

## BURKINA FASO

### Community Monitoring for Better Health and Education Service Delivery

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#### *Project overview*

**The Burkina Faso Community Monitoring for Better Health and Education Service Deliver Project (P121714; CMP) aims to increase the quality and quantity of health and education services through empowering, capacitating, and stimulating individuals and communities to demand good governance and through increasing transparency and accountability of service providers.** This is achieved through a community scorecard mechanism which evaluates the quality of services in health and education facilities. Previously scarce information is provided through community core cards, increasing individual and community-level knowledge of the quality of service and, it is hypothesized, demand for and supply of higher quality services.

In each village, the community itself defines evaluation criteria for schools and health facilities. They then use these criteria to identify service delivery issues and develop strategies to solve these, and progress is discussed at quarterly meetings. It is expected that this monitoring, coupled with public praising or shaming (through dissemination of scores), will elicit increased effort by health and education service providers (intermediate outcomes), which in turn will yield improvements in health and education outcomes. Additionally, the CMP is expected to induce greater participation of households in the management of community affairs and, potentially, improve social capital.

This is a pilot project targeting 18 health facilities and 18 schools in nine poor rural municipalities in three of Burkina Faso's thirteen administrative regions. **To provide high-quality evidence on project impact and on the mechanisms through which these are achieved, the CMP includes an experimental impact evaluation (IE).**

#### *IE of the Community Monitoring Project*

**The IE will empirically answer four primary research questions.** First, what are the impacts of community monitoring on health and education service delivery and on human development outcomes? Second, do these impacts differ across health and education services? Third, how does the level of social capital within communities affect these outcomes? Fourth, does the intervention build informal institutions (social capital)?

**In addition to providing project-specific actionable evidence, the IE builds on existing CDD literature in two important ways.** First, by examining the community monitoring intervention for both health and education sectors in the same context, the IE will provide evidence on the extent to which this is transferable across sectors. Second, the IE includes a behavioral "lab-in-field" experimental approach to help us understand whether the intervention has an impact on social capital, which is often claimed to be a benefit of CDD projects. Recent evidence, however, shows that CDD projects have failed to improve development outcomes in many cases, and one reason for this may be that such programs are not improving social capital as anticipated. The Burkina Faso CMP IE will add much needed evidence on whether CDD projects really can achieve development impact though increasing social capital in the medium term, or whether other interventions are needed.

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