SDG Indicator 16.6.2

Proportion of the population satisfied with their last experience of public services

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Key concepts: satisfaction with public services

Target 16.6: Develop effective, accountable and transparent institutions at all levels

Indicator 16.6.2: Proportion of the population satisfied with their last experience of public services

Satisfaction (for each service) measured based on: Assessment of relevant service 'attributes' + Overall satisfaction

5 most relevant attributes per service type, among the following:

- Accessibility
- Affordability
- Quality of facilities
- Equal treatment
- Courtesy
- Timeliness
- Effective service delivery process

Public services = services delivered by public institutions

Selected 3 'services of consequence', relevant to all countries:

- Healthcare
- Education
- Government (i.e. 'administrative') services

N.B. Other SDG indicators on health/education measure service provision (national coverage) mainly from administrative sources **Healthcare services:** Focus on respondents' <u>last experience</u> (or that of a child in their household who needed treatment and was accompanied by the respondent) with *primary* healthcare services over the past 12 months – that is, basic health care services provided by a government/public health clinic, or covered by a public health system

Thinking about the <u>last time</u> you [or a child in your household] had a medical examination or treatment, <u>in the past 12 months</u>, would you say that: (3: Strongly agree – 2: Agree – 1: Disagree – 0: Strongly disagree)

It was easy to get to the place where I received medical treatment. (Accessibility: 3-0)

Expenses for healthcare services were affordable to you/your household. (Affordability: 3-0)

The healthcare facilities were clean and in good condition. (Quality of facilities: 3-0)

All people are treated equally in receiving healthcare services in your area. (Equal treatment: 3-0)

The doctor or other healthcare staff you saw spent enough time with you [or a child in your household] during the consultation. (Courtesy and treatment: 3-0)

<u>Overall</u>, how satisfied or dissatisfied were you with the quality of primary healthcare services you [or a child in your household] received <u>on that last</u> <u>consultation</u>?

(3: Very satisfied – 2: Satisfied - 3: Dissatisfied – 4: Very dissatisfied)

Education services: Focus on respondents' experience with the *public school system* (i.e. public schools that are funded by the state) over the past 12 months – that is, if there are children in their household whose age falls within the age range spanning primary and secondary education in the country.

Please tell me more about the primary and/or secondary <u>public</u> schools attended by this child/children in your household: (3: Strongly agree – 2: Agree – 1: Disagree – 0: Strongly disagree)

The school can be reached by public or private transportation, or by walk, in less than 30 minutes and without difficulties. (Accessibility: 3-0)

School-related expenses (including administrative fees, books, uniforms and transportation) are affordable to you/your household. (Affordability: 3-0)

School facilities are in good condition. (Quality of facilities: 3-0)

All children are treated equally in the school attended by the child/children in your household. (Equal treatment: 3-0)

The quality of teaching is good. (Effective delivery of service: quality teaching: 3-0)

<u>Overall</u>, how satisfied or dissatisfied are you with the quality of education services provided by the primary and/or secondary <u>public</u> schools attended by this child/children in your household?

(3: Very satisfied – 2: Satisfied - 3: Dissatisfied – 4: Very dissatisfied)

Government services: Focus on respondents' <u>last experience</u> (over the past 12 months) with two types of government services frequently used by people: (1) Services to obtain government-issued identification documents (such as national identity cards, passports, driver's licenses and voter's cards) and (2) Services for the civil registration of life events such as births, marriages and deaths. Thinking about the <u>last time</u> you tried to obtain an ID or a certificate of birth, death, marriage or divorce, <u>in the past 12 months</u>, would you say that: (3: Strongly agree – 2: Agree – 1: Disagree – 0: Strongly disagree)

The office, website or [toll free] telephone number was easily accessible. (Accessibility: 3-0)

The fees you needed to pay for the ID or the certificate were affordable to you/your household. (Affordability: 3-0)

The process for applying and obtaining the ID or the certificate was simple and easy to understand. (Effective delivery of service: 3-0)

All people are treated equally in receiving government services in your area. (Equal treatment: 3-0)

The amount of time it took to obtain the ID or the certificate was reasonable. (Timeliness: 3-0)

<u>Overall</u>, how satisfied or dissatisfied were you with the quality of government services you received <u>on that occasion</u>? (*i.e.* the <u>last time</u> you applied for an ID or a certificate of birth, death, marriage or divorce in the past 12 months) (3: Very satisfied – 2: Satisfied - 3: Dissatisfied – 4: Very dissatisfied)

Methodology development

- Developed under the guidance of the **Praia City Group on Governance Statistics** and its dedicated Working Group on SDG indicator 16.6.2
- **Consultations with Expert Group** (consisting of NSOs, international agencies and experts), and organizations with expertise in measuring public satisfaction with service provision to produce and refine the metadata (incl. the Afrobarometer, the World Values Survey, the OECD's Statistics Directorate, the European Quality of Life Surveys, the World Bank, etc.)
- The methodology **draws from standardized questionnaires** developed by reputable global and regional producers of data on citizen satisfaction with public services, and adopts the existing standards established by these questionnaires
- The methodology also draws on a **global mapping of current surveying practices on satisfaction with public service delivery**, conducted through a survey and follow-up interviews of **13 NSOs** in all regions of the world (Cameroon, Germany, Georgia, Kenya, Latvia, Mexico, New Zealand, Norway, Pakistan, Philippines, South Africa, Tunisia and Viet Nam)
- Methodology also informed by **extensive statistical analysis** to help identify attributes that are strongest 'predictors' of satisfaction with public services

Piloting

- 8 NSOs (Cabo Verde, Cameroon, Ghana, Kenya, Republic of Korea, Mexico, Palestine and Uganda) undertook to pilot the proposed batteries of question for SDG 16.6.2. 4 successfully completed.
- 6 NSOs (Canada, Colombia, Egypt, New Zealand, Sweden and Turkey) provided detailed feedback on the proposed survey instrument, its methodological soundness and feasibility in individual national contexts.

• Pilot results demonstrated:

- Technical feasibility and pertinence of all questions in varied national contexts
- Important differences across demographic sub-groups, which confirmed importance of disaggregating results as much as possible
- The suitability of a 4-point scale (also tested 10-point scale)
- The methodological advantage of using multiple survey questions to enhance the reliability of data on satisfaction (i.e. averaging offers a simple/effective way to reduce the measurement error affecting any individual survey item)

NSO Pilot countries

AfricaCabo Verde, Cameroon, Ghana, Kenya,
UgandaArab StatesPalestineAsia / PacificRepublic of KoreaLatin America and the CaribbeanMexico

Method of computation

Global reporting on SDG 16.6.2 will require, for each service type, separate reporting on 1) service attributes and 2) overall satisfaction:

- For healthcare services:
 - o % satisfied with attributes
 - % satisfied with health services overall
- For education services:
 - o % satisfied with attributes
 - % satisfied with education services overall
- For government services:
 - o % satisfied with attributes
 - % satisfied with government services overall

)	Attributes	Healthcare services	% who strongly agree (3) or agree (2)	Education services	% who strongly agree (3) or agree (2)	Government services	% who strongly agree (3) or agree (2)
	1	Accessibility	50% respondents 'strongly agree' or 'agree'	Accessibility		Accessibility	
	2	Affordability	60% respondents 'strongly agree' or 'agree'	Affordability		Affordability	
	3	Quality of facilities	73% respondents 'strongly agree' or 'agree'	Quality of facilities		Effective service delivery process	
	4	Equal treatment for everyone	55% respondents 'strongly agree' or 'agree'	Equal treatment for everyone		Equal treatment for everyone	
	5	Courtesy and treatment (Attitude of healthcare staff)	42% respondents 'strongly agree' or 'agree'	Effective delivery of service (Quality of teaching)		Timeliness	
		% satisfied with attributes of healthcare services	(50+60+73+55+42)/5 = 56%	<u>% satisfied with</u> attributes of education services		<u>% satisfied with</u> <u>attributes</u> <u>of government</u> <u>services</u>	
		<u>% satisfied</u> <u>with</u> <u>healthcare</u> <u>services overall</u>	(23% 'very satisfied' + 37% 'satisfied')/2 = 30%	% satisfied with education services overall		<u>% satisfied with</u> government services overall	

Recommended disaggregation dimensions identified based on empirical analysis, i.e. strongest demographic determinants of citizen satisfaction with public services

- Sex: Male/Female
- Income level: By income quintile
- Place of residence: By administrative region e.g. by province, state, district; urban/rural

To the extent possible, all efforts should be made to also disaggregate ratings by:

- Age groups: It is recommended to follow UN standards for the production of age-disaggregated national population statistics, using the following age groups: (1) below 25 years old, (2) 25-34, (3) 35-44, (4) 45-54, (5) 55-64 and (6) 65 years old and above.
- **Disability status:** If possible, NSOs are encouraged to add the <u>Short Set of Questions on Disability developed by</u> <u>the Washington Group</u> to the relevant survey vehicle
- Nationally relevant population groups (groups with a distinct ethnicity, language, religion, indigenous status, nationality or other characteristics): For the purpose of this indicator, particular focus is placed on minorities

Conclusions

- The proposed methodology for indicator 16.6.2 offers a **technically feasible and cost-effective approach** to measuring people's satisfaction with public services.
- Measures satisfaction with the availability and quality of services *as they were actually delivered to survey respondents,* i.e. **focus on citizen** *experiences* **rather than simply perceptions**, using specific attributes-based questions to facilitate recall of 'last experience'
- Several NSOs already producing survey statistics in this area, albeit using very diverse methodologies. Reclassification will encourage countries to start producing globally comparable data in this critical area of governance.
- Survey methodology draws on standardized questionnaires developed by global and regional survey producers and adopts existing standards; validated through pilot study in diverse contexts across the world.
- Synergies with other targets and indicators: 16.6.2 can complement other SDG indicators assessing various aspects of public service provision (mainly based on admin sources), especially SDG 3.8.1 on coverage of essential health services, SDG 4.a.1 on school facilities, and SDG 1.4.1 on access to basic services.