

# PROJECT INFORMATION DOCUMENT (PID) CONCEPT STAGE

Report No.: PIDC17852

<b>Project Name</b>	Voice and Action: Social Accountability for Improved Service Delivery (P146160)
<b>Region</b>	EAST ASIA AND PACIFIC
<b>Country</b>	Cambodia
<b>Sector(s)</b>	Sub-national government administration (40%), Primary education (30%), Health (30%)
<b>Theme(s)</b>	Decentralization (20%), Other social development (20%), Education for all (20%), Health system performance (20%), Rural services and infrastructure (20%)
<b>Lending Instrument</b>	Investment Project Financing
<b>Project ID</b>	P146160
<b>Borrower(s)</b>	Save the Children, Denmark, World Vision International
<b>Implementing Agency</b>	Save the Children, Cambodia, World Vision International
<b>Environmental Category</b>	C-Not Required
<b>Date PID Prepared/ Updated</b>	04-Feb-2015
<b>Date PID Approved/ Disclosed</b>	07-Feb-2015, 15-Jun-2015
<b>Estimated Date of Appraisal Completion</b>	01-Oct-2015
<b>Estimated Date of Board Approval</b>	15-Oct-2015
<b>Concept Review Decision</b>	Track II - The review did authorize the preparation to continue

## I. Introduction and Context

### Country Context

Cambodia has experienced remarkable economic growth and macroeconomic stability over the past years. The growth rate has averaged 7.9 percent per annum during the ten-year period (2003–2013), ranking the 17th fastest real GDP growth in the world over that period. Per capita income in current prices has doubled over the past decade, reaching US\$1,077 in 2014 from US\$367 in 2003. As a result, the poverty rate has decreased by more than half over seven years from 53.0 percent in 2004 to 18.6 percent in 2012, surpassing all expectations and far exceeding the Millennium Development Goal (MDG) poverty target. This performance has been achieved after Cambodia managed a challenging transition from a planned economy toward a market-based economy, and ended a two-decade long conflict.

Despite impressive economic progress, Cambodia is still one of the poorest countries in Southeast Asia. Vulnerability of falling back into poverty is a significant issue, particularly in rural areas where 90% of the poor live. 2011 poverty data shows this affects a significant proportion of the rural poor: a loss of about \$0.30 per capita per day would put about 3 million people back into poverty and double the poverty rate to 41.0 per cent. Nine out of ten of Cambodia's poor live in rural villages where access to services is still lacking. Non-income dimensions of poverty (as described by access to basic services) are significantly higher in rural areas. Access to improved water and sanitation in rural areas remains low: 46.5% have access to an improved water source and 41% to improved sanitation (CSES 2013). Only 40.5% of households in rural areas have improved toilets. Only 61% of students are reaching grade 6, making it the lowest in Southeast Asia, and the quality of the education of Cambodian children and youth is poor. Maternal mortality is still at 206 deaths per 100,000 live births in 2010 and infant mortality rate in 2010 stood at 45, the second highest in Southeast Asia. Of further concern is that a number of key indicators are not changing despite growth and improved livelihoods. Cambodia's institutions are still emerging and there is much evidence that the delivery of basic services lacks quality and accountability. As a result living standards remain low for much of the Cambodian population.

Women's status remains low in Cambodia despite their significant contribution to the economy. A variety of indices point to persistent gender inequalities in Cambodia. Cambodia has a Gender Inequality Index value of 0.473 and is ranked 96 out of 148 countries in the 2012 index. In Cambodia, 11.6 percent of adult women have reached secondary or higher level education. Typically, many women lack the confidence to demand the service standards to which they are entitled. While enabling legislation and policies exist, these are undermined in implementation by poor governance, and limited transparency and accountability of institutions. Women are severely underrepresented in local level decision making around development matters and poor women have little to no voice, especially in the more remote areas.

Cambodia's population is young. Currently, 53% of the national population is estimated to be below 20 years of age by 2015. Cambodia ratified the UN Convention on the Rights of the Child almost two decades ago but children and youth remain disproportionately disadvantaged in accessing their rights. Although more than 56% of the population are children and youth below the age of 24, they have few opportunities to express their views and consequently they lack any voice and participation in efforts to promote better services at the local level.

Khmer people make up approximately 90% of the population, however there are also pockets of minority ethnic groups; these are among the most disadvantaged and the most difficult to reach for government, donors and NGOs. In addition, the Cambodian population is estimated to have one of the highest rates of disability in the world, estimated between 10% and 15%.

The average Cambodian has received only 5.8 years of schooling (cf. a low income country average of 8.5 years). Only 39.47% of children in Cambodia manage to reach lower secondary with 23.90% reaching upper secondary. These ratios are the worst in South East Asia. Access and affordability remain key issues, with only 5.4% of Cambodian villages having a lower secondary school. Although the RGC allocates around 8% of total spending on education, there is little left after running costs (for facilities repair and maintenance, teaching materials or classroom equipment). The quality of education delivery is often poor, with lower qualified teachers appointed to rural schools and limited support for in-service training.

Health indicators are significantly worse for Cambodians living in remote areas, where services are limited, often of poor standard and difficult to access. While there has been some success in reducing the maternal mortality rate to 206 per 100,000 births, most indicators remain higher in underserved rural communities and low comparatively. Achieving universal access to quality health services is an incremental process requiring well-trained, motivated, accountable and adequately-compensated staff, and adequate drugs, supplies and equipment in all referral hospitals and nearly 1,300 health centres and health posts across the country. Ill health is recognized as a significant factor contributing to poverty, with high prevalence of food and water-borne diseases, as well as malaria, tuberculosis and HIV/AIDS.

### **Sectoral and Institutional Context**

The RGC National Program for Sub-National Democratic Development (SNDD). Since 2003, the RGC with support from the World Bank, JICA and other development partners has implemented a vast number of activities aimed at enhancing government responsiveness by establishing a functioning sub-national system of government with elected commune councils. IDA financing over US\$70 million was provided to the RGC over the period 2003-2012 specifically to establish a block transfer to communes and to develop the policy and processes for local level investment. The organic laws establishing the decentralization agenda in Cambodia and more recently the National Program for Sub-National Democratic Development (SNDD) 2010–2019, aimed at the dual goals of local governance and local development, set out the RGC intention to establish a “vibrant, democratically-elected and locally accountable sub-national governance system”, supported by local budgets to empower councils and effective citizen engagement in local decision-making.

The RGC Implementation Plan for Decentralization Reform (the IP3). In 2012, the NCDD began the implementation of this programmatic approach for RGC and donors. At a Joint Appraisal in February 2011, government and development partners agreed that it was vital to build a more strategic approach to citizen engagement and social accountability within the context of local governance and the overall framework of accountability. Given the experience in this area, the World Bank was requested by the inter-ministerial Technical Working Group to provide the technical support necessary to strengthen the demand-side dimension of the decentralization process. The result of this support is the recent adoption of the “Social Accountability Framework” policy and implementation plan.

The Demand for Good Governance Project. Alongside the decentralization reform, IDA financing of US\$5.23 million under the Demand for Good Governance (DFGG) Project was directed to support grants to non-state actors to enhance citizens’ engagement in governance, and strengthen dialogue with state actors, and US\$3.2 million for the Ministry of Interior to establish a state/non-state governance learning program. During the implementation of the DFGG project, the efforts of non-state actors led to a greater understanding of how they could stimulate improvement in government performance and accountability, especially at the local level. By the end of 2012, a platform of CSOs had developed skills and experience in the implementation of social accountability activities, and had pioneered new citizen monitoring and feedback mechanisms that enhanced the effectiveness of the local administrative functions and basic services. The component met or exceeded most targets: 226 commune, 153 health centers and 330 schools were monitored by citizens (almost double), and of those monitored, a positive impact on performance was reported by citizens in all state institutions. For instance in health these improvements were found to be about staff professionalism and timeliness (80%) hygiene and cleanliness (69%) staff attitudes (66%)

access to emergency services and outreach (48%) and transparency of fees (44%) and small infrastructure (44%). The project also produced a vast set of lessons of what works, what doesn't and why. Avoiding fragmentation, small discontinuous pilots and developing commitment from government and civil society for simultaneous and reciprocal actions were foremost among these.

A Social Accountability Framework (SAF). Within the context of the decentralization reform agenda laid out in government implementation plans, and building on the track record and lessons learnt in the DFGG project, a new opportunity is now established through an innovative Social Accountability Framework (SAF) which establishes a framework agreement for CSOs and government to cooperate in activities that lead to enhanced voice and accountability in local service delivery and governance. The SAF includes both government and civil society action, coordinated and integrated into local governance and service delivery annual processes. Roles and responsibilities are clearly defined in the implementation plan. Government will take the lead in generating and displaying local information on performance and budgets, and in ensuring responsiveness at the end of the process. These are mandated as new local procedures. Social accountability activity, such as awareness building, budget literacy and citizen monitoring, carried out by CSOs will therefore not stand alone but be complemented by supply-side efforts to mandate, encourage, train and monitor local officials and service providers to engage in social accountability activities. SAF implementation is also multi-sectoral. The agreement includes activities in relation to communes/districts, health centers and schools. The SAF underwent extensive consultation with a vast number of civil society actors before being endorsed as policy in July 2013 and developed into an Implementation Plan (ISAF) and Operations Manual. As a result, interest from civil society is high and the proposed activities, on which this proposal is based, are structured to link into annual processes, political and administrative accountabilities and sub-national administration capacity development.

This request for JSDF financing is set in this context. Long term engagement in decentralization, and opening space for civil society engagement, a significant innovation in the form of a nationwide multi-sectoral social accountability framework which commits government to supportive and responsive action, and the completion of the pilots and the closure of the earlier Bank grant financing mechanism for social accountability.

### **Relationship to CAS**

The project will contribute to long-term efforts to strengthen governance and service delivery in Cambodia. The objectives of the proposed project are closely aligned with the RGC Rectangular Strategy (2014-18). Governance is a central pillar of the development strategy and plan. Decentralization reform is a specific element, and social accountability is included in the RGC 5 year National Strategic Development Plan and National Program for Sub-National Democratic Development. The initiative is closely linked to the objectives of the Education and Health Sector Support Programs, and builds on earlier support for decentralization under the flagship Rural Investment and Local Governance Project (RILGP) and the recently completed demand-side governance (DFGG) project. This JSDF will supplement the multi-donor programmatic support for local government development by funding the demand side activity needed to engage Cambodian citizens in the enhancement of local service delivery and governance. This is set out in the RGC Implementation Plan for the Social Accountability Framework.

## **II. Proposed Development Objective(s)**

### **Proposed Development Objective(s) (From PCN)**

The PDO is to help support the improvement of service delivery in schools, health centers and communes, for rural households in selected districts. This will be achieved by local government and service providers engaging with communities in the ISAF process (access to information, open budgets, citizen monitoring) to improve performance and responsiveness.

### **Key Results (From PCN)**

Results will be measured in terms of improved performance in the delivery of services and improved governance, as set out in a results chain for the I-SAF and agreed for the PDO above. Key results are:

Improved performance in local service delivery in schools, health centers and communes (including for women and children/youth)

60% of citizens in target districts report improved performance (in schools, health centers and commune administrations) as agreed in Joint Accountability Action Plans.

- 60% women report improved performance in services of priority to them.
- 60% children/youth report improved performance in services of priority to them.

Improved responsiveness in local service delivery in schools, health centers and communes (including for women and children/youth).

60% of citizens in target districts report changes in actions they defined in Joint Accountability Action Plan.

- 60% women report changes in actions they defined in Joint Accountability Action Plan.
- 60% children/youth report changes in actions they defined in Joint Accountability Action Plan.

Improved quality of participation and engagement of rural households in local service delivery in schools, health centers and communes (including for women and children/youth).

60% of target districts complete agreed ISAF process (information-open budgets-citizen monitoring) annually.

- 60% of women report they were engaged in completed ISAF process.
- 60% of children/youth report they were engaged in completed ISAF process.

## **III. Preliminary Description**

### **Concept Description**

The proposed grant will support the development and implementation of an innovative approach to social accountability to improve local level services and functions in Cambodia. The Social Accountability Framework, which the proposed grant will implement and test, links together demand side activity (that will be carried out by civil society) and supply side activity (that will be carried out by national and local government) around three substantive strategies that have the possibility of transforming local governance processes:

- Access to information on rights, standards, targets and performance. Entirely new information flows to communities will be executed by government through “information for citizens” (I4C) packs generated nationally and locally. Public display materials on rights and standards, together with guidelines are all complete. The simplification of templates to post performance information is complete and the instructions for districts to generate data locally are in place. Then ISAF, rightly, allocates the task of information generation and display to government

but the awareness building to civil society. The grant will finance all the I4C awareness building activities for citizens (men, women and youth) to access and use information. It will also finance local level capacity building facilitating joint state – non-state capacity development and dialogue.

– Open local budgets. The ISAF intends that budgets and expenditures in communes/districts, schools and health centers will be systematically published and posted by government. In 2014, the processes were developed and tested by government to start roll-out in 2015. The grant will facilitate the processes of budget literacy and strengthening inquiry of these budgets and expenditures with regards to service delivery needs.

– Citizen monitoring and action plans. Citizen monitoring builds on the previous stages that have informed and empowered citizens with information on service standards and rights, and introduces a facilitated citizen monitoring mechanism to obtain grass-roots feedback from women, children, youth as well as men and village leadership, in three areas –health centres, schools and communes. The citizen monitoring process in the ISAF is a community scorecard, which will result in a Joint Accountability Action Plan. The grant will finance local NGO partners to facilitate these processes including the development of a cadre of 4-6 community accountability facilitators in each commune (60% women).

The information and budget dissemination and awareness building have been programmed by government and civil society to take place January-April, and citizen monitoring from May-July, this ensures their completion prior to the commune/district planning/budgeting process.

Through the Implementing NGOs, working in different provinces, the activities will reach about 3.5 million beneficiaries in over 60 districts in the selected provinces. The Implementing NGOs are already well established in these provinces through education, governance, nutrition and health programming. The footprint of Save the Children is focused at targeting the poorest in Cambodia. Save the Children will implement the activities defined by the ISAF with a particular focus of the role of children/youth in the SAF activities, and measure the impacts for all citizens and children/youth as citizens. Save the Children will carry out this grant within the context of their world-recognized Child Rights Governance programming. This will ensure integration in their organizational programming as well as longer term sustainability.

The grants will support demand-side social accountability activities to engage with citizens and work in partnership with civil society for improved service delivery. The activities are not freestanding, they are a part of annual government processes to (shown in figure 1). Synchronized complementary government activity focused on enhanced transparency and the accountability actions that respond to citizens are to be financed through the annual work plan and budget of the coordinating arm of government for subnational democratic development. The largest area of grant support will be for the regularized community monitoring of commune, health center and school services and functions, for building awareness of information on standards/ entitlements, targets and performance and for the budget literacy activities needed to make “open local budgets” effective. Care and Save the Children will work with local NGO partners, and guide a process of capacity development of local NGOs, CBOs and community accountability facilitators.

## COMPONENT SUMMARY

Component A: Access to Information and Budgets, and Citizen Monitoring

Component A of the proposed Voice and Action Project aims to provide support to local civil society to implement the defined information, budget and citizen monitoring activities in 65 districts in the ten target provinces.

The IAs will initiate the proposed grant with local CSO partners through community engagement and mobilization strategies that emphasize the roles of women, and children/youth. In the first year, twenty districts will be selected based on existing abilities and capacities of governments and partners to initiate and undertake the ISAF processes. The project will be extended to the remaining 45 districts over the following two years, will allow for incorporation of learning from implementation in previous years and further refining approaches and tools. Ongoing support for the cycle of activities will continue for each participating district/commune for the remaining duration of the project.

Activities will be carefully coordinated with all government I-SAF activities. As above, civil society will lead activities which support: (i) the awareness building of Information for Citizens (I4C) – promoting the understanding and use of local information sets to empower citizens, and promoting budget literacy; (ii) the citizen monitoring, a facilitated process of participatory monitoring on commune/district functions, health centers and schools, to be undertaken through a community scorecard process; and (iii) the processes of feedback to councilors, service providers and line ministry officials through the development and dissemination of results and joint accountability action plans (JAAPs) for community, service provider, commune and district department action. Underpinning these processes, all activities to build a cadre of local facilitators is planned in Component B below. Implementation is an integral part of the commune/district calendar and service delivery planning and budgeting cycles.

Information, education and communication materials for the awareness activities will be developed, including in ethnic minority languages. Visual aids will be developed to engage and empower women and children/youth, and will be appropriate to populations with low levels of literacy. The IAs will use proven community engagement and mobilization strategies, with an explicit and monitored focus on the poor and vulnerable, and ensuring gender and disability inclusion.

#### Component B: Capacity Building and Facilitation

Component B aims to enhance the capacity and empowerment of the local level stakeholders (state and non-state) to implement the activities (outlined in para. 18). Specifically, it will: (i) create a cadre of trained local community facilitators; (ii) build the capacity of local civil society partners to mentor and coach the community facilitators to carry out the planned information, budget and community monitoring activities; (iii) provide a platform, model interventions and a toolkit for continuing dialogue between government service providers and citizens, mediated by commune councils and local CSOs.

Under component B, the proposed grant will provide capacity building and ongoing technical support for the anticipated district level partner CSOs in the target districts. Each local partner has on-the-ground experience and presence, understanding of their local communities and, importantly for the northeast of Cambodia, ability to engage with ethnic minority communities in their own languages.

Community facilitators (CAFs) and local CSO partners will be supported and trained to be “brokers” of social accountability tools, including the scorecard/JAAP, and ensure that the social accountability process continues to meet the needs of community members. The facilitators will be volunteers, are expected to have good literacy levels, and in ethnic minority areas, be able to communicate in local languages. As a result, many will be young women and men that will have finished elementary schooling. Master trainers in each province will deliver training using the materials and methods developed to date, but the mentoring approach will be critical to ongoing skills development.

CARE will incorporate its Women’s Empowerment Framework into the training and implementation of all activities. This includes developing customized gender modules that will maximize female participation and voice, involve community leaders and male relatives to examine and address the traditional roles of men and women in the community, and engage with local authorities and other stakeholders to ensure the inclusion of the voices of women and girls. Similarly, Save the Children will incorporate its Child Rights Governance approach in working with communities, including local authorities and children and young people. These approaches will identify constraints to the participation of children/youth and consider power relations affecting participation in local decision making forums.

Of the community accountability facilitators, it is planned that 60% will be women in CARE districts, and 50% women/youth in Save the Children districts. They will become certified as community facilitators increasing gender and youth inclusion in the processes of local governance and service delivery. CSOs and community accountability facilitators will be trained to use gender and child/youth sensitive approaches, and the SAF process will be adapted as required to ensure inclusion of the needs of marginalized ethnic minorities.

#### IV. Safeguard Policies that might apply

Safeguard Policies Triggered by the Project	Yes	No	TBD
Environmental Assessment OP/BP 4.01		✗	
Natural Habitats OP/BP 4.04		✗	
Forests OP/BP 4.36		✗	
Pest Management OP 4.09		✗	
Physical Cultural Resources OP/BP 4.11		✗	
Indigenous Peoples OP/BP 4.10	✗		
Involuntary Resettlement OP/BP 4.12		✗	
Safety of Dams OP/BP 4.37		✗	
Projects on International Waterways OP/BP 7.50		✗	
Projects in Disputed Areas OP/BP 7.60		✗	

#### V. Financing (in USD Million)

Total Project Cost:	5.00	Total Bank Financing:	0.00
Financing Gap:	0.00		
<b>Financing Source</b>	<b>Amount</b>		



Borrower	0.00
Japan Social Development Fund	5.00
Total	5.00

## VI. Contact point

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