**Coupling social accountability with legal empowerment in Mozambique**

Namati is an international organization that partners with civil society and governments around the world on implementation, research, and advocacy related to access to justice. To date, Namati has developed grassroots paralegal efforts with five countries in Africa (Kenya, Liberia, Mozambique, Sierra Leone, and Uganda) and three in South Asia (Bangladesh, Burma, and India). Namati is currently experimenting with syntheses of social accountability and access to justice tools in hopes of generating improvements in the delivery of essential services.

In Mozambique, Namati is working to equip community members to hold the health care system accountable for its service provision quality. The program is led by a small core of health advocates who work in both health care facilities and target communities.

Mozambique remains marked by extreme poverty, high rates of malnutrition and infectious disease, a dire shortage of human resources, and inadequate infrastructure. Often, the nearest health care facility lies at least 10 to 15 kilometers from a patient’s home, with no transport available. Since March 2013, Namati has supported health advocates in deploying a range of social accountability and legal empowerment tools. This has enabled them to work flexibly with local community members, health care providers, and public officials to enhance the quality and reach of health care services.

One of the program’s measures involves holding public fora where community members, health care providers, and village health committee members can discuss key health indicators and aggregate data concerning grievances, with the aim of spurring collective action. As recently as June 2013, there was not a single functioning village health committee in any of the project areas. Between March and June, the health advocates working with Namati helped establish or revitalize these committees through a series of training workshops and community meetings. Namati’s work seeks to understand and document the factors that influence the effectiveness of village health committees, as well as to identify how the Ministry of Health can best mobilize and support effective village health committees on a broader scale.

Namati’s health work in Mozambique also includes a comprehensive communications and education strategy. The health advocates help translate key social and health legislation and policy into local languages and, for community members with limited literacy, offer rights awareness through radio programming, public talks, door-to-door visits, and interactive theater. They also provide targeted training to health care providers, HIV/AIDS support groups, and other grassroots associations, offering them scientific information balanced with dialogue on health rights and policy. Equipping these groups with information about their rights and responsibilities promotes their active participation in the fora described above. It also encourages them to approach the health advocates for further assistance.

Indeed, one of the health advocates’ main tasks is to work with community members to pursue redress for their grievances. While many public health facilities in Mozambique have complaint boxes in place, these are seldom used due to low literacy levels among patients, fear of retribution, and lack of institutional responsiveness. As a result, the health advocates have begun accepting grievances themselves, which they try to resolve with the active input of community members and the village health committees. Each grievance is captured in a standardized case form, which is then added to a central database, enabling internal case review, aggregate analysis, and comparison both within Mozambique and with other settings where Namati works.

Between March and December 2013, the health advocates registered 228 cases, nearly two-thirds of which were filed by women. Examples of success include

* getting a district hospital equipped with a bathroom for use by outpatients or family members;
* getting diabetes patients’ glucose levels monitored during monthly outreach clinics;
* addressing stock-outs of essential drugs;
* getting a health care facility cleaner to stop administering vaccines, performing deliveries, and demanding bribes;
* getting an ambulance to come to Machubo, an isolated area; and
* improved privacy for patients in health care facilities.

Namati has found that community members are more comfortable registering their complaints with the health advocates because of their independence from government, their accessibility, and their approachability. The health advocates have also been instrumental in beginning to break down communication barriers between health care providers and the communities they serve. This has helped health care providers to consider the health advocates as allies, and they now call on the health advocates for assistance in resolving challenges they face in their day-to-day work.

In situations where local leaders and health care staff are slow to respond to grievances, Namati supports the health advocates in taking the case to the district or provincial level and, if necessary, to the central Ministry of Health. Over time, the project partners hope to transfer the roles played by the health advocates to the village health committees.