CITIZEN VOICE & ACTION FIELD GUIDE

CVA is about bringing the staff, community & government together for better services
AT A GLANCE
Citizen Voice and Action is a local level advocacy methodology that transforms the dialogue between communities and government in order to improve services, like health care and education, which impact the daily lives of children and their families.

The goal of Citizen Voice and Action is to improve the accessibility and quality of public services. Through collaborative, non-confrontational dialogue between service users, government and providers, users are empowered to monitor and seek accountability for service delivery and to take collective responsibility for services. CVA is based on the view that each citizen has the right to hold to account his or her government for fulfilling its commitments.

Through CVA, governments are held accountable for service delivery against government’s own standards. These are existing standards, which are documented by government departments and are publicly available. Standards vary from country to country and might include, for example, classroom size or staffing levels at a clinic. Existing government standards are a crucial part of CVA and provide the key distinction between traditional advocacy and advocacy using CVA.

Citizen Voice and Action also gives citizens the opportunity to voice their opinions about what makes a good school, clinic, or other government service. Citizens generate indicators that describe what makes a good service (such as a clinic or a school). Once they have generated these indicators, they rate the performance of services against them.
THREE PHASES OF CVA

CVA'S THREE PHASES:

1. Enabling Citizen Engagement
2. Engagement via Community Gathering
3. Improving Services & Influencing Policy
Phase 1.

ENABLING CITIZEN ENGAGEMENT

The objective of this phase is to prepare the community to engage productively and positively with service providers and government. The five elements “Enabling Citizen Engagement” are shown below and can be undertaken in any order.

1.1 UNDERSTANDING PUBLIC POLICY

GOVERNANCE & POLITICS

1. Access government documents to produce a clear, simple summary of the structure of government and politics from national to local level.
2. Analyse the age, nature and level of decentralisation for local service delivery. Who/which authorities are responsible for basic service delivery? Do funds reach the responsible authority at local level from the central government?
3. Assess the strengths and weaknesses, potential opportunities and obstacles of the governance structure, concentrating on relevant parts such as the health or education sector.
PUBLIC POLICIES, THEIR DEVELOPMENT, IMPLEMENTATION & BUDGETING

- Understand and briefly document government processes and systems in relation to policy development and budgeting for basic services for health and education or other sectors where government has established and documented standards. Who makes the policy decisions and who influences them?

IDENTIFY & DOCUMENT STANDARDS

- Communities should begin by focusing CVA on one sector i.e. health, education, agriculture, water and sanitation, either decided by WV or the community. When public policies are confirmed with authorities as the agreed statement/position of the government, document the standards.

CITIZEN PARTICIPATION

- Are there any mandated or official forums for citizen engagement or are they only unofficial? What is the relationship between civil society and government? Have civil society had any key successes in advocacy campaigns? Are there restrictions on civic participation?

Children know the problems in their school and need a voice
1.2 PREPARE LOCAL MATERIALS AND RESOURCES

When staff have summarised available documents, distil the information into simple, accessible, visual and appealing materials in the local language for a community audience. Don’t forget the government standards – these are vital.

1.3 CITIZEN EDUCATION AND MOBILISATION

Using the local materials you have prepared, work with local partners to mobilise and sensitise community leaders and groups about CVA, government policies, citizenship - both rights and responsibilities - and government standards.

1.4 BUILD NETWORKS AND COALITIONS

Whenever possible, CVA should be led by local partners or community members themselves. WV can play an essential role in equipping these groups with the CVA tools. It is important to meet with other stakeholders in the community early to maximize the collaborative nature of the CVA process.

1.5 ESTABLISH RELATIONSHIPS AND CONNECTIONS

For CVA to succeed, we must facilitate a warm, collaborative relationship among service users and service providers. Open communication and trust is vital, because some may feel – especially nurses, teachers and government officials – that they are being criticized. Building relationships is crucial to ensuring participation and political will.
Nurse Atim Dinah Rose at Kiyeyi Health clinic
Phase 2:

ENGAGEMENT VIA COMMUNITY GATHERING

The Community Gathering is the heart and soul of Citizen Voice and Action. The Community Gathering is a series of meetings involving large and small focus groups that assess the quality of public services and identify ways to improve their delivery. During this phase, communities collect information about the performance of services and make proposals for improvement. It is vital that those responsible for the services participate, especially the service providers themselves.

BEFORE HOLDING THE COMMUNITY GATHERING SESSIONS, STAFF SHOULD:

1. Establish the CVA Working Group. The members of the working groups should organize and facilitate the meetings. The working group may be mobilized by local partners.

2. Decide the venue. Often, meetings are held at the facilities that are being monitored.

3. Agree on which user and service provider groups to invite. The working group should decide the focus groups that will participate in the various sessions.

4. Decide the date and times

5. Provide invitations

6. Organize and train the facilitation team

7. Obtain materials. CVA requires a large number of flip charts.
THE INITIAL MEETING (INTRODUCTION) TO THE COMMUNITY GATHERING:

This meeting is designed to launch the monitoring exercises of CVA and introduce citizens and government representatives to all the processes and expected outcomes of the Community Gathering.

MONITORING STANDARDS SESSION

The Monitoring Standards session allows communities and government to compare government standards with the actual conditions of a particular facility. During the “Enabling Citizen Engagement” phase, WV staff and stakeholders will have started this process by identifying these key standards from government policies, documents and the service providers. The CVA Working Group meets with government representatives and service providers. It is a good idea to remind participants about the CVA process as a whole so that they understand how the “Monitoring Standards” session fits. The group then visits an actual facility (such as a clinic or school). During this visit, the participants compare government standards with reality.

Prepare a flip chart like the image on the next page but leave the actual column empty. You explain to staff that you have identified the standards from the public policies and have a copy of the government document with you so that they trust the information source. Then ask them how this national standard compares with the reality of their clinic/school. Fill their response into the ‘actual’ column and then ask why they think this is the case. You can record their comments in the ‘comments’ column.

EXAMPLES OF STANDARDS:

If your CVA group is monitoring education services, you may wish to monitor government standards related to the teacher-pupil ratio, the availability of desks, benches, and other materials, or the availability of toilet facilities.

If your CVA group is monitoring health services, you may wish to monitor government standards related to staffing levels at the local clinics, the availability of certain drugs, the opening hours of the facility, or the presence of certain equipment.
A community facilitator explains the standards to a focus group of teachers

<table>
<thead>
<tr>
<th>Area: Monitoring Standards</th>
<th>Service/Venue:</th>
<th>Type of Input</th>
<th>Standard</th>
<th>Actual</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of Input</td>
<td></td>
<td>Teachers</td>
<td>1 teacher to 45 pupils</td>
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<td>Furniture:</td>
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<td>- Desks</td>
<td>24 desks</td>
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<td></td>
<td></td>
<td>- Chairs</td>
<td>24 chairs</td>
<td></td>
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<tr>
<td>Learning Materials</td>
<td></td>
<td>[core text book]</td>
<td>1 per pupil</td>
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<td></td>
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<td>- English</td>
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<td>- Mathematics</td>
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<td>- Science</td>
<td>1 per pupil</td>
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<td>Toilets</td>
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<td>one for boys</td>
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<td>one for boys</td>
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</table>
THE COMMUNITY SCORE CARD SESSIONS

The objective of the Community Scorecard session is to get the opinions of service users and service providers about the performance of the service they are monitoring. These are not government standards. Rather, they are the ideas and opinions of the community themselves.

FORM FOCUS GROUPS
Divide the community into age and sex disaggregated small focus groups, to ensure maximum participation. You should also form focus groups for marginalized or vulnerable groups such as pregnant women, people with disabilities, people with HIV/AIDS, etc. Go through the scorecard process for each group.

DEFINE PERFORMANCE MEASURES
Ask focus group participants to think about the characteristics of an ideal service. "How would you describe a good ... (school, clinic etc)? Some prompting may be needed. For example, “Would you expect staff to respect you?” Record these performance measures, or “indicators” on a sheet like the flip chart at right:

INTRODUCE THE "SMILEY SCALE"
Next, introduce a simple voting method, the "smiley scale". For each indicator, each focus group member will vote, by indicating whether he or she feels “very good”, “good”, “OK”, “bad”, or “very bad” about that particular indicator.
Depending on the facilitator’s discretion, do a practice run on something other than the service i.e. the weather - is it good or bad that day? or the national sporting/football team’s performance (see pictured below). This is to test if the community understand the voting procedure. Request ideas for a symbol or simple drawing that will represent the performance measure for illiterate community members. Below, the test example of the national football team’s performance is represented by the image of football. Nice health clinic staff might be represented by a smiling woman’s face with a nurses’ cap.
VOTING
Next, transfer the criteria from the “Characteristics of a good service” flip chart to the group’s scorecard and invite them to vote.

The scorecard is three flip charts taped together in a horizontal line across a wall in the order displayed here on the right.

Once everyone has voted, examine the votes and ask the community to record an overall average score - represented by a smiley face not a number - in the column marked “scores”. Deciding on an average score might require a lot of discussion, especially if there is disagreement among the group members. Next, ask community members to comment on the reasons they voted the way they did. Record these reasons under the column marked “comments”. For each performance measure, encourage communities to propose solutions and record these. These proposals could include actions to be taken by community, government, or any other stakeholder.

Score Card sessions should be facilitated by a minimum of three people, the lead facilitator, someone to record the information on the flip chart and someone to record the information for documentation. Remember, the Score Card should be repeated for each disaggregated focus group. In this way, we ensure that we get the opinions of marginalized groups.

In the Appendix you will find an example of a Comparison Chart which demonstrates how you can represent the results of the focus groups to the wider group. But for participatory purposes you may wish to include one member from the group to share the results. Try not to use the whole scorecard for this presentation as the temptation is for people to go through every aspect of the scoring and there is simply not enough time! Encourage each group to vote on their top 1-2 proposals for change and get them to share this with the wider group.
Voting on services during a Community Gathering
INTERFACE MEETING

Once the “Monitoring Standards” and “Community Scorecard” sessions are complete, we can convene an “Interface Meeting”. The objective of the interface meeting is to encourage dialogue among citizens, service providers, government, and other stakeholders about the quality of the services that were monitored. Together, participants decide how they will improve services. Based on this information, an action plan is prepared which includes the allocation of responsibilities and time lines to enable the work to be taken forward. The Interface Meeting is the most critical session of the Community Gathering process as this is when action will be decided. The Interface Meeting can take several hours – most communities plan to serve lunch during the meeting. During the meeting, community representatives present the results of the Monitoring Standards session and the Community Scorecard sessions. Participants review the proposals that have emerged from the process thus far.

Next, ask the community to prioritize some objectives to be included in a collective action plan. The objectives should be “SMART” – Specific, Measurable, Achievable, Realistic, and Time-Bound. Record these objectives on a flip chart like the one below, and ensure that those involved are truly committed to its implementation. Sometimes, these objectives will require the formation of a working group to effectively implement.

![Action Plan Table](image-url)
Please note the difference between an action and an issue. For example, noting down ‘water supply’ on an action plan is noting the problem or issue not the solution. If water supply is raised, the facilitator would try to get the community to come up with an action like “write a letter to the District about water supply”. The letter is an action to do with the issue or problem of ‘water supply’. Note the letter is also something that the community can do which does not require resources. Encourage communities to come up with smaller, practical activities that are achievable to start off with – don’t encourage unrealistic or ambitious actions to start. You want incremental activities that can be achieved and demonstrate the possibility of change.

**CLOSING AND CELEBRATION**

Besides the Action Plan, the Interface Meeting is important as it provides the community with the opportunity to share the results of the work carried out together. The facilitator should emphasise that the Action Plan belongs to both citizens and government and it is their responsibility to make sure that the proposed changes are carried out. Schedule a follow up meeting to monitor progress.

At the end, an opportunity should be provided to the participants to evaluate the Community Gathering, its weaknesses and strengths. Request from the group any thoughts on what they liked or didn’t like about the Community Gathering process. The meeting could end with a celebration of food, song and dance.

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CVA is about bringing the staff, community & government together
Phase Three:

IMPROVING SERVICES AND INFLUENCING POLICY

Congratulations! You now have an action plan. The objectives in this plan will guide the community, government, and service providers to improve services that will ultimately improve the lives of children. But in order to succeed, the community will have to closely monitor the plan’s implementation. In this third phase, communities, government, and service providers implement the action plan. But in order to be successful, they must undertake four broad activities:
1. "DOING THE ACTION PLAN":
CVA practitioners often find that the objectives from their action plans require more thought after the interface meeting. Carrying out the Action Plan is led by citizens themselves, the users of the service and other relevant stakeholders – those who volunteered or committed themselves during the Community Gathering. But no matter how “SMART” the objectives are, the individuals are responsible for their achievement. It may be helpful to divide the objectives into sub-tasks and seek the assistance of a working group to complete these tasks.

2. MONITORING AND SUPPORT
Many times, individuals will commit to certain actions in a meeting, but will need substantial monitoring and support in order to ensure that they actually fulfil their new commitments. For this reason, the “Action Plan” includes a column titled “Who will monitor”. The individuals named here should take their responsibility very seriously. The individuals named here should generally be community members.

One suggestion might be to hang the action plan in public at the public service itself or at another public place such as the town hall. This will ensure transparency and accountability of those responsible to carry out the actions. It will also encourage participation of the general community in the process to improve services.

Documenting actions taken is important to facilitate the monitoring of actions. Those responsible for carrying out actions, should be encouraged to keep records of action taken, progress made and to report back to the wider community on the progress.

3. BUILDING NETWORKS AND COALITIONS
Often, the Action Plan will include some objectives that require the input or authority of a higher-level government official. In order to reach that official, communities will need to build networks and coalitions that will catch the attention of these higher level authorities. Work with local partners or ask your National Office advocacy team for more guidance about how to create a successful advocacy coalition.
4. ADVOCATE AND INFLUENCE

When an Action Plan includes ambitious objectives, communities will need to be strategic about the way they seek to achieve their goals. Here are some simple guidelines for successful advocacy:

1. Identify who can make the change your community wants. Be as specific as possible. Don’t say “the Ministry of Education”. Who is the individual (identified by title and name) with the power?

2. Who are your likely allies? How can you build a coalition or network that can press for the change you seek?

3. What is likely to persuade those with the power? Will they respond to political pressure? Pressure from the media? Pressure from a particular interest group?

4. Are there existing civil society spaces or government processes that you may use in order to achieve your objective?

Consider working with local partners or your National Office Advocacy or Child Health Now staff to design a successful advocacy strategy.

Information recorded on the flip charts during the Community Gathering is owned by the community. They should keep the flip charts. They can be kept by a head teacher, school management committee, responsible parent or a student committee. For example, in some CVA programs they have been posted in the head teachers’ office following a Community Gathering.

National advocacy success in Uganda

In Uganda, CVA activities identified truancy as a big problem. Initially, community members realised that it was because children were hungry and so they arranged to provide food at lunchtimes. But, over time this failed. From CVA research it was realised that the Uganda Free Education Act prohibited schools from collecting any fees including for food. From this local level and through a WV/NGO coalition, the National Government agreed to change the Act to allow the school to collect meal fees.
ADDITIONAL TIPS:

KEEP GOOD RECORDS!
Citizen Voice and Action generates important information about the quality of public services. This information should be kept as precisely as possible so that it can be used credibly to influence government.

Be sure to record the information generated during:
- Monitoring Standards session
- Score Card sessions
- Interface Meeting (Action Plan)

See annexes 2-6 at the end of this manual for standardized recording sheets.

CONSIDER HOW THE COMMUNITY MIGHT LINK LOCAL AND NATIONAL LEVEL ADVOCACY
Linking local level action to higher level action is often necessary to make sure action plans can be fulfilled. Efforts at the national level, for example, to meet with the Minister for Education, are often beyond the reach and capacity of community members and would require an advocacy objective broader than one district. Initially, this might be done on behalf of the community by World Vision staff and their partners, while the capacity of the community is built so they can take on these activities themselves in the long term. But WV should always try to encourage 1-2 community representatives to accompany WV at any high level meetings.

CONSIDER HOW TO USE THE MEDIA
Journalists are often looking for stories. Organise community members to speak to them about CVA activities but ensure that you have an outcome i.e. a success story to share including photos or video. Don't arrange to simply talk about the process of CVA. The media need a tangible outcome or there is no story. World Vision Communications staff can help communities work successfully with local media.

GOOD LUCK! Feel free to contact cva@wvi.org for more guidance or materials!
## ANNEX 1: THE COMMUNITY GATHERING SESSIONS

<table>
<thead>
<tr>
<th>SESSION</th>
<th>WHO IS NEEDED?</th>
<th>SESSION PURPOSE/ OUTPUTS</th>
<th>MATERIALS REQUIRED</th>
<th>TIME NEEDED</th>
</tr>
</thead>
<tbody>
<tr>
<td>INITIAL MEETING</td>
<td>• Community • Community leaders • Government representatives • Service providers • CVA Working Group members</td>
<td>Overall introduction to CVA and the Community Gathering</td>
<td>CVA overview diagram (draw on flip chart) Community gathering overview diagram (draw on flip chart)</td>
<td>1 hour</td>
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<tr>
<td>MONITORING STANDARDS</td>
<td>• Community leaders • Government representatives • Service providers • Working group members</td>
<td>Compare standards with the actual condition of the service being monitored</td>
<td>CVA overview diagram (draw on flip chart) Community gathering overview diagram (draw on flip chart) Flip charts to draw and record the “Monitoring Standards” results</td>
<td>1-2 hours</td>
</tr>
<tr>
<td>COMMUNITY SCORECARDS</td>
<td>Users of the service (disaggregated groups) Providers of the service (disaggregated group)</td>
<td>Qualitative assessment of service delivery performance by service users and service providers Provide proposals for the improvement of services</td>
<td>CVA overview diagram (draw on flip chart) Community gathering overview diagram (draw on flip chart) Flip charts to draw and record the “Community Scorecard” results</td>
<td>1-3 hours per focus group. Remember: you should facilitate the “Community Scorecard” session with a variety of user groups.</td>
</tr>
<tr>
<td>INTERFACE MEETING</td>
<td>Participants of the Monitoring Standards and Community Scorecard Sessions Community Leaders Government Representatives (administrative and political)</td>
<td>Share results of “Monitoring Standards” and “Community Scorecard” sessions Prepare an Action Plan to improve services</td>
<td>CVA overview diagram (draw on flip chart) Community gathering overview diagram (draw on flip chart) Flip charts that show the results of the “Community Scorecard” and “Monitoring Standards” sessions</td>
<td>From a few hours to a full day. Many CVA practitioners provide lunch.</td>
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### ANNEX 2: RECORDING SHEET FOR MONITORING STANDARDS SESSION

#### CVA MONITORING STANDARDS SESSION

<table>
<thead>
<tr>
<th>Type of Input</th>
<th>Standard</th>
<th>Actual</th>
<th>Changes after CVA exercise</th>
<th>Date of changes</th>
<th>Comments</th>
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### ANNEX 3: RECORDING SHEET FOR COMMUNITY SCORECARD SESSION:

#### CVA COMMUNITY SCORECARD SESSIONS

<table>
<thead>
<tr>
<th>Performance Measures Generated by Community</th>
<th>Overall Score</th>
<th>Proposals for Improvement</th>
<th>Changes after CVA exercise</th>
<th>Score after CVA exercise</th>
<th>Date of revised score</th>
<th>Comments</th>
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<table>
<thead>
<tr>
<th>PERFORMANCE MEASURES GIVEN</th>
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ANNEX 4: RECORDING SHEET FOR INTERFACE MEETING:

<table>
<thead>
<tr>
<th>ACTION</th>
<th>WHO WILL DO THIS</th>
<th>BY WHEN</th>
<th>RESOURCES / SUB ACTIVITIES</th>
<th>WHO MONITORS</th>
</tr>
</thead>
<tbody>
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<tr>
<td>ACTION</td>
<td>WHO WILL DO THIS</td>
<td>BY WHEN</td>
<td>RESOURCES / SUB ACTIVITIES</td>
<td>WHO MONITORS</td>
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**SAMPLE COMPARISON CHART**

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<th>Indicators</th>
<th>Symbols Outpatients</th>
<th>Pre-Natal Patients</th>
<th>Service Providers</th>
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<tbody>
<tr>
<td>PERFORMANCE MEASURES FROM GROUP</td>
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<td></td>
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<tr>
<td>Availability of drugs</td>
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<td></td>
<td>🙁</td>
</tr>
<tr>
<td>Staff friendliness</td>
<td>😞</td>
<td>😞</td>
<td>😞</td>
</tr>
<tr>
<td>PERFORMANCE MEASURES GIVEN</td>
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<td>5.1 Quality of staff</td>
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<tr>
<td>5.2 Overall satisfaction with the service</td>
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