancer Institute. The policy-making steering committee included community representatives, health professionals, and researchers to balance community and scientific quality standards. A factor in the project's success was continuous involvement over 7 years by a core of community representatives and professional staff. More than 500 women participated in the intervention, and outcome measures indicated that there was a community wide impact on cancer-related knowledge, attitudes, and behaviours. Important contributions of the project also included direct economic benefits, improvements in health services and systems, increased research capabilities, and dissemination of findings to other communities and researchers. The authors conclude that community participation in all phases of the research was essential in generating community acceptance
and resulted in an innovative and effective intervention. This participatory research project has left the community richer in knowledge, skills, experience, confidence, and resources. These qualities provide a strong foundation for building future programs and research.

Country: Hawaii
Publisher: Cancer, John Wiley and Sons Incorporated

Author: Mathie, A; Cunningham, G
Title: From Clients to Citizens: Asset-Based Community Development as a Strategy for Community-Driven Development
Date of Publication: January 2002
Publication type: Discussion paper
Publication details: Mathie, A; Cunningham, G (2002). From Clients to Citizens: Asset-Based Community Development as a Strategy For Community-Driven Development. Occasional Paper Series No. 4. The Coady International Institute, St. Francis Xavier University
Keywords: Community monitoring, social participation, international, assets
Abstract: In this document, asset-based community development (ABCD) is presented as an alternative to needs-based approaches to development. Following an overview of the principles and practice of ABCD, five major elements of ABCD are examined in the light of current literature on relevant research and practice. This involves exploring: the theory and practice of appreciative inquiry; the concept of social capital as an asset for community development; the theory of community economic development, such as the sustainable livelihoods approach; lessons learned from two decades of international development in the participatory paradigm; and the theory and practice of building active citizenship engagement and a stronger civil society. How ABCD both reflects recent trends in these areas and stands to benefit from the insights generated from this work is outlined.

Country: International
Publisher: The Coady International Institute, St. Francis Xavier University
URL: http://www.communityrestorationtrust.com/PDF/communitydevelopment.pdf

Author: Macaulay, AC; Commanda, LE; Freeman, WL; Gibson, N; McCabe, ML; Robbins, CM; Twohig, PL
Title: Participatory research maximises community and lay involvement
Date of Publication: September 1999
Publication type: Academic paper
Publication details: Macaulay, AC; Commanda, LE; Freeman, WL; Gibson, N; McCabe, ML; Robbins, CM; Twohig, PL (1999). Participatory research maximises community and lay involvement. BMJ; 319(7212): 774–778
Keywords: Participatory research, international
Abstract: This integrative review is based on a search of medical, nursing, and social science databases and ethical research codes. The material selected had to be significant theoretical works, source documents, or concrete examples of participatory research. It notes that such research stresses the relationship between researcher and community, the direct benefit to the community as a potential outcome of the research, and the community’s involvement as itself beneficial. A goal is that research subjects should “own” the research process and use its results to improve their quality of life.

Country: International
Publisher: British Medical Journal (BMJ)
URL: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1116604/
Author: Mimicopoulos, MG; Sormani, N
Title: Public governance indicators: a literature review
Date of Publication: 2007
Publication type: Report
Keywords: Participatory research, international, social accountability, governance
Abstract: This report intends to give an overview of performance indicators, focussing on those in the public sector, and discusses their pros and cons. “Good” governance, which establishes a framework for fighting poverty and inequality, has motivated many researchers to compute single or aggregated indicators. Part I of the paper evaluates existing methodologies, including data collection, sampling and ideological biases, the validity of proxy variables, aggregation methods, and applicability of results. The paper argues that new transforming factors such as the Information Age, globalization and decentralization should be better taken into account in the assessment process of governance. It also discusses the topic of accurately assessing citizen needs to better implement “good” governance mechanisms. It concludes with a discussion of future directions for data collection, particularly the need for more objective and geographically disaggregated indicators. Part II selects three core dimensions of governance and some economic indicators which can assist in monitoring governance in the public sector.

Country: International
Publisher: Department of Economic and Social Affairs, United Nations Publications, New York

Author: Minkler, M; Garcia, AP; Rubin, V; Wallerstein, N
Title: Community-Based Participatory Research: A Strategy for Building Healthy Communities and Promoting Health through Policy Change
Date of Publication: 2012
Publication type: Report
Publication details: Minkler, M; Garcia, AP; Rubin, V; Wallerstein, N (2012). Community-Based Participatory Research: A Strategy for Building Healthy Communities and Promoting Health through Policy Change
Keywords: Participatory research, international, policy change,
Abstract: This report focuses on Community-Based Participatory Research (CBPR), where the authors begin by first defining some terms and guiding principles derived from many years of observing and working on these kinds of projects. Next, the report explores a range of practices that have been shown to be valuable in carrying out CB PR in a way that supports efforts at policy and systems change. Throughout the report, examples of effective practices are drawn from both the six cases explored specifically for this project (the full case studies are presented in Section IV) and from many others. A number of resources published in print or available on the Internet, as well as descriptions of organizations whose work

Country: International
Publisher: PolicyLink
URL: http://www.policyleink.org/atf/cf/%7B97C6D565-BB43-406D-A6D5-ECA3BBF35AF0%7D/CBPR.pdf
Author: Morton, S; Flemming, J
Title: Assessing research impact: A case study of participatory research
Date of Publication: February 2013
Publication type: Discussion brief
Keywords: Participatory research, Ukraine, social action
Abstract: This briefing reports on findings from a JISC/ NCCPE funded project which tried to get to grips with some of these challenges. There is much current interest in how impacts of research on the wider economy and society can be analysed and documented, despite many methodological and practical challenges. The projects reported on used a framework developed by Sarah Morton – a knowledge exchange professional and impact analyst at The University of Edinburgh, to assess the impact of particular social action research developed by the Centre for Social Action (CSA) at De Montfort University, led by Jennie Fleming. The project focused on two case-studies; one of which looked at the de-institutionalisation of childcare in the Ukraine and is the focus of in this briefing.
Country: Ukraine
Publisher: Centre for Research on Families and Relationships, The University of Edinburgh, Edinburgh
URL: http://www.era.lib.ed.ac.uk/bitstream/1842/6562/1/Briefing%2066.pdf

Author: Mosavel, M; Simon, C; Van Stade, D
Title: Community-based participatory research (CBPR) in South Africa: Engaging multiple constituents to shape the research question
Date of Publication: December 2005
Publication type:
Keywords: Participatory research, South Africa, social participation, health services
Abstract: In this paper, the authors explore the community-based participatory research (CBPR) model as a means to negotiate a mutual agenda between communities and researchers. This paper is focused on the (perceived) need for cervical cancer screening in an under-resourced community in Cape Town, South Africa. Cervical cancer is a significant health problem in this community and elsewhere in South Africa. Unlike HIV-AIDS, however, many Black South Africans have not been educated about cervical cancer and the importance of obtaining screening. Many may not consider screening a priority in their lives. This research included extensive consultations and informal interviews with diverse community and regional stakeholders. Following these, the conducted 27 focus groups and 106 demographic surveys with randomly selected youth, parents, local health care personnel, educators and school staff. Focus group data were summarized and analysed cross-sectionally. Community stakeholders were involved throughout this research. Community engagement is an on-going, arduous, and necessary process for developing effective health promotion programs. The challenges are amplified when the particular health issue or research question is not prominent in the consciousness of the targeted community. The authors’ consultations, interviews, and focus group data were key in identifying the concerns and priorities of the community. By engaging community stakeholders, they developed a research framework that incorporated the community’s concerns and priorities, and stressed the intersecting roles of poverty, violence, and other cultural forces in shaping community members’ health and wellbeing. Community members helped to refocus the authors’ research from cervical cancer to ‘cervical health,’ a concept that acknowledged the impact on women’s bodies and lives of HIV-AIDS and
STDs, sexual violence, poverty, and multiple social problems. The authors conclude that the research agenda and questions in community-based health research should not be considered immutable. They need to be open to negotiation, creativity, and constant reinvention.

**Country:** South Africa  
**Publisher:** Social Science and Medicine  
**URL:** [http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3248692/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3248692/)

**Author:** Muhinda, A; Mulumba, M; Mugarura, J; Akankwasa, P; Kabanda, J  
**Title:** EQUINET PRA paper: Prevention of vertical HIV transmission in Kamwenge and Kiboga districts, Uganda  
**Date of Publication:** August 2009  
**Publication type:** Report  
**Publication details:** Muhinda, A; Mulumba, M; Mugarura, J; Akankwasa, P; Kabanda, J (2009), EQUINET PRA paper: Prevention of vertical HIV transmission in Kamwenge and Kiboga districts, Uganda. EQUINET PRA paper, HEPS Uganda, TARSC. EQUINET, Harare, 33 pages  
**Keywords:** Social participation, Uganda, health services  
**Abstract:** This project sought to identify the barriers to delivery, coverage and uptake of PMTCT services at primary health care and community level and to generate improved demand for and utilization of PMTCT within Kamwenge sub-county in Kamwenge district and Mulagi subcounty in Kiboga district in Uganda. The work was implemented by HEPS Uganda within an EQUINET participatory action research programme and was mentored by Training and Research Support Centre (TARSC) in co-operation with Ifakara Health Institute Tanzania. Participatory methods were used to explore the barriers to using services to prevent vertical transmission and to identify actions to improve uptake. The findings suggested a need to emphasise couple counselling and testing; encourage local leaders to mobilise communities for antenatal care, PMTCT and other primary health care services and to address cultural barriers like male dominance. The baseline survey indicated that even where services are provided, while health workers may be effective in referring those who attend services for testing, PMTCT and ANC, there is a gap in people actually getting to services which breaks this link. Weak links are also made with some other maternal health services. Communities need to be involved in designing interventions that encourage male participation in demand and utilisation of testing and PMTCT services. This would appear to be a core element of any PHC oriented AIDS programme to prevent vertical transmission, as essential as other more biomedical elements.

**Country:** Uganda  
**Publisher:** EQUINET, Harare  
**URL:** [http://www.equinetafrica.org/bibl/docs/HEPS%20PRARep09.pdf](http://www.equinetafrica.org/bibl/docs/HEPS%20PRARep09.pdf)

**Author:** Mswia, R; Lewanga, M; Moshiro, C  
**Title:** Community-based monitoring of safe motherhood in the United Republic of Tanzania  
**Date of Publication:** April 2003  
**Publication type:** Report  
**Keywords:** Community monitoring, Tanzania, maternal mortality  
**Abstract:** This article set out to examine the progress made towards the Safe Motherhood Initiative goals in three areas of the United Republic of Tanzania during the 1990s. The report presents the findings and argues that the use of community level monitoring in sentinel registration areas may be a cost-effective and accurate way for developing countries to monitor mortality indicators and causes, including for maternal mortality.
Author: Mwasaru, M
Title: Assessing Social Change Through Participatory Action Research: The Case of Kasighau Small-Scale Miners, Kenya
Date of Publication: February 2007
Publication type: Report
Keywords: Participatory research, Kenya, miners
Abstract: This case study describes the author’s experience with the use of PAR using a ‘resistance paradigm’. The case study aims to demonstrate the critical difference in using participatory methods, in this case PAR, not only with creativity and innovativeness in new circumstances but particularly in applying these methods in an alternative development paradigm outside the mainstream or conventional development paradigm.

Author: O'Fallon, LR; Dearry, A
Title: Community-based participatory research as a tool to advance environmental health sciences.
Date of Publication: April 2002
Publication type: Academic paper
Keywords: Participatory research, USA, environment, knowledge systems
Abstract: In this article, the authors highlight six key principles of community-based participatory research (CBPR) and describe how these principles are met within specific NIEHS-supported research investigations. The past two decades have witnessed a rapid proliferation of CBPR projects. CBPR methodology presents an alternative to traditional population-based biomedical research practices by encouraging active and equal partnerships between community members and academic investigators. The National Institute of Environmental Health Sciences (NIEHS), the premier biomedical research facility for environmental health, is a leader in promoting the use of CBPR in instances where community-university partnerships serve to advance our understanding of environmentally related disease. The NIEHS-supported projects described within this article demonstrate that community-based participatory research can be an effective tool to enhance our knowledge of the causes and mechanisms of disorders having an environmental aetiology, reduce adverse health outcomes through innovative intervention strategies and policy change, and address the environmental health concerns of community residents.

Country: Tanzania
Publisher: World Health Organisation, Geneva

Country: Kenya
Publisher: Institute of Development Studies (IDS), London
URL: [http://www.ids.ac.uk/files/Kasighau_casestudy.pdf](http://www.ids.ac.uk/files/Kasighau_casestudy.pdf)

Country: USA
Publisher: Environmental Health Perspectives, National Institute of Environmental Science
URL: [http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1241159/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1241159/)
**Author:** O'Toole, TP; Kaytura, AF; Chi, MH; Horowitz, C; Tyson, F  
**Title:** Community-based participatory research: opportunities, challenges, and the need for a common language.  
**Date of Publication:** 2003  
**Publication type:** Academic paper  
**Keywords:** Participatory research, international  
**Abstract:** This article highlights the results of a January 2002 call for papers featuring community-based participatory research (CBPR) that was issued. While CBPR may seem somewhat straightforward in theory, as these articles demonstrate, the degree to which CBPR is applied and how it is represented are far more diverse and varied. The peer review process and several editor meetings for this Special Issue brought out many of the challenges inherent in CBPR. How do we define community? What is a meaningful impact? How do we distinguish between community-placed and community-based research? How do we balance the importance of the research process with the importance of the research product or findings? Is there a methodologic threshold with which to determine whether a project is or is not CBPR? What is evident from the submissions is how broadly CBPR is being applied, geographically, within specific population groups and clinical scenarios, and methodologically.  
**Country:** International  
**Publisher:** Journal of General Internal Medicine  
**URL:** [http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1494882/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1494882/)

**Author:** Othieno, CJ; Kitazi, N; Mburu, J; Obondo, A; Mathai, MA; Department of Psychiatry, School of Medicine, College of Health Sciences, University of Nairobi; Mathari Hospital, Nairobi  
**Title:** PRA project report 7: Community participation in the management of mental disorders in Kariobangi, Kenya  
**Date of Publication:** January 2008  
**Publication type:** Report  
**Publication details:** Othieno, CJ; Kitazi, N; Mburu, J; Obondo, A; Mathai, MA; Department of Psychiatry, School of Medicine, College of Health Sciences, University of Nairobi; Mathari Hospital, Nairobi (2008). PRA project report 7: Community participation in the management of mental disorders in Kariobangi, Kenya. EQUINET PRA Report, pgs 1-25  
**Keywords:** Participatory research, Kenya, mental health, knowledge systems  
**Abstract:** This participatory action research aimed to explore and strengthen the community’s capacity to recognise and advocate for their mental health needs, to increase the awareness of mental health problems among the community and to increase collaboration between the mental health workers from clinic and hospital level and the community in the management of mental health problems. Both health workers and community identified exclusion, isolation and poor control over life, associated with risks and a poor physical state, as features of mental ill health. The Kariobangi community was felt to experience high levels of mental ill health, with poverty a major contributing factor. The major mental disorders identified were depression, stress, poverty, lack of awareness, drugs/substance abuse, lack of essential services (mental health services), mental retardation and epilepsy. The intervention is still at an early stage, but the evidence suggests that the PRA approach has strengthened community roles and interaction with health workers in improving mental health care in an underserved community.  
**Country:** Kenya  
**Publisher:** EQUINET, Harare  
**Author:** Sahota, PC  
**Title:** Community-Based Participatory Research in American Indian and Alaska Native Communities  
**Date of Publication:** June 2010  
**Publication type:** Report  
**Publication details:** Sahota, PC (2010). Community-Based Participatory Research in American Indian and Alaska Native Communities. NCAI Policy Research Center, 29 pages  
**Keywords:** Participatory research, Alaska, American Indian, community priorities  
**Abstract:** This paper discusses the usefulness of CBPR for American Indian/Alaska Native (AI/AN) communities and presents several case studies of CBPR in tribal communities. CBPR prioritizes the community in research design: the community is involved in developing research questions and methods; collecting data; analysing data; and writing publications and disseminating data. CBPR is not simply a research method—it is a philosophy about how research should be conducted so that community needs are prioritized. The variety of approaches possible in CBPR projects is reflected in the case studies presented in this paper. The common link between diverse CBPR studies is their commitment to community needs and priorities. One outcome that follows from some CBPR projects is that communities and researchers work together to implement study results to improve community programs or services. There is a growing emphasis in research overall, not just among CBPR researchers, on the translation of research study findings into concrete strategies for improving practices, programs, and service provision.  
**Country:** Alaska, American Indian communities  
**Publisher:** NCAI Policy Research Center  

**Author:** Scott V; Stern R; Sanders D; Reagon G; Mathews V  
**Title:** Research to action to address inequities: The experience of the Cape Town Equity Gauge  
**Date of Publication:** February 2008  
**Publication type:** Academic paper  
**Publication details:** Scott V; Stern R; Sanders D; Reagon G; Mathews V (2008), Research to action to address inequities: The experience of the Cape Town Equity Gauge. International Journal for Equity in Health 7 (6)  
**Keywords:** Participatory research, South Africa, health services, equity  
**Abstract:** This manuscript describes how the Cape Town Equity Gauge initiative, part of the Global Equity Gauge Alliance (GEGA) addressed the gap in equitable health care between and within countries. The authors give an overview of the first phase of their research in which they did an initial assessment of health status and the socio-economic determinants of health across the subdistrict health structures of Cape Town. They describe two projects from the second phase of their research in which they move from research to action. The first, the Equity Tools for Managers Project, engages with health managers to develop an Equity Measurement Tool which quantifies inequity in health service provision in financial terms, and the Equity Resource Allocation Tool which advocates for and guides action to rectify inequity in health service provision. The Water and Sanitation Project, engages with community structures and other sectors to address the problem of diarrhoea in one of the poorest areas in Cape Town through the establishment of a community forum and a pilot study into the acceptability of dry sanitation toilets. Both used participatory approaches. The findings reported demonstrate the value of adopting three pillars of assessment and monitoring; advocacy; and community empowerment.  
**Country:** South Africa  
**Publisher:** International Journal for Equity in Health 7(6)  
**URL:** [http://www.equityhealthj.com/content/7/1/6](http://www.equityhealthj.com/content/7/1/6)
**Author:** Storti, C [Editor]; Environmental Health Project  
**Title:** Participatory Community Monitoring for Water, Sanitation, and Hygiene The NicaSalud Experience  
**Date of Publication:** Undated  
**Publication type:** Toolkit and training material  
**Publication details:** Storti, C (Ed); (Undated). Participatory Community Monitoring for Water, Sanitation, and Hygiene; The NicaSalud Experience. Environmental Health Project, Activity Report 141, U.S. Agency for International Development, Washington DC, 41 pages  
**Keywords:** Community monitoring, Nicaragua, sanitation  

**Abstract:** This report summarizes the NicaSalud report, “Experiencias en la implementación de la Metodología de Monitoreo Comunitario Participativo para Agua, Higiene y Saneamiento,” (in Spanish) on the participatory community monitoring methodology and its application by three nongovernmental organizations (NGOs) in Nicaragua. The original report, as prepared by members of the NicaSalud Water, Sanitation, and Hygiene Working Group – ANASAM, PCI, and IMPRHU – documents the Participatory Community Monitoring (PCM) Initiative project that NicaSalud developed with funding and technical assistance from the United States Agency for International Development (USAID) through the Environmental Health Project (EHP). This summary highlights the PCM methodology for use by program planners and managers who would like to include PCM in their water, sanitation, and hygiene programs.  
**Country:** Nicaragua  
**Publisher:** U.S. Agency for International Development, Washington DC  
**URL:** [http://www.ehproject.org/PDF/Activity_Reports/AR-141formatted.pdf](http://www.ehproject.org/PDF/Activity_Reports/AR-141formatted.pdf)

---

**Author:** Training and Research Support Centre (TARSC)  
**Title:** Participatory methods for people centred Health Systems, Regional Review Workshop Report September 2009  
**Date of Publication:** September 2009  
**Publication type:** Report  
**Keywords:** Social participation, social power, East and Southern Africa, health equity, knowledge systems  

**Abstract:** The workshop on Participatory approaches to people centred health systems was held in September 2009 in Munyonyo Uganda before the EQUINET regional Conference. The regional review workshop gathered researchers from the PRA research programme since 2005. The studies implemented that were used as the basis for the discussions are separately reported and are shown in Appendix 8.3 of the report. The workshop reviewed the learning from, policy issues and knowledge gaps from the research studies, to inform planning of future work on empowerment and health and on people centred health systems in the ESA region and to explore the role of PRA approaches and community photography in advancing health equity. The workshop gathered those who had led the studies, community photographers and others involved with work on empowerment and health. This report documents the proceedings of the meeting.  
**Country:** East and Southern Africa  
**Publisher:** EQUINET, Harare  
**URL:** [http://www.equinetfrica.org/bibl/docs/PRA%20mtg%20rep%20Sep09.pdf](http://www.equinetfrica.org/bibl/docs/PRA%20mtg%20rep%20Sep09.pdf)
**Author:** TARSC IHI; REACH Trust; GNP+, EQUINET

**Title:** Training workshop on Participatory methods for a people centred health system: Strengthening community focused, primary health care orientated responses to prevention and treatment of HIV and AIDS, Bagamoyo Tanzania, 27 February to 1 March 2008

**Date of Publication:** March 2008

**Publication type:** Toolkits and training materials


**Keywords:** Social participation, participatory research, East and Southern Africa, AIDS, knowledge systems

**Abstract:** This report of the proceedings of a PRA training workshop in 2008 on strengthening equitable primary health care responses to HIV and AIDS. The 2008 training built understanding of PRA approaches and their use in strengthening people centred health systems, particularly community focused and PHC oriented HIV and AIDS interventions; drew on experiences in the east and southern African region for strengthening community focused and PHC oriented HIV and AIDS interventions; worked through practical examples of PRA approaches and their application in areas of work that participants are practically involved with at community level; provided initial mentoring and support to development of research and training proposals for EQUINET support on equitable, community driven responses.

**Country:** East and Southern Africa

**Publisher:** TARSC, EQUINET, Harare

**URL:** [http://www.equinetafrica.org/bibl/docs/REPMTG0208pra.pdf](http://www.equinetafrica.org/bibl/docs/REPMTG0208pra.pdf)

---

**Author:** The Institute for Community Research

**Title:** Case Studies in Community-Based Collaborative Research

**Date of Publication:** June 2007

**Publication type:** Report

**Publication details:** The Institute for Community Research (2007). Case Studies in Community-Based Collaborative Research. The Institute for Community Research

**Keywords:** Community based research, USA

**Abstract:** This compilation of case studies in Community-Based Collaborative Research (CBCR) was developed to facilitate the sharing of ideas among community-based researchers, and to support the dissemination of research concepts, models and outcomes. It is a dissemination product of the Institute for Community Research’s three-day national conference, “Crossroads I: Critical Issues in Community-Based Research Partnerships” that took place June 10-13, 2004 in Hartford, CT. Conference participants submitted case studies, following an outline provided by ICR that described CBCR projects recently completed or on-going during the time of the conference. All of the included projects represent the principles of CBCR and illustrate a wide range of local and national partnership research in the U.S. and Canada on the topics of arts and cultural heritage, capacity building and evaluation, economic and community development, and youth development.

**Country:** USA

**Publisher:** The Institute for Community Research

**URL:** [http://www.incommunityresearch.org/publications/documents/CaseStudiesinCBCRFinal12.17.08.pdf](http://www.incommunityresearch.org/publications/documents/CaseStudiesinCBCRFinal12.17.08.pdf)
Author: Ubel, PA  
Title: The Challenge of Measuring Community Values in Ways Appropriate for Setting Health Care Priorities  
Date of Publication: September 1999  
Publication type: Academic paper  
Keywords: Participatory research, international, ethics, priority-setting, community monitoring  
Abstract: This article outlines a preliminary research agenda to bring together empirical research on community values with more traditional research on health care ethics; with the goal of identifying and measuring acceptable community values that are relatively consistent across measurement methods and, ultimately, developing ways to incorporate these values into health care priority decision making. The move from a notion that community values ought to play a role in health care decision making to the creation of health care policies that in some way reflect such values is a challenging one. No single method will adequately measure community values in a way appropriate for setting health care priorities. Consequently, multiple methods to measure community values should be employed, thereby allowing the strengths and weaknesses of the various methods to complement each other.  
Country: International  
Publisher: Kennedy Institute of Ethics Journal, The Johns Hopkins University Press  
URL: http://muse.jhu.edu/journals/kennedy_institute_of_ethics_journal/v009/9.3ubel.html

Author: Wallerstein, NB; Duran, B  
Title: Using community-based participatory research to address health disparities  
Date of Publication: July 2006  
Publication type: Academic paper  
Publication details: Wallerstein, NB; Duran, B (2006). Using community-based participatory research to address health disparities. Health Promotion Practice 7(3); 312-323  
Keywords: Participatory research, international, social power, equity, knowledge systems  
Abstract: Community-based participatory research (CBPR) has emerged in the past decades as an alternative research paradigm, which integrates education and social action to improve health and reduce health disparities. More than a set of research methods, CBPR is an orientation to research that focuses on relationships between academic and community partners, with principles of co-learning, mutual benefit, and long-term commitment and incorporates community theories, participation, and practices into the research efforts. As CBPR matures, tensions have become recognized that challenge the mutuality of the research relationship, including issues of power, privilege, participation, community consent, racial and/or ethnic discrimination, and the role of research in social change. This article focuses on these challenges as a dynamic and ever-changing context of the researcher-community relationship, provides examples of these paradoxes from work in tribal communities, discusses the evidence that CBPR reduces disparities, and recommends transforming the culture of academia to strengthen collaborative research relationships.  
Country: International  
Publisher: SAGE Publications, on behalf of Society for Public Health Education  
URL: http://hpp.sagepub.com/content/7/3/312.short

Author: Wallerstein, N; Duran, B  
Title: Community-based participatory research contributions to intervention research: the intersection of science and practice to improve health equity  
Date of Publication: April 2010
Abstract: In this article, the authors identify the barriers and challenges within the intervention and implementation sciences, discuss how community-based participatory research (CBPR) can address these challenges, provide an illustrative research example, and discuss next steps to advance the translational science of CBPR. CBPR has emerged in the last decades as a transformative research paradigm that bridges the gap between science and practice through community engagement and social action to increase health equity. The authors further elaborate on how CBPR expands the potential for the translational sciences to develop, implement, and disseminate effective interventions across diverse communities through strategies to redress power imbalances; facilitate mutual benefit among community and academic partners; and promote reciprocal knowledge translation, incorporating community theories into the research.

Country: International

Publisher: American Journal of Public Health

URL: http://ajph.aphapublications.org/doi/full/10.2105/AJPH.2009.184036

Author: Wang, CC

Title: Photovoice: A Participatory Action Research Strategy Applied to Women's Health

Date of Publication: March 1999

Publication type: Academic paper


Keywords: Participatory research, international, photojournalism, knowledge systems

Abstract: This report gives an overview of the origins, key concepts, methods, and uses of photovoice as a strategy to enhance women's health. Photovoice is a participatory action research strategy that may offer unique contributions to women's health. It is a process by which people can identify, represent, and enhance their community through a specific photographic technique. Photovoice has three main goals: to enable people (1) to record and reflect their community's strengths and concerns, (2) to promote critical dialogue and knowledge about personal and community issues through large and small group discussion of their photographs, and (3) to reach policymakers.

Country: International

Publisher: Journal of Women’s Health

URL: https://apps.lis.illinois.edu/wiki/download/attachments/30304/Photovoice-%28Participatory-Action-Research.pdf
COPASAH is a global community of practitioners who share an interest and passion for the field of community monitoring for accountability in health. The secretariat is based at CEGSS in Guatemala, with regional coordinating offices in east and southern Africa (UNHCO, Uganda) and Asia (CHSJ, India). Members interact regularly, exchanging experiences and lessons learned and sharing resources, capacities and methods in the production and dissemination of conceptual, methodological and practical outputs towards strengthening the field. Member organisations also network and build capacity among themselves.

For further information on COPASAH please see www.copasah.net; 
Or contact the secretariat: Centro de Estudios para la Equidad y Gobernanza en los Sistemas de Salud (CEGSS)
email: contacto@cegss.org.gt
website: www.cegss.org.gt
Address:11 calle 0-48 zona 10, edificio Diamond oficina 504. Ciudad de Guatemala. Tel: + 502 2362-6689

EQUINET implements work in a number of areas identified as central to health equity in east and southern Africa
• Protecting health in economic and trade policy
• Building universal, primary health care oriented health systems
• Equitable, health systems strengthening responses to HIV and AIDS
• Fair Financing of health systems
• Valuing and retaining health workers
• Organising participatory, people centred health systems
• Social empowerment and action for health
• Monitoring progress through country and regional equity watches

EQUINET is governed by a steering committee involving institutions and individuals co-ordinating theme, country or process work in EQUINET from the following institutions: TARSC, Zimbabwe; CWGH, Zimbabwe; University of Cape Town (UCT), South Africa; Health Economics Unit, Cape Town, South Africa; MHEN Malawi; HEPS and CEHURD Uganda, University of Limpopo, South Africa, University of Namibia; University of Western Cape, SEATINI, Zimbabwe; REACH Trust Malawi; Min of Health Mozambique; Ifakara Health Institute, Tanzania, Kenya Health Equity Network; and SEAPACOH

For further information on EQUINET please contact the secretariat:
Training and Research Support Centre (TARSC)
Box CY2720, Causeway, Harare, Zimbabwe Tel + 263 4 705108/708835 Fax + 737220
Email: admin@equinetafrica.org
Website: www.equinetafrica.org