

# Advocacy Learning Lab: Accountability for Health

Meeting report  
Nairobi, Kenya  
August 2018





During a break, Johannes van Dam, PATH; Oby Obyerodhyambo, PATH; Beatrice Gachambi, MSF Belgium; Pamela Onduso, Pathfinder; Yolanda Moyo, PATH; Angeline Mutunga, Jhpiego; Apondi Nyanga'ya, Social Development Consultant; and Angela Kithua, PATH, swap stories and lessons learned about holding decision-makers accountable in their respective countries.

**In countries across Africa, governments have adopted policies and made commitments that have the potential to transform the health and lives of women and children. In many cases, however, progress stagnates from a lack of follow through on implementation, investment, and—in decentralized settings—translation from the national to sub-national level.**

When policies collect dust on shelves and budgets remain inadequate, it is clear that advocates must act to hold decision-makers accountable for delivering on health-related commitments. Yet “accountability” comprises a broad set of actions and a wide variety of actors—from advocates exerting pressure on parliamentarians to community groups demanding action from local leaders.

It is through that lens that on August 30, seventy contributors representing advocacy organizations and decision-makers gathered in Nairobi, Kenya for the PATH-hosted Advocacy Learning Lab: Accountability for Health. The Learning Lab was convened to exchange learning across sectors and geographies and apply existing tools and tactics on accountability to accelerate health-related policy implementation and resource mobilization and allocation.

### Defining accountability

Without accountability for goals and commitments, there is little point in making them. Increasing accountability depends not only on how mechanisms are enforced but also on how everyone understands accountability. The concept of accountability can have many different meanings across countries, contexts, and projects. Not only do a variety of definitions exist for “accountability,” but approaches to achieving it differ as well. Some use accountability

On the cover: Yolanda Moyo, PATH.

Photos: PATH/Asha Limo



At the Learning Lab, instant polling was used to get a sense of how different individuals understand accountability, the obligation of duty-bearers in fulfilling commitments, and the role of civil society in demanding action.



## One size fits none when it comes to tools and approaches

During a discussion, panelists outlined tools and approaches they have found effective for their respective work:

Hasifa Naluyiga, PATH Advocacy Officer for Advocacy for Better Health in Uganda, discussed the project's successful use of a Patient's Charter to raise citizens' awareness of their rights and responsibilities related to health services. Meanwhile, Johnpaul Omollo, National Coordinator for Health NGOs Network (HENNET), discussed HENNET's efforts

In small groups, participants discussed examples of policies and commitments—from global frameworks to county level budget allocation—and what successful implementation would look like. Then they discussed the disconnect. In other words, what prevents the implementation of policies and the allocation of resources to meet health needs? Several lessons emerged:

- It is difficult to translate global commitments to national action because oftentimes those ultimately accountable for the commitment at multiple levels aren't engaged in the crafting of the commitment; other times it is unclear who is accountable.
- Often non-state actors (e.g. civil society and the private sector) are uncoordinated in their advocacy and accountability efforts.
- Information about progress toward policy implementation is frequently not publicly available.
- Where public participation and citizen engagement is weak, governments are less likely to deliver on commitments.

Melissa Wanda, PATH, facilitates a small group discussion about navigating the accountability labyrinth and who is accountable for what within different levels of Africa's health care system.



coordinating Kenyan civil society engagement in health advocacy through budget tracking and training forums, and Joyce Kyalo, Regional Health Financing and Advocacy Advisor for E4A-MamaYe, described MamaYe's use of civil society accountability scorecards linked to the Kenya RMNCH Investment Framework to improve the Global Financing Facility's accountability and transparency.

The use of scorecards was brought up by many panelists and participants as being useful mechanisms for enabling community members at health facilities to hold service providers and governments accountable and ultimately improve relationships between communities and service providers.

Participants also discuss the importance of transparency — without adequate information, citizens cannot meaningfully participate in government processes. Many Learning Lab contributors discussed which tools they find most helpful and in what settings. At the end of the day, attendees committed to learning from one another's successes through the sharing of existing accountability tools. Many of the tools discussed at the Learning Lab can be found at the end of this report.

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***“We are the people. We cannot forget that. We must move beyond relationships. I do not need to know someone at the Ministry of Health to get a document. It's public information. We need to institutionalize the openness of budgets so that this information is available to the people. We must build systems that work beyond us.”***

—Vivian Ntinyari, grants specialist, International Budget Partnership

## Moving beyond relationships

While relationships are crucial in the context of accountability, it is debatable how much we should rely on these relationships to get things done. For instance, a participant shared an example on the importance of building personal relationships to track budgets. This sparked a lively debate in which a sizeable number of participants argued that institutional mechanisms must be built for citizens to access information and their rights, and this should not be entirely dependent on personal relationships. Several participants expressed that there is a need to move beyond relying on one-on-one relationships for accountability and that there should be institutionalized mechanisms for every citizen to engage, not just those who hold the relationships.

Johnpaul Omollo, HENNET; Joyce Kyalo, E4A - MamaYe; Hasifa Naluyiga, Advocacy for Better Health; and Yolanda Moyo, PATH discuss the range of tools and tactics used by their respective organizations for engaging advocates and decision-makers in accountability.





*“Accountability explains what each of us is doing, how, why, and where... We will never have the highest attainable health care services if those individuals responsible are not held accountable.”*

Dr. Mohammed Sheik  
Head of Division of Family Health, Ministry of Health







Lucy Kiaria, APHRC; Joyce Kyalo, E4A-MamaYe; Vivian Ntinyari, IBP; Maryanne Wanjiku, IPFK; and Reema Atuma, IPFK, discuss the role of relationship building in the accountability process.

Another camp of attendees admitted that although relationships are not the ideal means to hold decision-makers accountable, we are operating in an imperfect world where relationships do matter. Joyce Kyalo of E4A-MamaYe noted: “Rome wasn’t built in a day. We must recognize that we’re operating in an imperfect world. Systems are the end goal, but relationships are needed now.”

### Citizen-led accountability

Citizens play a central role in holding policymakers accountable for commitments they have made. While citizens and policymakers both agree that public participation is crucial in the policymaking process, many participants expressed the need for more mechanisms to empower citizen engagement. Unless citizens are aware of their rights and responsibilities they cannot hold their leaders accountable.

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***“It’s important for citizens to understand government structures, processes, and how they can engage—even through simple methods like petitions.”***

—Hon. Abigael Owina, county assembly member, Siaya County

PATH’s advocacy lead in South Africa, Yolonda Moyo, put it well when she said: “How can the public participate if they do not know how? It’s about meaningful public participation and debate, not just checking a box.”

Hon. Abigael Owina, county assembly member, Siaya County, offered a policymaker’s perspective and expressed that although it is a function of government leaders to implement policy, citizens must also show up and play a role, especially in areas where groups of citizens may have more expertise than their policymakers. Citizens can support their policymakers by providing evidence to support policy development and implementation. They can identify data gaps, collect data, understand how to analyze and use at different levels. This can inform budget allocation and resources. Owina said that civil society can play a role in “building the capacity of parliamentarians to understand the budget process and policy analysis.”

### Accountability in a decentralized world

Decentralization of health systems is becoming increasingly common as a way of bringing health decisions closer to citizens and improving efficiency and equity. Yet participants shared confusion about roles and responsibilities among national and subnational policymakers. Without clearly defined roles, it is difficult to hold decision-makers accountable.

Closely related to the lack of clarity around roles is a failure to consistently transfer competencies from national to sub-national governments. Local authorities often don't have the capacities and technical expertise and look to the national government to take the lead. Once clearly defined roles and responsibilities are determined and made known, local authorities must be empowered to make their own decisions and hold their national governments accountable.

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***“We sometimes assume that social accountability is an event, but it’s a process. And this process must be invested in for us to achieve anything.”***

—Angela Nguku, national coordinator for White Ribbon Alliance

Nicole Fulton, Team Leader for Maternal & Newborn Improvement (MANI) Project at Options, expressed the importance of also building the capacity of decisionmakers to respond to empowered citizens. If citizens don't ever get a response from government, they risk becoming apathetic and giving up.

Decentralization is a way of ensuring that quality services get to the people and accountability must be a component of the decentralization process. Angela Nguku, national coordinator for White Ribbon Alliance, put it well when she said:

“Decentralization and accountability cannot be separated. If decentralization is going to work, accountably must be at the center of it.”

## Best practices

The following best practices for accountability efforts came out of the Advocacy Learning Lab:

- Hold policymakers accountable who have authority *when* they have authority. This requires an understanding of process and when key decisions are being made.
- Set yourself up for success when crafting global commitments by beginning with the end in mind. Consult and include stakeholders who will ultimately be accountable for implementing the commitments.
- Part of our job as advocates is to educate policymakers about their obligations and civil society about their rights. This empowers both to act.
- There is a time and place for utilization of one-on-one relationships, but there should be institutionalized mechanisms in place to empower every citizen to engage.



Oby Obyerodhyambo, PATH.

## Tools

Visit <https://www.path.org/programs/advocacy-and-policy/accountability-resources/> to view some of the accountability resources discussed at the Advocacy Learning Lab, including those on:

- Budget tracking
- Scorecards
- Citizen engagement and campaigns
- Media engagement
- Capacity strengthening of decision-makers

For more information or questions, reach out to [advocacyandpolicy@path.org](mailto:advocacyandpolicy@path.org).