Does Transparency Improve Governance?

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Keywords

Abstract

In recent years, there has been increasing interest in the potential of transparency—the provision of information to the public—to improve governance in both developed and developing societies. In this article, we characterize and assess the evolution of transparency from an end in itself to a tool for resolving increasingly practical concerns of governance and government performance. After delineating four distinct varieties of transparency, we focus on the type that has received the most rigorous empirical scrutiny from social scientists—so-called "transparency and accountability" (T/A) interventions intended to improve the quality of public services and governance in developing countries. T/A interventions have yielded mixed results: some are highly successful; others appear to have little impact. We develop a rubric of five ideal-typical "worlds" facing transparency that helps to account for this variation in outcomes. Reform based on transparency can face obstacles of collective action, political resistance, and long implementation chains. T/A interventions are more likely to succeed in contextual "worlds" with fewer of these obstacles. We find that 16 experimental evaluations of T/A interventions are largely consistent with the theoretical predictions of our five-worlds rubric.

INTRODUCTION

The myriad problems of poor governance—misplaced priorities, overstretched budgets, outright corruption—can sometimes seem intractable. Yet substantial improvements in governance are possible, even in unlikely places. In 2004, a remarkable local-governance intervention in Uganda improved the delivery of health care to such an extent that a year later, mortality in children under age five had fallen by 33% in randomly selected treatment communities compared to control communities. Immunization rates and treatment practices improved and utilization of general outpatient services rose 20%, while waiting times and practitioner absenteeism fell substantially. And at just $3 per treatment household, the intervention appears to have been far cheaper than alternative methods of improving health (Björkman & Svensson 2009).

What was the secret? The intervention in Uganda relied on a tool whose potential is increasingly inspiring optimism among good-governance reformers: transparency. Treatment communities were not provided with more nurses, medicine, equipment, or more material resources of any kind. Instead, researchers developed "community score cards" (CSCs) that provided detailed information about the quality of health services in each community and compared the CSCs to those of other communities and to government benchmarks. Communities then used this information to identify problems in health services and develop plans of action to fix them. A year after the intervention, it was clear not only that healthcare providers had improved their performance, but that treatment communities were doing more to monitor the providers, holding them accountable for making these improvements.

For a small but growing camp of governance reformers, transparency is in vogue. At nearly every level of governance, from community-level initiatives like the Ugandan intervention up to the Open Government Partnership launched by US President Obama in 2011, reforms that seek greater transparency are increasingly on the agendas of governments, international organizations, civil society, and the private sector. The intuitive idea underlying this enthusiasm is that information empowers citizens to hold public officials accountable—that disclosure of information about government institutions, policies, and programs empowers citizens to hold officials responsible for their spending and performance, thereby reducing corruption and mismanagement of public resources and leading, eventually, to more accountable, responsive, and effective governance.

Yet the effects of transparency reforms and programs on governance can often seem opaque and unpredictable. Indeed, there is a growing sense of the ambiguities in the relationship between increases in transparency and other desirable outcomes, such as greater accountability, less corruption, and improvements in basic services. These ambiguities temper the enthusiasm for the potential of transparency to improve governance and hamper wider adoption of transparency as a tool by the broader governance-reform community.

This article seeks to make sense of some of these ambiguities. In the next section, we clarify the conceptual terrain. The term transparency has denoted very different reforms and policy interventions. We group these into four general types. We then focus, in the remainder of the article, on one type that has commanded the largest share of recent rigorous research: transparency and accountability (T/A) interventions that, like the intervention in Uganda, seek to improve public services in developing countries. The picture that emerges from these studies seems, at first glance, to be frustratingly mixed (see also J-PAL 2011, McGee & Gaventa 2011). For every example like the one above from Uganda—where transparency seemed to produce more accountable and effective governance—there is another where transparency either had no effect or produced a backlash that further insulated public officials from accountability to citizens. We attempt to make sense of the theoretical and empirical confusion surrounding transparency and accountable governance by disentangling, first, the different contexts in which transparency interventions have unfolded and,

second, the various mechanisms that may connect transparency to positive governance outcomes. We posit that there are five main causal pathways from transparency to service improvements. We review 16 experimental evaluations (Andrabi et al. 2009; Banerjee et al. 2008, 2010; Björkman & Svensson 2009; Duflo et al. 2012; Glewwe & Maïga 2011; Hastings & Weinstein 2008; Keefer & Khemani 2011; Lieberman et al. 2012; Muralidharan & Sundararaman 2010; Olken 2007; Pandey et al. 2007, 2009; Pradhan et al. 2011; Reinikka & Svensson 2005, 2011) that have measured the impact of transparency across these pathways in order to illustrate when and how transparency can help to improve the quality of governance.

WHAT IS TRANSPARENCY GOOD FOR? FOUR VARIETIES OF TRANSPARENCY

As a basic notion, transparency is attractive to many people. But as a political practice, there is no single conception of transparency; rather, transparency has multiple meanings, as well as multiple rationales, purposes, and applications. Here we outline four distinct varieties of transparency.

Perhaps the most familiar form is governmental transparency through "freedom of information" (FOI) or "right to information" (RTI) legislation. FOI laws create a right of citizens to request information, and an obligation of governments to either provide that information or explain why they will not (Roberts 2008). The United States was an early adopter of FOI laws; driven by the advocacy of journalists and government-reform organizations, Congress passed the US Freedom of Information Act in 1966. In the ensuing decades, FOI provisions spread quite slowly across the globe. Only 14 countries had adopted national FOI/RTI laws by 1990. In the past two decades, however, such legislation spread rapidly. By March 2013, some 94 countries had FOI/RTI laws in force (Open Society Foundations 2012).[1]

The main justification for the FOI/RTI version of transparency is to enable people to better govern themselves democratically. At the core of most conceptions of democracy is the principle that citizens govern themselves by making laws and policies, either directly or indirectly by voting for representatives. In order for citizens to express their preferences effectively—and hold their representatives accountable for realizing those preferences—they require access to the widest possible range of information and arguments. Alexander Meiklejohn (1948, pp. 24–25) argued that the "final aim" of a democratic assembly

> is the voting of wise decisions. The voters, therefore, must be made as wise as possible. The welfare of the community requires that those who decide issues shall understand them. They must know what they are voting about. And this, in turn, requires that so far as time allows, all facts and interests relevant to the problem shall be fully and fairly presented.... As the self-governing community seeks, by the method of voting, to gain wisdom in action, it can find it only in the minds of its individual citizens. If they fail, it fails. (pp. 24–25)

Louis Brandeis articulated a second variety of transparency. When Brandeis (1913, p. 92) wrote famously that "sunlight is said to be the best of disinfectants; electric light the most efficient policeman," the infection that concerned him was not the lack of accountability of democratic government but rather the social and economic plutocracy of the Gilded Age barons of banking, finance, and heavy industry. In his view, modern society had brought such great complexity that even the simplest of transactions were fraught with what we now call "information asymmetries"

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[1]For a thorough account of government secrecy, see Roberts (2008).

(e.g., Akerloff 1970, Stigler 1961, Stiglitz & Weiss 1981). Then, as now, it was difficult for a grocery shopper to judge the ingredients contained in food products; this difficulty was compounded many times when an investor tried to assess the worth of more complicated products such as financial securities. Government, he thought, should step in to require companies such as food producers and banks to become fully transparent about their products and practices through laws and regulations because "the archaic doctrine of caveat emptor is vanishing" (Brandeis 1913, p. 103). Such transparency, he argued, would enable grocery shoppers and investors to protect themselves from unscrupulous merchants and rapacious bankers.

Brandeis' justification differs from the democratic impulse behind the early FOI laws in two fundamental ways that are often missed in contemporary discussions. First, the targets of transparency, for Brandeis, are private sector actors—such as banks and grocers—not government. Whereas in the FOI/RTI view, transparency is an instrument to tame corrupt states and public officials, Brandeis' view was that regulatory transparency can tame undue private power. A second difference concerns the hoped-for users of transparency: individuals can use information about private actors in their role as customers (shoppers, investors)—rather than as self-governing citizens, as in the FOI view—to protect themselves in the marketplace by making better choices or by negotiating from stronger positions (for a discussion, see Fung et al. 2007).

Figure 1 represents these two dimensions, targets and users, in a two-by-two matrix. In both columns of the matrix, individuals use information to advance their interests. The first column, however, contains varieties of transparency that are oriented toward advancing the more general interests of a self-governing citizenry. These kinds of transparency provide information that increases the ability of citizens to create the kind of social, political, and legal order they desire. By contrast, the second column contains varieties of information that enable individuals to defend specific interests against particular actions and behaviors of public and private organizations. The democratic purposes behind FOI laws fit in cell I: they provide information to citizens for use in their dealings with their government. Brandeis' goal for transparency fits in cell III: transparency provides information to consumers for use in their dealings with private firms and corporations.

In recent decades, transparency efforts have moved into the other two cells in this matrix: transparency for responsible corporate action (cell II) and the T/A movement (cell IV). These moves reflect the evolution of the prevailing conceptions of (*a*) the degree to which citizens should be directly involved in governing the private market and (*b*) the extent to which people should be treated as individuals, rather than collective beneficiaries or consumers of public services.

Targets of transparency	Users of transparency	
	Self-governing citizens	Individual customers/beneficiaries
Governments	I. Freedom of information (e.g., use by journalists and citizens)	IV. Transparency for accountability (T/A) (e.g., disclosure to improve public services in health and education)
Private firms/ corporations	II. Transparency for responsible corporate behavior	III. Regulatory transparency (e.g., financial disclosures of corporations, product safety disclosures)

Figure 1

Users and targets of transparency.

We usually think of citizens governing corporations indirectly, through governmental laws and regulations. But with the rise of consumer campaigns and corporate social responsibility, activists, investors, and consumers have increasingly taken governance matters into their own hands. They have pressed companies to behave in what they regard as more socially responsible and beneficial ways by compelling corporations to become transparent about their products and processes (cell II of **Figure 1**; see also Micheletti et al. 2006). "Union-made" labels, for example, complement the efforts of regulatory bodies such as the National Labor Relations Board by allowing consumers to favor organized workplaces in their market decisions. In 1958, the International Ladies' Garment Workers' Union won a contract with the New York metropolitan dress industry that required a "union-made" label to be sewn into all clothes produced in union shops. With much fanfare, the very first union label under this agreement was sewn into a garment by Mrs. Nelson Rockefeller, the wife of New York's governor (Tyler 1995). In 1966, the fact that union-harvested grapes were labeled with the United Farm Workers' black eagle on a red background allowed sympathetic consumers to support the union's nationwide grape boycott (Frank 2003). More recently, environmental activists, through political campaigns and corporate board proxy actions, have pressed companies to disclose their environmental performance in regular corporate reports (Wheeler & Elkington 2001).

In these and many other instances of public disclosures by corporations on environmental sustainability and other social issues, reformers hope that individuals will use information about companies' social performance in their consumption or investment choices (e.g., "buying green") and thus induce those companies to behave in certain ways (e.g., more sustainably). Although in these cases individuals exert pressure through market channels, they are nevertheless acting as self-governing citizens, albeit through nonelectoral and nonparliamentary means. Transparency informs their views on what are essentially policy questions (such as environmental impacts, labor conditions) rather than individual consumer interests (such as price or quality).

The most recent evolution in the use of transparency has been its move into cell IV in **Figure 1**, where people hold government accountable not as self-governing citizens but as individual consumers or beneficiaries of public services. The root of this evolution is the efforts of grassroots activists—and their allies in international donor organizations and aid agencies—who are concerned with corruption and underperformance of public services in developing countries. This coalition of actors, broadly dubbed the transparency and accountability (T/A) movement, aims to improve the poor quality of public services by providing information—for example, about beneficiary rights to those services, funding allocations, front-line service worker performance, and service delivery outcomes (Ackerman 2004, Fox 2007a,b, J-PAL 2011, Joshi & Houtzager 2012, World Bank 2004). The movement is closely associated with the increasing focus of development funders and practitioners on participatory or community-driven development (see, e.g., Barron et al. 2011, Gaventa & Barrett 2011, Khan 2012, Mansuri & Rao 2013, United Nations 2008, World Bank 1994). The underlying hypothesis in T/A interventions is that the provision of information will trigger a chain of events in which beneficiaries, service providers, or policy makers improve the quality of critical public services such as health, education, and infrastructure provision (McGee & Gaventa 2011).

The remainder of this article focuses on these transparency and accountability interventions, for three reasons. First, T/A interventions are generally designed to produce particular, tangible improvements in public services, such as improved health or education, that ultimately improve the lives of individual citizens. They thus reflect the evolution of transparency from an end in itself, or an ingredient with important but nonspecific benefits for democratic governance, into a tool for dealing with increasingly practical and specific concerns of government performance. Second, development economists and comparative political scientists have trained their sights on

this arena, and development agencies and international philanthropists have been eager to fund such interventions and research their effects. Consequently, there has been an explosion of rigorous quantitative and qualitative research in this domain in recent years, including numerous randomized controlled trials as well as many case studies (J-PAL 2011, Joshi 2010). These interventions have attracted significant scholarly attention partly because they seek to affect specific outcomes and partly because T/A efforts, particularly in developing countries, lend themselves to systematic research. The interventions are relatively easy to mount (compared with, say, passing a regulation in an industrialized democracy), and their smaller scale allows their microdynamics and effects to be examined in a much larger number of cases than national-level interventions. Our third reason for focusing on T/A is that we find the T/A field to be at a critical juncture. T/A efforts are recent enough that the underlying mechanisms are often underspecified, leading to confusion about results, difficulty in designing effective interventions, and calls for a theory of T/A's impact.[2] And yet, the first generation of research and practice in the field now allows us to take stock and arrive at preliminary conclusions and hypotheses, which can motivate the research questions and agenda of the next generation of scholars.

TRANSPARENCY AND ITS PATHWAYS TO BETTER GOVERNANCE

How might transparency lead to improved public services? Returning to our first example, how did information in the form of community score cards (CSCs) help Ugandans improve their health care? In this section, we introduce a framework for understanding the pathways from transparency to improved public services. The framework combines three schemas that illuminate different connections between transparency and better governance. First we describe the "action cycle," by which information triggers individual or collective action, developed by Fung et al. (2007). We then turn to the "short and long routes" of accountability developed in the 2004 *World Development Report* entitled *Making Services Work for Poor People* (World Bank 2004). Finally, we discuss the "willingness"—the incentives and disposition—of politicians, policy makers, and frontline providers to make improvements to public services. Combining these three schemas allows us to develop a rubric of five "worlds"—five groupings of informational, market, and political conditions that each link transparency to improved public services through a different pathway.

The "Action Cycle": How Information Becomes Useful

In *Full Disclosure: The Perils and Promise of Transparency* (2007), Fung et al. develop criteria for transparency policies that are successful in inducing public authorities (and private companies) to improve their products and practices.[3] Successful transparency policies share four main elements:

1. The information provided is salient and accessible to at least one group of information users. For health and other public services in developing countries, for example, the most obvious

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[2] For example, McGee & Gaventa (2011) write that "much of the current evidence base relies on untested normative, positivist assumptions and underspecified relationships between mechanisms and outcomes.... [T]he most common assumption made in the literature and in current experience is of a direct linkage between transparency and accountability. Yet, this chain of causation is seldom explicitly examined" (p. 14). Fox (2007b), who finds that T/A may be able to "mobilize the power of shame" but that its mechanisms would have no effect on the shameless, asks, "*under what conditions* can transparency lead to accountability?" and "what *types* of transparency manage to generate what types of accountability?" (p. 665). Glennerster (2005) asks for more evidence not only on the role of information in service provision but also on mechanisms of voice and participation that empower communities to act on that information and initiate reform.

[3] Lieberman et al. (2013) lay out a related, ten-step "information-accountability causal chain" in which each link is necessary for information to trigger accountability.

set of users comprises the citizens who benefit from those services. But other information users might include service providers, their managers, policy makers, and civil society groups.

2. The information causes users to change their decisions and actions. In the case of health services, citizens might utilize the information to choose a different provider or therapy. They might use the information to advocate for a different allocation of healthcare resources. Or they might use the information to press providers to put forth more effort or embrace other methods or technologies of provision. Note that the decisions and actions changed need not be those of beneficiaries; new information might also change the decisions and strategies of policy makers or civil society advocates.

3. These new actions affect providers in ways that they find salient and consequential. Health-care workers may be affected if citizens use information to choose only high-quality providers, or to engage in social protests against poor-performing providers that jeopardize the social standing or employment status of those providers. Yet, these same actions may sometimes not affect service providers—if, for example, they are able to ignore protests or do not care what citizens think of their performance.

4. Providers respond constructively. In the case of health care, successful transparency policies cause providers to improve the quality of health services, rather than resisting or strategically gaming the disclosure of information. For example, when confronted with information that shows a particular clinic to be performing poorly relative to its peers, service providers might respond constructively by learning about and adopting some of the practices of better clinics. That is, they would not respond strategically by changing their practices to improve their "score" on only the measured indicators without addressing the underlying problems. Information about these responses then feeds back as new information about the provider, their responsiveness and willingness to reform, completing the cycle and perhaps triggering follow-up action by citizens.

These four elements form a transparency "action cycle," depicted in **Figure 2**. The action cycle lays out some of the most important dynamics that must be in place for a transparency policy or
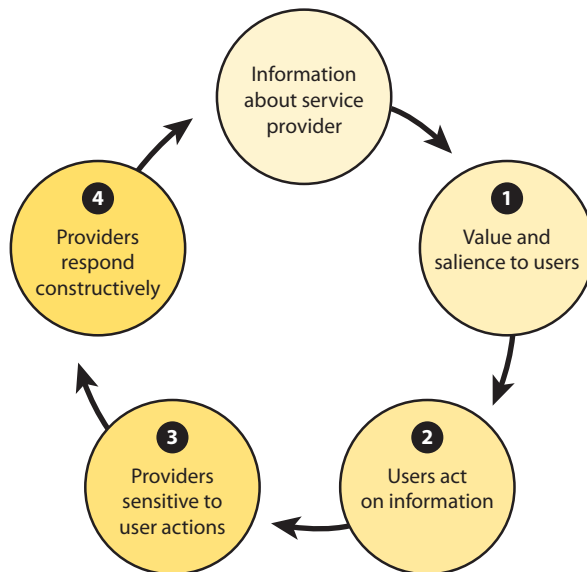

Figure 2

The transparency action cycle.

program to lead to improved public services. A transparency program will fail if it does not trigger each of the elements in the cycle.

The first step in the action cycle highlights the importance of demand for improvements in the service the transparency program seeks to improve. A transparency program may fail to improve services if users of the service simply do not care about the new information to which transparency gave them access. For the second step in the action cycle to be triggered—for users to take advantage of the new information to select better providers, exert pressure on providers or policymakers, etc.—users must (*a*) want the service and (*b*) be dissatisfied with its current provision. Only then can they be expected to undertake behavior change.

This condition may seem obvious, yet, perhaps partly for that reason, it is often neglected in the design of transparency programs. Many interventions begin by simply assuming that because a public service is failing by some international standard—that, for example, infant mortality is high, or learning outcomes are low—it must be dissatisfying to its users. But this may not be the case. For example, for many citizens in poorer countries, traditional healers are highly preferred to modern clinics for cultural reasons. In many poor countries, basic education has a low rate of return (e.g., Schultz 2004): those who have graduated from primary school do not earn much more than those who spent that time learning traditional skills. Even if this low return is the result of the low quality of schooling—and thus could be expected to increase if users pressed for and succeeded in obtaining improved schooling quality—this hypothetical payoff may not be credible for many citizens. The result is an appearance of citizen apathy about the low quality of clinics or schooling that in reality may be quite rational (in cases where the perceived benefit to the service is low) or at least understandable (in cases where citizens have low expectations for the service—having no experience with anything superior—or a cultural preference for traditional services). In these contexts, a transparency program has little hope of improving a public service unless it can first convince citizens to both want the service and be dissatisfied with how it is being provided. Only then is it reasonable to expect them to do something to improve it.

Where citizens are willing to do something to improve the low quality of a service, the next question, and the next step in the "action cycle," is: What should they do? This question brings us to the second of the three schemas: the short and long routes to provider "accountability."

Short and Long Routes to "Accountability"

The 2004 *World Development Report* (World Bank 2004) delineated two general pathways by which users of a public service—citizens, or "clients" in this conception—may press for improvement. In the "short route," citizens engage with those who provide public services directly. In the "long route," citizens use their political power—such as voting or advocacy—to press policy makers and politicians to improve the quality of service delivery. **Figure 3** shows the two routes.
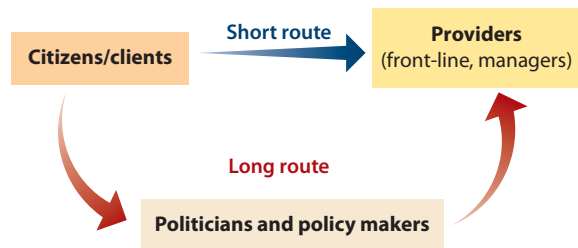

Figure 3
Short and long routes to "accountability" (adapted from World Bank 2004).

The two-routes schema of accountability highlights several important contextual considerations that influence what users might do with new information provided by transparency.

The first consideration is market conditions. Do users have a choice among providers? Can a parent or patient choose between more than one school or clinic, or is there only one school or clinic available? If providers compete with one another and beneficiaries enjoy choice and the option of exit from unsatisfactory providers, then competition can create a kind of short-route accountability. Users can vote with their feet: use the information provided by transparency to switch to higher-performing providers.

If, however, users are restricted to only one provider—either because there is only one private clinic or school in an area or at a given price, or because the government has provided only one public clinic or school—then any action they take must be to improve that provider's services. The range of such actions is virtually limitless; examples include the following:

1. Individual supplication (e.g., Fox 1994, Scott 1987)
2. Collaborative problem solving and mutual commitment to implementing solutions (e.g., Fung 2001)
3. Highlighting high-performing providers or naming and shaming underperforming providers (e.g., Fung et al. 2007)
4. Social demonstration or protest (e.g., McAdam et al. 2001, Piven & Cloward 1979)
5. Informal mechanisms of social incentives or sanction (e.g., North 1990, Olson 1965, Ostrom 1990)
6. Examining better-performing services and trying to draw lessons (e.g., Dorf & Sabel 1998)
7. Developing and advocating for reforms (e.g., Kosack et al. 2010)
8. Engaging with local or national civil society or media to incentivize improvement (e.g., Tandon 2003)
9. Forming voting blocs around better public services (e.g., Bueno de Mesquita et al. 2003, Lake & Baum 2001, McGuire 2010)

Many of these actions could target either providers themselves or the politicians and policy makers to whom providers answer—that is, the short or the long route (or a combination).[4] Each of these actions is a way either of targeting the providers directly or of enlisting the help of another actor in government, media, or civil society. In this simplified schema, the short route is more direct—with a shorter chain for implementing any reforms or improvements—and in that way preferable. But where users find that providers resist engaging in collaborative problem solving or are not sensitive to incentives or pressures to improve, long-route action may be preferable. The key question, to return to the "action cycle" above, is which type of action will lead to the third and fourth steps: a constructive response by providers who are sensitive to the users' actions.

This question brings us to the third schema: the incentives and disposition—the "willingness"—of different actors users might target.

Confrontation or Collaboration?

Teachers, healthcare workers, and the policy makers and politicians who supervise them may sometimes be eager partners in efforts to improve the quality of public services and in other cases resistant to such reforms. A teacher, for example, may be earnestly interested in improving education but lack the resources, know-how, relationships, or official authorization to do so. Conversely,

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[4]Actual reforms often cannot be mapped exclusively into the long or short routes because the two paths interact in complex ways. For example, long-route reforms can pave the way to community empowerment along the short route (Fox 2005).

that teacher may resist efforts to improve education because they would require more work, time, effort, or loss of control and independence. Similarly, policy makers may be willing or unwilling to contribute to public service improvements. For example, reform-minded officials or politicians—whether at the district, province, or national level—might be allies of advocates or beneficiaries seeking to improve basic services.[5] On the other hand, officials or politicians who are dependent on clientelist relationships that require supporting, and therefore protecting, service providers can be expected to be more resistant to reform efforts. These differences constitute a third contextual consideration that affects how transparency can lead to improved services. In particular, they determine whether collaborative or confrontational strategies are more likely to improve services.

The issue of whether users should act collaboratively or confrontationally is at the heart of current debates about citizen action and public services. A recent review of T/A interventions targeted at public services (Joshi & Houtzager 2012) characterizes the debate. On one side are those who assume that the usual relationship between providers and citizens is one of confrontation. In this framing, providers will "misbehave unless constantly watched" (p. 151) by citizens-as-consumers or by a vigilant community seeking to expose corruption and underperformance.[6] On the other are those who presume "a more trusting, collaborative approach to resolve issues of poor services through collective deliberation and joint problem solving" (p. 152). Proponents of this view are associated with efforts at "deepening democracy" (e.g., Fung 2001).

These two conceptions yield very different approaches for using transparency to improvements in services. The collaborative view relies on problem-solving efforts between citizens and providers. For example, in the CSC technique—the approach to transparency used in the Ugandan example with which we open this article—the key feature is an "interface" meeting in which service providers and citizens use the information in the score cards to develop a joint "action plan" for improving service, including specific actions to be taken and who is responsible for each action.[7] In Uganda, this approach led to dramatic improvements on both sides: in the quality of services provided and in the utilization of those services by citizens. The likely reason is that both sides were willing to live up to their responsibilities in the action plan.

But what about environments where providers or officials are unwilling to make improvements? Pritchett (2013) tells a powerful story about a community meeting in 2006 in the Indian state of Uttar Pradesh organized by Pratham, an Indian nongovernmental organization, to discuss the results of testing it had done on students in the village. The test results were dismal. At the meeting, a dismayed parent confronted the headmaster:

> You have betrayed us. I have worked like a brute my whole life because, without school, I had no skills other than those of a donkey. But you told us that if I sent my son to school that his life would be different than mine. For five years I have kept him from the fields and sent him to your school. Only now I find out that he is 13 years old and doesn't know anything. His life won't be different; he will labor like a brute just like me. (p. 2)

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[5] For example, Fox (2007a) describes a dynamic involving the alliance of citizens and reform-minded actors in government to overcome vested interests standing in the way of reform.

[6] Joshi & Houtzager (2012) trace the roots of this perspective to the New Public Management approach, which champions market mechanisms to improve public sector accountability and performance (see also Bately 1999, Joshi 2008).

[7] The transparency component in a community score card is a set of surveys of both providers and service users, dealing with aspects of the service that might be improved. For example, surveys used in the Uganda CSC "included utilization, quality of services, drug availability, informal user charges and comparisons vis-à-vis other health facilities in the district and the country at large" (Björkman & Svensson 2009, p. 741).

The headmaster, however, clearly "had no concern with what either his students or their parents thought." He replied:

> It is not our fault. We do what we can with your children. But you are brutes and donkeys and the children of donkeys are also donkeys. We cannot be expected to teach your children. They come from your homes to school stupid and you cannot expect that they will come home from school anything other than stupid. (p. 3)

In such cases, transparency must play a very different role than in the Ugandan CSC program. Rather than providing the basis for joint problem solving, it instead must empower beneficiaries and other citizens to confront indolent, inept, or predatory providers and officials. This is the confrontational model. It is associated with a different family of transparency techniques—such as complaint hotlines, citizen charters, and social audits—that aim to expose corruption and malfeasance.

The confrontational model is now iconically exemplified by the Mazdoor Kisan Shakti Sangathan (MKSS; "Workers' and Farmers' Power Organization") in Rajasthan, India. In its early days, MKSS helped villagers in Rajasthan pry budget information out of the hands of secretive governments and organized very public meetings to show the dramatic leakage and theft from the public fisc (Jenkins & Goetz 1999). Its techniques gradually formed the "social audit" and catalyzed a movement that led to passage of India's RTI law in 2005.

Like the differentiation of long- from short-route accountability, the distinction between confrontation and collaboration is not perfect; successful transparency techniques may combine elements of both. One consequence of the Ugandan CSC, for example, was increased community monitoring of healthcare providers, a process that could be seen as involving confrontation. Confrontation can be a strategy for generating countervailing power that establishes conditions of equity that in turn foster successful collaboration (Gibson & Woolcock 2008). Nor does the approach taken by a transparency program need to employ the same balance of confrontation and collaboration in all villages and districts.

Rather, a successful transparency program can try to account for both the disposition of the individuals it is dealing with and the political environment in which those individuals are embedded. The political environment—including factors such as formal accountability structures and the degree of political competition—can, depending on the degree of political decentralization, vary between states, districts, or individual villages in the degree to which it incentivizes individual officials and providers to improve public services. And individuals—providers, officials, policy makers, and politicians—in the same political environment can vary in their response to those incentives. Successful transparency programs are likely to follow the path of least resistance through the short and long routes of accountability, collaborating with allies and confronting those who stand in the way of service improvements.

Putting It All Together: Five Worlds of Service Delivery

Combining the three schema above—(a) the action cycle; (b) the short and long routes of accountability; and (c) the willingness of providers, policy makers, and politicians to make improvements—helps us to understand important contextual factors that influence the path by which transparency might translate into improved services. Together, they offer criteria for a successful pathway from the information provided by transparency to service improvement, a set of types of action that service users might take to use that information, and some important considerations about the kind of actions that are likely to lead providers to respond constructively. Here we combine them

Table 1   Exit, collaboration, and confrontation: five worlds in which transparency interventions occur

	Competition and choice (exit)	Accountable and/or willing individuals (collaboration)	Unaccountable and/or unwilling individuals (contestation)
Short route (individuals as beneficiaries)	World 1: competitive service	World 2: willing providers	World 3: unwilling providers
Long route (individuals as self-governing citizens)	N/A	World 4: willing public officials	World 5: everyone is unwilling

into five "worlds" of service delivery (**Table 1**): varied contexts in which transparency should lead to service improvement through some pathway.

In each of these worlds, the role of information and transparency is different, and each therefore calls for different kinds of actions and reform strategies. The implication is that the very same transparency intervention applied successfully in one of these contexts may be counterproductive in another.

World 1.   In a world of competitive service, beneficiaries can choose among more than one service provider. In this case, transparency can improve outcomes by helping clients make better choices among these providers. Where, for example, a patient can choose between several public or private clinics, transparency might provide information about the comparative health outcomes of those clinics. This information would be (*a*) salient to patients, to the extent that they care about their health and find the information credible, and (*b*) actionable, in that they can use the information to choose a better provider; (*c*) providers would be sensitive to it, because if they are funded on a capitation basis, poorly performing clinics will lose patients. The providers would then (*d*) respond constructively by improving service delivery.

World 2.   In the second world there is little competition, but service providers are willing ex ante to engage in the reform process. Here the contribution of information is to enhance the efforts of these providers. Information about actual practices and outcomes may feed short-route problem-solving deliberations in which community members and service providers collaboratively develop more effective delivery practices. Information may also help to document the most critical material needs and make the case for provision of resources via the long route to policy makers and politicians. For example, transparency might provide data on comparative performance or citizen satisfaction with different aspects of a health clinic (such as hours, availability of medicines, or treatment experiences). Users of this information might include both clinic clients and healthcare workers. The information is (*a*) salient to users, because patients care about their health and front-line workers care about the quality of the service they provide. The information might then be (*b*) actionable, triggering the community and providers to develop a joint action plan that addresses the problems revealed through transparency. Providers might be (*c*) sensitive to this process, because it entails a shared sense of commitment and responsibility for improving service. The implementation of this clinic improvement plan would constitute a (*d*) constructive provider response.

World 3.   The third world entails little competition and service providers who are unwilling ex ante to engage in reform efforts, perhaps because doing so would be costly to their income, privileges, status, or free time. To improve services in this world, the T/A intervention must shift the balance of power between citizens and providers, so that providers find it difficult to ignore the costs of their disregard for the quality of care available to citizens. In this world, if citizens try to

improve service provision via the short route, they must either engage directly with providers to mount pressure for improvements or use other means of altering the incentives of these providers. The main contribution of information in this world is to provide clarity about the main areas of underperformance and enhance the capacity of beneficiaries to pressure providers to increase their performance. For example, transparency about health clinic quality might provide information that empowers clinic beneficiaries relative to providers, such as absentee data and information from audits of materials or finances that reveals leakage. Beneficiaries might find this information (*a*) salient because it reveals that providers are violating social norms and legal requirements, and (*b*) actionable if it helps them organize to protest these violations and advocate for reforms. Healthcare providers may be (*c*) sensitive to that collective action if it threatens their prerogatives or position, and they may (*d*) respond constructively to those threats by putting forth more effort, properly allocating funds and materials, and so on.

World 4. In the fourth world, there is little competition and service providers are ex ante unwilling to engage in the reform process, but policy makers and/or politicians are willing to engage. In this world, even though service providers are unwilling to respond to citizen pressure, citizens or their champions may engage policy makers at a higher level in the reform project. If policy makers with jurisdiction over the sector are motivated to improve that sector, information can trigger or reinforce their reform efforts. For example, a transparency intervention that provides new information about how a public clinic or school is underperforming may empower reform-minded policy makers such as local political officials or district health administrators. Thus the prime users of information need not be citizens themselves; they may be civil society advocates and policy makers. In this world, the information provided by transparency might be (*a*) salient and valuable to civil society advocates who are arguing that healthcare reform is necessary and developing recommendations for the shape of that reform, and (*b*) actionable, in that they can incorporate the information into their lobbying of sympathetic policy makers. Those policy makers, in turn, can act on that information by crafting policies such as incentives or sanctions to improve provider performance. If those policies are well-implemented, front-line providers may be (*c*) sensitive to the new incentives and (*d*) respond constructively.

World 5. In the fifth world, there is little competition and neither providers nor policy makers are willing to engage ex ante. In this world—by far the most difficult one for T/A interventions to make a difference—political and administrative elites and service providers are all resistant to reform. The potential contribution of information is thus to mobilize more broad-based social action that will ultimately alter the incentives of policy makers and thereby providers. For example, a transparency intervention that provides new information on underperformance of public health clinics and the lack of response by politicians and policy makers to that underperformance might trigger civil society or citizen collective action to incentivize or punish either providers or policy makers and politicians—for example, through social protest or at the ballot box. In this world, such information is (*a*) salient to citizens and civil society advocates who are arguing that healthcare reform is necessary and developing ways to pressure reluctant providers, policy makers, and politicians to adopt reforms, and (*b*) actionable, in that they can use the information to pressure existing public officials or elect new, more reform-minded officials. Otherwise-unwilling officials may be (*c*) sensitive to the public pressure or the possibility of being replaced by more reform-minded officials and thus (*d*) respond constructively by implementing healthcare reforms and putting top-down pressure on providers to improve their performance.

    Table 2 sketches these five political contexts of service provision, the differing role of information in each of them, whether the path of action lies on the short or long route to accountability,

Table 2   From transparency to accountability in the five worlds

World	Service context	Contribution of information	Accountability path	Collaboration or confrontation	Exemplary transparency intervention
1	Competition between providers	Inform individual choices	Short route	N/A	Comparative provider performance rankings
2	Providers willing (or have incentives) to engage in reform	Feed collaborative problem solving	Short route	Collaboration	Citizen report cards or community score cards followed by deliberative community meetings
3	Providers unwilling to reform, community tries to pressure them	Increase pressure and accountability on service providers	Short route	Confrontation	Social audits, followed by naming and shaming, social protest
4	Providers unwilling, policy makers willing to reform	Enable policy makers to enact top-down reform	Long route	Collaboration	Social audits, absenteeism studies, public expenditure tracking surveys followed by top-down accountability and/or community advocacy
5	Providers unwilling and policy makers unwilling	Build countervailing power to increase accountability	Short and long routes	Confrontation	Social audits, public expenditure tracking surveys, followed by community mobilization

whether the action is primarily collaborative or confrontational, and some exemplary transparency interventions that may produce usable information.

Note that each successive world involves increasingly demanding requirements for collective action, engagement in adversarial politics, and the length of implementation chains. Thus we anticipate, *ceteris paribus*, that the probability of successful reform is greatest in world 1, where only individual action is required. World 2 is more difficult than world 1 because beneficiaries must act collectively to solve problems within their political opportunity structure (Alsop & Heinsohn 2005, Barron et al. 2011, Joshi 2008, Narayan & Petesch 2007).[8] World 3 is more difficult still because beneficiaries must not only act collectively but also overcome the resistance of front-line service providers. World 4 is even more challenging because the longer implementation chain from policy makers to resistant front-line officials creates room for slippage and strategic gaming. World 5 poses the greatest challenges for reformers: the need to overcome collective action barriers, a long implementation chain, and the resistance of both providers and policy makers.

The next section analyzes the results of transparency interventions, all evaluated with experimental methods, that sought to improve health, education, or infrastructure in each world. But before turning to this analysis, we would like to note that the rubric we develop here is not a complete consideration of all the contextual factors that may affect the likelihood that a particular transparency program leads to service improvements. Alongside the factors the rubric incorporates

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[8]Given the well-known disincentives to collective action (Giugni 1998, McCarthy & Zald 1977, Olson 1965, Polletta & Jasper 2001), where collective action is required, well-functioning civil society organizations may be necessary to mobilize citizen action (McAdam 1982, McAdam et al. 2001, Tandon 2003)—in particular, by providing citizens with the nuanced local knowledge that is crucial to navigating the political opportunity structure.

are broader institutional, cultural, historical, and political-economic factors that play an important role in explaining how any particular world of services came to be the way it is and influence the possibilities for improving services. Thus, although the rubric suggests pathways that may lead from transparency to service improvements, it is not, and is not intended to be, predictive. Furthermore, we do not claim that the only factor behind the success or failure of a particular intervention is its location in our rubric. There are, of course, many other reasons why a given intervention may fail, such as problems with basic design or implementation.

THE IMPACT OF TRANSPARENCY IN THE FIVE WORLDS

We noted at the outset that there is an abundance of recent, rigorous empirical work on the impact of T/A interventions on the quality of governance. Here we review this literature in light of the five-worlds rubric developed above. The literature has thus far yielded frustratingly mixed conclusions: some studies conclude that transparency has huge effects; others show little or no effect. The five-worlds rubric helps us to make some sense of this ambiguity.

For this review, we identified 66 studies on the topic of transparency and development outcomes. We focus here on the 16 studies that evaluated interventions experimentally: 15 in randomized controlled trials and one in a natural experiment.[9] Eleven of these 16 reported a positive effect (mostly individual-level outcomes in health or education) and five were unsuccessful.

The 16 studies were reviewed using a template designed to assess basic information on the intervention: the sector and the service environment in that sector (such as whether there were competing providers); the type of T/A tool used and the kind of information provided (absolute or comparative, objective or subjective, etc.); the incentives and formal accountability of providers, to suggest whether they were ex ante willing or unwilling partners in reform; and the kind of social action, if any, that was part of the intervention. We characterized the service environment, accountability structures, and the nature of the information as they were presented by the study. Items on which the study did not present sufficient information to make any determination were excluded. More detail on the coding scheme and methods is in the online supplemental material (follow the **Supplemental Material link** from the Annual Reviews home page at **http://www. annualreviews.org**).

World 1: Competitive Service

Of the 16 experimental studies, two were in world 1, in which users have a choice among service providers. Andrabi et al. (2009) evaluate the impact of distributing school performance report cards in randomly selected villages in three districts in Punjab, Pakistan, where parents are able to choose among competing public and private schools. Hastings & Weinstein (2008) evaluate a similar intervention that provided test scores and admission rates for public schools that low-income parents could choose from in Charlotte, North Carolina.

World 1 is a relatively straightforward world for transparency: as long as an intervention gives users good information about different providers of a service whose quality they care about, they can make better choices among those providers. Consistent with the expectations from our five-worlds rubric, both these interventions were highly successful.[10] Andrabi et al. (2009) find that

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[9]The 16 studies are Andrabi et al. 2009; Banerjee et al. 2008, 2010; Björkman & Svensson 2009; Duflo et al. 2012; Glewwe & Maïga 2011; Hastings & Weinstein 2008; Keefer & Khemani 2011; Lieberman et al. 2012; Muralidharan & Sundararaman 2010; Olken 2007; Pandey et al. 2007, 2009; Pradhan et al. 2011; Reinikka & Svensson 2005, 2011.

[10]At the time of writing, several other studies are investigating the effects of information on educational choices and outcomes (see Leonhardt 2013).

the report card led both to an improvement in learning of 0.10 standard deviations in public and private schools and to a decrease in private school fees of 21%. The Hastings & Weinstein (2008) evaluation shows that parents were significantly more likely to select high-performing schools and that their children's test scores increased as a result.[11]

World 2: Willing Providers

In world 2 users cannot choose among providers, but providers themselves appear willing to engage in reform efforts. In such cases, information can help these providers make improvements through the "short route" of accountability, perhaps by fueling collaborative problem solving between them and community members.

As far as we could discern from the studies themselves, none of the authors perceived their interventions to be operating in this world. This may be because in a world where providers are obviously willing to make improvements, they do not need an informational intervention to trigger reform. Or it may have to do with the difficulty of discerning in advance how willing providers will be. Indeed, several of the most successful interventions do rely on collaboration with providers who initially seemed unwilling to engage in reform efforts, among them the Ugandan success story (Björkman & Svensson 2009) at the beginning of this article. But the authors of these studies either found providers more willing to make reforms than they had anticipated or were able to pressure or induce providers to be more interested in making reforms over the course of the intervention.

World 3: Unwilling Providers

Interventions such as that of Björkman & Svensson (2009) attempt to take the short route of accountability despite environments where there is little competition and service providers appear (at least initially) unwilling to engage in reforms: our world 3. We classify 10 of the 16 interventions as unfolding in world 3.

The goal of T/A interventions in world 3 is to make it more difficult for providers to ignore the costs of their underperformance and thus induce them to improve. Users face barriers of collective action and front-line resistance, and success requires overcoming these barriers to shift the balance of power between citizens and providers. Unsurprisingly, the 10 interventions in this world had a mixed record: six were successful and four were not.

The six successful interventions show that the short route can lead to improvements even where providers seem unwilling to join in reform efforts. For example, in the Pandey et al. (2009) experiment, community members in three Indian states were provided with information on the communities' state-mandated roles and responsibilities in the management of schools; treatment communities saw significant improvement in teacher effort and more modest improvement in learning. Another example is the study by Pradhan et al. (2011), which details several interventions to strengthen school committees in Indonesia. A "linkage" intervention that facilitated collaboration between the school committee and the village council in order to improve teacher motivation and effort, community and parental support for education, school-based management, and student outcomes had significant and substantial effects on learning, increasing test scores between 0.17 and 0.22 standard deviations. By contrast, interventions that simply provided for either training

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[11] Hastings & Weinstein (2008, p. 1,412) note that these results do "not imply that measures of *overall* student achievement will necessarily be higher under school choice."

or democratic election of school committee members had no effect; only the intervention that facilitated collaboration made a difference.

Yet the other four interventions illustrate that the success of this approach is not guaranteed. For example, we noted above that in order to have a chance of eliciting a constructive response from providers, the information provided needs to be salient to users of the service. The evaluation conducted by Banerjee et al. (2010) demonstrates the importance of this criterion. Like Pandey et al. (2009), Banerjee et al. (2010) evaluate an intervention to provide information to Village Education Committees on their role and activities and to community members on how to administer a simple reading test for children. But the intervention had no effect on teacher effort or on learning, and one reason may be that the information provided to communities failed to increase their involvement in education.

World 4: Willing Public Officials

In world 4, there is little competition and service providers appear unwilling to engage in reforms, but policy makers and/or politicians are willing to engage—either because they are individually disposed toward reform or because they operate within a political environment with accountability structures or sufficient political competition to incentivize responsiveness. In a world where providers are reluctant to reform, citizens or their champions can sometimes avoid the difficulties of pressuring providers directly by working through the "long route" of accountability: collaborating with politicians and policy makers at a higher level.

Three of the 16 interventions fit this description, and all three were successful. Reinikka & Svensson (2005, 2011) evaluate newspaper campaigns in Uganda to provide information to communities about schooling funds that they were entitled to receive and actually received. They find that these campaigns reduced leakage of funds in treatment communities—and significantly improved test scores. It is likely that these communities used information to voice complaints to higher-level officials about diversion of funds by local officials.[12] Olken (2007) finds that increased grassroots monitoring of infrastructure spending in Indonesia reduced diversion of wage payments,[13] and that government audits of spending, which were subsequently read publicly at open village meetings and could thus induce social sanction, reduced missing materials expenditures and improved infrastructure quality.

World 5: Everyone is Unwilling

World 5, where there is little competition among providers and where neither providers nor politicians and policy makers appear willing to reform, is the most difficult world for T/A interventions. To be effective, the information must (*a*) overcome the collective action barrier to induce collective social action that (*b*) overcomes political resistance by altering the incentives of otherwise-reluctant public officials, who must, in turn, (*c*) overcome the difficulties of a long implementation chain to alter the incentives of front-line providers. Only one of the 16 studies, Banerjee et al. (2008), evaluated an intervention in this world. The intervention relied on a

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[12]The authors note that in Uganda, district politicians were elected in semicompetitive elections and that the central government had signaled strong support for and oversight of basic education. In the 2011 evaluation, they note that of the half of schools that did not receive their full capitation grant, "47% complained or protested to some formal or informal authority that could transmit the complaints onwards or act on them" (Reinikka & Svensson 2011, p. 959).

[13]However, monitoring did not reduce diversion of materials expenditure. Olken speculates that this was because of elite capture and the free-riding difficulties for communities in monitoring spending on materials.

timestamp to inform public officials when nurses were absent from work, so their pay could be docked. Though successful for a few months, the intervention soon provoked a backlash from local administrators, who undermined the scheme by allowing nurses to claim an increasing number of "exempt" days.

Characteristics of Useful Information in the Studies

Although our N is small, a relatively clear pattern emerges. First, in general, interventions that take account of their context have a better chance of succeeding. Both interventions that leveraged a competitive environment (world 1) succeeded, as did all those that relied on top-down pressure from allies in the long route. Those in the difficult worlds—3 and 5—naturally had more trouble. We speculate, based on the above discussion, that reformers in world 3 who were finding it difficult to increase the pressure on reluctant providers may have had more luck if they had tried the long route.

But these interventions may have also suffered from a different problem: the information's lack of salience to users. In fact, one of the evaluations of an unsuccessful intervention in world 3 (Lieberman et al. 2013) did encourage citizens to use the long route, but the citizens simply did not. And as noted above, several of the other unsuccessful interventions tried to increase parents' involvement with the school or school-based management committees, but had difficulty getting parental interest and participation.

In our review, we also examined the characteristics of the information the interventions provided in an effort to better understand information salience. Several additional patterns emerge:

1. Interventions that provided information on inputs tended to be more successful than those that provided information on outputs. All but one of the interventions that focused on service provider inputs such as absenteeism were successful; the exception was the intervention in Banerjee et al. (2008), which faced the difficulties of world 5. By contrast, most of those that focused on outputs—such as test scores, whose connection to observable inputs may have been unclear to users—were unsuccessful. Only two interventions that provided information on outputs were successful, and they were the two (Andrabi et al. 2009, Hastings & Weinstein 2008) that intervened in world 1, where information about outputs is useful because it allows users to choose better providers.

2. All unsuccessful interventions provided information only on the performance of the provider, not the rights of citizens. Only three successful studies provided information only on the performance of providers, and two of them were the Andrabi et al. (2009) and Hastings & Weinstein (2008) studies of interventions in world 1, in which, again, information on provider performance enables users to select better providers. (Of the remaining eight successful interventions, six presented information on both rights and performance, and two presented information only on rights.)

3. All but one of the unsuccessful interventions presented only absolute information on performance (for example, test scores), rather than comparative information that allowed users to see how their providers were performing relative to other villages or to national standards.

4. Fourteen of the 16 interventions presented only objective information. But both of the studies that presented both objective and subjective information (e.g., both medical stocks and citizens' perceptions of waiting times at clinics) were successful.

5. Most interventions did not recommend or imply clear actions for citizens to take in response to the information—for example, attending a community meeting or petitioning an official. But of the six that did, four were successful. In one of the unsuccessful interventions that did recommend a clear action, citizens were presented with information on poor outcomes from

education and urged to pursue both long- and short-route strategies for recourse (Lieberman et al. 2013); but, as noted above, they generally did not pursue these avenues.

None of these patterns should be considered definitive; again, we have only 16 studies. And none implies a characteristic that is sufficient in isolation to make an otherwise unsuccessful intervention successful. But as a whole they suggest that interventions are more likely to be successful when, as implied by the "action cycle," they provide information that is clearly understandable and salient to citizens (e.g., by showing problems with inputs clearly related to the performance of their providers, and how this performance stacks up against their neighbors' or against their rights to service); that illuminates problems with the inputs into services, not simply with the performance of the service, which may have myriad causes; and that implies or directly recommends a clear course of action to improve those problems.

CONCLUSION

In both the developed and developing worlds, there has been increasing interest in the potential of transparency to improve governance. This article aims to provide a conceptual framework for political scientists, other scholars, and policy makers to understand the contemporary debates, as well as the emerging body of evidence, at the heart of the relationship between transparency and improved governance.

Historically, transparency advocates saw it first and foremost as a necessary component of democratic self-government. Transparency about governmental policies and activities allows democratic citizens to make more informed decisions about how to govern themselves. More recently, this principle was extended into the private sector, to include information that individuals could use in regulating the market and as consumers of its products and services.

In recent years, however, many advocates of transparency have come to expect their reforms to yield highly tangible and concrete results by resolving specific concerns of governance and government performance. Many now see transparency's potential to catalyze improvements in areas such as healthcare outcomes and educational quality, leading to measurable improvements in citizens' capacities and well-being. The expectations for consequential transparency are far more ambitious—practically and social-scientifically—than citizens' deontological "right to know." These expectations also come at a time when there is no consensus about whether transparency improves concrete outcomes. The answer, as with so many other questions in political science, seems to be that "it depends."

Therefore, we believe that the next stage of T/A research will seek to establish the configurations and conditions under which transparency improves governance outcomes. In the sections above, we laid some groundwork for these investigations by reconsidering the growing body of experimental literature on the impact of T/A interventions through a rubric of five ideal-typical "worlds" in which transparency interventions are attempted. Our rubric seeks to clarify the pathways by which transparency might lead to improved public services. It combines three schemas: the action cycle by which information triggers individual or collective action; the short and long routes of accountability; and the incentives and disposition of politicians, policy makers, and front-line providers to improve public services. The first schema—the transparency action cycle—addresses the effectiveness of various designs for transparency by focusing attention on who might use the information made available through a disclosure initiative, how they would act on that information, and what reaction their actions would elicit from governments or service providers. The latter two schemas focus on various political and market contexts of transparency, which create various obstacles that a transparency intervention must overcome in order to lead to reform: collective

action dilemmas, the resistance of front-line staff and political officials, and slippage induced by long chains of implementation and accountability.

We offer these conceptual schemas as building blocks for further theorizing, empirical research, and policy making. For those designing future transparency interventions, the rubric directs attention to three critical questions: Who is supposed to use the information made available by the intervention? Why will they care about that information? And, perhaps most critically, what can they do with that information, through either individual or collective action? On this third question, the rubric highlights two features of T/A interventions. The first is the level of governance at which actions are taken in response to the increased availability of information. In worlds 1, 2, and 3, reform unfolds at the local level of service provision, whereas reforms are enacted at higher levels of policy making—perhaps at the provincial or national level—in worlds 4 and 5. The second feature concerns the sociopolitical dynamics of reform that transparency can catalyze: individual exit, collaboration, or contestation.

Although we predict that reform will come most easily in the context of service competition, where individual exit is a powerful engine of improvement, reformers and scholars need not focus their attention only on that context. In many public service domains in many developing countries, there simply is not meaningful competition between providers. Reform there must rely on dynamics other than exit, such as contestation and collaboration. Our five-worlds rubric is not meant to prioritize action in one world over any of the others, but rather to articulate important ways in which contextual variations influence the mechanisms through which transparency can improve government performance. Some of these mechanisms are more demanding than others.

Indeed, from a broader vantage, the evidence we consider in this article—16 experimental evaluations of transparency interventions, of which 11 were successful—provides reason for enthusiasm about the power of information to catalyze meaningful governance reforms. As with any other tool or strategy of reform, further progress depends on well-informed designs, painstaking implementation, favorable conditions, and no small measure of good fortune. We believe that one important role for the social science of transparency is to develop further evidence and insights to guide those designs and uncover those conditions. We hope that the discussion above contributes to that enterprise.

ACKNOWLEDGMENTS

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