What makes frontline duty-bearers act with integrity? Conditions and approaches that influence teachers and health workers to deliver services with integrity

- ANNEXES TO FINAL REPORT -

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Annex 1. Data collection and analysis framework

Tool	Question	Types of questions	Purpose
Phase 1– Analysing ex	isting knowled	dge and research	
Act 1.2. Klis at global level (Annex 2)		Collecting existing knowledge Initial Formulated in positive Generic	 For RQ1.1.: To deduce an initial list of conditions. For RQ 1.2. and RQ 1.3.: To get insights into how these conditions vary with the country context and sectors. For RQ 2.1.: To deduce an initial list of good practices and/or promising approaches. For RQ 2.2.: To get insights into how the success of these approaches vary with the context.
Phase 2 – Capturing co	ontext and sec	toral variability	
Act 2. KIIs with Integrity Action's partners (Annex 5)		Question guide to remain fluid Open-ended questions Formulated in positive or negative	 For RQ 1.2.: To get an overview of the country specificities (legal and institutional framework), and country variability of the main conditions. For RQ 2.1.: To validate and/or identify good practices or promising approaches to enable or motivate teachers to act with more integrity. For RQ 2.3.: To get feedback from Integrity Action's partners on citizen-centred accountability approaches.
		Self-assessment	
	Q7, 9, 11	Initial Formulated in positive Specific questions (integrity pillars)	For RQ 1.2.: To assess country variability of the extent to which teachers are currently able to work with integrity.
Act 3. Mini survey – teachers	Q 8, 10, 12	Multiple-choice questions Initial Formulated in negative Specific questions (integrity pillars)	 For RQ 1.1.: Get teachers' views on the relevance and the relative importance of the conditions from Phase 1. For RQ 1.2.: To assess the country variability of the relative importance given to each condition, according to teachers.
(Annex 7)	Q 14	Multiple-choice question ideal Formulated in positive Specific questions (participation)	For RQ 1.2.: To get specific information on the current practices around participation and to analyse the country variability of these practices.
	Q 13.	Multiple-choice question Initial Formulated in positive	For RQ 2.2.: To get feedback on the level where teachers think interventions are most needed.

		General	
	Q15	Multiple-choice question Initial Formulated in positive Specific questions (citizens' level)	 For RQ 2.3.: To get feedback from teachers on the activities at the school level where community engagement is most useful (and compare per country).
	Q 16, 17	Open-ended questions Ideal Formulated in positive Specific questions (intervention levels)	 For RQ 2.1. To get teachers' views on what more could be done to help them work with integrity (good practices that could be replicated and/or promising approaches).
Act 4. Minisurvey – sectoral experts (Annex 9)	Q8, 9, 10	Multiple-choice questions Initial Formulated in negative Specific questions (integrity pillars)	 For RQ1.1.: To get experts' views on the relevance and relative importance of the conditions from Phase 1. For RQ 1.3.: To get insights on the sector variability of the relevance and relative importance of the conditions according to experts.
	Q11, 12, 13, 14, 15, 16	Open-ended questions Ideal Formulated in positive Specific questions (intervention levels)	For RQ 2.1.: To validate and/or identify good practices and/or promising approaches.
	Q 17	Open-ended question Specific questions	• For RQ 1.2 and 2.2.: To get experts' views on the extent to which the conditions influencing duty-bearers' integrity and/or or the approaches' effectiveness vary with the context.
Focus country work (Annex 13)		Inductive (open-ended) Initial and ideal Formulated in positive or negative	 For RQ 1.1.: To evaluate the relevance and relative importance of the conditions from Phase 1 and capture specific examples of what is in place in specific schools and HCFs. For RQ 1.2.: To get insights into how the conditions vary with the country context and sector. For RQ 1.3.: To assess the sector variability of conditions. For RQ 2.1: To validate and/or identify good practices and/or promising approaches. For RQ 2.3.: To get feedback from duty-bearers on citizen-centred accountability approaches.

Annex 2. Question guide for KIIs at global level

Preliminary clarifications

By "acting with integrity" we mean when there is consistency between a duty-bearer's words and actions, both in public and in private, and when these actions reflect the best interests of the citizens who rely upon them. It includes keeping promises that have been made to citizens, and responding positively to citizens' feedback – which may include changing or retracting a promise where citizen feedback suggests this is appropriate.

This research focuses on the work of frontline duty bearers in schools and Health Care Facilities (HCFs). With 'front line duty bearers', we are specifically interested in teachers and head teachers in schools, and nurses, doctors, and responsible persons in HCF. The study focuses on developing countries, especially in East Africa, South Asia, and the Middle East.

ONLY FOR WASH EXPERTS: Access to adequate infrastructures such as classrooms or health care units, but also Water, Sanitation and Hygiene (WASH) facilities/services are known conditions for provision of quality education and health services. Therefore, this research also looks into conditions and approaches that help ensure that these infrastructures are well constructed and well maintained.

Considering your experience, we would like to focus this questionnaire on the situation in schools/HCF.

Questions

- 1. What are the main sector/s and countries where you have working experience?
- 2. From your experience working in the education/health sector in developing countries, what do you think are the most important conditions for enabling or inspiring teachers and head teachers/health workers to act with integrity?
- 3. Have you seen these conditions vary in different country contexts (cultural, political, economic, etc.)? if so, how?
- 4. Have you come across any approaches, methodologies or tools that have proven successful to create or strengthen these conditions? If so, could you please give some example of the most relevant ones according to you?
- 5. If you have come across these approaches in different contexts, have you observed any difference in the extent to which they are successful?
- 6. ONLY FOR WASH EXPERTS: Could you please share your experience on the extent to which 'well-constructed and maintained' infrastructure (including WASH) influence the way teachers and head teachers/health workers can do their job?
- 7. ONLY FOR WASH EXPERTS: Looking at contractors for infrastructure: Poor construction quality, inappropriate design or choice of technologies are real challenges in low-income countries: What could be done to improve this situation? (either by the community, school stakeholders, the local government or by supporting agencies such as NGOS?)
- 8. ONLY FOR WASH EXPERTS: What do you think could be done to ensure that infrastructure (including WASH) is better maintained? (either by the responsible stakeholders, the local government or by supporting agencies such as NGOs?)

Important note: We aim to use the content of this interview for our research. The research findings will be made publicly available. We would like to acknowledge your support in this research (name and organization). In case you prefer to remain anonymous, please inform us.

Annex 3. List of global experts interviewed in Phase 1

	Name	Organization	Sector
1	Nicole Rähle	Swiss Red Cross	Health
2	Marco Gerritsen	Ministry of Foreign Affairs of the Netherlands	Health
3	Alejandra García Naranjo	Médecins Sans Frontières	Health
4	Nicole Uhlick	Friends Without a Border	Health
5	Wim Groenendijk	Health Pooled Fund (Crown Agents) and Girls Education (Mott MacDonald)	Health and Education
6	Tom Aston	Independent Consultant	Health and Education
7	Tracy Ledger	Gordon Institute of Business Science	Education
8	Jessica Gregson	Lutheran World Federation	Education
9	Bella Monse	GIZ and Sustainable Sanitation Alliance (SuSanA)	Education and WASH
10	Sareen Malik	African Civil Society Network for Water and Sanitation	Integrity and WASH
11	Binayak Das	Water Integrity Network (WIN)	Integrity and WASH
12	Jacopo Gamba	Transparency Trust Fund, Inter-American Development Bank	Integrity and WASH
13	Florencia Guerzovich	Global Partnership for Social Accountability (GPSA)	Integrity
14	Daniel Burwood	Integrity Action	Integrity
15	Jasmina Haynes	Integrity Action	Integrity
16	Hannah Hudson	Integrity Action	Integrity
17	Annalisa Renna	Integrity Action	Integrity
18	Derek Thorne	Integrity Action	Integrity

Annex 4. List of conditions and approaches resulting from Phase 1

Conditions

Conditions	Responsiveness	Equity	Transparency
1. Effective sanctions and disciplinary actions	✓	✓	✓
2. Effective incentives	✓		
3. Clear management structures			✓
4. Clear internal protocols and procedures			✓
5. Autonomy	✓		
6. Support from supervisor			✓
7. Support from oversight institutions	✓	✓	✓
8. Adequate physical infrastructure		✓	
9. Adequate tools and equipment		✓	
10. Adequate human resources	✓	✓	
11. Being aware of needs and expectations from citizens	✓	✓	
12. Citizens actively demand integrity			✓
13. Social pressure/recognition		✓	✓
14. Adequate skills and competences	✓		

Approaches

Interface with citizens

- Raising awareness of citizens on their rights and responsibilities
- Participatory planning and budgeting
- Citizens playing a role in monitoring the quality of services
- Feedback mechanisms
- Taking part in decision making

Within the institution: Good practices that can be implemented to improve integrity

- Awareness raising for duty bearers
- Platforms for engagement/participation at different moments
- Improving transparency of information
- Clarifying responsibilities
- Protocols and procedures to improve integrity

At the individual level

- Sanctioning / Incentives
- Training/capacity building

At the level of the oversight authorities

- Reforms
- External oversight and control
- Performance monitoring and evaluation at country level

Media: Role that the media or other lobby groups could play

Role that CSOs/NGO could play to help or motivate teachers to act with more integrity

Annex 5. Question guide for KIIs with Integrity Action's partners

→ Starting by explaining the purpose of the research and clarifying the definition of integrity

Confidentiality and Data Protection

The information gathered from these interviews will be included in documentation that will become part of Integrity Action's internal data. It may be shared with other organizations or individuals. Your identity will not be used, nor your personal information shared.

Integrity Action's approach is citizen-centered and focuses on supporting citizens to engage in constructive dialogue with duty-bearers on commitments that have been made and not delivered, and on how these shortfalls can be collaboratively overcome. More specifically:

- Duty bearers should inform citizens on what is promised;
- Citizens are involved in checking that it is delivered and provide feedback;
- Information on whether it is delivered should be made public;
- In case the promise are not delivered, even if it is the responsibility of duty bearers to find a solution, citizens and duty bearers can discuss on how best to address the issues (collaborative approach).

Context

• What is the legal or regulatory framework in your context with regards to integrity, particularly with regards to participation of citizens?

Assessing the extent of the problem

- Please explain some of the issues around integrity in the context you work in.
- What are some of the reasons why frontline duty-bearers in schools and HCFs do not act with integrity?

Main conditions that need to be in place

- What are some of the conditions that are currently present in your context that help duty bearers to act with integrity?
- Can you identify other conditions that **need** to be in place to support and motivate duty bearers to act with integrity?

Approaches that can strengthen these conditions

- What are some approaches/good practices that you have seen that can strengthen these conditions? Here, think of the different levels:
 - Working with citizens;
 - Improving the interaction between citizens and frontline duty-bearers;
 - Working from within: with the duty bearers;
 - Working to improve the interaction between frontline duty-bearers and governmental institutions;
 - Other? Media?

Feedback and opinion on Integrity Action's approach

- Do you think increasing citizens' participation and feedback can help improve the integrity of frontline duty-bearers?
- Do you find the approach of Integrity Action feasible for the context/s you work in?
- Do you think teachers would feel comfortable to involve citizens in monitoring that the promises that are made are implemented and evaluate the quality of services provided?
- What challenges do you see? What would it require to be implemented effectively?
- Do you find it works better in certain contexts?

Annex 6. Respondents from the KIIs with Integrity Action's partners

	Country	Person met	Organisation	Position
		Yusuf Ayubi	Integrity Watch	Community Based
1	Afghanistan		Afghanistan	Monitoring Specialist
1	Aignamstan	Mashoug Safi	Integrity Watch	Community Based
		Mashoud San	Afghanistan	Monitoring Specialist
	Sarala Maharjan Nepal Rhuwan Rhusal	Sarala Maharjan	CAHURAST	Program Manager
2		Bhuwan Bhusal	Youth Initiative- Youth	Program Coordinator
		Bridwaii Bridsai	Empowerment	r rogram coordinator
	Sylvine M'Ka	Sylvine M'Kabaka	CEDEJ	Coordinatrice et
3	Congo	Kahasha	CLDLI	Directeur de Programme
3	Congo	Espoir Ihiseelela	CEDEJ	Chargé de Programme
		Sango	CEDEJ	Charge de Programme
4	Kenya	Damaris Aswa	KESHO	Project Officer- SHINE

Annex 7. Minisurvey for teachers

Preliminary remarks

This mini survey is part of a research commissioned by Integrity Action. The aim of the research is to identify what can help and motivate you to improve the way you work so that you better respond to the expectations from your community, treat everyone with equity and act transparently. Your input is greatly valued. We would like to acknowledge your participation in the final report. However, if you prefer to remain anonymous, please indicate so in the respondent profile. Thank you very much for your support!

Respondent profile:

- 1. Country:
- **2. Name:** or Anonymous
- 3. Gender: M, F, Prefer not to disclose
- 4. Age:
 - 18-24
 - 25-34
 - 35-44
 - 45-59
 - 60+

5. Where are you working?

- In a school
- In a health care facility

4. Position:

Teacher Nurse Director Doctor

Other, please specify

Manager/Director
Other, please specify

5. Type of institution:

Primary school Health post at community/village level

Secondary school Health center at district level

Both primary and secondary Health center/hospital at regional level

Other, please specify Other, please specify

6. Location of the institution

Rural peri- urban

Urban Other, please specify

Research questions – the problems

Responsiveness

7. Does your school/heath care facility manage to respond to the expectations from the community?

I	1	2	3	4	5
ĺ	Never	Rarely	Sometimes	Often	Always

- **8.** What limits you most to respond to the expectations from the community? *Please select the three most important options.*
 - Lack of incentives (condition 2)
 - Unclear responsibilities (condition 3 and 5)
 - Unaware of **expectations** from the community (condition 11)
 - Lack of specific skills (condition 14)
 - Lack of **sanctions** (condition 1)
 - Too high workload (condition 10)

Equity

9. Does your school/ heath care facility manage to take care of every student/patient according to their specific needs?

1	2	3	4	5
Never	Rarely	Sometimes	Often	Always

- **10.** What limits you most to take care of every student/patient according to their specific needs? Please select a maximum of three options.
 - Lack of materials and tools (condition 9)
 - Lack of adequate infrastructure (condition 8)
 - Too high workload (condition 10)
 - Social pressure to act otherwise (condition 13)
 - Unawareness of the specific needs of some individuals (condition 11)
 - Lack of **sanctions** (condition 1)

Transparency

11. Does your school/health care facility manage to share information on decisions and actions with the community?

1	2	3	4	5
Never	Rarely	Sometimes	Often	Always

- **12.** What limits you most to share information on decisions and actions with the community? *Please select a maximum of three options.*
 - Lack of **platform for dialogue** with citizens (condition 3)
 - Unclear protocols and procedures (condition 4)
 - Lack of guidance from your manager (condition 6)
 - Social pressure to act otherwise (condition 13)
 - The community does not ask for such information (condition 12)
 - Lack of **sanctions** (condition 1)

Research questions – the solutions

- **13.** What could help or motivate you to be more responsive, transparent and treat everyone with **equity?** *Please select a maximum of three options.*
 - More engagement of the community in decision making
 - More consultation with the community
 - More incentives for staff
 - Better internal rules and processes
 - More support from the local and national government
 - **Pressure** from media or other external actors
- 14. Whom from the community is actively engaged in your school/ heath care facility?

School answers:	HCF answers:
Parents	Community members
Students	Local government
Local government	Community leaders
Community leaders	Women's group
Women's groups	'Marginalised' groups
Other: if so, please specify.	Other: if so, please specify.

- **15.** In which activities is community engagement most useful? *Please select a maximum of three options.*
 - In planning
 - In budgeting
 - In monitoring of the quality of services
 - In construction and maintenance of infrastructure
 - In voicing expectations and needs
 - In providing constructive feedback
 - In taking part in management meetings
- 16. At the level of a school/ heath care facility, what more could be done to help or motivate teachers/health workers to be more responsive, transparent and treat everyone according to its specific needs?

Please give examples of good practices that could be replicated in other schools/health care facilities, or new ideas.

17. What more could be done by the local or national government to help or motivate teachers/health workers to be more responsive, transparent and treat everyone according to its specific needs?

Please give examples of good practices that could be replicated in other schools/health care facilities, or new ideas.

THANK YOU SO MUCH FOR YOUR PARTICIPATION!

Annex 8. Minisurvey for teachers – Respondents profiles

	Nepal	DR Congo	Afghanistan	Kenya	Global
TOTAL RESPONDENTS	13	24	21	16	74
Gender					
Male	9	17	20	10	56
Female	4	6	1	6	17
Not disclosed	0	1	0	0	1
Age group					
Between 18-24	0	1	0	2	3
Between 25-34	6	18	6	6	36
Between 35-44	3	3	7	7	20
Between 45-59	4	2	7	1	14
60 and above	0	0	1	0	1
Position					
Teacher	12	21	13	15	61
School Director	0	2	4	1	7
Other	1	1	4	0	6
Type of school					
Primary School	1	3	0	0	4
Secondary School	8	20	4	15	47
Both Primary and Secondary	4	1	2	1	8
Other	0	0	15	0	15
Location of the school					
Urban	6	17	1	1	25
Rural	7	5	10	13	35
Peri-urban	0	2	8	2	12
Other	0	0	2	0	2

Annex 9. Minisurvey for sectoral experts

Preliminary remarks

This minisurvey is part of a research commissioned by Integrity Action titled: 'what enables and inspires frontline duty bearers to act with integrity'.

This minisurvey focuses on schools and health care facilities at community level in developing contexts. It aims to identify what can help and motivate teachers and health workers better respond to the expectations from their community, treat everyone according to their specific needs and share information on decisions and actions of their institution.

We aim to acknowledge your contribution. In case you prefer to remain anonymous, please indicate so in the next question. Thank you so much for your support!

Respondent profile

- 1. Name: or anonymous.
- 2. Gender: M, F, Prefer not to disclose
- 3. Name of the organization you work for:..... prefer not to disclose
- 4. Type of organization:
 - International NGO
 - National NGO/CSO
 - Private sector
 - Research
 - Government
 - Other. Please specify.
- 5. Position: Prefer not to disclose
- 6. What type of institutions are you most familiar with?
 - Schools
 - Health care facilities

As the following questions can be context specific, we would like to ask you to focus on the country where you have most experience.

7. Please indicate the country for which you will fill the answers below:

Research questions - the problems...

- **8.** What limits teachers/health workers to respond to the expectations from the community? Please select a maximum of three most important options.
 - Lack of **incentives** (condition 2)
 - Unclear **responsibilities** (condition 5)
 - Unaware of expectations from the community (condition 11)
 - Lack of **specific skills** (condition 14)
 - Impunity/lack of sanctions (condition 1)
 - Too high workload (condition 10)
- 9. What limits teachers/health workers most to take care of every student/patient according to their specific needs? Please select a maximum of three most important options.
 - Lack of materials and tools (condition 9)
 - Lack of adequate infrastructure (condition 8)
 - Too **high workload** (condition 10)
 - Social pressure to act otherwise (condition 13)
 - Unaware of the specific needs of some individuals (condition 11)
 - Impunity/lack of sanctions (condition 1)
- 10. What limits teachers/health workers most to share information on decisions and actions with the community? Please select a maximum of options.
 - Lack of **platform for dialogue** with citizens (condition 3)
 - Unclear protocols and procedures (condition 4)
 - Lack of guidance from your manager (condition 6)
 - Social pressure to act otherwise (condition 13)
 - The community does not ask for such information (condition 12)
 - Impunity/lack of sanctions (condition 1)

Research questions – the solutions...

For the following questions, we are looking for good practices that you have seen being implemented in some schools/HCF and could be replicated, or new ideas.

- **11. Within the school/ health care facility:** What good practices can be implemented at the level of a school/ health care facility to improve transparency?
- **12. Interface with citizens:** What good practices can help increase citizens 'engagement in the school/health care facility and the value given to citizens' participation?
- **13.** At the individual level: What can be done to motivate individual teachers/health workers to be more responsive, equitable and transparent towards the community they serve?

Here, 'integrity' is defined as going beyond teaching students, but also ensuring that teachers respond to the expectations of the community, take care of each student according to its specific needs, and share information on decisions and action of the school.

14. Oversight authorities: What (more) can be done by local or national governmental authorities to help or motivate teachers/health care workers to act with more integrity?

- **15. Role of CSOs/NGO:** What role could CSOs/NGOs play to help or motivate teachers/health care workers to act with more integrity?
- **16. Media:** What role could the media or other lobby groups play to help or motivate teachers/health care workers to act with more integrity?

Variability in different contexts

17. To which extent do the conditions and solutions influencing the integrity of teachers/health care workers vary with the context (socio-economic, political, cultural, etc.)? Thanks for sharing your experience in different countries or contexts.

THANK YOU SO MUCH FOR YOUR PARTICIPATION!

Annex 10. List of networks contacted for the minisurvey for sectoral experts

Network Name	Link/Website
All key informants interviewed in Phase 1	
Swiss Water and Sanitation Consortium - project teams and head offices of Swiss organisations	https://waterconsortium.ch/
Sustainable Sanitation Alliance	https://www.susana.org/en/
FRESH Partnership	https://www.fresh-partners.org/
Water Integrity Network	https://www.waterintegritynetwork.net/
MIET Africa	https://www.mietafrica.com/
Simavi Networks	https://simavi.org/
Swiss Agency for Cooperation and Development (SDC) Health and Education Network	https://www.shareweb.ch/site/Education
Community of Practitioners on Accountability and Social Action (COPASAH)	https://www.copasah.net/
Forum for African Women Educationalist (FAWE)	http://fawe.org/
Inter-Agency Network for Education in Emergency (INEE)	https://inee.org/
Global Partnership for Education	https://www.globalpartnership.org/
Global Campaign for Education for All	https://www.campaignforeducation.org
Education International	https://www.ei-ie.org
International Union for Health Promotion and Education	https://www.iuhpe.org/index.php/en/
Health (and WASH) Practitioners	Health and WASH Interest Group.
Global Education Cluster	https://www.educationcluster.net/OurTeam
Peregrine - Peregrine Discussion Group for Better Evaluation	discussion- peregrine@community.betterevaluation.org
Open Government Partnership Network (OGP)	
Dynamic Accountability Community of Practice	
Women in Transparency Network	
the Basel Institute on Governance	
Linked in profiles	

Annex 11. Minisurvey for sectoral experts – Respondents names and contacts

(While 104 experts have responded, this is the list of respondents that provided their email address)

	Name	Gender	Name of the organisation	Organisation	Position	Country	Institutions
			Health and Nutrition				
1	Abdullahi Nor	Male	Developments Society	National NGO/CBO	Project Manager	Somalia	HCF
2	Aboubacar Ballo	Male	Terre des hommes Lausanne	INGO	Responsible WASH	Mali	HCF
			Shine Community Development				
3	Alex Muia	Male	Programme	National NGO/CBO	Partnership Lead	Kenya	Schools
4	Alice DARAN	Female	HELVETAS	INGO	Coordination de project	Bénin	Schools
			Population and Development				
5	Alpha Ntayomba	Male	Initiative	National NGO/CBO	Chairperson	Tanzania	Schools
				Red Cross Red Crescent			
6	Amélie Courcaud	Female	Swiss Red Cross	Movement	Country Coordinator	Sudan	Schools
7	Ampofo Adino	Male	Success children college	Private sector	Teacher	Ghana	Schools
8	Aswini Kumar Nayak	Male	Vikash Sadan	National NGO/CBO	Secretary general	India	Schools
9	Atchade	Male	Ahed Togo	National NGO/CBO	Directeur	Togo	HCF
10	Barbara	Female	SDCC	Government	Regional health advisor	Ukraine	HCF
			Save Generation Development				
11	Bekelech Demesie	Female	Association (SGDA)	National NGO/CBO	Executive Director	Ethiopia	Schools
			Bella Foundation for Child and				
12	Bella Akhagba	Female	Maternal Care	National NGO/CBO	Founder/CEO	Nigeria	Schools
13	Bomba Selecta	Female	Haiti School Project	INGO	In-country Representative	Haiti	Schools
14	C. Bubb	Female	FWCS	Government	Educator	USA	Schools
15	Catherine Wanjihia	Female	UNICEF	UN body	Senior WASH Specialist	Kenya	Schools
16	Daniel Kasongi	Male	Governance Links Tanzania	National NGO/CBO	Project officer	Tanzania	Schools
17	Danilo Armando Padilla	Male	Omega Proyectos/ITCC	Private sector	Gestor de Proyectos	Honduras	Schools
18	Danilo Padilla	Male	ITCC/Omega Proyectos	Private sector	Gestor de Proyectos	Honduras	HCF
19	David Ogwang	Male	HEKS-EPER	INGO	Programme Officer	Uganda	Schools
20	Deborah Nabukeera	Female	ACORD Uganda	National NGO/CBO	School WASH Officer	Uganda	Schools
21	Deepthi Wickramasinghe	Female	University of Colombo	Government	Professor	Sri Lanka	Schools
22	DEMBELE	Male	Tdh	INGO	Chargé Wash	Mali	HCF
			MASSA Institute of Social		Head of Research And Data		
23	Diego Shirima	Male	Sciences Research Ltd	Research	Management	Tanzania	Schools
24	Djibrila Youssoufa	Male	PIVJET international	National NGO/CBO	Founder and CEO	Cameroun	Schools
25	Donald Kasongi	Male	Governance Links	National NGO/CBO	Director	Tanzania	HCF
26	Edgar Mubvuma	Male	MIET AFRICA	INGO	FutureLife-Now In-Country Coordinator	Zimbabwe	Schools

27	Edwin Kiraki	Male	Kiamunyi Secondary School	Government	Teacher	Kenya	Schools
					Director for Reproductive Health		
28	Fannie Kachale	Female	Ministry of Health	Government	Services	Malawi	HCF
29	Girum Girma	Male	Caritas Switzerland	INGO	Project Coordinator	Ethiopia	Schools
			Nairobi City Water and Sewerage				
30	Godfrey Masinde Barasa	Male	Company Ltd	Government	Regional Manager	Kenya	HCF
			Joint Effort to Save the				
31	Godfrey Rugumayo Mulinda	Male	Environment (JESE)	National NGO/CBO	Program Manager-WASH	Uganda	HCF
32	Hassan	Male	UHWA	INGO	MEAL	Somaliland	Schools
			Khairpur Rural Development				
33	Ikhtiar Khaskhelly	Male	Organization (KRDO)	National NGO/CBO	Executive Director	Pakistan	Schools
			MINISTRY OF HEALTH AND				
34	JAMES GIBBA	Male	SOCIAL WELFARE	Government	ADMINISTRATOR	Gambia	HCF
35	Karl Heuberger	Male	HEKS	INGO	thematic advisor on access to water	Honduras	Schools
	-		Department of Water &				
36	Kene Dick	Female	Sanitation	Government	Principal Chemist	Botswana	HCF
37	Krenare Lleshi	Female	Caritas Switzerland in Kosovo	INGO	Project Manager	Kosovo	Schools
			Association for Social Solidarity				
			and Empowerment Training				
38	Krishna Amirthalingam	Male	Trust (Asset Trust)	National NGO/CBO	Project Director	India	Schools
39	Kwabena Owusu Amoah	Male	Accra School of Hygiene	Government	Senior Health Tutor	Ghana	Schools
			SOLDIS (Solidarité pour le				
	LINJOUOM NCHOUTPOUEN		Développement et les Initiatives				
40	Abdou Aziz	Male	de Santé Publique)	National NGO/CBO	Promoteur / Project Team Leader	Cameroun	HCF
			Nigerian Women Agro Allied				
41	Lizzy Igbine	Female	Farmers Association	National NGO/CBO	National President.	Nigeria	HCF
42	Luke Kapchanga	Male	Emonyo Yefwe International	National NGO/CBO	DIRECTOR	Kenya	Schools
					Acting Deputy Director of Preventive		
43	Mavuto Thomas	Male	Ministry of Health	Government	Health Services	Malawi	HCF
44	Md Sahidul Islam	Male	UNHCR	INGO	WASH OFFICER	Bangladesh	Schools
					Monitoring, Evaluation, Learning and		
45	Micheal Fredrick Ssenoga	Male	ActionAid International	INGO	Research Coordinator	Global	Schools
			Centre d'étude et réalisation en				
			environement, eau et				
46	MOMO BOUTI GERVAIS	Male	assainissement	Private sector	FONDATEUR	Cameroun	HCF
47	Monday Akor	Male	STETiS Limited	Private sector	Data Analyst Officer 1	Nigeria	HCF
48	Moses Rujumba	Male	Caritas Fort Portal-HEWASA	National NGO/CBO	Program Officer	Uganda	Schools
			Bicosito Bangladesh Foundation				
49	Mr. Jakaria Sumon	Male	(BBF)	National NGO/CBO	Executive Director	Bangladesh	Schools

50	Mubashir Hassan	Male	Malteser international	INGO	Program Coordinator	Pakistan	HCF
51	Mussa Raido	Male	Centre for Community Initiatives	National NGO/CBO	Researcher	Tanzania	Schools
52	Narayan Joshi	Male	sankalpa	National NGO/CBO	ED	Nepal	HCF
53	Natasha Mesko	Female	Freelance consultant	Other	Freelance consultant	Nepal	HCF
54	Peter Arero	Male	Ministry of health	Government	Manager	Kenya	HCF
55	Phozisa Malusi	Female	Buyambo Project Ideas	Private sector	Managing Director	South Africa	Schools
56	Prof Maxwell C. C. Musingafi	Male	Zimbabwe Open University	Research	lecturer	Zimbabwe	Schools
	RAJA KRISHNA MURTHY						
57	MORLA	Male	Centre for Good Governance	Research	Senior Knowledge Manager	India	Schools
			Swiss Water and Sanitation				
58	Ramesh Bohara	Male	Consortium	INGO	Regional Advisor	Nepal	Schools
59	Rogers Musiitwa	Male	ACORD-UGANDA	National NGO/CBO	Project Assistant-PHAST	Uganda	HCF
			Joint Effort to Save the				
60	Rugumayo Godfrey Mulinda	Male	Environment (JESE)	National NGO/CBO	Program Manager-WASH	Uganda	Schools
61	Sa'adatu	Female	Independent Consultant	Private sector	Independent Consultant	Nigeria	HCF
62	Safiyatou Mohamed	Female	Pivjet International	INGO	Enseignante	Cameroun	Schools
			BROAD GREEN HEALTH				
63	SAKWE MAURICE ITOE	Male	FOUNDATION	National NGO/CBO	Program Manager	Cameroon	HCF
			Sichuan Industry and Business				
64	Sam Shan	Male	University	Private sector	Teacher	China	Schools
					Service Provider Capacity Building		
65	Samson Wachara	Male	KIWASH	INGO	Specialist	Kenya	HCF
66	Sashie	Female	MIET Africa	National NGO/CBO	Country Manager	Zambia	Schools
					Blue School and Water Integrity		
67	seanghak khin	Female	Caritas Switzerland	INGO	Advisor	Cambodia	Schools
			Participatory Human Rights				
68	Shah Tasadduque Ali Khan	Male	Advancement Society	National NGO/CBO	Executive Director	Bangladesh	Schools
69	Tigist Gebremedhin	Female	HEKS	INGO	WASH Coordinator	Ethiopia	Schools
70	Tim Myers	Male	Haiti School Project	INGO	Board Member	Haiti	Schools
			Child Health and Development				
71	Tom	Male	Centre Makerere University	Government	Research Assistant/Data Entrant	Uganda	HCF
			Gender and Environmental Risk				
72	Ukange Ichivirbee	Male	Reduction Initiative	National NGO/CBO	Program officer WASH	Nigeria	Schools
73	Vinayak Gupta	Male	NUS R and G innovation_ LOTA	Research	Co-PI	India	Schools
74	Vivek Sharan	Male	Water For People	INGO	State in Charge	India	Schools
			Livelihood Relief & Development				
75	Yusuf Abdi Lare	Male	Organization	National NGO/CBO	Chairperson	Somalia	Schools
			GDS - Grameen Development				
76	Zahid Hossain Khan	Male	Society	National NGO/CBO	Executive Director	Bangladesh	Schools

Annex 12. Minisurvey for sectoral experts – Respondents profiles

Total number of respondents per gender (F/M)

Gender	Number
Female	33
Male	71
Total	104

Total number of respondents per sector

Total number per sector		
Schools	66	
HCF	39	
Total	104	

Total number of respondents per country (alphabetical order)

Country	Total	Health	Education
Bangladesh	4	0	4
Bénin	1	0	1
Botswana	1	1	0
Cambodia	1	0	1
Cameroon	5	3	2
China	1	0	1
Ethiopia	4	0	4
Gambia	1	1	0
Ghana	3	1	2
Global	2	1	1
Guinée	1	0	1
Haiti	2	0	2
Honduras	3	1	2
India	6	0	6
Kenya	8	4	4
Kosovo	1	0	1
Lesotho	1	1	0
Madagascar	1	1	0
Malawi	4	2	2
Mali	4	3	1
Mozambique	2	1	1
Myanmar	1	1	0
Nepal	3	2	1
Niger	1	1	0
Nigeria	9	6	3

Pakistan	2	1	1
Philippines	1	0	1
Somalia	2	1	1
Somaliland	1	0	1
South Africa	2	0	2
South Sudan	2	1	1
Sri Lanka	1	0	1
Sudan	1	0	1
Tanzania	7	1	6
Togo	1	1	0
Uganda	7	3	4
Ukraine	1	1	0
USA	1	0	1
Zambia	3	0	3
Zimbabwe	2	0	2
Total	104	39	65
Percentage	100%	37%	63%

Annex 13. Question guide for focus country work

→ For all KIIs, start by explaining the purpose of the research and clarifying the definition of integrity.

Integrity Action's approach is citizen-centered and focuses on supporting citizens to engage in constructive dialogue with duty-bearers on commitments that have been made and not delivered, and on how these shortfalls can be collaboratively overcome. More specifically:

- Duty bearers should inform citizens on what is promised;
- Citizens are involved in checking that it is delivered and provide feedback;
- Information on whether it is delivered should be made public;
- In case the promise are not delivered, even if it is the responsibility of duty bearers to find a solution, citizens and duty bearers can discuss on how best to address the issues (collaborative approach).

KIIs with sectoral experts

Assessing the extent of the problem/ Main limiting conditions

- In this country, to which extent are teachers/health workers able to act with integrity? OR Is integrity of teachers/health workers a real problem?
- Please explain some of the issues around integrity in the context you work in.
- What are some of the reasons why frontline duty-bearers in schools and HCFs do not act with integrity?

Main conditions that need to be in place

- What are some of the conditions that are currently present in your context that help duty bearers to act with integrity?
- Can you identify other conditions that need to be in place to support and motivate duty bearers to act with integrity?

Approaches that can strengthen these conditions

- What are some approaches/good practices that you have seen that can strengthen these conditions? Here, think of the different levels:
 - Working with citizens;
 - Improving the interaction between citizens and frontline duty-bearers;
 - Working from within: with the duty bearers;
 - Working to improve the interaction between duty bearers and governmental institutions;
 - Other? Media?

Feedback and opinion on Integrity Action's approach

- → Explain the principles of approaches such as Integrity Action's
 - Do you think increasing citizens' participation and feedback can help improve the integrity of frontline duty-bearers?
 - Do you find the approach of Integrity Action feasible for the context/s you work in?
 - Do you think teachers would feel comfortable to involve citizens in monitoring that the promises that are made are implemented and evaluate the quality of services provided?
 - What challenges do you see? What would it require to be implemented effectively?
 - Do you find it works better in certain contexts?

KIIs with teachers and health workers

Initial situation: Conditions in place to help act with integrity

- Inductive and general: What is currently in place in your school/HCF that helps or motivates you and your colleagues to work with integrity?
- Or inductive and specific if the respondent struggle to answer the question:
 What is currently in place in your school/HCF that helps or motivates you and your colleagues:
 - To respond to expectations from students-parents/patients? (responsiveness)
 - To take care of every student/patient according to their specific needs? (equity)
 - To share information on decisions and actions with parents-students/patients? (transparency)

Problems: Main limiting conditions to act with integrity

- Either general: What limits you or your colleagues to always follow integrity principles in your work?
- Or specific: What limits you or your colleagues:
 - To respond to expectations from students-parents/patients? (responsiveness)
 - o To take care of every student/patient according to their specific needs? (equity)
 - To share information on decisions and actions with parents-students/patients? (transparency)

Solution: What could help you do your work with more integrity?

- Either general or specific: What could help or motivate you and your colleagues work with more integrity? Here, think of the different levels:
 - o To improving the interaction with citizens;
 - At the level of the school;
 - o To improve the interaction with governmental institutions;
 - Other? Media?

Examples of more specific questions

Deductive and specific questions can be asked in case the respondent struggles to answer the questions above. This can help to assess whether some conditions from Phase 1 are in place, whether it would be helpful and motivating to put them in place, and what can be done to help this process. See below for examples. These can also be used for follow-up on some points mentioned. Not all questions need to be asked in each interview. Only a few each time, depending on the direction of the discussion.

Effective sanctions and disciplinary actions & Effective incentives (condition 1 and 2)

- Are there any incentives to motivate you to go beyond just teaching or treating patients?
- If so, does that really motivate you? Can you give examples?
- If not: could that motivate you do your work better?

Clear management structures & Being aware of needs and expectations from citizens & Citizens actively demand integrity (condition 3, 11 and 12)

- Are there specific platforms for engagement of citizens (students, parents, patients)? If so: which ones? Who do you engage and in what type of activities? Are these platforms efficient?
- If not: do you think it would help to engage citizens more? And if so, what would you suggest?
- Are parents-students/citizens usually happy or reluctant to be engaged? Please specify?

Clear internal protocols and procedures (condition 4)

- Do you think protocols and procedures to ensure that information is available and transparent are clear? If so, what is in place?
- If not, what could be done to improve this?

Level of responsibilities of frontline duty-bearer (condition 5)

• Do you think you would be more able to act with integrity if you had more responsibilities? Please explain.

Support from the direct supervisor (condition 6)

• Do you feel you need more support from your supervisor to be able to do you work with integrity?

Support from the oversight institutions (condition 7)

- What type of support do you get from oversight authorities?
- What more could be done to help you do your work with integrity?

Physical infrastructures & tools and equipment & human resources (condition 8, 9 and 10)

- How adequate are the physical infrastructures and the tools and materials available in the school for you to do your work?
- Does this sometimes limit you from being able to do your work with integrity? If so, please explain how.
- In case it is not adequate, what could be done to better use these resources?

Being aware of needs and expectations from citizens (condition 11)

 How do you know/collect information on what citizens expect and whether they are satisfied with the services you provide? What could be done to improve these?

Social pressures/recognition (condition 13)

• Do you feel that, sometimes, external pressures from family or friends is a challenge for you to act with integrity (treating everyone equality, being transparent etc.).

Adequate skills and competence (condition 14)

Do you feel you sometimes lack the specific skills to be able to act with integrity?

A bit more on WASH infrastructure

- What can be done to ensure that construction work is done with better quality and avoid shortcuts from contractors?
- What can be done to ensure that it is better managed?

Feedback on opinion on integrity action's approach

- → Explain the principles of approaches such as Integrity Action's
 - Do you think increasing citizens' participation and feedback can help you and your colleagues to work with more integrity? If so, how? In which activity would it be most useful to engage citizens?
 - Would you feel comfortable to involve citizens in monitoring that promised made are implemented and assess the quality of services you provide?
 - Would you be comfortable if this information is made public?
 - What benefit would you expect from such an approach?

(we are expecting answers such as: improved efficiency, money saved, better relationships with communities, no finger pointing")

KIIs with local education and health authorities

Assessing the extent of the problem/ Main limiting options for schools and/or HCF

- In this country, to which extent are teachers/health workers able to act with integrity? OR Is integrity of teachers/health workers a real problem?
- Please explain some of the issues around integrity in the context you work in.
- What are some of the reasons why frontline duty-bearers in schools and HCFs do not act with integrity?

Current support provided to teachers/health workers

 What support are you currently providing to teachers/health workers to help them or motivate them to work with integrity? Do you think it is adequate? If not, what limits you? What more could you do?

Influence of other actors on the integrity of teachers/health workers

- National government: what is currently done by the higher level authorities to help or motivate these teachers/health workers? What more could be done?
- Within the institution: What can be done at the level of the schools/HCF to influence its staff to work with integrity?
- At the individual level: What could be done to motivate teachers/health workers to act with integrity?
- Citizens: Do you think increasing citizens' participation can help improve integrity of teachers/health workers? If so, how? Do you have specific success stories or good practices that could be replicated, or new ideas?
- Role of CSOs/NGO: What role could CSOs/NGOs play to influence the integrity of teachers/health workers? Do you have specific success stories or good practices that could be replicated, or new ideas?
- Media: What role could the media or other lobby groups play to influence the integrity of teachers/health workers? Do you have specific success stories or good practices that could be replicated, or new ideas?

Annex 14. List of persons interviewed – Nepal focus country work

Frontline duty bearers

	Name	Gender	School	District	Designation
Sch	ools				
1	Mr. Narayan Prasad Bhatta	Male	Chandeshwori Secondary School (Youth Initiative)	Sindhupalchowk	Teacher
2	Mr. Kailash Tamang	Male	Shree Chandi Adarsha Saral Secondary School (CAHURAST)	Chakupat, Lalitpur	Teacher
3	Mr. Ramjee Nepal	Male	Seti Devi Panchakanya Secondary School (Youth Initiative)	Sindhupalchowk	Teacher
4	Mr. Krishna Dhungana	Male	Terse Secondary School (CAHURAST)	Melamchi 6, Sindhupalchowk	Head teacher
5	Mr. Gyan Bahadur Lama	Male	Shree Nurbuling Manichaur Secondary School (Caritas)	Helambu Rural Municipality, Sindhupalchowk	Head teacher
6	Ms. Sabitri Dhital	Female	Shree Panchakanya Secondary School (Youth Initiative)	Kathmandu	Teacher
7	Mr. Ram Chandra Poudel	Male	Shree Chilaune Secondary School (CAHURAST)	Paanchpokhari Thangpalkot, Sindhupalchowk	Teacher
8	Ms. Mira Tamang	Female	Siddhartha Basic School (Caritas)	Sindhupalchowk	Head teacher
HCF					
1	Dr. Subarna Shrestha	Male	Sorahawa Primary Health Care (PHCC)	Bargiyatal Rural Municipality ward number-3, Bardiya	Doctor
2	Mr. Humanath Devkota	Male	Deudakala health post	Bansgadhi Municipality ward number -7, Bardiya	HCF In charge
3	Mr. Tanka Prasad Gartaula	Male	Sanoshree health post	Madhuban Rural Municipality ward number-6, Bardiya	HCF In charge
4	Mr. Kriparam Gartaula	Male	Bagnaha health post	Thakurbaba Rural Municipality ward number-4, Bardiya	HCF In charge

Governmental representatives at municipal level

Person met		Position	Organisation		
1	Mr. Bhakta Bahadur GC	Health Coordinator, Health	Bangalachuli Rural Municipality, Dang,		
+	IVII. BIIAKLA BAIIAUUI GC	Section	Gandaki Province		
2	2 Mr. Ohimana Dalia	Education Coordinator,	Tribeni Rural Municipality, West Rukum,		
2	Mr. Obiram Roka	Education Section	Karnali province		

Representatives from NGOs/key organisations

	hepresentatives from trees, key organisations					
	Person met	Position	Organization			
1	Mr. Kamal Baral	Director	Nepal Red Cross Society/Swiss Red Cross			
2	Mr. Raj Kumar Kshetri	Deputy Director	Nepal Red Cross Society/Swiss Red Cross			
3	Mr. Bodh Narayan Shrestha	WASH officer	UNICEF Nepal			
4	Mr. Prakash Bohara	Health & WASH Coordinator	Terre des Hommes Nepal			
5	Mr. Ek Dev Panthi	Central Committee Member	Nepal National Teachers' Association			

Annex 15. List of persons interviewed – Kenya focus country work

Frontline duty-bearers

	Name	Gender	Institution	County	Designation
Scho	ools				
1	Mutai Alfred	М	Kasisiyo Primary School	Kericho	Head teacher
2	Richard Korir	М	Kasisiyo Primary School	Kericho	Head teacher
3	Nixon Aswani	M	Kamasega Primary School	Kericho	Head teacher
4	Jackson Matangwony	M	Kamasega Primary School	Kericho	Teacher
5	Flossy Sirma	F	Kimugul Primary School	Kericho	Deputy Head teacher
6	Samwel K Sigei	М	Baraka Primary School	Kericho	Head teacher
7	Vincent Kanyingi	М	Hospital Hill Primary School	Nairobi	Teacher
8	Peter Kiguru	М	Hospital Hill Primary School	Nairobi	Senior teacher
9	David Chepkwony	М	Kapgetuny Primary School	Kericho	Deputy Head teacher
10	Simon K Mitei	М	Kimugul Primary School	Kericho	BoM chairman
HCF					
1.	Berlyl Okombo	F	Kaitui Dispensary (Level 2)	Kericho	Nurse in charge
2.	Phillip Mutisya	М	Kapsoit Dispensary (Level 2)	Kericho	Nurse in charge
3.	Trizah Wainaina	F	Githabai Dispensary (Level 2)	Nyandarua	Nurse in charge

Governmental representatives at county level

	Person met	Position	Organisation
1.	Martin Muori	Health Administrator	Government of Kiambu county
2.	Patrick Gathirua	Education Officer	Government of Nakuru county
3.	Nickson Kibet	Clinical Officer	Government of Kericho county

Representatives from NGOs/key organisations

	Person met	Position	Organization
1.	Mwangi Nyagah	Gilgil Sub-County Representative	Kenya National Union of Teachers
2.	Alvans Odero	Parklands Sub-County Representative	Kenya National Union of Teachers
3.	Patrick Munyeri	Water Systems Advisor, USAID	Mercy Corps
4.	Caroline Macharia	WASH Specialist	Rural Focus
5.	Benard Waweru	Contractor	Future Construction Company
6.	James Gakahu	Contractor	Super Extra Builders Construction Company
7.	Peter Kimuyu	Artisan	Consultant
8.	Samuel Matuku	Artisan	Consultant

Annex 16. Results from teachers' self-assessment on integrity

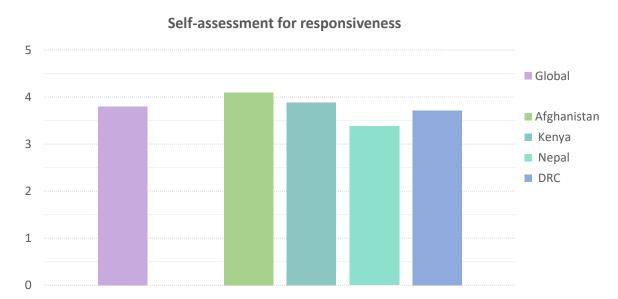


Figure 16.1. Teachers' self-assessment results on the extend their school or HCF is currently able to respond to the expectations from the community.



Figure 16.2. Teachers' self-assessment result on the extend their school or HCF is currently able to are able to take care of everyone according to their specific needs.



Figure 16.3 Teachers' self-assessment result on the extend their school or HCF is currently able to are able to share information on decision & actions with the community.

Annex 17. Relative importance of limiting conditions

Summary

Results from the minisurveys

Responses from teachers - Summary of the most limiting conditions

Regarding what limits duty-bearers to be able to respond to the expectations of the community (responsiveness):

- 'Lack of incentives' was the most mentioned limiting conditions for duty-bearers, according to both experts and teachers;
- 'Lack of specific skills' was considered as the second most limiting conditions by experts, but was not often mentioned by teachers;
- Teachers selected being 'unaware of needs and expectations' of the community as the second most limiting condition;
- 'Lack of sanction' was the least selected limiting conditions for both experts and teachers.

Regarding what limits duty-bearers to be able to take care of everyone according to their specific needs, experts and teachers' views were similar (equity):

- 'Lack of materials and tools' and 'lack of infrastructure' were the two most limiting conditions selected by both teachers and experts;
- 'Lack of sanction' was one of the least selected limiting conditions.

Regarding what limits duty-bearers to share information on decisions and actions with the community (transparency):

- For teachers, 'community does not ask for such information' is the most limiting condition, while for experts, it is 'lack of platform for dialogue';
- 'Lack of sanction' was one of the least selected limiting conditions, for both experts and teachers.

Note:

- The Y axis displays the number of times a specific response was given compared to the total number
 of responses given by all respondents. Note that, as the number of answers given by a respondent
 could vary between 1 and 3, the % of responses displayed in this graphic cannot be interpretated as
 the % of respondents.
- The limiting conditions are ordered based on the results of the minisurvey for teachers: from the most limiting ones to the least limiting ones.

Limiting conditions for responsiveness 30% ■ Teachers 25% Experts 20% 15% 10% 5% 0% Unclear responsibilities Lack of specific skills Lack of incentives Lack of sanctions Unaware of expectations Motkload too high

Figure 17.1. Experts' and teachers' perception of the relative importance of different limiting conditions to influence the way health workers/teachers are able to respond to the expectations from the community.

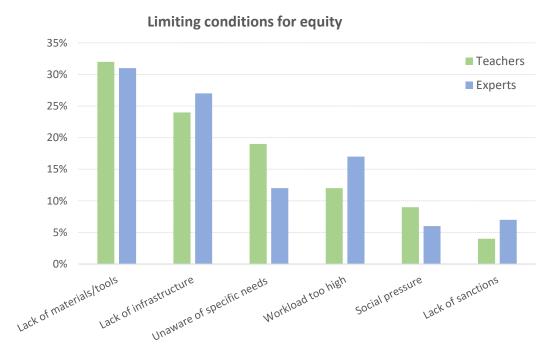


Figure 17.2. Experts' and teachers' perception of the relative importance of different limiting conditions to influence the way health workers/teachers are able to take care of everyone according to their specific needs.

Limiting conditions for transparency 35% ■ Teachers 30% Experts 25% 20% 15% 10% 5% 0% Community does not ask Lack of dialogue platform Unclear protocols Lack of manager guidance Lack of sanctions Social pressure

Figure 17.3. Experts' and teachers' perception of the relative importance of different limiting conditions to influence the way health workers/teachers are able to share information on decision & actions with the community.

Annex 18. Relative importance of limiting conditions per country

Results from the minisurveys - Responses from teachers.

Regarding limiting conditions for responsiveness, the differences worth noting include:

- In Afghanistan, teachers felt less limited by the 'lack of incentives' and 'unclear responsibilities' than teachers in other countries, while being 'unaware of expectations' and the 'lack of specific skills' appeared more limiting to them;
- In Kenya, teachers felt more limited than the average by 'workload too high' and hardly referred to 'lack of skills';
- In Nepal, teachers selected 'Lack of specific skills' as the main limiting conditions while this was comparatively less limiting in other countries; but 'high workload' and 'unaware of expectations of community' was less limiting to them;
- In the DRC, the most mentioned limiting condition was the 'lack of incentives'. No teacher mentioned 'lack of skills'.

<u>In terms of equity</u>, responses were quite similar among the four countries, with 'lack of materials and tools', 'lack of infrastructure' and 'unaware of specific needs' being the most limited conditions to take care of every students according to their specific needs.

<u>In terms of transparency</u>, all four countries considered the fact that 'community does not ask for information' as the main limiting condition and 'lack of sanctions' as one of the least important. Regarding the other conditions:

- In Afghanistan, 'social pressure' was the second most mentioned limiting condition, while 'unclear protocols' was hardly mentioned;
- In Kenya, 'unclear protocols' seem to particularly limit teachers, while 'lack of manager guidance' does not seem to be a real issue;
- In Nepal, the 'lack of dialogue platforms' seems less limiting than for other countries, while the 'lack of manager guidance' seems more limiting than for other countries;
- In the DRC, the 'lack of dialogue platform' was also relatively less limiting than for other countries, and 'lack of sanctions' was mentioned more than in other countries.

Note:

- The Y axis displays the number of times a specific response was given compared to the total number of responses given by all respondents. Note that, as the number of answers given by a respondent could vary between 1 and 3, the % of responses displayed in this graphic cannot be interpretated as the % of respondents.
- The limiting conditions are ordered based on the results from the average from all countries (pink colour): from the most limiting ones to the least limiting ones.

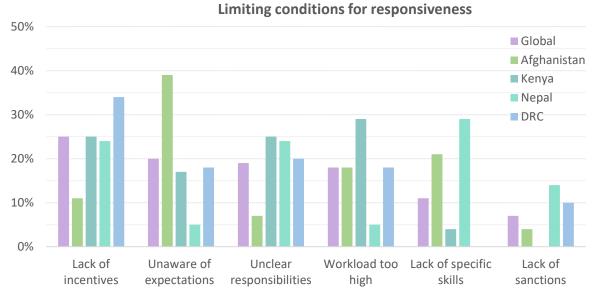


Figure 18.1. Teachers' perception of the relative importance of different limiting conditions to influence the way they are able to respond to the expectations from the community, per county.

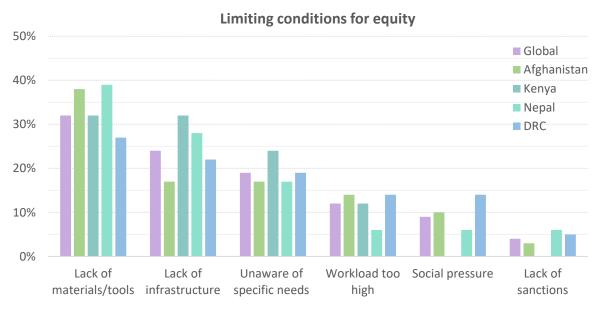


Figure 18.2. Teachers' perception of the relative importance of different limiting conditions to influence the way they are able to take care of everyone according to their specific needs, per country.

Limiting conditions for transparency 50% ■ Global ■ Afghanistan 40% ■ Kenya Nepal 30% DRC 20% 10% 0% Community Lack of dialogue Unclear Lack of manager Social pressure Lack of platform does not ask protocols guidance sanctions

Figure 18.3. Teachers' perception of the relative importance of different limiting conditions to influence the way they are able to share information on decision & actions with the community, per country.

Annex 19. Relative importance of limiting conditions per sector

Note:

- The Y axis displays the number of times a specific response was given compared to the total number of responses given by all respondents. Note that, as the number of answers given by a respondent could vary between 1 and 3, the % of responses displayed in this graphic cannot be interpretated as the % of respondents.
- The limiting conditions are ordered based on the results from the education experts: from the most limiting ones to the least limiting ones.

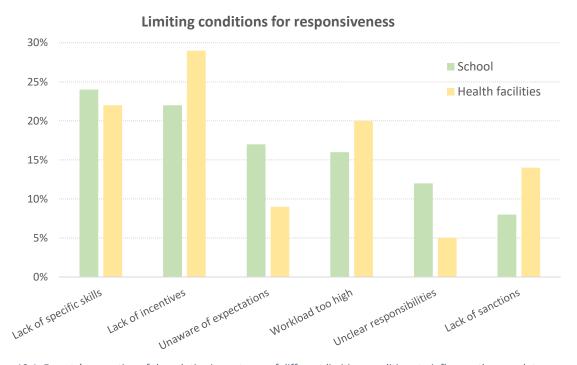


Figure 19.1. Experts' perception of the relative importance of different limiting conditions to influence the way duty-bearers are able to respond to the expectations from the community, per sector.

Limiting conditions for equity 35% School 30% Health facilities 25% 20% 15% 10% 5% 0% Unaware of specific needs Lack of materials tools Lack of infrastructure Workload too high Lack of sanctions Social pressure

Figure 19.2. Experts' perception of the relative importance of different limiting conditions to influence the way duty-bearers are able to take care of everyone according to their specific needs, per sector.



Figure 19.3. Experts' perception of the relative importance of different limiting conditions to influence the way duty-bearers are able to share information on decision & actions with the community, per sector.

Annex 20. Teachers' responses on questions related to Participation

Note:

- The Y axis displays the number of times a specific response was given compared to the total number of responses given by all respondents. Note that, as the number of answers given by a respondent could vary between 1 and 3, the % of responses displayed in this graphic cannot be interpretated as the % of respondents.
- The responses are ordered based on the results from the average: from the most important to the least important.

At which levels would intervention be most beneficial?

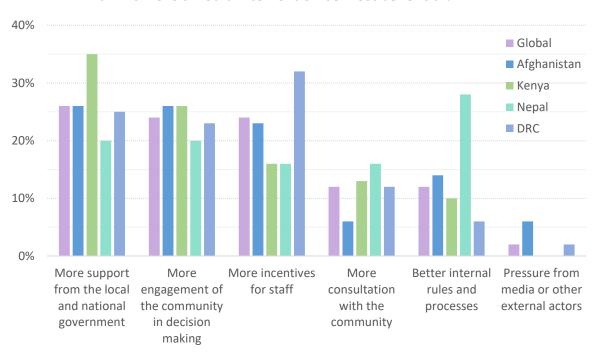


Figure 20.1. Teachers' opinion on what could help or motivate them to be more responsive, transparent and treat everyone with equity (type of interventions).

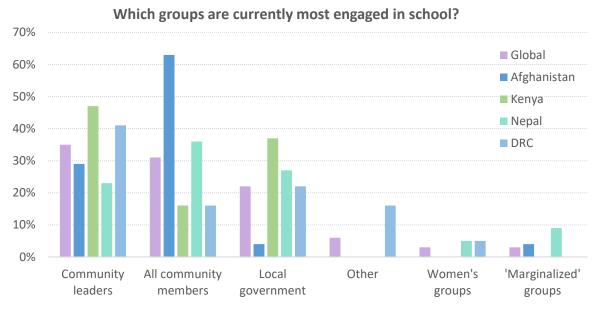


Figure 20.2. Teachers' answers on whom from the community is actively engaged in their school.



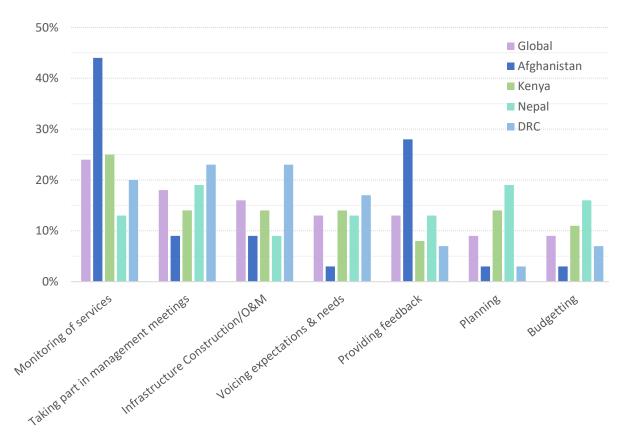


Figure 20.3. Teachers' opinion on the activities in which they think community engagement is most useful.