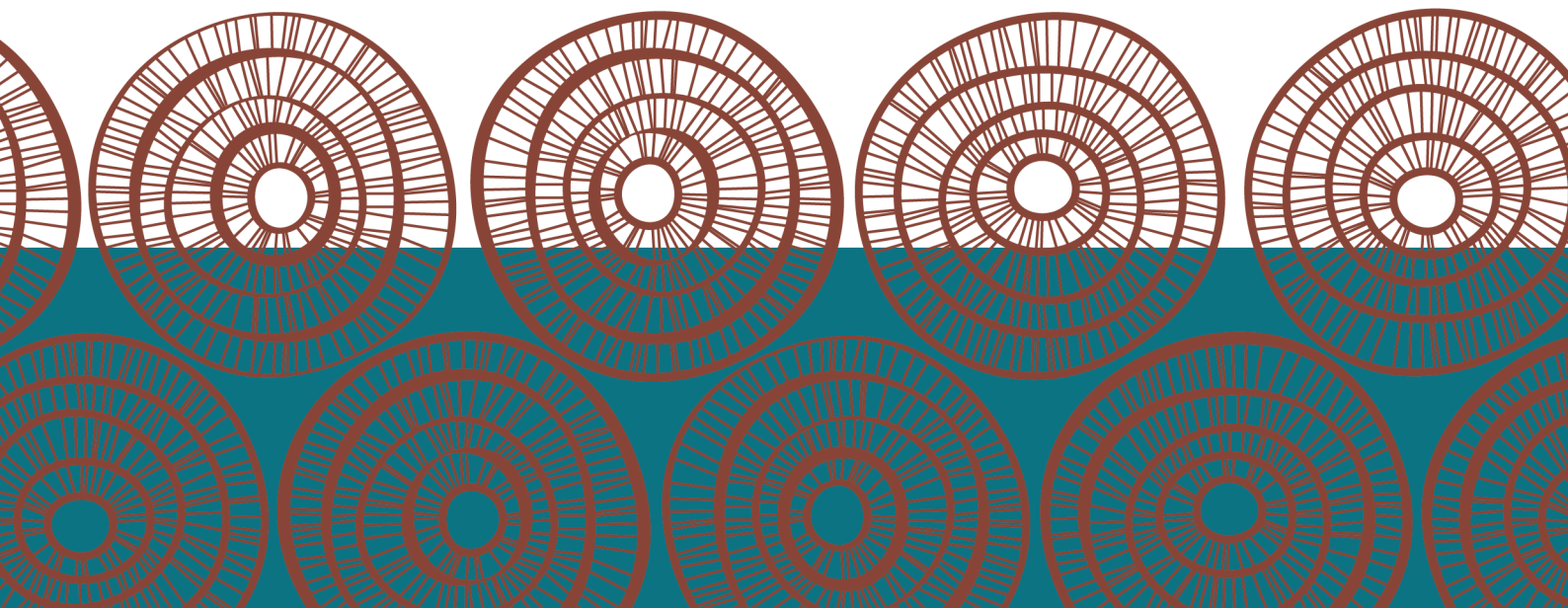


# SABI Learning Review

## AJABU ADVISORS

Chris Allan, Abdulai Darimani, Abu Jalloh, Atalie Pestalozzi

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# List of Acronyms

CHW	Community Health Worker
COM	Capabilities, Opportunities, Motivations
COM-B	Capability, Opportunity, Motivation – Behaviour model
CMC	Community Management Committees
CPS	Citizens' Perception Survey
CHC	Community Health Centre
CSO	Civil Society Organisation
CWC	Child Welfare Committee
DC	District Council
DO	District Officer
DFID	Department for International Development
DHMT	District Health Management Team
DMO	District Medical Officer
DPO	District Planning Officer
FCDO	Foreign, Commonwealth & Development Office
FGD	Focus Group Discussion
FMC	Facility Management Committee
FO	Field Officer
FQSEP	Free Quality School Education Programme
FISP	Frontline Service Provider
FSU	Family Support Unit
GDPR	General Data Protection Regulation
GESI	Gender Equality and Social Inclusion
GoSL	Government of Sierra Leone
IP	Christian Aid Implementing Partner
LC	Local Council
KII	Key Informant Interview
MBSSE	Ministry of Basic and Senior Secondary Education
MDA	Ministry, Departments and Agencies
MLGRD	Ministry of Local Government and Rural Development
MoHS	Ministry of Health and Sanitation
MoPED	Ministry of Planning and Economic Development
MoF	Ministry of Finance

MoU	Memorandum of Understanding
MSWGCA	Ministry of Social Welfare, Gender and Children's Affairs
MTR	Mid Term Review
NGO	Non-Governmental Organisation
NDP	National Development Plan
NES	National Engagement Strategy
PC	Paramount Chief
PHU	Peripheral Health Unit
PRSP	Poverty Reduction Strategic Plan
QPR	Quarterly Progress Report
RADA	Rehabilitation and Development Agency
RD	Restless Development
SDDirect	Social Development Direct
SDGs	Sustainable Development Goals
SEND	Special Enterprise Development
SGBV	Sexual Gender Based Violence
SLSAV	Sierra Leone Social Aid Volunteers
SMC	School Management Committee
ToC	Theory of Change
WASH	Water, Sanitation and Hygiene
WDC	Ward Development Committee
YAV	Youth Accountability Volunteer

# Executive Summary

SABI is a multi-year citizen-led government accountability programme funded by UK Aid and led by Christian Aid designed to improve government services. Since 2016, the SABI programme has been working in all 16 districts of Sierra Leone to strengthen community-led accountability. It contributes to creating a more informed and empowered citizenry, and increases awareness of, and demand for, improved service delivery.

The programme has been implemented by a consortium led by Christian Aid, including Restless Development (RD), Social Development Direct (SDDirect), and Humentum from the United Kingdom, and Local Implementing Partners FOCUS 1000, Rehabilitation and Development Agency (RADA), Social Enterprise Development (SEND), and Sierra Leone Social Aid Volunteers (SLSAV). As the SABI programme is ending, Christian Aid has commissioned this review to ascertain key learnings in relation to what has worked and what has not to inform strategic thinking for uptake by Foreign, Commonwealth & Development Office (FCDO) sister programmes and the wider sector.

**Overall, the programme demonstrated that citizen demand for improved services can result in better education, health care, and social protection when citizens are accompanied by an integrated programme of support.** The SABI programme moved citizens through a process of survey, situation analysis, prioritization of needs, understanding how to get the changes they seek, and accompaniment through ward, district, and even national levels. The hundreds of concrete results that citizens achieved occurred thanks to this well thought out and well managed process. This success was based on the trust built among citizens and local authorities and service providers, which has been in short supply in recent years, most notably during the Ebola crisis. There was broad consensus among participants and outside observers that District Councils, Ward Development Committees, and front-line service providers are responding more effectively to citizens.

SABI's patient approach was the key to the success of the programme: starting with communities and building capacity and motivation to act, helping them find opportunities to influence the quality and quantity of services, and helping them to follow up at ward, district, and sometimes national level. The programme successfully countered citizen feelings of disempowerment and apathy, and strengthened their ability to hold service providers and local authorities to account

What were the key approaches and activities that produced this result? The following lists them briefly.

- The programme had effective partners.
- The programme used effective methods.
- While the programme focussed on community, ward, and district levels, there were notable achievements with national government.
- The Citizen Perception Survey (CPS) data showed how citizens see important issues in health, education, and social protection.
- The programme effectively promoted inclusion of youth, women, persons with disability and other marginalised groups in social accountability processes.
- The programme enhanced partnership and collaboration

Since the programme is ending, only some of the benefits are likely to be sustained. Those changes which are based in the capacity and attitudes of people are likely to carry on. Primary among these are beliefs: a renewed sense of agency among citizens, and an attitude on the part of service providers that their role is to serve citizens, rather than “doing them a favour by doing their jobs.” Practices like action planning, understanding of accountable governance pathways, media engagement, advocacy for rights to disability services, social inclusion, and the use of policy briefs represent ways of working that people have learned that will continue as long as they remain active in public life.

Other changes which require funding or considerable organisational resources are less certain to carry on. Regardless of their value – which is high – activities like the Citizen Perception Survey (CPS), District and National Service Summit, joint monitoring visits, and small grants support are unlikely to be sustained.



## Recommendations

These recommendations are made for the benefit of funders, development partners, central and local government service at the local, national and international levels, and communities and citizens.

### General Programming Recommendations

1. The SABI programme demonstrates that services improve because people are better able to articulate their needs and know how to work to make them come to fruition. Any programmes seeking to improve service delivery should incorporate the SABI practices that build capacity at community, ward, and district level of citizens to understand the issues, generate data, **build trust in public service institutions, and generate concrete, feasible plans of action.**
2. **Build capacity at District Councils** through organizational development interventions. Possible tools from the SABI programme are Policy Literacy Sessions, joint monitoring visits with Ministry and MDAs, District Service Summits, social inclusion practices, and Citizen Perception Surveys.
3. **Build capacity of Ward Development Committees** through organizational development interventions. Possible tools from the SABI programme are Policy Literacy Sessions, guidance on the role and function of Ward Development Committees, and social inclusion practices.
4. **Provide support to national level policy analysis and advocacy** to align ministry policies with the demands of citizens and needs of local authorities.
5. **Support civil society organisations** to continue to promote accountability from local to national level. Support might take the form of grants programmes to support local staff and activities or promotion of networks for organizational development or advocacy.
6. Programmes to promote accountability of services should **adopt and expand the approach to gender equality and social inclusion** to promote Sustainable Development Goal 5, Achieve Gender Equality, Social Inclusion and Human Rights for all. Specifically, programmes should a) model the change they want to see in inclusion in their practices; b) ensure that all programme partners practice inclusive approaches and use gender and social inclusion-sensitive analysis and monitoring, evaluation, and learning methods, and c) encourage collective learning about ways in which pathways of accountability differ for men, women, and excluded groups.
7. **Create a strategic communications plan** for all accountability-oriented programmes to publicize successes and spread the message that participation and accountability work can be effective.

### Recommendations for Government

8. **Support development of a sustainable Citizen Perception Survey** for use by Ministry, Departments and Agencies, District Councils, and frontline service providers. The survey could be adapted to the amount of funding available, and integrated into planning for all service providers and policy maker.
9. **Develop a score card** based on the Citizen Perception Survey data and lessons from the programme implementation. The score card should identify key performance indicators for service providers for use by local and national authorities, citizen groups, and service providers themselves. A simple format emphasizing key, easily assessed indicators should be easy to use and understand. Results of the community score cards could be published annually by central government agencies to determine best performing local councils and fostering positive competition in service delivery.
10. **Complete the decentralization process** to clarify and streamline decision making roles among district councils and MDAs. Funding and authority should be aligned so those who bear the duty to regulate and provide services have the resources available to fulfil their responsibilities.
11. A specific department or departments and personnel of the local councils should be clearly identified and entrusted with the responsibility to follow-up and coordinate the **effective incorporation of the relevant achievements, lessons and experiences of the SABI programme into the medium-term plans of the Councils.**
12. Central government Ministry, Departments and Agencies should collaborate with the Local Councils to **institutionalize the joint monitoring visits and District and National Service Summits** as forums for coordinated delivery on improved services, accountability, and decentralization.
13. **The Ministry of Basic Education and Senior Secondary Education should adopt and incorporate gender equality and social inclusion strategies and insights into its curriculum** as a long-term measure for promoting social inclusion.

# I. Introduction

## A. Background

SABI is a multi-year citizen-led accountability programme funded by UK Aid and led by Christian Aid designed to improve government services. The programme commenced in July 2016 and was scheduled for completion in June 2020, but has been extended through an Accountable Grant Arrangement through March 2021 on a reduced scale and scope. A key part of the extension is to generate learning on what works and share with Foreign, Commonwealth and Development Office (FCDO), FCDO sister programmes, and other interested parties in the wider sector such as the World Bank.

Since 2016, the SABI programme has been working in all 16 districts of Sierra Leone, in 94 wards, 54 chiefdoms and 610 communities. The programme strengthens community-led accountability, contributes to creating a more informed and empowered citizenry, and increases awareness of, and demand for, improved service delivery.

The programme has been implemented by a consortium led by Christian Aid. Members of the consortium are Restless Development (RD), which led the youth programme of consultations, surveys, and planning at community level; Social Development Direct (SDDirect), which provided technical support on Gender Equality and Social Inclusion (GESI) issues; and Humentum, which provided technical support in financial management. Local Implementing Partners were FOCUS 1000, which focused on change at national level, and Rehabilitation and Development Agency (RADA), Social Enterprise Development (SEND), and Sierra Leone Social Aid Volunteers (SLSAV), all of which led engagements and accountability work at ward and district level. The Campaign for Good Governance worked at national level until 2017. For the first year of the programme, BBC Media Action led awareness raising through radio programming.

The SABI programme is in its last months of implementation and has commissioned this review to ascertain key learnings in relation to what has worked and what has not. This review will test assumptions and will assess understanding of SABI approaches and methods, challenges, and lessons to date to inform strategic thinking for uptake by FCDO sister programmes and the wider sector.

## B. Objectives of the Review

The overall purpose of the assignment is to review the SABI programme. Specifically, the review is to:

- a. Assess the effectiveness of the SABI design and approach to create change as envisioned in the programmatic Theory of Change (ToC).
- b. Consider challenges in programme implementation and any reasons why expected changes were not brought about (if that is the case).
- c. Identify key lessons and assess the potential for replicability and scaling up in seeking to apply SABI approaches and processes in future in Sierra Leone.

## C. Main Research Questions

A summary of the main research questions for this Learnings Review is as follows:

1. **Effectiveness: To what extent is the theory of change for SABI valid and justified based on the available evidence? Which SABI approaches/processes/strategies/activities have been most effective for each of the following outcomes?**
  - a. Building the capability, opportunity and motivation of targeted citizens to hold their District Councils and Service Providers to account
  - b. Building the capability, opportunity and motivation of Local Councils, Ward Development

Committees and front-line service providers to better understand and effectively respond to the needs of citizens

- c. Influencing the opportunity and motivation of national Government to better respond to the needs of citizens
- d. Enhancing accountable relationships between citizens and state service providers; and leading to improvements in service provision within target communities
- e. Facilitating enhanced inclusion of youth, women, persons with disability and other marginalised groups in social accountability processes

## 2. Sustainability:

- a. Which of these changes are likely to continue into the future?
- b. What activities or approaches contribute most to sustaining these changes? Which SABI approaches/processes/strategies/activities can be taken up by other programmes?

## 3. More Detailed Questions:

- a. What value (or not) of the implementing partners being civil society organisations bring at all levels?
- b. How necessary was it to collect data on citizen perceptions? Did SABI's data collection mechanisms diminish pressure for Government to improve its own data and M&E systems?
- c. What assumptions did the ToC make about government ability to respond to increased citizen demand and awareness, and were these assumptions valid?
- d. How has the programme managed any gap between raised awareness and demands that were unmet? In these cases, how did staff or officials handle it?



## II. High-level Conclusions

This section summarizes the take home conclusions of the programme. Findings and evidence for them appear in more detail in section IV.

Overall, the programme demonstrated that citizen demand for improved services can result in better education, health care, and social protection when citizens are accompanied by an integrated programme of support. The SABI programme moved citizens through a process of survey, situation analysis, prioritization of needs, understanding how to get the changes they seek, and accompaniment through ward, district and even national level. The hundreds of concrete results that citizens achieved occurred thanks to this well thought out and well managed process. This success was based on the trust built among citizens and local authorities and service providers, which has been in short supply in recent years, most notably during the Ebola crisis.

The SABI Theory of Change held up well. Intervention at local level successfully countered citizen feelings of disempowerment and apathy, and strengthened their ability to hold service providers and local authorities to account. Hundreds of local demands – such as improved service at health centres, registration of new schools with the Ministry of Education, more responsive local authorities – were successfully met. The assumptions of the Theory of Change were valid, though some often did not hold up when there was a mismatch between community priorities and the ability of ward, district, and service provider staff to fulfil their demands. The Theory of Change assumed that focus on capacity, opportunity, and motivation of citizens, local authorities, and service providers would improve services, even if other necessary changes were beyond the control of the SABI programme. In practice, this was often true, but in many cases the solutions to problems lay in funding and policy issues at national level, where change moves much slower than at local level.

The strongest result of the programme was building the capability, opportunity, and motivation of targeted citizens to hold their District Councils and service providers to account. A number of approaches and activities produced this result.

**The programme had effective partners.** Restless Development, Focus 1000, RADA, SEND, and SLSAV all performed well in developing and implementing the plan, adapting to changing circumstances, and bridging communities with service providers at many levels. Christian Aid's leadership helped the consortium and implementing partners weather several important changes: reduction in budget by £1.7 million in 2017, the 2018 election (which included both a disruption of work during the campaign and as the new government took shape), slow implementation of the decentralization policy, and COVID-19.

**The programme used effective methods.** The programme used a whole menu of methods from community to national level: Transect Walk, Open Community Meeting, Awareness Raising Tools, Policy Literacy Sessions, Citizen Perception Survey, Community Mapping, Data Collection Planning, Problem Priority Matrix, Accountable Governance Pathways Mapping, Action Planning. These methods were complementary and reinforcing. The key product at the local level was Action Planning, supported by the other methods. Building Capability, Opportunity, Motivation – Behaviour (COM-B) analysis with GESI into the planning process diagnosed problems and prioritised them, pointing to potentially effective pathways to change. The review interviews and focus groups highlighted the value of the following in the programme's success:

- Awareness raising of citizens on their rights
- Data availability from the survey on citizen perceptions
- Capacity building of Ward Development Committees
- Development of action plans
- Inclusion of women, persons with disability, and youth
- Meeting with service providers

It is difficult to imagine that the many successes in improved service delivery could have been achieved without the patient, thorough approach of all parts of the SABI system. Generating trust and a spirit of collaboration does not come about by doing a survey or creating a list of demands. Instead, it comes of building relationships from grassroots to national level, strengthening the ability of people to understand what is happening and articulate their needs, and to engender a spirit of collaboration rather than confrontation that seeks solutions

together.

**Success was predominantly at community and ward level.** Given the Theory of Change's focus at the local level, it is not surprising that that is where the most impressive results were. While there was effective work beyond communities and wards, results drop off in frequency and impact as you move up through district and national level.

**There was broad consensus among participants and outside observers that District Councils, Ward Development Committees, and front-line service providers are responding more effectively to citizens.**

There is of course variation across districts and service providers within districts, but documentation showed overall service provision and citizen satisfaction has improved. Ward Development Committees visited showed progress in managing their roles and responsibilities. By 2020, only two of 16 districts had not incorporated Ward Development Committee action plans into their development plans.

**Participants in the review all pointed to the Citizen Perception Survey (CPS) data to show how citizens see important issues in health, education, and social protection.** The data provided a firm foundation for diagnosis and action, from local to national level. At local level it was fed back to communities in the form of easy-to-understand infographics, and started off the action planning process. At district and national level in particular, it lent an empirical basis to demands for improvement. It took some time to figure out how to make CPS data most effective – especially to make it GESI sensitive – but by the end of the programme, SABI staff and partners had figured out how to do it and used the data well.

**While the programme placed less emphasis on work at national level, there were notable achievements with national government.** The primary one was the increased opportunity for dialogue and understanding of issues from local perspectives through National Service Summits and joint monitoring visits. By examining local demands, CPS data, and national priorities, the programme focused on the production of four National Engagement Strategies (NES) in Education, Health, Social Protection, and Governance. The success of these strategies was based on work from community level up, and on a strategic examination of what government could achieve given its priorities and resources.

**The programme effectively enhanced inclusion of youth, women, persons with disability and other marginalised groups in social accountability processes.** This ability to introduce concepts and practices of inclusion across the country was a high point of the programme. It promoted and documented increased participation of women, persons with disability, and youth in community events, Ward Development Committees, monitoring committees for front-line service providers, and District and National Service Summits. People in these groups showed increased confidence to insist on accountability among health care and education service providers. Participants pointed to cultural shifts toward inclusion – practices of accessibility to meetings, clinics, and schools, and inclusion of diverse membership in public events and discussion occur now as a matter of course. The programme also promoted internal organisational progress with partners in safeguarding policies and awareness creation among staff. One gap that became clear was that persons with disability are still struggling to hold social protection service providers accountable because most of the social protection service providers are at district level, and they only travel to the wards to implement activities.

**The programme enhanced partnership and collaboration.** The programme design and implementation contributed to enhanced partnership and collaboration between central and local government Ministry, Departments and Agencies (MDA) service providers, citizens and local communities, and civil society organisations working together for improved service delivery to citizens and communities. This collaborative approach contributed in a large measure to establishing trust, which hitherto was quite low, especially during the struggle with Ebola. For instance, the interviews and focus groups revealed the growth of tight relationships between Ward Development Committees, Chiefdoms and local communities, which is a far-reaching contribution towards a functioning decentralised service local governance. Similar improved relationships were observed between civil society organisations (CSOs) and central government agencies at the national level. Documents also reveal inevitable ongoing conflicts between some players<sup>1</sup>, but overall, the trend was for improved relationships across the country.

<sup>1</sup> See for example Mid Term Review of The Project "Strengthening Community-Led Accountability to Improve Service Delivery in Sierra Leone (SABI)," 28th April, 2019.

# III. Description of the Methodology

The review used a mixed methods approach. The Theory of Change and the Logical Framework provided structure for the inquiry, framing both our approach and how the results were organised. Given the brief time allowed for this review – five weeks – there was limited time for primary data collection. As a result, the method focused on key documents, interviews with important stakeholders, and focus group discussions at the community level to assess the programme.

The Terms of Reference provided clear and specific review questions, which the learning review team used to structure interviews, analysis, and the report. The following lays out approach and methods for the conduct of the SABI Learning Review overall.

**Review Design** – In the inception phase we worked with Christian Aid staff and partners to determine the course of the review. In this phase we laid out a plan for who specifically was to be involved and how they would engage with the process. This provided an opportunity to build in involvement of staff and partners in the review.

Uncertainty around precautions due to COVID-19 meant the Work Plan and Budget were designed to be flexible to adapt to changing conditions. Changes in COVID-19 precautions during the review did not require any changes to method.

**Ethics** – The review team adhered to Christian Aid’s safeguarding policy, confidentiality policy, and code of conduct in carrying out this review. The team ensured that vulnerable groups were not placed at risk due to the interviews and focus groups. The SABI Gender Equality and Social Inclusion (GESI) strategy, which includes a thorough analysis of risks involved in working with SABI’s target groups, was used by the review team to prepare a risk mitigation matrix prior to the start of work. For all interviews and focus groups, participants signed Informed Consent forms, and were given an opportunity to discuss them with the team. All interviews and focus groups were confidential, and thus no one interviewed is identified by name in this report. Where cited, interviews do not identify the location or date of the interviews, since planning for the field work was open and shared with numerous people.

**Regular Calls** – The learning review team organised an inception call with Christian Aid on January 28, 2021 to present the general understanding of the terms of reference for the review, our approach, and plan for the entire review. The call also provided the opportunity for a shared understanding of the reporting and administration of the review. The inception call workshop allowed the space to affirm these and the various contact persons for the entire duration of the review.

The review team also met with SABI staff by phone every week, and conducted a separate internal meeting weekly as well. The review team conducted an internal “writeshop” at the end of data collection to share insights and discuss findings and conclusions.

**Desk Review of Documents** – Desk review was a key source of collecting data for this review. The review team conducted a desk review of the relevant SABI documents, in particular programme documents covering the period of the programme inception to the end of 2020. The purpose of the review was to enable the review team to familiarise themselves with the programme and in particular to identify the significant milestones and lessons based on implementation experience from the local to the national levels. The review team obtained a total of 62 documents from the SABI Programme Team, which included programme logframe, programme Theory of Change, GESI reports, Mid-Term independent review, learning reviews, monitoring reports, workshop reports, and SABI Programme annual and quarterly reports and reviews for 2016 to 2020.

**Key Informant Interviews (KII)** – The learning review team conducted confidential interviews with key informants. The terms of reference provided that the key informant interviews should be conducted with the donors, programme staff, programme partners, and external stakeholders, including representatives of Ministries, Departments and Agencies at the national and local levels, District Councils, Ward Committees, Chiefdoms, citizens and local communities.

The team used the key learning review questions and task areas in the Terms of Reference to prepare a set of

semi-structured interview guides appropriate to different categories of the key informants (Appendix 1) as the main instrument for the interviews. The review team spoke to a total of 35 key informants (16 at national level and 14 at district level) from the 5<sup>th</sup> to the 17<sup>th</sup> of February 2021.

The review team purposely selected a number of key informants from each of the stakeholder groups in the list for interviews provided by the Christian Aid Team. The demographic distribution of the key informants interviewed was approximately 25% female and 75% male across all interviewed groups: district (4 female and 10 male) and national (4 female and 12 male) levels, and Implementing Partner staff (1 female and 4 male). We obtained perspectives and stories from the key informant interviews, and recorded the interviews for our own quality checks.

District and ward level key informants were selected from five districts: Kenema in the East; Western Area Rural in the West; Bombali in the North, Port-Loko in the North-West; and Bo in the South. All were interviewed face-to-face while observing COVID-19 protocols, except for in Bombali, where interviews were held by phone due to time constraints. These districts and interviewees were chosen in consultation with SABI programme staff to ensure a mix of higher and lower performing districts.

**Focus Group Discussions (FGD)** – The review team conducted Focus Group Discussions with citizens in SABI communities in four districts: Kenema, Western Area Rural, Port-Loko, and Bo. In the focus groups, 32% were female and 68% male (8 of 25 participants), of which five were persons with disability. In each focus group, women and persons with disability were represented. Review team member Abu Jalloh conducted the discussions in English and Krio. In all of these, COVID-19 hygiene and social distancing protocols were duly adhered to.

Except in the case of the focus groups and the face-to-face interviews at the community level, we spoke to interviewees using virtual means: telephone, WhatsApp, Zoom and Microsoft Teams. Virtual means were used in view of the COVID-19 pandemic and the need to comply with the applicable protocols on travel, social distancing, hygiene, and public gathering.

**Approach to Managing Data** – The review team stored all data in a secure Dropbox directory. Only the review team members have access to the directory. Interview notes were not labelled with individually identifiable information. Instead, they were coded, with the master code sheet stored separately. The recordings were all password protected and similarly coded.

Interview subjects gave written consent on an Informed Consent form (Appendix 2) or gave verbal consent to be interviewed. Only those consenting to be interviewed were allowed to participate in the interviews. At the completion of the project, in keeping with the European General Data protection Regulation (GDPR) guidelines, the review team will destroy all the personal data within three months.

**Analysis and Reporting** – The review analysed the information collected from the review, key informant interviews and focus group discussions to provide a clearer overview of what happened in the programme. The analysis was structured by the review objectives and questions from the Terms of Reference. It included a comparison of findings on the themes to those in the SABI learning documents, annual reports, FCDO annual reviews, evaluations, and other documents which assessed SABI's programme achievements and challenges. The analysis also includes summarizing interview notes into themes, findings, and conclusions in a narrative report, and preparation of graphs, charts, and other data visualizations to enhance clarity in the report. The team organised a digital review with Christian Aid and FCDO staff to review these conclusions and adjust them for a final report.

**Risk and Mitigation Strategy** – The review team assessed the risks and provided mitigation strategies for the review process. Of the risks identified, only one occurred: "Delays in setting up interviews lead to interviews extending beyond Week 2 of February." The team conducted one interview after this date. Since the team exceeded the target of interviews, and spoke to representatives from all stakeholder groups, there was no material effect on the review for potential interviewees who never responded to repeat inquiries from both the review team and SABI staff.



# IV. Findings

## A. Effectiveness

This section addresses the following review questions:

1. To what extent is the theory of change for SABl valid and justified based on the available evidence?
2. Which SABl approaches/processes/strategies/activities have been most effective for each of the following outcomes?

### 1. Theory of Change

The SABl Theory of Change outlined in December 2019<sup>2</sup> is as follows:

**Impact:** Citizens access more and better-quality services and government achieves its Recovery Plan objectives.

**Outcome:** Increased awareness of and demand for improved services, with service providers increasingly accountable to citizens for results.

**Outputs:**

**Output A.** Strengthened and coordinated community feedback mechanisms to demand better services.

**Output B.** Citizens and duty bearers innovate to resolve service delivery challenges locally.

**Output C.** Improved understanding of what works through conduct and dissemination of research and assessments.

**Output D.** Improved data on service delivery outcomes and recovery plan progress.

Overall, reports, reviews, focus groups, and interviews all document that these four outputs contributed to increased awareness and demand for improved services, and increased and improved quality of government-provided services, especially in education and health. The outcome and impact of programme implementation exceeded the stated milestones, except for small grants.<sup>3</sup>

### 2. Building the capability, opportunity and motivation of targeted citizens to hold their District Councils and Service Providers to account

There is evidence from interviews, focus groups, learning reviews, annual reports and annual reviews of increased awareness on the part of citizens targeted by SABl of their rights, privileges and civic responsibilities, particularly in respect of service delivery focussing on health, education and social protection. Results at the level of local citizen action were the strongest outcome of the programme. Figure 1 shows the proportion of results at all levels. The majority of actions were targeted at the local level, and the majority of results were recorded there as well.

<sup>2</sup> SABl Theory of Change, Behaviour Change for Improved Governance, December 2019

<sup>3</sup> SABl Annual Reports, July – December 2016, January – December 2017, January – December 2018, March 2019 – February 2020.



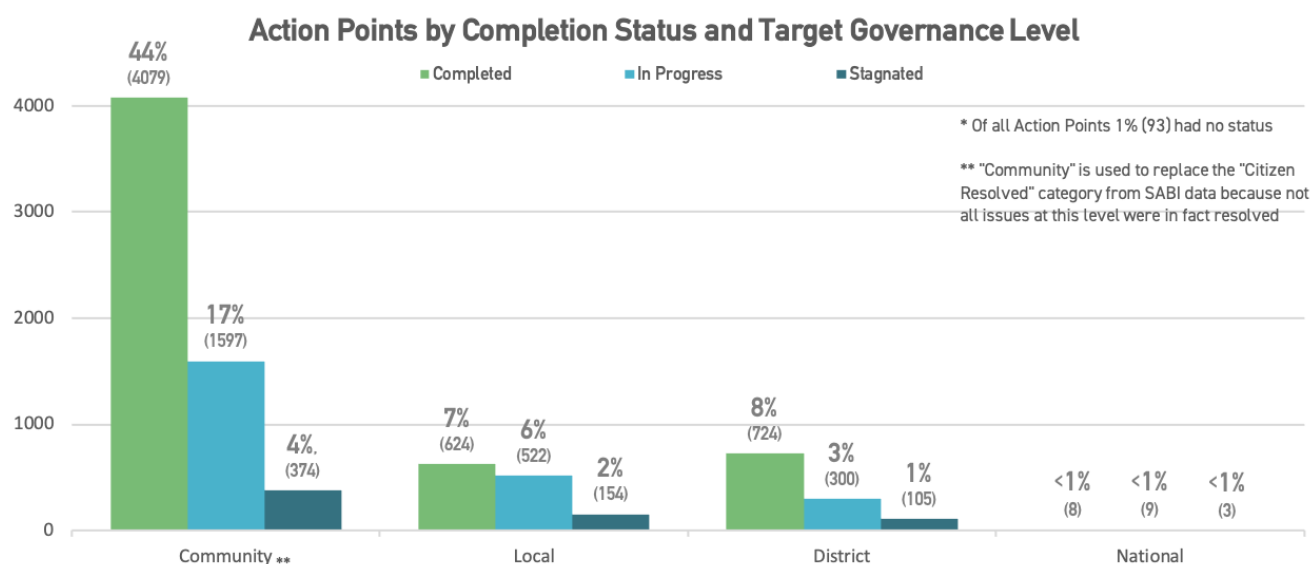


Figure 1. SABI data shows a majority of Action Points targeted community level issues and of those, more than half were completed.

While there were many ways that the programme achieved results, there were some common themes that ran through most of them.<sup>4</sup> Figure 2 shows a typical change story of one community in which SABI partners raised awareness at community level, facilitated community members to analyse their issues and propose solutions, built capacity of communities and local authorities, and helped engage stakeholders up the chain.

## Mayola Community Improves Healthcare Access with a new Health Facility

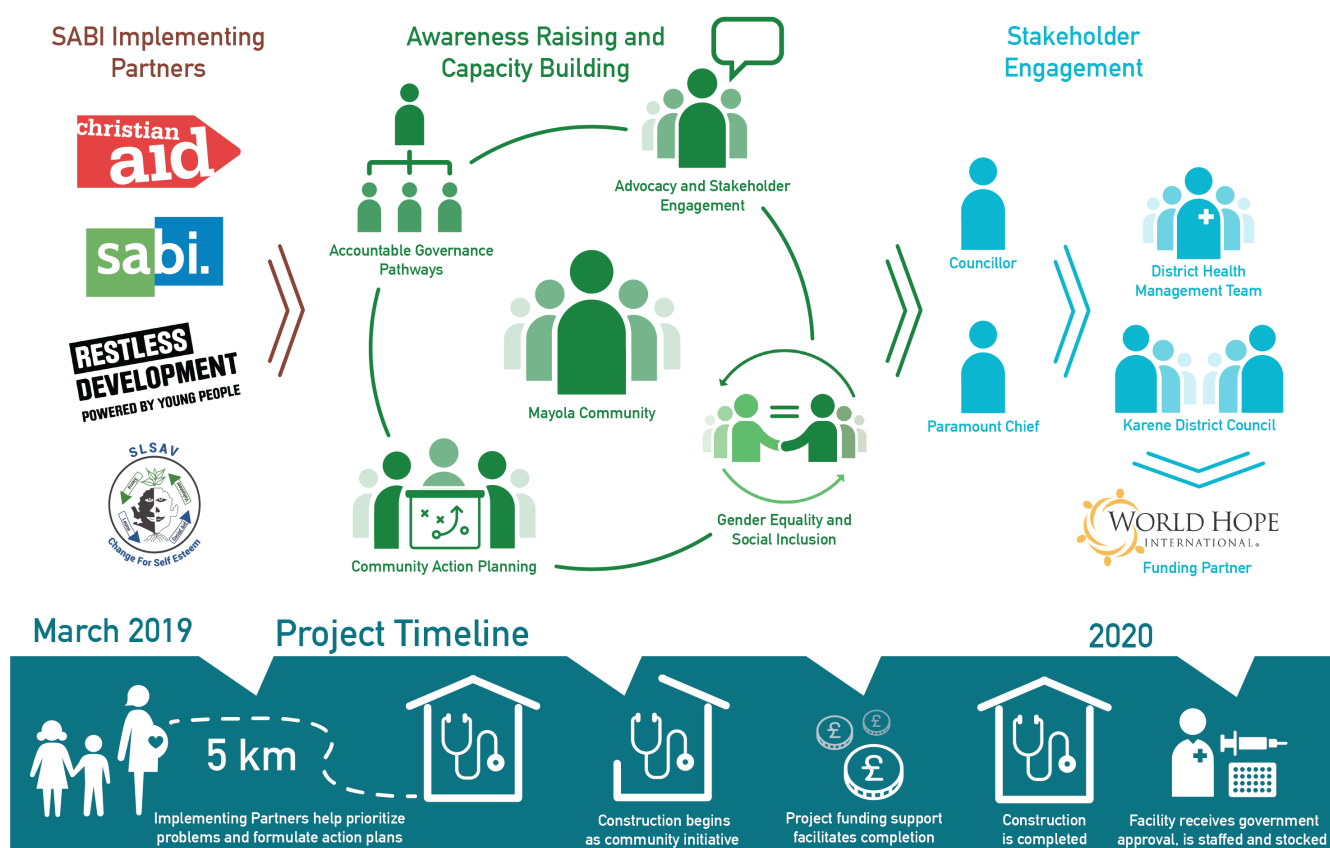


Figure 2. The Mayola community's change story shows how with SABI's help and support from district level duty bearers, they were able to build, staff and stock a health facility to serve approximately 2000 people.

Another change story shows how communities across Sierra Leone worked with implementing partners to engage district and national level stakeholders, including the Ministry of Basic and Senior Secondary Education (MBSSE), to clarify school approval procedures for the Free Quality Education programme launched in 2018. The result was a national level policy document to delineate the process and requirements (see Figure 3).

<sup>4</sup> Analysis by the Learning Review team using the SABI database of action plans.

# Communities Improve National School Approval Process

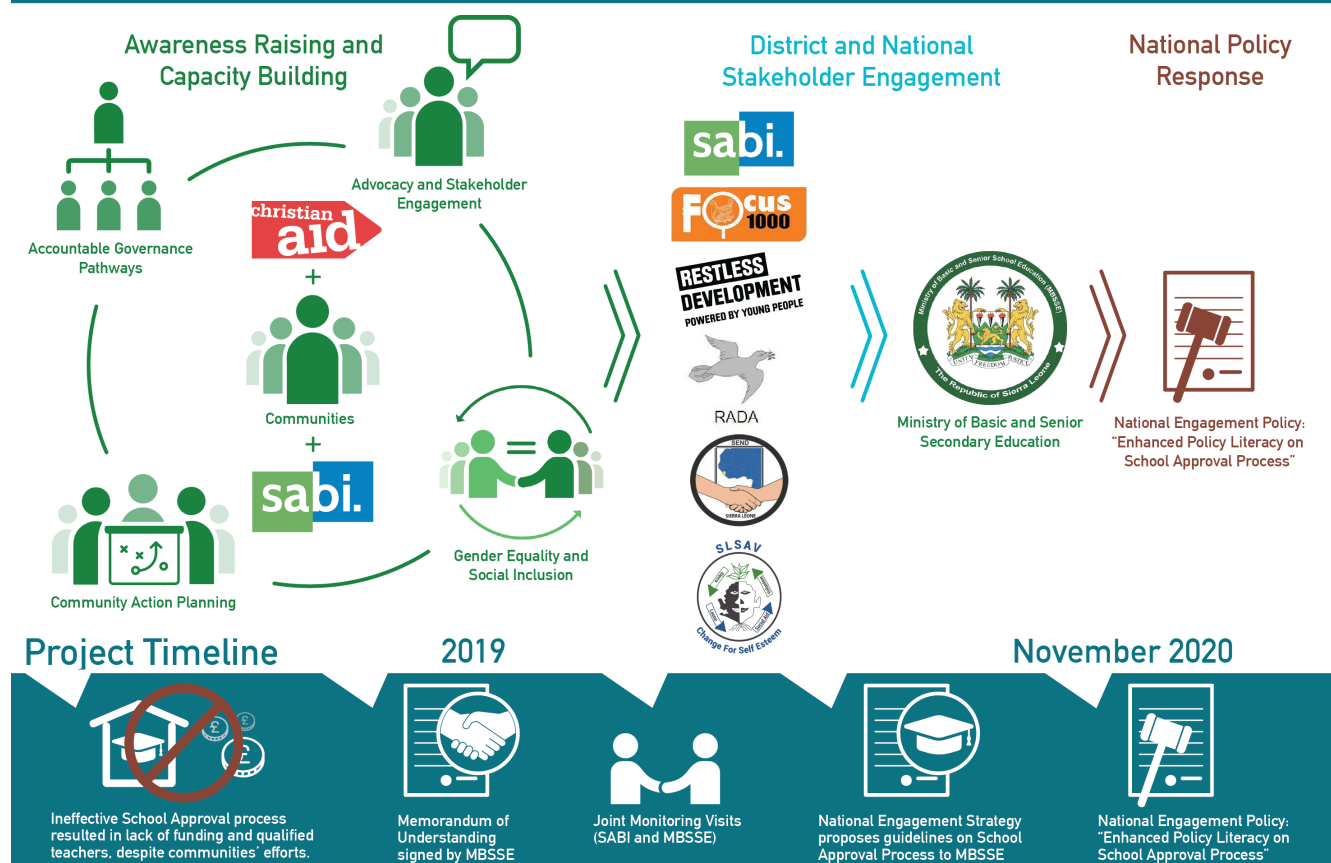


Figure 3. Demands for national level response to education policy were met by the Ministry of Basic and Senior Secondary Education (MBSSE) with the release of a National Engagement Policy titled “Enhanced Policy Literacy on School Approval Process.” Communities worked with SABI and national partners to produce a National Engagement Strategy on Education that influenced government officials to take action.

In working at community level, SABI focused on two of the pillars of the COM-B framework – *capability* and *motivation* – recognizing that in many ways *opportunities* for change required interventions beyond its control. As a result, Christian Aid developed an array of tools to facilitate community engagement, organizing, and planning. Tools included Transect Walk, Open Community Meeting, Awareness Raising Tools, Policy Literacy Sessions, Citizen Perception Survey, Community Mapping, Data Collection Planning, Problem Priority Matrix, Accountable Governance Pathways Mapping, Action Planning. All were useful in raising capability and motivation, and some helped discern where the opportunities were, especially the Policy Literacy Sessions and Accountable Governance Pathways Mapping.<sup>5</sup>

The COM-B framework was useful in making realistic plans for achieving results on local priorities. The framework breaks situations down into capability, motivation, and opportunity, allowing participants to analyse what the most likely pathways to change are, and how to put their plans together. Interviews with Implementing Partners and consortium members all pointed to the usefulness of the method in helping community members find their way.

It is noteworthy that while SABI tools have been used throughout the world in building community capacity, the SABI Theory of Change also recognized a difficulty that has been particularly acute in Sierra Leone: after years of poor government service, civil unrest, and a brutal Ebola epidemic, “*citizens have expressed their feelings of disempowerment and lack of trust.*”<sup>6</sup> The result was a programme that started from the premise that people do not feel able to act. Using these tools, one programme staff member noted that of all the results produced, “*one of the big things, which is kind of intangible, but you notice it if you visit and you talk to people, is the level of agency that has been created.*”<sup>7</sup>

<sup>5</sup> The SABI Field manual: Data collection and action planning for accountable governance, February 2019 provides a wealth of detail on these methods.

<sup>6</sup> SABI Theory of Change

<sup>7</sup> Key Informant Interview, February 2021

The key to the programme was the integrated use of this methodology first at community level, led by Restless Development, and then at ward and district level, led by RADA, SEND, and SLSAV. Figure 4 shows graphically how this process built from the Citizen Perception Survey conducted by the Youth Accountability Volunteers through national level dialogues facilitated by Focus 1000, all guided by Christian Aid. Without this integrated programme, many of the pieces are far less effective. For example, the YAV programme is just cheap labour without the community development methodology used and the infographics put together by the programme. The accompaniment of communities and their action plans at ward and district level by RADA, SLSAV, and SEND are key to the success of action points. And Focus 1000 at the national level speaks with little credibility without the steady build up of demands from community, to ward, to district, to national level.

## Demand-led Model for Improving Service Delivery

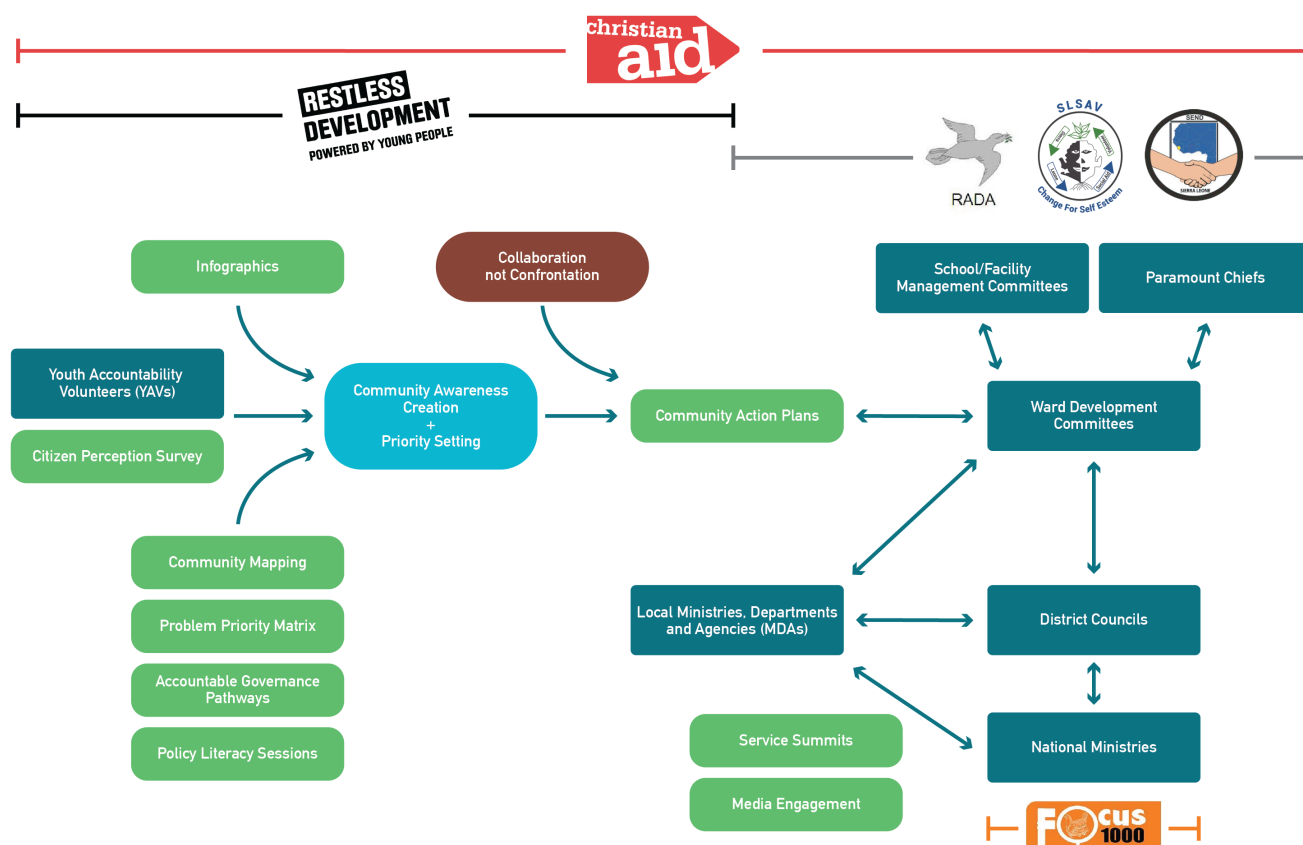


Figure 4. Demand-led Model for Improving Service Delivery

The mode and frequency of engagement of SABI partners with partner communities has resulted in improved understanding of issues in relation to their rights, civic responsibilities and service delivery. The understanding has enabled citizens and local communities to take ownership of their priority issues, realizing that community problems are *their* problems, thereby increasing their involvement in decision-making. *“Before then they will say it was not their problem and they would even go ahead to steal materials meant for the community projects,”* noted one SABI staff member.<sup>8</sup>

Understanding came in two forms: how to organise and take action on one hand, and on the other, understanding what services they have a right to, such as free health care for under-five children, pregnant and lactating women; free birth certificates for children after birth; and free education and free medical care for persons with disability as stipulated by the 2011 Disability Act. Ministry staff cited the value of three policy briefs on these issues that SABI developed that clarified government legislation in plain language for people. Key to developing this understanding were the 3600 infographics developed by the SABI programme based on the CPS data and community discussions.<sup>9</sup>

Focus Group Discussions were unanimous on the activities that contributed to these improvements:

1. Awareness raising of citizens on their rights
2. Survey on citizens perception

<sup>8</sup> Key Informant Interview, February 2021

<sup>9</sup> A brief video describing these infographics can be found at <http://sabi-sl.org/infographics-help-sabi-amplify-voices-in-communities-with-low-literacy/>

3. Capacity building of Ward Development Committees
4. Development of action plans
5. Inclusion of women and youths
6. Meeting with service providers<sup>10</sup>

Of these, the actions plans are the key to collective citizen action. The February 2020 Annual Review noted that *“the percentage of ‘good quality’ action plans of 90% represents more than a doubling compared to 43% in 2018, and a significant increase over the 2019 level of 82%.”*<sup>11</sup> One interviewee pointed out that through *“action planning in which citizens and service providers meet and discuss various actions to take, we developed 10,369 action points to be implemented over the life of the SABI programme, and 95% of these had good quality benchmarks because these actions points were realistic, achievable and time bound. 62% had reached completion point at the end of the SABI programme.”*<sup>12</sup> Implementing partners monitored these plans, so the programme always had a good idea how each was progressing, and what was needed for trouble shooting. All were tracked in a database, which is the source of much of our data on the action plans in this review.

Supporting the work of Implementing Partners, the review found a strong communication and media engagement strategy. Partnership with media outlets has been established through the Kombra Media Network providing visibility for the SABI programme. Not only does this partnership enhance understanding, it serves as a forum and provides motivation for targeted citizens to voice their concerns and hold their District Councils and service providers to account. The network has been following up and participating in SABI activities, reporting on them both in print and electronic media while also producing quarterly reports.<sup>13</sup>

The role of Non-Governmental Organisations (NGOs) in the programme also merits comment. In many programmes focused on service delivery and governance, NGOs are recruited to deliver services to make up for poor government service provider performance. In this case, *“a fundamental part of SABI’s theory of change is that dependency on NGOs and donors for service delivery undermines accountable governance if elected officials and civil servants are not engaged in the process of improving services. As such, it trains youth accountability volunteers to avoid directly including NGOs in action plans.”*<sup>14</sup> SABI recognizes a role of NGOs in support and in provision of services, but only as engaged by the government institutions responsible for service delivery. This increases the likelihood of NGOs supporting government responsibilities, rather than replacing or duplicating them.<sup>15</sup>

### 3. Building the capability, opportunity and motivation of Local Councils, Ward Development Committees and front-line service providers to better understand and effectively respond to the needs of citizens

Reports and interviews showed a consensus that District Councils, Ward Development Committees, and front-line service providers are responding more effectively to citizens. There is of course variation across districts and service providers within districts, but overall service provision and citizen satisfaction has improved. By February 2020, 86% of all respondents surveyed said they had moderate trust or above in services. This is an increase of 37% over three years from the baseline survey from January 2017.<sup>16</sup>

The same annual report shows that service providers responded to 40% of substantive service delivery issues in ward action plans. Further, of the 615 action points planned by the wards for 2020, Ward Development Committees reported that service providers responded to 75% of them, defined as ‘incorporating into a plan, or allocating budget or making funding available, or giving a justified response to the community (we can or cannot do it).’ This level was a 40% increase over that of the previous year. Examples include: 1) rehabilitation of a dam to provide access to water in Largo community in ward 46, Nongowa chiefdom, Kenema district, 2) approval of the construction of a Peripheral Health Unit (PHU) in ward 411 in Western Area Urban District, and 3) approval of a health facility in ward 297 of Bo District, Njagbahun community.<sup>17</sup>

<sup>10</sup> Focus Group Discussions, February 2021

<sup>11</sup> DFID, SABI Annual Review, April 2020

<sup>12</sup> Key Informant Interview, February 2021

<sup>13</sup> Note that the original media partner for the programme was BBC Media Action, which made strong contributions in the first year of the programme. It dropped out of the programme at the time of the budget cuts in 2017.

<sup>14</sup> Kas Sempere, SABI Learning Review – Triggering citizen action, Christian Aid’s Research, Evidence and Learning team.

<sup>15</sup> SABI Theory of Change

<sup>16</sup> SABI Annual Report, March 2019 – February 2020

<sup>17</sup> SABI Annual Report, March 2019 – February 2020



At ward level, the 2019 Mid-Term Review found that four of the five Ward Development Committees visited showed progress in managing their roles and responsibilities, and that 39% of their action plans showed progress in implementation, about the same as in 2019. Challenges at ward level identified by the Mid-Term review included continued inactivity of some Ward Development Committees and hampered performance due to lack of travel allowances.<sup>18</sup>

Three years later in 2021, a SABI staff member observed that Ward Development Committees now “*know what to do when citizens bring up issues – they escalate and engage with accountability process.... When we started SABI, the ward would only think of the ward headquarter town, now they reflect on the whole ward – it has broadened their perspective so the whole community benefits.*”<sup>19</sup>

At district level, the 2019 Mid-Term Review found that the District Planning Officers, Councillors from the District Council and Ministry, Departments and Agencies (District Health Management Team, Ministry of Basic and Senior Secondary Education and Ministry of Social Welfare, Gender and Children’s Affairs) in all five districts investigated had noticed visible results. They agreed that they were motivated by the changes taking place in the SABI communities and the push they feel from citizens and their leaders. One SABI staff member noted that “*we were not surprised... but I will use the word overexcited with their response because you hear councils telling us that... ‘we always wanted citizens to come to us and talk to us but we never thought of developing a learning product [like accountable governance pathways] that could make that work.’ So SABI did that.*”<sup>20</sup> By 2020, only two of 16 districts had not incorporated Ward Development Committee action plans into their development plans.<sup>21</sup>

Challenges at district level included the fact that some councillors were not aware of their roles and responsibilities following elections held in 2018, since they had not been properly inducted to their roles. Also, in a number of districts, there is poor coordination between development partners, civil society organisations, councils, ministries, departments and agencies and frontline service providers, and CPS data is not used at some District Offices. Most important, in many areas, the process of decentralization was not yet effective, since there were too many different reporting and financial transfer lines among district councils and line ministries and agencies.<sup>22</sup>

All stakeholders interviewed pointed to the value of CPS data to show perceptions of issues in health, education, and social protection. It provided a firm foundation for diagnosis and action, yet it took some time to figure out how to make it most effective. The production of CPS data was too slow to help much in the first half of the project, and the CPS data in 2017 was not GESI sensitive. SABI staff improved it after that, breaking out data by sex, and eventually hiring a data expert to manage the data. SABI made the data available on its website in a user-friendly manner, with data displayed in easy-to-read charts and graphs.

#### 4. Influencing the opportunity and motivation of national Government to better respond to the needs of citizens

The focus of the Theory of Change and thus most programme activity is at community and ward level, so there has been less focus on the function of national government. Having said that, from the beginning the programme Christian Aid staff engaged the Presidential Recovery Team, and developed Memoranda of Understanding with several ministries. With the loss of its national partner and budget cuts in 2017 and the election of a new government in 2018, the programme slowed down its work at national level temporarily. From November 2018, the programme renewed its attention to the role of the central government, and has made some significant contributions, facilitated by Focus 1000.

In the original plan, work on national government was meant to take place largely at district level with local service providers like health clinics and government schools. From 2019 this line of work was expanded in a number of significant ways in Freetown. Christian Aid renewed Memoranda of Understanding with the Ministry of Health and Sanitization (MoHS), Ministry of Basic Secondary School Education (MBSSE), and Ministry of Social Welfare Gender and Children’s Affairs (MSWGCAs), rebuilding constructive relationships. SABI also organized National Service Summits, providing a forum for participatory dialogue among a range of partners

18 Mid-Term Review of The Project “Strengthening Community-Led Accountability to Improve Service Delivery in Sierra Leone (SABI),” 28th April, 2019.

19 Key Informant Interview, February 2021

20 Key Informant Interview, February 2021

21 SABI Annual Report, March 2019 – February 2020

22 Mid-Term Review



and stakeholders including MDAs, Local Councils, WDCs, communities and citizens, CSOs and SABI consortium partners to bring together actors from local to national level. At these summits, participants engaged in dialogue across these levels, including with several government Ministers. The CPS data proved important at these summits, as they laid out clearly what the experience of citizens is with government services at local level. Interviews repeatedly pointed to the enthusiasm of the Minister of Education in particular for this data, who called on Ministry staff to use it in formulating strategy. If and how it was actually used was not clear, but all participants agreed that having clear, objective data was important for motivating change and targeting it to priority areas.

SABI organized similar events at district level. District service summits were carried out in all 16 districts, giving citizens the opportunity to directly interact with district councils, MDAs, and other stakeholders responsible for service provision within each district. Participants were drawn from a cross section of citizens within SABI operational areas and included, chiefs, women, youth and persons with disability.

Focus 1000 also led the development of four National Engagement Strategies drawn from the CPS findings and actions planned across the country:

1. **Education:** The goal is for the MBSSE to develop simple and clearly articulated guidelines on the process of approving schools for support under the FQSE.
2. **Health:** The goal is for the MOHS to update and revamp awareness-raising on no user fee for Under 5s, detailing what is covered by the Free Health Care Initiative (FHCI).
3. **Social Protection:** The goal is to contribute to the establishment of a Medical Board that will certify persons with disability through the National Commission for Persons with Disability (NCPD).
4. **Governance:** The goal of this NES is for MLGRD to enhance the effectiveness of WDCs through the provision of Standard Operating Procedures (SOPs) and identification cards for WDC members.

These campaigns were targeted and doable, and engendered cooperation between SABI and ministries rather than confrontation.

One outcome of this work was summed up by a SABI staff member: *“Education has gone the farthest – it created a policy guide on school approval process. Clarifying this process was attributed to SABI efforts.”*<sup>23</sup>

Figure 5 shows the proportion of actions targeted by level of governance.<sup>24</sup> Two thirds were at Level 1, where

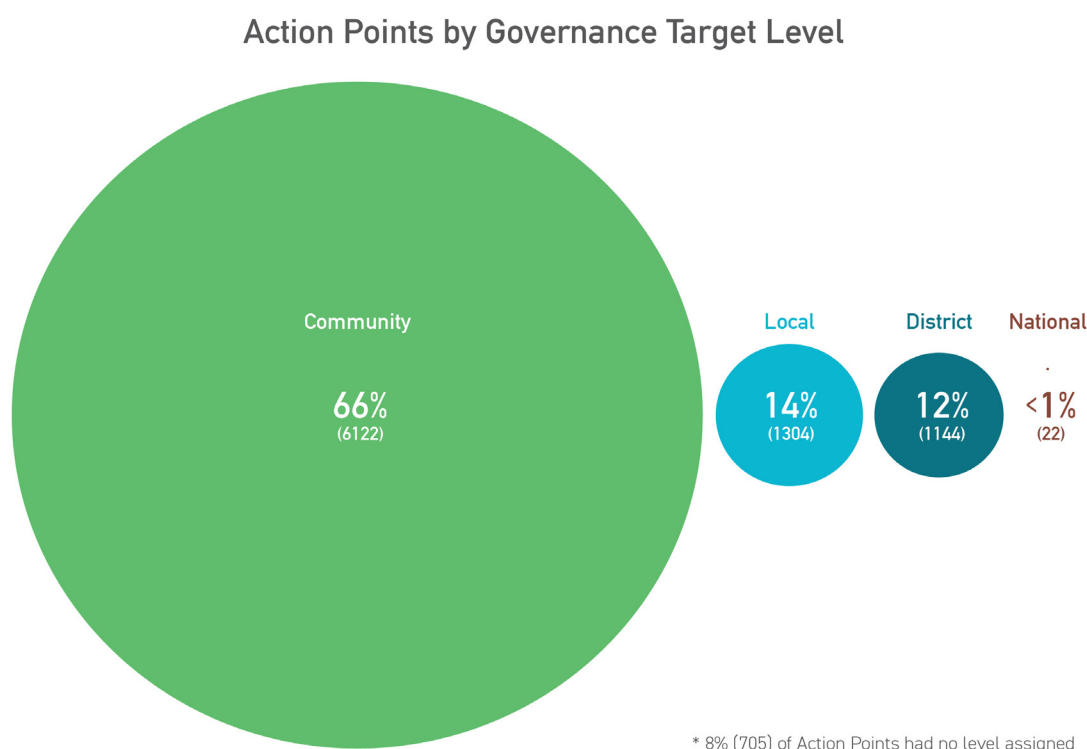


Figure 5. Action Points by Target Governance Level

<sup>23</sup> Key Informant Interview, February 2021

<sup>24</sup> The Theory of Change defines four levels of governance targets for the database: Level 1: Citizens resolve the issue themselves; Level 2: Citizens lobby local decision-makers; Level 3: Citizens lobby district decision-makers; Level 4: Citizens lobby national decision-makers.

citizens resolve issues themselves. Another 14% were at ward level or below, Level 2, where citizens lobby local decision-makers. Local decision-makers were typically parents' associations, and women and youth leaders, front-line workers such as teachers and nurses, supervisory committees mandated by the government, such as school, health and village committees, and local authorities including paramount chiefs, ward councillors, and Ward Development Committees. Nearly as many were targeted at District level. Note that simply counting actions is not the same as assessing impact. While fewer than 1% of actions were targeted at national level, results on National Engagement Strategies had the potential to affect far more people than local actions. These figures are all consistent with the action envisioned by the Theory of Change.

## 5. Enhancing accountable relationships between citizens and state service providers; and leading to improvements in service provision within target communities

The institutionalized joint monitoring between SABI and government ministry staff has facilitated accountable relationships between district level partners and stakeholders and national MDAs helping to increase responsiveness from service providers. The review noted that 37 such joint monitoring visits were conducted involving a variety of stakeholders across the country. During these visits, citizens had the opportunity to ask questions and receive answers to their questions. It was a breakthrough in government-citizen relations that *"In each of the communities they visited the residents had equal access to the venue where they met and all those that participated were given equal opportunity to ask questions, make suggestions or share their experiences in accessing (or lack of) education and health services for themselves or their child/ward."*<sup>25</sup>

Overall, these activities attempt to address a major challenge in linking district to national level. *"SABI has faced difficulties with lack of time to really do the intensive work that has been achieved in connecting communities to districts. The linkage problem seems to be a combination of government changes (an election took place and government changed) which led to the need to reengage across the board; the inertia of MDAs to get things done; and COVID-19 challenges. Many of these problems and issues were beyond SABI sphere of influence or control."*<sup>26</sup> The steps discussed above – joint monitoring visits, National Service Summits, Memoranda of Understanding, etc. – certainly improved the situation. But absent a strategic advocacy plan and effort with a variety of other influential actors, SABI is limited in its ability to move the needle on these issues on its own.

## 6. Facilitating enhanced inclusion of youth, women, persons with disability and other marginalised groups in social accountability processes

Nearly all interviews cited the increased awareness of GESI issues and the adoption of GESI-sensitive practices such as inclusion in meetings and accessible meeting venues. By 2020, more than 65% of the individuals who participated in developing and reviewing action plans were women, persons with disability, or young people.<sup>27</sup> SABI's insistence on representation at all meetings, and seating arrangements that made meetings accessible, was a constant reminder to partners of the importance of the issue. Interviews noted that inclusion became a regular practice across the districts.

Monitoring committees for front-line service providers all include women, persons with disability, and youth. And while the sample size is small, two women elected as ward councillors in 2018 said their election was in part due to SABI raising awareness that women can also perform well when given leadership positions.

The generation of data, in particular the CPS, was one of the biggest tools for inclusion and motivating citizens to participate. The data emboldened and helped women, youth and persons with disability to point out specific issues of interest, and offered concrete proposals for overcoming the issues. For example, persons with disability identified the lack of certification and the issuing of identification cards as a major obstacle for their access to free medical service and free education at the tertiary level.

SABI also promoted the introduction of safeguarding policies within the project among partners. While many policies have been established, gaps remain in uptake.

Focus Group Discussions in communities showed that young people are effectively holding education service providers (schools and teachers) accountable. When teachers are not punctual in school, young people report it immediately to the ward development committee. Young people also have representatives in the ward

<sup>25</sup> DFID, SABI Annual Review, April 2020

<sup>26</sup> SABI: GESI, Power, Politics and COM-B, December 2020

<sup>27</sup> SABI Annual Report, March 2019 – February 2020

development committee and other various committees within the ward.

A woman in one of the focus groups also reported reduced levels of Gender-Based Violence (GBV). A participant noted that *“since the SABI programme raised awareness around human rights and steps to follow to access the law when a wife is beaten by her husband, husbands in our community who were used to beating up their wives have stopped because they know if they do, the wives will take them to the law.”*<sup>28</sup> While this finding only came up in one focus group, this finding is suggestive, since the Mid-Term Review also reported a similar finding. *“There is an increased awareness on gender-based violence and teenage pregnancies,”* the Mid-Term Review noted. *“In 4 of the 5 wards, various stakeholders confirmed that according to them, cases of gender-based violence and teenage pregnancies have reduced. A gender officer working in one of the districts quoted: ‘Rape cases have gone down from 250 in 2015 to 50 in 2018. Paramount Chiefs take these cases much more seriously now.’”*<sup>29</sup>

When discussed at the March 2019 National Outcome Harvesting workshop at the time of the Mid-Term Review, participants objected to this finding by pointing out that in some communities, stigmatisation against persons with disability still takes place, and persons with disability are not included, and that in some districts Gender Based Violence is still an issue and affects women and young girls. This objection seems to set the bar for reducing Gender-Based Violence unrealistically high. While of course it would be best if such discrimination and violence were eliminated, it may be a significant finding that both women and government officers report a reduction, and that this reduction was echoed in a focus group discussion for this review. More investigation of these issues is warranted to see how widespread it is.

Interviews and focus groups revealed one continuing gap in accountability. Persons with disability are still struggling to hold social protection service providers accountable because most of the social protection service providers are at district level, and they only travel to the wards to implement activities. As a result, persons with disability lack the capacity to engage with the social protection service providers directly and hold them to account.

This change in attitudes and practices seemed to have made more progress at local level than national. The December 2020 learning review noted: *“On GESI changes there is a real need to build the motivation and desire from the community level but equally the central government has low capacity, little time and limited interest in checking how services are delivered at local level in GESI sensitive ways – let alone auditing its own GESI ways of operation.”*<sup>30</sup>

This fact may reflect the emphasis of the programme on change at the local level. It may also reflect the fact that the SABI programme did not attempt to achieve the most ambitious change in its strategy, “structural transformation.” Given constraints of time and resources, the SABI GESI strategy aimed at “strategic gender and inclusion,” which focuses more on individual empowerment than on systemic change. These levels are summarized in Figure 6.<sup>31</sup>

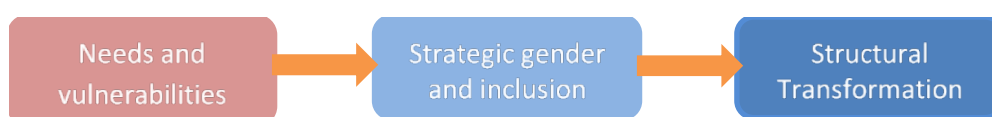


Figure 6. SABI's Conceptual Framework for Gender Equality and Social Inclusion

## B. Sustainability

### 1. Which of these changes are likely to continue into the future?

Assessment of sustainability is necessarily speculative, but we can base our speculation on a few principles. The definition of sustainability from the Organisation for Economic Co-operation and Development (OECD) Development Assistance Committee (DAC) is *“The continuation of benefits from a development intervention*

28 Focus Group Discussion, February 2021

29 Mid Term Review

30 SABI: GESI, Power, Politics and COM-B

31 Social Development Direct, Gender Equality and Social Inclusion Strategy: Strengthening Community-Led Accountability to Improve Service Delivery in Sierra Leone (SABI), February 2019

*after major development assistance has been completed. The probability of continued long-term benefits. The resilience to risk of the net benefit flows over time.”<sup>32</sup>* Applied to the SABI programme, we can consider two basic types of changes, which have different trajectories:

1. Changes inherent in individuals, such as new skills and changed attitudes, and
2. Changes in processes, procedures, and policies, which are likely to endure even as individuals come and go.

SABI programme managers often distinguish between the “software” approach of SABI – changes in people and institutions – rather than a “hardware” approach, of material things like vehicles, buildings, and money. Most of the sustainable changes noted below are based on the continued use of new “software,” whether individuals who have learned new ways, or institutions like Ward Development Committees, which have changed their practices. The following analysis discusses first which changes are likely to be sustained, and then those which are unlikely to continue.

### **Changes which are likely to continue into the future**

**Action Planning** – The SABI programme has facilitated the evolution of participatory action planning at District, Ward and Community levels. District Councils are incorporating Ward Development Committee action plans, prepared at the ward levels with the cooperation of chiefdoms and communities. The Ward Development Committees, chiefdoms, and communities are excited to see their priority issues reflected in the plans of their District Councils and National Ministry, Departments and Agencies. This excitement is a major boost of interest for the participatory action planning to continue. The additional evidence that even non-SABI targeted communities are adopting and demanding the SABI participatory action planning approach suggests that these practices will continue.

**Understanding of accountable governance pathways** – A key piece of the SABI programme was helping citizens discern what strategies they needed to undertake to make their demands become reality. The capacity building and awareness creation, quality data from the citizens perception survey, and the participatory action planning process all have enabled citizens and communities to identify and familiarize themselves with the routes that citizens can take to raise issues about service delivery challenges. The review noted that identification and pursuit of accountable pathways is ongoing, and will continue after the life of SABI. The review also observed these new skills and practices are being adopted at ward and district level. For example, during the field interviews, it was reported that the District Medical Officer for Bombali District went to the field and came back with a lot of notes he took from interaction with communities, who reported their perception of health workers, and also identified gaps with respect to health care delivery in the district.<sup>33</sup>

**Media Engagement** – The media engagement of local communities facilitated by the SABI programme has not only broken the isolation of some communities, but also has engendered self-confidence to speak out and be heard. This confidence will continue to inspire ordinary citizens to voice their concerns and demand service delivery. The learning review found out that various media houses in Sierra Leone have developed citizen-led phone-in programmes through which they frequently reach out to communities, chiefdoms, Ward Development Committee members, and staff of District Councils and central government MDAs service providers. Social media is being used to promote dialogue and engagement on service delivery to citizens and communities.<sup>34</sup>

**Advocacy for Disability Rights to Services** – Success in advocacy to make health care and education at the tertiary level (as stipulated by the 2011 Disability Act) free for persons with disability has energized people to seek out and demand these services. This practice will likely continue because the SABI programme has equipped citizens, duty-bearers, and the Disability Union with adequate data and information about the rights of persons with disability. Three organizations – SLUDI, the National Commission for Persons with Disabilities, and Focus 1000 – have already been coordinating efforts to continue the advocacy beyond the life of SABI.

**Citizen Sense of Agency** – Under the capacity building and awareness programmes, citizens and communities, District Councillors, and Ward Development Committees have acquired knowledge and skills that instilled in them a sense of agency and the ability to make changes. The experiences, knowledge, and skills acquired by women, youth, and persons with disability have created a more level playing field for them to continue to make

<sup>32</sup> OECD/DAC Network on Development Evaluation, Better Criteria for Better Evaluation Revised Evaluation Criteria Definitions and Principles for Use, 10 December 2019

<sup>33</sup> Key Informant Interview, February 2021

<sup>34</sup> Key Informant Interview, February 2021



demands for access to quality service delivery. Communities are raising questions, women are demanding inclusion in decision-making – particularly at the local level – and persons with disability are demanding for their rights to free health services and fee-free tertiary education. Local and central government MDA service providers are responding to these demands. Of all the changes brought about by the programme, this one undergirds many, encouraging people to speak up and act.

**GESI Approach** –The GESI approach has created awareness, and instilled a sense of responsibility and confidence among central and local government, Ward Development Committees, CSOs, and citizens and local communities for inclusion. Through the GESI approach many people in local communities have embraced the idea of social inclusion, and are taking practical steps to ensure representation of women, persons with disability and youth at their meetings. Inclusion has become a global campaigning issue and there is need to promote linkages with existing constituencies of women, youth and disability unions for sustainability. As with all cultural shifts, not all have shifted their thinking or practices to the same extent, but it is unlikely that these new ways of working will fade entirely.

**Increased Capacity of Ward Development Committees (WDCs)** –The SABI programme has catalysed the Ward Development Committees (WDCs) to engage other duty bearers for improved service delivery by preparing local action plans. The learning review noted from interviews that through action planning Ward Development Committees have improved their performance as part of the decentralized system of local governance in Sierra Leone. The improved function at the ward level will continue at least for the immediate to medium term, but may fade as membership turns over if not institutionalized with encouragement from the Ministry of Local Government and Rural Development and District Councils.

**Use of Policy Briefs** – Citizens, local communities, persons with disability, youth, Ward Development Committees, CSOs and the media will continue to benefit from and use the policy briefs that were developed and disseminated. These briefs clarify three government policies on Free Health Care Initiative, Free and Quality Education, and Social Protection, including gender, youth and disability, and will serve as advocacy tools. The learning review noted that SLUDI is already using the policy briefs on health and education as campaigning tools.

**Youth Accountability Volunteers (YAVs)** –The SABI programme supports the recruitment and training of about 122 youth accountability volunteers in 9 monthly rotations. In the past three years the programme successfully recruited and trained 358 youth volunteers. For the unemployed youth, this is a life-forming programme, but it is not clear how much of its function will be sustained. Christian Aid quarterly reports show that Restless Development has entered into an agreement with the Saving Lives programme to take over the volunteers, so the programme is likely to continue.<sup>35</sup> What remains to be seen is if it will retain its effectiveness. The review showed that these youths were able to be effective because they fed into a well integrated, professional programme that built trust, communicated clearly, developed feasible action plans, and followed up these action plans at ward, district, and national level. It is not clear to the review team if that wraparound programme will continue to support the youth.

### Changes which are unlikely to continue

**Citizen Perception Survey (CPS) Data** – All the different categories of actors interviewed by the learning review reported that the Citizen Perception Survey data was useful but unlikely to continue at the scale conducted by the SABI programme. The survey in its current form is too expensive to conduct and analyse without outside funding. Central and Local government MDA service providers reported they already were aware of some of the service delivery challenges and that similar data existed, though in different formats. However, that data is not presented in as accessible a format as the Citizen Perception Survey, which expresses results in a user-friendly format on the SABI website. The Citizens Perception Survey (CPS) has generated comprehensive data on service delivery outcomes, which has informed local to national level service providers, citizens and communities, donors, media and civil society organisations, providing a basis for specific actions such as the preparation of action plans, the identification of social disparities, and advocacy for the certification of persons with disability to enable them access free health and education services. Adoption of something like the Citizen Perception Survey by national ministries could continue this useful service.

**Annual National Service Summit** – The SABI programme has facilitated the Annual National Service Summits



as a forum for participatory dialogue on a range of service delivery issues and challenges. Interviews suggested that this summit is unlikely to continue unless there a transitional arrangement for continuity of the summit after the life of SABl is made. National ministries would need to fund and implement the summits for them to continue.

**Joint Monitoring** – The SABl programme institutionalized joint monitoring visits with SABl Implementing Partners and MDAs from the relevant sectors across the country. Particularly from the central government level, this joint monitoring is unlikely to continue after the life of SABl. Without SABl, there will be no funding for the joint activities, and arrangements have not been made for continuity by any of the participating central and local government MDAs or Implementing Partners.

**Small Grants Support** – Small grants support was a useful tool to help citizens and service providers collaborate to address service delivery challenges. The grant programme under Output B built the capacity of three NGOs, whose skills and approaches remain available to communities and the civil society sector. However, the demise of the grants programme – due to the high costs necessary to fund a set of civil society organisations requiring considerable institutional support – was a missed opportunity to build that capacity further. Without a set of strengthened NGOs at local level to continue to reinforce many SABl practices, many will fade. While there has been some progress in other African countries on generating domestic support for civil society organisations, it is difficult to see how sufficient funding would be available to continue to build the sector without outside donor support.

## 2. What activities or approaches contribute most to sustaining these changes? Which SABl approaches/processes/strategies/activities can be taken up by other programmes?

**Citizens Perception Survey (CPS) Data** – CPS data was ranked as the method that contributed the most enduring approach and activity triggering action, responses and sustaining momentum. The data was utilised by all actors from local to national level to communicate service delivery challenges to district and national government, engage in dialogue, and forge collaborative relationships. Figure 7 shows a sample of how the data was made available to the public on the SABl website.<sup>36</sup>

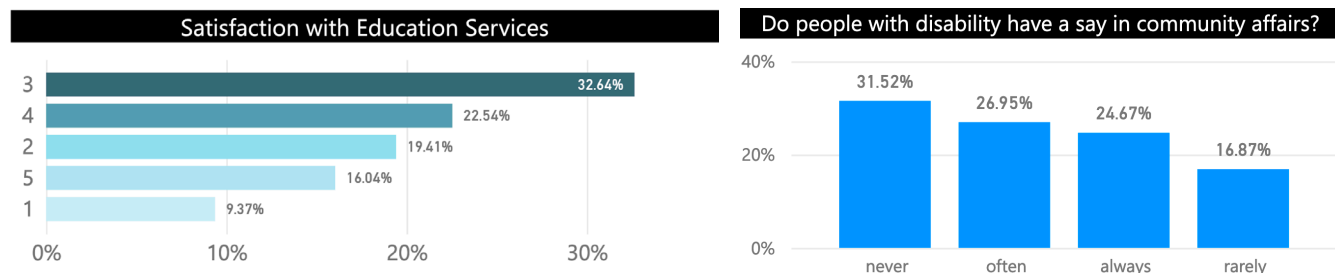


Figure 7. Samples of Citizen Perception Data available to the public

**Capacity Building and Awareness Raising Activities** – The whole set of capacity building and awareness raising activities were noted as the key to making and sustaining programme milestones, informing, communicating, and disseminating the very essence of the SABl programme. The capacity building approach has improved understanding and dissemination of what works through practice, analysis, learning, and reflection on practice.

**Use of Local Partners** – The use of local Implementing Partners was found to be valuable as the programme built on their local knowledge, skills, relationships, experience, toolkits, and exposure.

**Use of International NGOs** – The use of international NGOs like Christian Aid and Restless Development brought well-developed skillsets and fundraising ability (such as the funding for this programme) to the table. Their considerable experience and contacts elevated the quality of the programme to a very high level. However, as with most civil society organisations, use of outside donor funding exposes local groups vulnerable to end of funding cut-off.

**Constructive and Collaborative Relationships** – Interviews at all levels cited the constructive and collaborative relationships forged among Ward Development Committees, Local Councils, Ministries, Departments and Agencies, traditional authorities, citizens, and local communities as key to problem solving. It was not a given that this would happen: as one Implementing Partner staff member noted, “SABl was seen as a threat by MDAs, District Councils... giving citizens information while they don’t have the resources [to respond]. Giving

<sup>36</sup> <http://sabi-sl.org/community-data/>, accessed February 20, 2021



**2. The role of data – how necessary was the data collection set of activities to achieving the programme outcome, as written in the logframe? How important was it in getting MDA engagement? To what extent was did SABI's data collection mechanisms diminish pressure for Gov to improve its own data and M&E systems? Was it well understood that the data was meant to reflect citizen perception not substitute for routine gov data collection mechanisms?**

Interviews revealed that the data collection of the Citizen Perception Survey was an important part of the SABI programme. It served as the basis for building community awareness, identifying areas of weaknesses and challenges for service delivery, pointing out governance pathways, generating data for local level action planning and Monitoring and Evaluation, and affirming some of the perennial service delivery challenges known to central and local government MDA service providers. The process of the data collection also helped all the stakeholders to better appreciate the challenges and how to address them.

The learning review did not find evidence of government MDA service providers utilizing specific pieces of data, though there was indication from the Ministry of Education they would use it to inform their strategic review. However, interviews confirmed that most stakeholders felt the data affirmed the challenges with respect to service delivery. The data was important to get MDAs to engage. For instance, at the national level, the data was an important basis for SLUDI's engagement with MDAs on the certification of persons with disability. The data was equally critical in influencing the joint monitoring with MDA staff facilitated by Focus 1000, including providing issues for discussions during joint monitoring visits. At the local level, the data constituted important input for the action planning. SLUDI, for instance, found the data useful to inspire the Disability Union to mobilize around their rights to service delivery.

Data was one thing that government at the national level was most impressed with and found most useful. At ward or district level, the data affirmed the long-standing challenges of service delivery MDAs, and so was useful as an advocacy tool. However, government did not see SABI's data and the collection mechanisms as replacing their M&E systems or the need to collect their own data. The interviews showed that all the partners, including central government MDA service providers, understood well that the data was meant to reflect citizen perception, not to substitute for routine government data collection mechanisms. At the very least, government staff understood that the data could complement their own on specific issues and areas.

Data gave SABI, partners, and communities credibility with MDAs. The CPS reports were presented in a disaggregated format by sex, age, and disability, showing clearly and affirming the existing inequalities and social disparities that need to be addressed. This supported a sense of agency among women, youth, and persons with disability to demand inclusion.

**3. What assumptions did the ToC make about government ability to respond to increased citizen demand and awareness, and were these assumptions valid? If not, what does this mean for the programme and the ToC? Are there lessons from working primarily on the demand side of the accountability equation without equal effort through the same programme / mechanism on supporting government to respond. It was decided through SABI implementation not to increase support to councils; was this the correct decision? What significance was there for the ToC for SABI when the Presidential Delivery Team (PDT) (and FCDO's support to it) ended?**

The Theory of Change assumed that government would be able to respond to citizen inquiries and demands. It defined responding as incorporating the action into a plan, or allocating budget or making funding available, or giving a justified response to the community (they can or cannot do it). The farther the change was from community level, the less likely government was to be able to fulfil a demand, at least in the life of this project. Meeting demands at higher level typically involves changing budgets or policy, all of which takes more time than many local level changes. Had SABI engaged at national level through the whole programme the way it did after 2018, more might have been achieved, though the change of government after 2018 complicates speculation on this point. What we can say is two years is not much time for systemic change for any government.

Central and local government MDA service providers have the responsibility for service delivery to citizens and communities. The learning review noted that this duty of service delivery is mandatory, so the SABI programme

mechanism was not required for government to execute that duty of service delivery. However, the learning review noted that those mechanisms were complementary and supportive to government MDA service providers to balance the accountability equation by facilitating interaction between government and citizens demanding improved service. For instance, the programme has enabled government MDA service providers to manage gaps between raised awareness and demands that were unmet. During the joint monitoring visits and the annual national service summits, government MDA service providers took the opportunity to respond to citizens demands by explaining the limitations of what can be done with the resources available, health emergencies and the financial implications, and government policy shifts and the implications for service delivery.

Support to councils in terms of funding their activities might have sped change, but in an unsustainable way. Note that a European Union (EU) programme<sup>39</sup> does provide funding to District Councils (€12.1 million euros to six councils), so any SABI funding would have been swamped in those districts. This notwithstanding, a limited support assisting local councils in organisational development and capacity building, as opposed to running costs, would have been a useful investment.

The following are all the assumptions the Theory of Change listed.<sup>40</sup> Several did not prove to be valid in some cases, which required the programme to adapt its approaches.

## Assumptions:

### i. Citizens

- a. *COM-B analysis accurate and complete* – valid
- b. *Citizens will be able to find necessary resources to engage if capability and motivation factors are adequately addressed* – To the extent that “resources” here refers to resources such as time to meet, volunteers to follow up, etc., this assumption held true.

### ii. Local Government Authorities

- a. *COM-B analysis accurate and complete* – valid
- b. *Other interventions required, which are beyond the mandate of SABI, are delivered* – While there are many cases of success in this regard, there are also many other examples where no matter what communities or local authorities did, they were not able to address demands. Most commonly, there was a mismatch between the ability of communities to advocate for themselves at Ward Development Committees and District Council level, and the changes needed were under the authority and budgets of ministries, whose hands were often tied by lack of funds or inability to influence national policies.
- c. *SABI prioritization of Ward Development Committees and Local Councils is appropriate and other actors’ behaviours do not significantly impede change* – This assumption proved to be true in many cases. The action plan database shows progress or completion for 13% out of 15% of actions targeted at wards, and 11% out of 12% at district level. In some cases, progress was hindered by issues at higher levels. The Theory of Change would have been more robust if it had dug deeper into how change happens above ward and district level. Extensive efforts to influence national level policy and performance only got going in earnest in 2019, halfway through the programme life. While this approach produced some results, national level policy change normally takes several years and the mobilization of a wide variety of actors, within and outside of government. A planned extension for the programme would have allowed time for these changes, but the advent of COVID-19 curtailed the size and focus of the extension.

### iii. Civil Society

- a. *CSOs want to hold the Government of Sierra Leone to account for improved service delivery* – valid
- b. *CSOs have basic minimal standards for managing grant funds* – This turned out to be true, as demonstrated by the performance of the Implementing Partners and three grantees. Output B, grants to civil society organisations, was scrapped when DFID deemed it as poor value for money. The

<sup>39</sup> 11th EDF in Support to Civil Society and Local Authorities (“Decentralisation” Programme). Part of these funds are for developing improved revenue streams for districts, so it is possible that sustainability would be achieved.

<sup>40</sup> SABI Theory of Change; SABI Learnings Review Terms of Reference, 2020.



programme had not yet advanced to the stage of assessing their capacity to manage grant funds.

#### iv. Service Providers

- a. *Service providers have the systems and resources to bring about improvements on the basis of citizen feedback and complaints relating to service delivery* – valid, except when funding was lacking.
- b. *Service providers are willing to bring about improvements on the basis of citizen feedback* – valid.

One assumption that does not appear in the Theory of Change turned out to be an important factor: the assumption that the programme would be fully funded as approved. In 2017, DFID informed SABl managers that they needed to cut £1.7 million from the budget due to changes in UK Aid funding priorities, after a productive start up period. As a result, SABl cancelled grants to civil society organisations for FY 17-18, eliminated communications partner BBC Media Action, reduced the role of SDDirect in technical advice on GESI and Humentum in technical advice on management and accountability.

#### 4. Consequences of raising awareness and demand when these went unmet – did we see this resulting in decreases in trust and a further breakdown in relationships (and potential implications for cohesion and stability)?

SABl and Implementing Partner staff reported they were realistic with community members about what local authorities could and could not do, especially as the programme proceeded. As noted earlier, the programme provided various engagement avenues such as the Annual National Service Summits, joint monitoring visits, media engagement – especially radio FM call/phone-in-times – to enable government MDA service providers to dialogue with citizens and communities, provide answers to their questions and explain to them why some of their demands could not be met. The learning review noted that these responses, clarifications, and explanations were a demonstration of reasonable and transparent relationships that earned trust between government MDAs and citizens and communities.



# VI. Conclusions

*“SABI is succeeding in building the awareness and capacity of citizens and service providers and bringing them together to address service delivery challenges. The programme continues to foster greater transparency and trust between citizens and service providers leading to improvements in service delivery at local level. Women, youth and persons with disability are being included and empowered and there is evidence from interviews conducted during fieldwork and from reports and stories of change gathered by SABI, of wider attitudinal and behaviour change towards these groups as a result.”<sup>41</sup>*

This learning review has confirmed the summary quoted above from the DFID Annual Review of April 2020. It is rare that programmes seeking to bring about fundamental changes in complex systems achieve clear impact within a few years, but our conclusion is that the SABI programme did, as stated in its Theory of Change: “Citizens access more and better-quality services and government achieves its Recovery Plan objectives.”

For services, the programme achieved hundreds of concrete results for communities, from increased teacher presence in schools, approval of new schools for Ministry of Education support, more reliable replenishment of medications at health centres, to new opportunities to speak directly with government ministry staff. Many actions were not successful, of course, but the ability of citizens to achieve some results restored confidence in service providers and the power of citizen initiative.

The programme was most effective at local level, specifically Level 1, where citizens resolve issues themselves, and Level 2, where citizens lobby local decision-makers. Local decision-makers were typically parents’ associations, and women and youth leaders, front-line workers such as teachers and nurses, supervisory committees mandated by the government, such as school, health and village committees, and local authorities including paramount chiefs, ward councillors, and ward development committees. The programme also experienced some success at Level 3, district level, as demonstrated by the database of action plans.

Only 1% of actions were targeted at national level. Yet actions in Freetown have the potential to affect larger numbers of people or to make more fundamental change, so programme influence is not just a question of number of actions. There were no major policy changes made, but the programme did begin some important processes at national level that have high potential for widespread benefit. One example is the push to develop identification cards for persons with disability that will allow them to receive free medical care and free tertiary education. At district level, 14 out of 16 districts incorporated ward development plans from places organized by the SABI programme. This is a breakthrough for citizen participation and for government accountability.

Note that the work at district and national level was intended to bring authorities to respond to issues coming from communities and wards and, to very large extent they did that and were responsive. The national level work also focused on getting MDAs to focus on issues of priority to citizens, such as the school approval process.

On social inclusion, the programme showed great success in shifting cultural attitudes to the inclusion of women, persons with disability, and youth in public life. Focus groups and interviews both consistently pointed to the programme’s promotion of more respectful attitudes towards these groups, and, as important, changed practices in inclusion. Throughout the life of the programme, it became normal for all meetings to ensure not only that all groups were represented, but that events were accessible to everyone.

It is hard to say with certainty which of these changes will be sustained over time, and some will certainly fall by the wayside soon unless funds become available to support them. Those changes which are based in the capacity and attitudes of people are likely to carry on. Primary among these are beliefs: a renewed sense of agency among citizens, and an attitude on the part of service providers that their role is to serve citizens, rather than “doing them a favour by doing their jobs.” Practices like action planning, understanding of accountable governance pathways, media engagement, advocacy for disability rights to services, social inclusion, and the use of policy briefs represent ways of working that people have learned that will continue as long as they remain active in public life.

<sup>41</sup> SABI AR 2020 final version by DFID.pdf

Other changes which require funding or considerable organisational resources are less certain to carry on. Regardless of the value – which is high – activities like the Citizen Perception Survey (CPS), District and National Service Summit, joint monitoring visits, small grants support, and continued engagement of Youth Accountability Volunteers (YAVs) are unlikely to be sustained. However, since the concepts and methods for these activities have already been worked out, institutions like government or civil society organisations could readily pick them up and carry on if they have the funding to do so.

# VII. Recommendations Going Forward

These recommendations are made for the benefit of funders, development partners, central and local government service at the local, national and international levels, and communities and citizens.

## A. General Programming Recommendations

1. The SABI programme demonstrates that services improve because people are better able to articulate their needs and know how to work to make them come to fruition. Any programmes seeking to improve service delivery should incorporate the SABI practices that build capacity at community, ward, and district level of citizens to understand the issues, generate data, **build trust in public service institutions, and generate concrete, feasible plans of action.**
2. **Build capacity at District Councils** through organizational development interventions. Possible tools from the SABI programme are Policy Literacy Sessions, joint monitoring visits with Ministry and MDAs, District Service Summits, social inclusion practices, and Citizen Perception Surveys.
3. **Build capacity of Ward Development Committees** through organizational development interventions. Possible tools from the SABI programme are Policy Literacy Sessions, guidance on role and function of Ward Development Committees, and social inclusion practices.
4. **Provide support to national level policy analysis and advocacy** to align ministry policies with the demands of citizens and needs of local authorities.
5. **Support civil society organisations** to continue to promote accountability from local to national level. Support might take the form of grants programmes to support local staff and activities or promotion of networks for organizational development or advocacy.
6. Programmes to promote accountability of services should **adopt and expand the approach to gender equality and social inclusion** to promote Sustainable Development Goal 5, Achieve Gender Equality, Social Inclusion and Human Rights for all. Specifically, programmes should a) model the change they want to see in inclusion in their practices; b) ensure that all programme partners practice inclusive approaches and use gender and social inclusion-sensitive analysis and monitoring, evaluation, and learning methods, and c) encourage collective learning about ways in which pathways of accountability differ for men, women, and excluded groups.
7. **Create a strategic communications plan** for all accountability-oriented programmes to publicize successes and spread the message that participation and accountability work can be effective.

## B. Recommendations for Government

8. **Support development of a sustainable Citizen Perception Survey** for use by Ministry, Departments and Agencies, District Councils, and frontline service providers. The survey could be adapted to the amount of funding available, and integrated into planning for all service providers and policy maker.
9. **Develop a score card** based on the Citizen Perception Survey data and lessons from the programme implementation. The score card should identify key performance indicators for service providers for use by local and national authorities, citizen groups, and service providers themselves. A simple format emphasizing key, easily assessed indicators should be easy to use and understand. Results of the community score cards could be published annually by central government agencies to determine best performing local councils and fostering positive competition in service delivery.
10. **Complete the decentralization process** to clarify and streamline decision making roles among district councils and MDAs. Funding and authority should be aligned so those who bear the duty to regulate and provide services have the resources available to fulfil their responsibilities.
11. A specific department or departments and personnel of the local councils should be clearly identified and entrusted with the responsibility to follow-up and coordinate the **effective incorporation of the relevant achievements, lessons and experiences of the SABI programme into the medium-term plans of the Councils.**

12. Central government Ministry, Departments and Agencies should collaborate with the Local Councils to **institutionalize the joint monitoring visits and District and National Service Summits** as forums for coordinated delivery on improved services, accountability, and decentralization.
13. **The Ministry of Basic Education and Senior Secondary Education should adopt and incorporate gender equality and social inclusion strategies and insights into its curriculum** as a long-term measure for promoting social inclusion.