

# ***Engaging Citizens: One Route to Health Care Accountability***

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**Executive Summary**

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## Executive Summary

Public outcry for governments to increase their accountability to citizens has reached a feverish pitch in Canada and shows no sign of abating. Canadians' revised expectations of government were also plainly evident in recent debates about the future of health care. Governments are responding to these calls with a range of tools for improving accountability relationships between themselves and their citizens. Greater public involvement in health care decision-making is one of the tools being called upon to address accountability concerns.

At the same time, there has been a shift away from traditional public participation practices to citizen engagement as a method for establishing and re-establishing trust between citizens and decision makers. Citizen engagement has become the "new public participation" with central tenets that include greater emphasis on information and power sharing, and mutual respect and reciprocity between citizens and their governors. The roots of citizen engagement and the democratic right for citizens to participate in public affairs, are inextricably linked to notions of accountability.

The accountability relationships typically discussed in the context of direct government-citizen interactions are primarily vertical and uni-directional (i.e., governments being made accountable to citizens). This view fails to capture and build on the two-way, reciprocal nature of citizen engagement. A more promising means for developing citizen engagement as a mechanism for fostering citizen accountability is to promote and reinforce bi-directional accountability mechanisms that are both vertical (i.e., government to citizens and citizens to government) and horizontal (i.e., between citizens).

There are three key accountability dimensions against which its performance is routinely measured: 1) sanction, 2) answerability and 3) relationship-building. When placed on a continuum, sanction is usually considered the strongest accountability tool, followed by answerability and, finally, relationship-building. For citizen engagement, we argue that the continuum should be reversed to assign relationship-building as the strong measure, sanction the weak measure, and answerability remaining in the middle. Citizen engagement processes, by definition, wield their accountability through the formation of strong relationships built upon trust, openness and responsiveness between citizens and government or public institutions. Answerability in the form of transparency, clear objectives and means for involving citizens and linking their input back into the decision process are also essential. Sanction is rarely available in citizen engagement processes and is less of a requirement if the first two criteria are adequately met.

Despite widespread calls for increased citizen engagement as a means for increasing citizen-governor accountabilities, there have been few, if any, rigorous assessments of the effects of this practice on accountability performance. Decision makers are only just beginning to pay attention to the design of accountable public participation processes so the attention paid to evaluating these nascent attempts has been minimal. More generally, building rigorous evaluation into public participation processes has been an underdeveloped area of activity in many policy sectors

and particularly in the health sector where public participation as a corporate and/or scholarly activity has had a short history.

The use of citizen engagement mechanisms in the Canadian health system is in its infancy. While recent high profile uses of mechanisms such as the citizens dialogues conducted for the Romanow Commission have generated enthusiasm in some quarters, it is a long way away from becoming an institutionalized mechanism for fostering democratic accountability and improved public policy making. A major barrier to its acceptance is that its practical and theoretical underpinnings represent major challenges to the long-standing power relations that characterize health system decision-making in Canada and between the governed and the governing in Canada more broadly. Information exchange, power sharing and partnership is not easily embraced in a policy sector dominated by professional expertise in the clinical and managerial domain.

Considerable resources are also required if citizen engagement is to be given serious consideration as an accountability mechanism. These include the need for nurturing political institutions and cultural receptivity to build the citizen engagement agenda. Access to information and a strong role for the media in promoting democratic dialogue are also essential tools as are the development and fostering of a strong civic infrastructure which lays the foundation for citizen engagement. Although tempting to create new institutions for citizen engagement, given the challenges described here, building on existing institutions and relationships may be more productive in the short-term as a means for re-establishing trust with citizens.

Expectations for improving the accountability of the Canadian health care system to its citizens are high. Governments are recognizing the need to develop mechanisms to achieve these accountabilities but they are being developed and implemented largely in the absence of guiding principles, a strong research base for informing these activities and criteria for assessing whether accountability has been achieved. Citizen engagement is an emerging mechanism for achieving citizen-government accountability. The principles upon which it is based – the establishment of open and transparent relationships between citizens and governors – overlap with key features of accountability and suggest that citizen engagement practices offer promise as mechanisms for fostering improved accountability. There are considerable challenges to advancing the citizen engagement agenda in the Canadian health care system. Information exchange, power sharing and partnership are threatening to a policy sector dominated by professional expertise in the clinical and managerial domain. In addition, considerable resources are needed to support citizen engagement practice in Canada, which will require the same political commitment that Canadians are seeking with regard to strengthened accountability.

Key words: citizen engagement, accountability, mechanism, health policy, evaluation.