



THE ROLE OF SOCIAL MOVEMENTS IN PROMOTING ACCOUNTABILITY IN THE HEALTH SECTOR

LESSONS FROM HEALTH NGOS NETWORK (HENNET) IN KENYA

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1.0: **BACKGROUND ON THE ROLE OF ACCOUNTABILITY IN UNIVERSAL HEALTH COVERAGE (UHC)**

Social accountability is an approach to holding public officials to account for the provision of public goods which are existing state obligations or that are consistent with socially-accepted standards and norms. In the health sector this approach is geared towards the improvement of health indicators by ensuring operational solutions and models are implemented, sustained and measured. The World Health Organization (WHO) emphasizes accountability as a major health system attribute comprised of (i) government attributes and rule of law (ii) partnerships for public policy and (iii) transparency and monitoring and evaluation as an underlying action for the achievement of UHC¹. Through accountability, citizens and providers are educated of their rights to health, mechanisms are employed for their voices to be heard, and tools are developed and utilized to hold key public officials accountable for policy implementation and outcomes².

David Aberle, a cultural anthropologist described social movements as large-scale groupings of individuals or organizations connected through a shared interest and focus on specific issues in order to carry out a social change. He categorized social movements into four categories namely alternative, redemptive, reformative, or revolutionary. Generally social movements' structures encompass a large set of actors that include many individuals grouped from different organizations that in turn are grouped and centralized under umbrella platforms. The members are largely from the grassroots or local levels as organizations or individuals and community level, who link up to the National Level Social movement³.

The relationship between social movements - also referred to as 'change from below' - and the demands for universal health coverage is a critical one. National health reform campaigns in the 20th century were initiated and run by individuals who were in high level positions. The high-level individuals were more concerned about defending themselves against attacks from interest groups and concentrated on immediate and incremental

1 WHO, 2015 *Accountability and UHC*

2 World Health Organization 2014

3 http://worldanimal.net/documents/4_Movements_for_Social_Change.pdf

changes rather than transformative change in health care⁴. Seemingly, the association between an effective and efficient UHC system and accountability is widely acknowledged. However, the recognition that social movements are sources of motivation for the advancement of UHC is generally underplayed⁵. It is important to note that dynamic social movements are facilitating the transformation of communities by bringing attention to issues and highlighting policies and programs across the continent⁶. They are doing this through the provision of opportunities for engagement in planning, utilization of limited public resources, establishing platforms for social accountability, transparency of information and forums for social accountability⁷.

In Kenya, the role of social movements in accountability is rarely assessed yet they exist at several levels, taking different forms from community level health committees to community health groups and hospital boards for sub-county and county. Evidence shows that the current mechanisms being used to engage citizens in monitoring service provision and providing constructive feedback need improvement⁸. Social movements can fill this gap by encouraging actors in the health sector to be accountable for their actions and to be committed in strengthening the national health systems. In this regard forming networks and alliances is vital in identifying individuals and organizations to be part of the social movement. There are various things to consider in formation of a social movement such as numbers and geographical spread, membership, strength of grassroots networks, knowledge and skills, expertise in awareness raising, public communication and advocacy that will be vital in disseminating evidence, presenting findings and putting out a compelling argument to convince decision-makers⁹.

4 *Health Care Reform and Social Movements in the United States* | Beatrix Hoffman, PhD 2003

5 *Social Movements in Health* Theodore M. Brown¹ and Elizabeth Fee²

6 *Inclusion Matters in Africa* Maitreyi Bordia Das Sabina Anne Espinoza

7 *Moving Toward a Middle-Class Society Nigeria On the Move: A Journey to Inclusive Growth* 2019 World Bank Group

8 *Citizen engagement in public services in low- and middle-income countries: A mixed-methods systematic review of participation, inclusion, transparency and accountability (PITA) initiatives* (Waddington et al 2019).

9 *Healthy Participation, Healthy People: A Review of Social Accountability Initiatives in Indonesian Policies and Programs* 2018 Chris Laugen Clara Siagian Cyril Bennouna Santi Kusumaningrum

2.0: HOW DOES A SOCIAL MOVEMENT IN THE HEALTH SECTOR LOOK LIKE: THE CASE OF HENNET

Social movements in the health sector, are often viewed as progressive forms of community participation whereby citizens take action to enhance the accountability of politicians, policymakers, and service providers¹⁰. In light of this, we carried out an interview with the Health NGOs Network (HENNET) an umbrella organization of health civil society organizations in Kenya with 107 member's organizations from the health civil society to have a better understanding of what a social movement in the health sector looks like.

Since its inception in 2005 HENNET has taken the role of coordinating the health civil society organizations in Kenya in ensuring civil societies speak in one voice and are able to pursue policies in the field of health together. They also provide a platform for collaboration and knowledge sharing that enables members to advocate for issues and build their capacity. HENNET's work is guided by a structured database that links key issues to the respective NGOs that are involved in the particular thematic area. For example, if the issue is HIV related then a NGO that is involved in the said area is consulted. Utilizing such a structured issue-based database makes it more meaningful but there are those general issues that requires joint ownership like universal health coverage.

It is a true definition of a secretariat for the health NGOs and represent them in meeting collaboratively with Subject Matter Experts who assist in the dissemination of the information to the rest of the network. It is also involved in resource mobilization by seeking for grants for capacity building and it gets the needed technical support members. This also ensures participation from members and reduces duplication by mapping out the services provided by each member.

To be a member of the network, an organization pays a membership fee. The membership fee is dependent on whether it is an international NGO, a local NGO or a CBO. This is based on the fact that the ability to access

¹⁰ *Social accountability in primary health care in West and Central Africa: exploring the role of health facility committees* Elsbet Lodenstein^{1*}, Eric Mafuta², Adolphe C. Kpatchavi³, Jean Servais⁴, Marjolein Dieleman⁵, Jacqueline E. W. Broerse⁶, Alpha Amadou Bano Barry⁷, Thérèse M. N. Mambu² and Jurrien Toonen⁵ 2017

resources differs. Also, there are members who request to join the network but sometimes the network shares information of the benefits of the network to attract members to join. It is governed by a constitution: a requirement by the government and has a board. It has a decentralized structure which includes a national office and county chapters. It strengthens the county chapters by aligning them with the national constitution. HENNET influences advocacy and policy by participating in the national processes through the technical working groups. It also advises the government on various issues and is cognizant of the fact that the network has shaped the health sector and the decisions of the government. It is involved in service delivery and it complements the government through it. An example is its role in creating awareness with regard to HIV/AIDs by sensitizing, conducting behavior change training, HIV testing and counselling etc. It can do this through the support of donors and development partners.

HENNET has realized successes as a result of its influence in the decisions of the government. Firstly, it is able to negotiate with the government, this fosters meaningful engagement with the government. Secondly, it has influenced the development of policies. For example, it has been very vocal in maternal and neonatal health by supporting the replication of the kangaroo mother approach and by leveraging on innovations that have influenced reproductive health like the self-injectable family planning option. Thirdly, it has supported the government in the development of strategies. Fourthly, it has fostered the convening of working groups and the inter-governmental partnership that exist between Ministry of Health and the health civil society organizations. These are just but a few of the successes the network has realized.

The network's social accountability platform is like any other working group for HENNET. The social accountability group holds the government accountable in pursuing universal health coverage. To do this, the group has a terms of reference, governance, and mandate, to mobilize resources, make decisions and most importantly align to the government's social accountability agenda.

The network is open to organizations that come with different agendas other than health and together the network negotiates to drive the health agenda. 90% of the network's activities as stipulated in the strategy is accomplished via peaceful engagement with the government. However, the network also holds peaceful demonstrations when

negotiations are not an option through its People Health Movement. An example is the Usawa (Swahili for equality) match, which advocated for equality. The network adapts to changes in accelerating issues of quality and is currently focusing on UHC, domestic financing and reducing dependence.

HENNET takes Multi sectoral partnership very seriously, especially when human rights are infringed. It also partners with organizations that focus on financing and SDGs and together they push the health agenda. The network boasts of a regional and international membership and pursues partnerships in other countries. Currently it is replicating its model in Malawi and Tanzania and will soon disseminate a report on key learnings that it would want to replicate in the Southern hemisphere.

3.0: **SUCCESSSES OWED TO CREATION AND UTILIZATION OF SOCIAL MOVEMENTS TO PROMOTE ACCOUNTABILITY FOR UHC**

Social movements start with people's own agendas and create an identity around a problem that affects their lives. HENNET's case has shown that social movements can act as the first steps towards developing a sense of self-identity by allowing individuals to take action on grievances. Examples of social movement approaches that have been commonly utilized in promoting accountability in UHC include building awareness among communities, creating voice, and empowering action. It is useful in the development of comprehensive approaches that fit local contexts, accommodate multi-sector partnerships, and account for existing power dynamics and risks associated with increased decision-making authority are vital success factors with regards to social movements and should be mainstreamed into all health system strengthening programs.

As mentioned above, HENNET is expanding and scaling to countries like Tanzania and Malawi and as such Countries have are adapted social movements approaches in promoting accountability for Universal Health through the following:

3.1 POLICY AND REGULATORY FRAMEWORK

In Kenya the development and implementation of health service charters presents another tool that social movements like HENNET use in enhancing accountability while accelerating UHC. The charters are collaboratively drafted by patients and providers detailing the services offered at a health facility. Information in the charter include service-related costs, waiting times, and facility hours. The charters also offer a baseline for citizens to assess the services they receive and hold providers accountable. For example, the Youth in Action movement an initiative of Amref Health Africa supports, mentors and builds the capacity of youth advocates to influence youth policies in the area of Sexual and Reproductive Health Rights (SRHR) and focuses on meaningful youth engagement in UHC. Currently the movement has a membership of over 2000 youth advocates from 43 counties. It has utilized its online presence as the first virtual Pan -African youth movement in pushing for its agenda successfully and developed an accountability framework to guide SRHR change in policies.

3.2 AWARENESS CREATION: INFORMATION AND EDUCATION

Social movements provide a platform for community members to possess sufficient education with regards to their rights and the services that they are entitled to and thus strengthen community capacity to demand. When community members understand how to identify and articulate problems related to service delivery, a more effective dialogue between them and service providers can then commence.

The use of information and communication technologies focuses on the establishment of efficient and integrated information system that strengthen accountability and transparency. Social movements support the use of ICT by raising awareness on the creation of e links between data produced by health facilities, payments and accountability and audit of the data.

3.3 VOICE AND EMPOWERMENT: MOBILIZATION, MONITORING, PARTICIPATION AND FEEDBACK MECHANISMS

Social movements echo citizen voice towards health service providers and government officials by engaging the citizens in activities that monitor service delivery, provide feedback, plan and allocate resources. Social movements build the capacity of citizens and governing bodies as an important component of accountability initiatives.

Strengthening the voice of the public often requires training, this in turn amplifies their capacity to respond to and address feedback. Capacity building also involves building networks among different groups within communities and with different levels of governing and non-governing bodies. Preparing each actor by identifying their roles and responsibilities helps them to fully participate in accountability initiatives.

People everywhere have the right to access affordable and quality health care. Social movements help to build a healthier world by mobilizing and sustaining political commitment to Universal Health Coverage (UHC) by holding the government accountable. These movements are an important means for social change as they empower

4.0: **CONCLUSION**

individuals and communities to have meaningful engagement with their policy and decision makers. They raise awareness on people's health rights and challenge both the process and the outcome of social and political decision making at local and global levels. All countries therefore must take active steps to meaningfully engage its population from all spheres taking into consideration context and population needs in shaping the UHC agenda. Policy & decision makers must then invest, enact laws and collaborate with its citizenry to deliver UHC.