

Going Beyond Service Delivery:
Exploring the Prevalence of Citizen Participation in Government Contracting

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Abstract

The objective of this study is to investigate the nature, scope, causes and implications of citizen participation in government contracting. Focusing on government contracts in the field of health and human services, this study is based on 33 in-depth interviews with county government contract monitoring officers, as well as managers of nonprofit and for-profit organizations in New York, Maryland, and Virginia. Our analysis suggests that a wide variety of citizen participation tools are used both by county governments and their private contractors such as client input, advisory boards, and public hearings. Citizens provided feedback on an array of issues such as: (a) concerns about living conditions and staffing, (b) scope of services, (c) desire for a new service emphasis or additional services, (d) program rules and clients' choices, and (e) assessment of the service (either appreciation or dissatisfaction). The most common reasons for seeking citizen input included to improve programs, to respond to client needs, to educate the community about clients and/or services, to fulfill legal requirements, and to reflect county culture. We find that the feedback generated by these participation opportunities resulted in service modifications, information sharing, shifts in funding, and, in some cases, new goals and contractual agreements. The findings of this study will enhance government agencies' ability to better understand citizen participation and more effectively use citizens' input to improve the outcomes of contracted programs.

INTRODUCTION

The U.S. government is currently spending over \$530 billion on federal, state and local contracts (Amey 2012). While cost savings have been articulated as the primary motive of the privatization reforms (Savas 2000, 2005), another important promise is to create “community-owned governments” and to “share power” with the private organizations – organizations that are expected to understand the local needs and deliver cheap, flexible and creative solutions to the existing problems (Kettl 1993; Osborne and Gaebler 1992). However, the way government contracts are implemented often raises numerous concerns about whether privatized programs are actually responsive to the needs of the citizens.

First, the privatized services commonly involve various strategies that constrain private service providers. Striving to achieve greater accountability and minimize the principal-agent problems – informational asymmetry, adverse selection and moral hazard – governments seek to control their private partners by specifying performance standards, monitoring and measuring performance, and using rewards and sanctions to modify their practices. These strategies may limit the contractors’ “*stewardship*” role and their ability to find innovative solutions that uniquely address the local needs. Second, sharing power with private organizations may not necessarily lead to the more empowered citizenry, particularly, because for-profit and nonprofit organizations have their own values and “biases.” For example, for-profit organizations are concerned about their profit margins, while nonprofits may suffer from particularism¹ by focusing on specific issues and serving narrowly defined cultural, religious or other sub-groups of the society. If citizens should indeed be placed at the forefront of public administration, as the

¹ It refers to the nonprofit organizations’ tendency to define their problems and focus on specific ideological, moral or other groups rather than the entire population (Steinberg 2006). See Steinberg, R. (2006), 'Economic theories of nonprofit organizations', in W. Powell and R. Steinberg (eds), *The Nonprofit Sector: A Research Handbook*, 2nd ed, New Haven, CT and London: Yale University Press (pp. 117-139).

New Public Service movement suggests (Denhardt and Denhardt 2000), scholars need to explore the role of *direct citizens' participation* in contract implementation and governance as a way to enhance the responsiveness of contracted services. Thus, the purpose of this study is to examine the prevalence and the scope of various forums for citizen participation and their role in the implementation local contracts in the field of health and human services.

Engaging community stakeholders in contract governance has been identified among the key practices pursued by successful contract managers in the field of human services (Gooden 1998). Citizen participation may help ensure that public policies – “double-delegated”² from the legislature to the administrative agencies and then on to private organizations – are implemented not only cost-effectively, but also with constitutional due process and citizens’ values and preferences in mind. However, the accountability requirements associated with government contracts, combined with the overall complexity and the costs of designing public participation forums, may carry disincentives for incorporating meaningful opportunities for public participation into contract implementation (LeRoux 2009; Nowland-Foreman 1998). By contributing to our understanding of the scope, causes and consequences of citizen participation in government contracting, this study will enhance government agencies’ ability to effectively incorporate and manage citizen engagement and use the obtained feedback to improve contract outcomes.

LITERATURE REVIEW

Dimensions of Public Participation. Public (or citizen) participation³ generally refers to the processes by which individuals, organizations and informal groups, who are not formally associated with the government, are directly engaged in democratic governance and decision-

² The term was first used in this context by Dickinson, Laura (2007-2008). Public Participation/Private Contract. *Social Justice*, 34 (3-4), 148-172.

³ In this paper, the terms *public participation* and *citizen participation* are used interchangeably.

making related to public policies or public programs.⁴ In the contemporary American society, the core values of efficiency, equal opportunity, economic growth, safety, liberty, environmental protection and privacy are equally fundamental and valid (Nabatchi, 2012). Providing opportunities for citizen participation helps to identify these and other public values (Bozeman, 2007) and resolve fundamental disagreements about them (Nabatchi, 2012).

There is a wide array of mechanisms for engaging the citizens in governance. Fung (2006) identifies three dimensions that help differentiate between the modes of public participation: (1) the participants, (2) communication mechanisms, and (3) the extent of impact on policy actions. Nabatchi (2012) offers a more detailed typology with eight dimensions of public participation: (1) the level of cooperation (adversarial or cooperative), (2) the communication mode (e.g., one-way or two-way), (3) the level of shared decision authority (varying from informing to empowering), (4) the participatory mechanisms (i.e., size of the participant groups and use of neutral facilitators), (5) the extent of informational materials, (6) participant selection (interested stakeholders or the general public), (7) participant recruitment (self-selection or random selection), and (8) the continuity of public participation. With so many choices to consider, the design of public participation is a complex task (Bryson et al., 2013). It is “a craft that requires local knowledge, political know-how, and reflective practice in order to purposefully assemble processes in which people, ideas, spaces, and artifacts are brought together to rethink or remake certain policy worlds” (Escobar 2013: 36).

The Nature and Scope of Public Participation in Government Contracts. While most studies of public participation are conducted in the context of government programs delivered in-

⁴ Our definition is adopted and somewhat modified from the definition provided by (Roberts 2008a, 5): “the process[es] by which members of a society (those not holding office or administrative positions in government) share power with public officials in making substantive decisions related to the community”. See Roberts, Nancy C. 2008a. *The Age of Direct Citizen Participation*. Armonk, NY: M. E. Sharpe.

house, this study focuses on the nature and scope of public participation processes in the context of government contracting. Kelleher and Yackee argue that the interactions between organized interests and government managers are in fact more frequent when services are contracted, since it may be easier for advocacy groups to influence the private contractors' rather than the governments' decisions (Kelleher and Yackee 2009: 579-580). The feedback that the contractors obtain through public participation may reflect citizen preferences on which services are most needed by the clients, what scope of services can better address their needs, what level of customer service and staff qualifications should be required, and what operational procedures may improve the outcomes.

Limited empirical research on public participation in the context of privatization conducted to date suggests that many private contractors in the field of health and human services go beyond service delivery and take on the "stewardship" role of promoting citizen participation in governance. A recent study of nonprofit contractors and grantees working in the field of mental health, HIV/AIDS, housing and homelessness, and child welfare⁵ in Michigan found that between 28% and 74% of these organizations engage citizens through client surveys, advisory boards, or work groups (LeRoux 2009). On the other hand, there have been fewer efforts to involve citizens in other service fields. For instance, in the area of military or foreign-service contracts, where transparency and public engagement are less common⁶, the contractors' efforts to promote public participation through beneficiary consultations or public meetings have been extremely limited (Dickinson 2007-2008). Similarly, there have been few opportunities for public participation reported in long-term infrastructure projects (Hodge and Greve 2007).

⁵ The sample of this study includes nonprofit organizations that may or may not have a contractual relationship with a government agency.

⁶ Only about 5% of Foreign Service and military contracts have been found to involve public participation (Dickinson 2007-2008).

In addition to the strategies pursued by private contractors, government agencies may also engage citizens in different phases of contract implementation – by conducting public hearings, sending official notices on the intent to privatize, and inviting feedback on various privatization options.⁷ The use of these tools may be common in the policy planning and negotiation stages of contracting, when involving a broader range of stakeholders in an unstructured manner proves most beneficial (Jung, Mazmanian, and Tang 2009). Citizens’ feedback may also be commonly used in the last stages of the contracting process: specifically, citizen surveys and citizen complaints play a critical role critical in policy evaluation (Yang, Hsieh, and Li 2009).

Motives for Creating Public Participation Opportunities in Government Contracts.

Citizen engagement efforts may be initiated for a number of reasons in the contracting relationships. When a government agency is the initiator of citizen participation forums, the latter may be incorporated into the contracting arrangement, requiring the contractor to engage the citizens in various ways (Dickinson 2007-2008). In other cases, government agencies take a more active role in engaging the citizens through volunteer boards and other forums. A key reason government agencies may seek public participation is to ensure democratic governance, recognizing that the vendors receiving government contractors are ultimately responsible to citizens. Providing meaningful opportunities for citizen participation is consistent with the ideal of having an informed and intelligent citizenry, described by Waldo (1948) and more recently by the New Public Service movement scholars (Denhardt & Denhardt, 2000). When conducted effectively, citizen participation forums both *create value* and promote the *citizens’ perception of the value* by having people with diverse opinions participate at public meetings (Halvorsen 2003;

⁷ For instance, some local governments also seek to enhance public trust by involving community residents in strategic planning initiatives to help define their programmatic goals and outcome measures (Gates, 2013).

Kirlin 1996). These forums result in greater social justice and equity (Fung 2006) and reaffirm the constitutional basis of contracted services, ensuring that the citizens' voices are heard, which is "especially important in quasi-markets due to the separation of purchaser and provider functions and the associated complexity of contracting regimes" (Vincent-Jones 2005, 899). Government agencies may also seek the citizens' feedback for managerial reasons: to achieve specific programmatic targets or improve program outcomes and client satisfaction. Fung (2006) argues that public participation can help address the lack of knowledge, gain resources and address other deficiencies that government agencies may experience in service provision. Thus, the managerial and legal/democratic values may be reinforcing each other in this case, as it has been argued before in the privatization context (Christensen, Goerdel and Nicholson-Crotty 2011).

Private contractors may also have incentives to initiate forums for citizens' input in contract implementation. In some instances, mission-driven contractors may seek feedback from clients in order to improve the responsiveness of their services. Some governance attributes of nonprofit organizations – such as the boards of trustees – are expected to "make accountability real" by creating meaningful opportunities for involvement, gathering information on client views and then using this feedback to influence future contracts (Smith and Smyth 2010). Private organizations also commonly provide a voice for underrepresented groups (Jung, Mazmanian, and Tang 2009). Nonprofit contractors, in particular, are often viewed as embodying professional and community values and helping to mitigate the tensions between the government and the population (Feiock and Jang 2009: 669). In addition, the use of public participation may reflect symbolic, political or economic interests: it may allow the contractors to gain the "legitimacy" needed to make program modifications that: (a) enhance organizational

reputation; (b) lower service costs; (c) eliminate unrealistic contract performance standards and increase the odds of contract renewal; or (d) result in a competitive advantage by improving the contractor's market share. By involving various interest groups, the contractors may create the opportunities to "convey their recommendation for policy change" (Kelleher and Yackee 2009: 580). In other instances, the use of public participation mechanisms, such as advisory groups, may help link the organization to its key stakeholders and serve as "a response to environmental influences and a vehicle for managing multiple and overlapping environments" (Saidel 1998: 423).

Gaps in the Research on Public Participation and Government Contracts. Although there has been some research on citizen participation in government contracting, a number of critical gaps remain. First, it is unclear which community groups –service providers, advocacy groups, or individual citizens – are more likely to engage in contract governance. Fung (2006) and Nabatchi (2012) argue that the mode of public participation depends largely on who is engaged in governance (i.e., whether the process is open to all stakeholders rather than select "elite" groups), as well as the participants' recruitment strategy, which varies from self-selection to random selection and engagement. Similar to the long standing concern that public agencies may become captives of major organized interest groups (Lowi 1979), nonprofit and for-profit contractors' citizen engagement efforts may vary in terms of their ability to involve the larger population. Of particular concern, private contractors and their public partners may be more heavily influenced by the entities with the most political clout, which may bias the political debate (Dickinson, 2007-2008: 151). In order to be effective, citizen participation forums should: (1) be inclusive, meaningful, and representative and (2) have processes that are fair and structured so that the citizens' decisions are well informed and have a high chance of being

adopted (Crosby, Kelly, and Schaefer 1986; Kirlin 1996; Schulz 2013). Therefore, understanding the “reach” of citizen engagement efforts (in addition to studying the design of those forums) in the context of government contracting is important.

More research is also needed on the motives for initiating citizen participation efforts. The literature reviewed above has identified several reasons why government agencies and contractors may be motivated to gather public feedback. However, it is unclear whether some motives are more prevalent or influential than others and whether some motives matter more to some groups than to other groups. For example, are contractors and government agencies motivated to engage the public for different reasons? Several other factors beyond the interests of government agencies and contractors may also influence the prevalence of public participation. Among these factors may be the existence strong interest groups in the community, contractors’ ownership (nonprofit versus for-profit), the degree to which a service field entails political conflicts, the contractors’ formal partnerships with other organizations, and, possibly, other factors. Understanding these motives and other factors influencing the use of citizen engagement will help government agencies manage this process more effectively.

The consequences of citizen participation in government contracting have also not been well researched. The role of the public can vary from having no effect on public policies and programs to being given a significant level of authority to directly affect the actions of government agencies (Fung 2006). One area of particular interest for scholars is how the feedback provided by the citizens is actually used. Key unanswered questions on the use of citizen feedback include: (1) do the contractors and their public partners share what they have learned from public participation efforts with each other? (2) are changes made to how contracted services are delivered as a result of public participation? (3) are changes made to

contractual agreements as a result of public participation? and (4) do contractors advocate for changes in the law or regulations that may influence the broader policy context in which they operate as a result of public participation? This paper seeks to address the gaps in the literature identified in this section and provide a better understanding of the nature, scope, causes and consequences of citizen participation in local government contracts.

Methods

This study is the first part of a multi-stage mixed-methods project. The current paper uses qualitative data to explore the richness of citizen participation practices, their determinants and role in contract implementation. It is based on interviews with public, nonprofit, and for-profit contract managers in four counties. Specifically, it focuses on government contracts in the field of health and human services such as services related to homelessness, HIV/AIDS prevention, mental health, substance abuse, intellectual disabilities, sexual and physical abuse, employment assistance, home health and elderly care, and family planning. These contracts serve individual citizens who are often vulnerable individuals with complex needs. We expect that the prevalence and the diversity of citizen participation forums is likely to be greater in this field, making this a fruitful sub-area for exploring citizen participation forums in a relatively limited sample.

Sample. The four jurisdictions included in this study were located in Maryland, New York and Virginia. According to the Census Bureau, the populations in these counties ranged between 198,000 and 1.12 million residents (two of the incorporated counties were considerably smaller, while the other two had more than 1 million residents). The proportion of white county residents ranged between 63% and 88%, while the proportion of foreign born residents ranged between 6% and 31%. Per capita income ranged between \$24,000 and \$60,000, while the

proportion of persons below poverty level ranged between 6% and 16%. Both major urban and smaller metropolitan areas have been included in the sample.

In three of the jurisdictions, we obtained the information on current service contracts and contact information for the government and private contract managers using online procurement listings on county websites. In the fourth jurisdiction, we obtained information on current service contracts from the individual county departments involved in the delivery of health and human services, such as the Office for Aging and the Department of Social Services. When selecting the contracts included in this study, we used a purposive sampling strategy in order to maximize the diversity of the contracted services we examined. In addition, we included private organizations serving different sized catchment areas in our sample. Most private organizations in the sample operated locally or across several neighboring jurisdictions (e.g., in Virginia and Maryland). Several larger national organizations providing services in the examined jurisdictions have also been included. In some cases, we interviewed government officers and private organizations associated with the same contract but sometimes we did not for logistical reasons. For example, a government manager might agree to participate but the private contractor would not. Instead, we focused on trying to interview government officers and private organizations that oversaw the delivery of a mix of human services. While such approach prevents us from examining two sides of joint contractual arrangements, independence of observations allows us to draw conclusions based on the entire sample.

We conducted semi-structured interviews with a total of 33 public and private contract managers. We contacted 42 respondents, and 33 of them agreed to participate, representing a response rate of 79%. The final sample included 13 interviews with public contract managers and 20

interviews private (nonprofit or forprofit) contractors⁸, representing a variety of service areas outlined in Table 1.

[Table 1 about here]

Some basic introductory statistics describing our respondents and the contracts included in our sample are described in Table 2. Among public managers, 92.3% of respondents discussed a contract with a nonprofit organization, while 7.7% of respondents discussed a contract with a for-profit organization. Among private sector respondents, 65% were nonprofit and the rest – for-profit. Respondents’ average work experience was 27 years for the private managers and 30 years for the public managers. Three-quarters of private-sector respondents had a Masters degree (rather than a Bachelors), meanwhile, among public managers, 67% had a Masters degree. We asked public managers to report the number of county employees working on the contract that was discussed during the interview, and the average number was 7.2. The average number of private sector staff members working on the contract that our nonprofit and for-profit respondents discussed was 19.4. In addition, we asked private sector respondents if their organization spent part of its budget on advocacy, and 30% of respondents indicated their organization did. All respondents were asked to rate the level of public attention paid to the contract’s service area, on a scale from 1 to 10, and the average rating for private and public respondents was 5.6 and 5.2, respectively. We also asked public sector respondents to rate how active their county governments were in creating citizen participation opportunities, on a scale from 1 to 10, and the average for our sample was 8.6.

[Table 2 about here]

Interviews. All data collected for this study are confidential: the names of the respondents, their organizations and counties have not been recorded or included in any oral or written texts associated with this study. Interview length ranged from 25 to 50 minutes. When possible, the interviews were done in person. Otherwise, we conducted them over the phone.

⁸ Data collection for this study is still in progress.

While we used separate interview protocols for the interviews with the public and private contract managers, the basic topics covered in the two protocols are the same. Please see Appendices A and B for the two interview protocols.

Each instrument contains mostly open ended questions that require descriptive responses and covers the following key topics: a description of the service area and service goals, use of various citizen participation practices, examples of information obtained through these practices, reasons for using these practices, use of this information, and contract monitoring practices.⁹ The open ended question on the various citizen participation practices used for a particular contract was accompanied by a limited number of explicit probes related to the use of client input, advisory boards, public meetings, boards of directors, as well as social media as forums for citizen participation. At the end of each interview, we asked respondents a few questions about their work and educational background. We also asked them to rate a variety of organizational and contextual factors using a 10-point Likert scale.

When the respondent agreed, we audio-recorded and transcribed the interview. In other cases, the interviewer took detailed notes of the answers. All interview notes and transcripts were coded using a mix of deductive and inductive strategies. Initial codes were developed based on past research and our government and contractor interview instruments. This list of codes was then revised and augmented through an inductive process based on analysis of the interview transcripts. Pattern-matching (for a description see Yin, 1994) was also used as part of the data analysis.

Findings

⁹ The secondary purpose of this exploratory study is (1) to refine the measures of citizen participation in health and social service contracts, (2) develop hypotheses on the determinants and motives of using public participation forums by contracting agencies, (3) refine hypotheses on the influence of public participation on the definition of contract outcomes, and (4) help design a structured instrument for a follow-up large-scale study.

This section begins by detailing the prevalence of various citizen participation practices among public and private respondents. This is followed by a qualitative discussion elaborating on each of these practices. We then examine the motives and implications of using citizen participation in health and human service contracts.

The Prevalence and the Scope of Citizen Participation Opportunities. While our analysis is mostly qualitative, we report some numeric data on the prevalence of citizen participation in our sample.

[Table 3 about here]

Table 3 presents information on citizen participation opportunities created and used by the private contractors and counties. A “1” depicts a positive response to the questions pertaining to various citizen participation tools (as opposed to a negative response or “don’t know”). Client input was the most prevalent form of citizen participation in the contexts we examined: 90% of contractors and 84% of public managers reported that the vendor collects client input, and 50% of contractors and 69% of public managers reported that the county government collects client feedback. Overall, while both the counties and the private vendors appear to be active in soliciting client feedback, the vendors appear to take the lead in this area, likely because contractor front line workers often have more direct interactions with clients.

A different trend can be noted related to the advisory boards. A higher proportion of public and private respondents discussed advisory boards that were initiated by county governments: 55% of private respondents and 61% of public respondents reported the existence of a county-led advisory board while only 45% of private respondents and 15% of public respondents reported the existence of a contractor-initiated advisory board. County governments were also more likely to initiate public hearings, open meetings and discussions related to the contracted services. Overall, 27% of respondents described public discussion

forums organized by the contractor (25% of private respondents and 31% of public respondents), while 49% of all respondents described public discussion forums organized by the county (45% of private respondents and 54% of public respondents). The county appears to be more active in bringing various stakeholders together to discuss services related to its contracts.

By virtue of including a large number of nonprofit service providers in our sample, 70% of contractors and 69% of government managers reported that the contractor had a board of trustees. Five respondents from private organizations indicated that clients and/or family members served on their organization's board. Finally, we found virtually no evidence of either county government or contractors utilizing social media to seek citizen feedback. In the section below, we take a more in-depth look at the various citizen participation opportunities and the input that was received through these forums.

Input from Organizational Clients and Their Families. Our analysis identified many instances of client engagement and participation. Examples include: (a) formal surveys or other data collection tools used by contractors or counties, (b) formal grievance/complaint processes implemented by both parties, (c) regular individual, small or large group meetings between vendor staff and clients, and (d) ongoing informal communication between clients and the vendor and/or county.

Seventeen respondents from private organizations (51%) and seven respondents from county government (21%) collected client input using *surveys or other formal data collection tools*, such as client satisfaction surveys (e.g, discharge or exit surveys) and formal in-person or telephone interviews with the clients and their families. Some vendors utilized specific industry data collection tools, such as “*My Interview*” which is designed for nursing homes and allows clients and family members to compare results across providers. Other contractors incorporated

questions requesting client input in their general program assessment tools, such as the “pre” and “post” surveys of participants in youth educational workshops on sexual violence. Most of these surveys seek feedback on service quality, staff, and/or physical environment and include open ended questions to incorporate some unstructured feedback. Some vendors and counties sought client input using more advanced or creative techniques. For instance, a private “group home” for individuals with mental health diagnoses asked its clients to create their own surveys and then complete the surveys as a way for collecting feedback. As another example, an intergenerational resource center conducted focus groups with its young and senior participants (as well as its volunteers, teachers, partnering senior centers and other stakeholders).

Seven respondents (21%) collected client input using formal *grievance or complaint procedures*. Clients and their families often first complain to the vendor but have the right to seek recourse from the county or state if they do not feel their complaint has been properly addressed, which would trigger an investigation. In some cases, contractor staff shared information about the complaint procedures with the clients. In other cases, complaint procedures were explained in various printed materials disseminated to clients or client rights posters which were posted in the physical space where services were provided.

Seven respondents (21%) used regular, but less structured *staff and client meetings* as an opportunity to solicit clients’ input. These meetings involved the informal, “free exchange of ideas” and were particularly prevalent in residential care settings, such as the groups homes for individuals with intellectual disabilities or mental health diagnoses. While the individual meetings focused on client treatment plans, the group meetings (e.g., “house councils”) revolved around existing services, schedules and events. While most respondents indicated that clients

were eager to provide feedback in these informal meetings, one respondent in a residential mental health setting commented on the difficulty of engaging the participants:

I found that if I just have family meetings, no one shows up. If I pack it up as a social event, then everybody gets together at one of the houses, and I can get a few parents together and have some dialogue with people. There are a few parents that are very involved that we have regular conversations with. A lot of the families don't want to be involved at the macro-level. They are concerned about whether or not their daughter has cigarettes and can smoke.

One large nonprofit reported conducting larger scale meetings with its clients. This nonprofit organization provided legal and employment assistance to recent immigrants who become dues-paying members and had over 40,000 member-clients. According to this vendor, their organization's advocacy and legislative priorities were based on feedback from member-clients at the vendor's annual membership assembly. One example of such feedback included focusing organizational advocacy efforts on helping its members obtain drivers licenses, rather than focusing on other priorities related to education. As explained by this respondent:

“Organizationally, we take a lot of pride in making sure our [legislative] priorities come from the membership.”

Finally, eleven respondents (33%) reported that current and former clients and their families provided *ongoing, informal feedback*. Reflecting the sentiments of many respondents, a vendor noted:

Informally, we get a lot of feedback during our daily operations, from our volunteers and clients. Our clients also talk to us about anything that's important, anything they want changed.

Two respondents specifically commented on the importance of informal feedback which can complement and provide insights into formal survey findings. As one respondent noted:

[The vendor's survey results] are always very very positive, which is a good thing. It just doesn't tell the whole story... They have day-to-day challenges with their clients just because of how sick they are. The changes they make in programming and adjustments

are based on their day-to-day interactions with these people and their families and what they are asking of us.

Overall, our study suggests that seeking client feedback is common and that both the counties and the vendors create multiple and ongoing opportunities clients and their families, those most immediately affected by the services, to express their views.

Advisory Boards and Related Public Discussion Forums. A large number of respondents described public and private advisory boards that held public hearings, provided recommendations on service “priorities,” and/or participated in the contractor selection or contract monitoring process. Eight respondents (24%) detailed the important role that the *Community Services Boards* (CSBs) played in creating opportunities for citizen participation in one state where two counties included in our sample were located. Following state mandates, counties create and appoint volunteers to serve on special administrative policy boards overseeing (and in some cases operating) programs providing mental health, substance abuse, or intellectual/developmental disability services. The CSB members generally include county leaders, policy experts, as well as clients and/or their family members. Clients and their family members must comprise at least one-third of the board. While some respondents are not aware of the process for appointing the CSB members, others indicate that the county selects “prominent” or “respected” local volunteers with an interest in these specific policy areas (in addition to the clients and family members on the board). The CSBs and their various sub-committees, which involve more citizen volunteers, hold regular public hearings.

Rather than being focused on individual contracts, a CBS and its committees concentrate on service provision in a particular subfield such as mental health services and receive feedback from a wide variety of stakeholders, including service providers, county staff, policy experts, advocacy organizations, individual “long time activists,” clients, their families and other

community residents. “Coordinated” by a county senior staff member, the CSB public hearings generally include discussions on the scope of services, determination of “priority areas,” challenges experienced by the providers, gaps in the system, and individual citizen testimonies. Several respondents noted that while private citizens who were not somehow affiliated with the service delivery system were encouraged to participate, the engagement of these citizens varied and, in some cases, was minimal.

Sixteen respondents (49%) reported on the activities of other *county-led advisory boards*. Examples of these boards, typically focusing on a policy subfield, include the Domestic Violence Task Force, Victims’ Advisory Committee, County Alcohol and Drug Advisory Board, Coordinated Children’s Services Initiative, Commission on Aging Volunteer Board, Latino Advisory Council, African Immigrant Advisory Council and others. As with the CSBs, these advisory boards oversee numerous in-house and contracted services and hold public forums on a regular basis. Generally chaired by a county council member, these forums inform citizens and providers about new services (“the state of the community address”), share strategic planning information, seek feedback from providers on service delivery issues, and/or solicit individual citizens’ comments. A number of respondents noted that some providers mobilized their clients to attend these forums in order to influence budget discussions. In addition to these large scale hearings, there were also smaller open forums. Specifically, one advisory board, organized by the county Planning Department’s permit process, reviewed proposals associated with new institutional programs that involved land use.

Two respondents (6%) noted that their contracts have *federal or federally mandated advisory boards*: one contract was for federally funded family planning services and the other had a Community Action Advisory Board which operated like the CSBs and oversaw services

for low-income persons. Both boards reviewed performance data supplied by the contracted nonprofit organization and included “client” members.

Nine respondents (27%) reported the existence of *private advisory boards* either affiliated with a specific contractor or advocacy group (such as People with Aids (PWA)). The private advisory boards generally did not hold open public hearings but instead focused on reviewing organizational missions, policies, performance and resources and providing general feedback on organizational activities. Similar to the county-led boards, the extent of community engagement in these efforts varied, as indicated in this respondent’s feedback:

We have recently merged with another organization, about a year ago. Both agencies tried to have a client advisory board and eventually it faded away. We are in fact trying to re-energize that again now, but it’s been challenging. We provide food, transportation, but there has been so little participation. The clients aren’t really motivated to attend things.

Another respondent from a nonprofit violence prevention program cites the activities of an Early Childhood Policy Council within her organization that involves its clients in various ways, such as asking them to participate in the interviews of new staff members.

Finally, ten respondents (33%) indicated that private citizens participated by either serving on a *vendor selection committee* which chooses contractors as part of the Request for Proposals [RFP] process or a *citizen review panel* which monitors contracts. The selection advisory committees are wholly or partially comprised of private citizens, non-county employees who are knowledgeable about health and human services. In describing the creation of one of these vendor selection committees, a respondent explained:

The county board, a number of years ago, wanted to get out of business of funding some nonprofits; these nonprofits would always go to them begging for money, so they said they will let citizens make the decision. During the [RFP process], we all apply, and it goes into a pot and a group of citizens will make the recommendation to the county board. These are people recruited or are simply volunteers who are interested in the process. I am not sure how they are selected, this is may in fact be confidential, but we

actually just hired someone to our organization who sat on the committee that selected our contract.

The citizens interview the contractors and have an equal voice in determining which organization wins the bid. In addition, citizens participated in open hearings for current and prospective contractors and their clients. These hearings were used to refine the scope of the service to be contracted, as well as to assess a vendor's capacity to deliver the service, as described in the comment below:

[This] vendor will bring in people to speak in favor of the contract continuing, particularly if there is an interest in increasing the amount of money that is needed. So, there is an open public process, a process for public participation on everything in the county that is funded through the county budget.

In some instances, the county developed and suggested evaluation criteria that the selection board should apply while evaluating the proposals. The citizen review panels involved volunteer boards too and conducted extensive assessments of the contracted services, which according to a private sector respondent, is less frequent but more in-depth than the county monitoring process.

Other Public Discussion Forums. In addition to the public discussions and hearings held by the advisory groups, respondents in our study cited numerous other public forums that encouraged citizen input. Some of these forums were initiated by the county while others were initiated by vendors. Four respondents discussed public forums that were regularly held by the county as a part of its *strategic planning* in the fields of homelessness prevention and senior care. Key stakeholders, such as clients, senior care providers, family caregivers, developers and/or landlords, participated in these forums which are typically advertised in the news, online, and in relevant constituency newsletters. Through these forums, the counties share their plans and solicit feedback on what new services are needed most. Three more respondents indicated that *public hearings on the county budget*, typically attended by 100-150 participants, provided

another excellent opportunity for citizens in the community to voice their concerns. In the words of one vendor:

Another way of engaging our members, we had a risk of getting cuts, so our membership got mobilized and we went to the county budget hearings and those are open to the public and anyone can come and talk about budget priorities. We have those regularly. So that would influence the level of funding, cuts and increases. One time, not for this contract, we also did a protest outside the office of the agency, and that actually had an impact, the agency really understood the impact it's making by cutting the program.

Another five respondents described various annual county-led hearings that invited a smaller group of service providers and their clients in a specific policy subfield to provide feedback.

One private manager noted:

It was helpful to the providers to hear the clients on those forums where they could just talk and not call and complain. It was an open forum so it didn't feel like a patient from a specific agency is complaining, but that it was general feedback from the clients of several providers.

The public discussions initiated by the vendors were generally on a smaller scale and sought to engage the constituents more immediately involved in or affected by the services: ten vendors (33%) reported working with various community constituencies, such as civic associations, schools, libraries, senior centers, and parents, either by exchanging information with the groups, seeking their feedback or by educating them about various issues. For instance, one nonprofit manager described her interaction with a civic association complaining about a group home for individual with mental health diagnoses:

This was a very angry neighborhood. Just a lot of work to be done. I came with the management from [the vendor] and my supervisor from this agency, our division chief, and the officials from the police department. We came and spoke with about 35 members from this community. We spoke about everything from institutionalization, issues of privacy, what kind of people are at the state hospital, what we can and cannot share, a lot of education trying to settle down a community. You know, these people have a right to live in the community.... So that is the kind of work we are doing with the public.... I've offered the community a chance to call me anytime if there have any further concerns, any mentally ill people in their communities in general and they want to get some education.

As an additional example, another private sector respondent who worked for violence prevention programs explained that her role involves constant outreach to various community members through small groups meetings or sessions open to the general public:

From our perspective, as a provider, and this is true for all of contracts we have, we do outreach to the county population, so that people know what services are available, how to refer others to our services, how to access them. As a part of my job, I am regularly meeting with various stakeholders, schools, juvenile justice and courts, because these are seen as [connected to our] primary target population. This program evolved from what the local schools and juvenile justice system were seeing as the most pressing needs. So, we continue to look at the needs in the community and the gaps. It is a pretty regular part of my job to be meeting with the folks at all levels.

Board of Directors. As Table 3 indicates, fourteen private respondents in the sample report having a Board of Directors that provides input on organizational policies, performance oversight, and general advice and support to the entire organization and, indirectly, the program. Of the five respondents who reported having clients or their family members on their Boards, four respondents referred to state regulations requiring that at least one third of their board be current clients, former clients and/or family members. A vendor providing legal and employment related services to immigrants noted that her organization arranged for translation services to ensure their active participation on the Board. Two respondents specifically indicated that clients on the board had provided valuable feedback to the organization in general but none of the respondents cited examples of how feedback from clients serving on the board had directly impacted the contracted services.

Using Social Media to Engage the Citizens. One of the most surprising findings of the study is that virtually no contracts utilized social media to seek feedback from their communities about service provision. Only one manager of a nonprofit homeless shelter reported using a Facebook account to let the public know about the programs funded by the contract and to highlight specific achievements of the clients, innovative initiatives and new partnerships.

However, he pointed out that the confidentiality provisions prevented him from posting more explicit messages, photos and client information. Other respondents reported either not using social media or not using it effectively. Three respondents expressed skepticism about using any form of social media for public engagement, with one noting that she did not “believe” in social media.

Examples of Citizen Feedback Received. Respondents in our sample reported using a variety of citizen methods that involve clients, their families and, in various capacities, other members of their communities. All of these tools are likely to generate interesting and important feedback. As part of our interview protocol, we asked our respondents to share one or two examples of specific input they received as a result of citizen participation. Respondents provided a broad array of examples, reflecting citizen “needs” and “wants” related to the contracted services. We grouped these examples of input into five categories: (a) concerns about living conditions and staffing, (b) scope of services, (c) desire for a new service emphasis or additional services, (d) program rules and clients’ choices, and (3) assessment of the service (either appreciation or dissatisfaction). Table 4 summarizes the prevalence of these themes.

[Table 4 about here]

As illustrated in Table 4, sixteen respondents (49%) noted that the feedback they received involved concerns related to *living conditions or staffing*. The clients (especially those receiving services in the context of residential care facilities) regularly provided feedback on services related to their daily lives such as trash collection, water services, the quality and type of food served, parking and facility accessibility for individuals with physical disabilities. The “neighbors” of these private organizations also provided feedback on how their lives had been impacted the facilities. For instance, citizens residing in close proximity to homeless shelters or

residential facilities for individuals with substance abuse problems, mental health diagnoses or intellectual disabilities contacted the vendors or the county [in some instances, through their civic associations] about issues such as disruptive client or staff behavior.

Since most programs in the area of health and human services involve close interactions between clients and staff, some client input focused on their relationships with individual service providers. Examples included feedback on staff tardiness, staffing schedules, and the overall match between a client and the assigned staff. For instance, at a county-led public hearing organized by a senior ombudsman, an elderly home-care client voiced a concern about a systemic cultural divide between the caregivers of a home care agency and its service recipients.

According to Table 4, eleven respondents (33%) commented on the overall *scope of provided services*. Many respondents indicated that clients generally needed and wanted more services. The following comment from a private provider of safe housing for the female victims of domestic violence captures the sentiment expressed by several respondents:

Users often come with the expectation that they would get safe housing and they don't. Affordable housing is in short supply here. Even transitional housing does not hold up. During the last few years, during the recession, all hotels and motels have been full all the time. The biggest feedback [that we receive] is that the facility doesn't do what [the clients] have hoped it would.

As another example, a vendor providing home care services commented:

We do get suggestions from the clients. They wish they were able to get more service. A lot of our clients can only receive 2 hours of care per day. The reason is because, of course, the county is heavily subsidizing this. The county pays for 90% of this service, and their dollars cannot stretch much. But from the clients' perspective, they really need more than the 2-3 hours that the county had approved. The aide goes into the home and the client is trying to get the aide do a 6 hour job in 3 hours.

Respondents reported receiving similar input about the length of time clients were able to receive services and about overall program funding.

As shown in Table 4, thirteen respondents (39%) mentioned a number of examples of citizen input (both from the individual clients and through advisory boards) about *changing the emphasis of the service delivery*, putting more resources into certain areas or initiating new services. Examples included clients with HIV/AIDS asking for less ongoing care and more crisis intervention services, the elderly and welfare-to-work clients asking for transportation assistance, the residents of a shelter asking for therapy services, and the residents of group homes asking for more “outings.”

Depicted in Table 4, nine respondents (27%) described feedback from the clients and other parties suggesting that they prefer to have *fewer rules, have more control, and more choice* in the decisions related to the services they receive. Complaints about having “too many rules” were particularly prevalent. For example, homeless shelters received frequent complaints about curfew rules requiring residents to be at the shelter by a certain hour and rules prohibiting clients from inviting their abusive partners to the shelter. In some instances, the residents argued that the requirement to return to the shelter on time prevented them from taking evening jobs and generating more income. While the clients tended to complain about rules, one respondent recalled an instance when an advisory board reviewed a contract for shopper services for the disabled elderly and recommended adding more rules to reduce the level of risk for program clients and volunteers.

Respondents also indicated that clients want more choice and control over services. A manager of a nonprofit faith-based residential facility initially planned to provide nutritional food presented on a formal menu for its residents. However, the clients asked for a less formal menu that allowed them to have more choice and, in some instances, opt for a less healthy option. This same respondent also reported giving clients some flexibility in terms of scheduling daily

cleaning responsibilities. Other respondents discussed their clients' desire to be more fully educated about their treatment and medications and about county programs in general. As explained by a mental health service provider:

We would hear, for instance, that the clients feel they were not fully involved in discharge planning. There is a treatment plan with the expectation that they would successfully complete it and would be moved to another level of care or referred to ongoing service. Often, the clinician develops that based on the assessment of need. In some cases these assessments do not match client expectations or understanding. So, we do education and training with our staff on how to involve the clients.

Finally, eleven respondents (33%) cited an example of feedback assessing the services that had been provided as illustrated in Table 4. In some cases, clients expressed satisfaction. Examples of this included client appreciation for: the 24/7 accessibility of the vendor staff, the quality of pediatric therapy services, caregivers' promptness, the amount of money saved as a result of Medicare-related referral services, and the quality of youth education classes. Other respondents provided examples of negative feedback they have received related to their services, such as community residents' opposition to the establishment of a new emergency shelter and private citizens' complaints about a county advertisement about sexual assault that used the word "rape." In addition, one of the authors of this paper witnessed citizen opposition during one of the interviews, observing a group of protesters standing outside the main office of a nonprofit organization included in this sample. The protesters opposed the general values and the mission of the nonprofit organization.

Clearly, organizational clients and other citizens, directly or indirectly affected by the county programs examined in this sample, provided a fair amount of input on the nature of their needs, preferred dimensions of the services, and their overall feedback on its value. Perhaps, the more important question relates to the extent to which this feedback influences decisions and programmatic policies at the local level. The following two sections will consider the motives

for the counties and the private providers to create public participation opportunities as well as how counties and vendors use the citizen feedback they receive.

Reasons for Creating Citizen Participation. Respondents reported creating opportunities for citizen participation for a variety of reasons. The most frequently mentioned reasons are summarized in Table 5. The second and third columns of Table 5 indicate the number of county and contractor interviews in which respondents reported a particular motivation for seeking citizen feedback, and the fourth column details the total number of respondents reporting a particular motivation.

[Table 5 about here.]

The most common reason for seeking citizen input cited by twenty respondents (61%) was to assess and improve programs as shown in Table 5. Reflecting the views of many, one respondent commented:

If we don't get the feedback on what we are doing, we don't know if we are doing it well. We are able to look at ourselves and say we are good here and not so good here, and we can change policies and procedures, to better ourselves.

As another example, a respondent stated:

Our goal is to provide world class service for all our citizens here in the county and, you know, the more input we can get from individuals, the more we can learn about the programs and the better the service can be.

While program improvement was an important goal for many public managers and contractors, this motivation was mentioned more frequently in the contractor interviews: program improvement was cited as a goal of citizen participation by 15 private sector respondents (75%) but by just 5 public sector respondents (38%). This may be explained by the fact that the contractors are accountable for the performance of their programs to multiple stakeholders, while the counties may see the democratic process as a goal in and of itself.

Consistent with the fact that citizen input was the most common form of citizen participation, many of the reasons that respondents cited as motivating their organizations to create opportunities for citizen participation related to client issues. For instance, thirteen respondents (39%) indicated they sought citizen feedback in order to better understand and meet client needs as indicated in Table 5. As explained by one respondent:

The parents [of the children receiving the contracted service] can always call and give feedback, if they are pleased with something or not pleased with something. That is the role of service coordinator, is to make sure people are feeling they are getting what they need to be getting from their contractor.

Another client-related motivation cited by five respondents (15%) was to educate the community about the clients their organizations serve and/or the services their organizations provide as illustrated in Table 5. These interviewees viewed citizen participation as a mechanism for reducing the stigma surrounding certain social problems and making it easier for their clients to be integrated into the community. In the words of one respondent:

Education is so important. Lack of education results in discrimination and stigma. Our clients don't dress well. They have trouble with their hygiene. They talk to themselves. They often speak constantly. But, that doesn't mean they can't work. They can go to work, and we don't need to be afraid of them. Discrimination stems from fear so we want to make sure we have a good relationship with the families and the neighbors because this helps reduce stigma and helps us find partners. Our neighbors and people in the community often help us find jobs for our clients. They donate money. This can only be good for the clients and the agency. These relationships lead to better things, especially if we educate people.

Creating citizen participation opportunities, specifically by seeking client feedback, was also viewed as a way to empower clients. Three respondents (9%) cited this as important motivation for their citizen participation efforts as shown in Table 5. For instance, one contractor who housing and mental health services to individuals with mental health diagnoses commented:

I am not in charge of your life. I am only giving you the support that you need and so that is the whole foundation of our residential programs. Our goal is to help empower you, what I want doesn't matter. I want to help you get to where you want to go. People create that environment that they want to live in.

Some other common reasons for creating opportunities for citizen participation were specific to subgroups of our sample. As an example, four out of the five respondents who indicated county culture was a key reason for their citizen participation efforts in Table 3 were government managers from the same county. According to the managers, their county emphasizes the importance of citizen engagement in every facet of its government. In the words of one of these managers:

We pretty much do everything we do because it's the County X way. It's the right way. If another county does it 100%, County X would do it 110%. They care very much about the county and the residents who live here and want to make it best for everyone.

Other reasons for citizen participation efforts that were specific to subgroups of our sample were client empowerment which was just mentioned by contractors and legal requirements which were just mentioned by government managers. Examples of legal requirements respondents cited included Department of Housing and Urban Development and state human right regulations.

Uses and Challenges of Citizen Feedback: There were many ways organizations used the citizen feedback they received. One of the most common was to change service delivery in some way. As illustrated in Table 6 which summarizes the different ways citizen feedback was used, 24 respondents (73%) reported that citizen feedback had influenced service provision. A few examples of the many service delivery changes respondents cited included preparing more meals on site at a senior center, allowing clients receiving substance abuse and mental health treatment to have greater involvement in the discharge planning process, and encouraging schools to make referrals to a violence prevention program. In most cases, respondents indicated that citizen feedback resulted in changes being made to existing services. However, two respondents reported that citizen feedback actually led to the creation of new programs. For instance, one government manager indicated that her county identified an unmet need for

bilingual substance abuse services and collaborated with other counties and a nonprofit to create a bilingual residential substance abuse treatment program for Spanish speaking males. Although well more than half of the respondents reported citizen feedback resulted in service delivery changes, six respondents (18%) indicated that their contract had to be modified due to these changes as indicated in Table 6. In the words of one contractor, “We have wide latitude with our contract. I can’t imagine anything that would come up at the [client-staff] meeting that would I would need go to the county to make change with.”

[Table 6 about here.]

Sharing of citizen feedback information between the government and contractor is another very common practice. As indicated in Table 6, 24 respondents (73%) reported sharing citizen feedback with their contracting partner and/or having had their contracting partner share feedback information with them. Reflecting the sentiments of several respondents:

County X is very participatory. That means relationships with our contractors are really our partnerships. As the county sees changes in our client population, we work with the contractors to ensure that services that are being provided are responsive to those needs.

In some cases, the information that was shared was aggregated and at the program-level. For instance, many contractors shared the results of citizen satisfaction surveys with their government partners. In other cases, information about specific clients was being shared and used to make changes in individual service plans.

As discussed previously, sometimes citizens were given the opportunity to directly affect government funding decisions by serving on vendor selection committees as part of RFP processes. Consistent with this, eight respondents (24%) indicated citizen feedback also influenced funding decisions as shown Table 6. For example, based on feedback from clients and their family members, one county allocated additional funds to pay for a primary care nurse

at a group home for individuals with serious mental illnesses when the vendor could no longer afford to pay for this service. According to the government manager:

It's [the primary care nurse is] not something we paid for or were pushing as a county but it came as something that was very important to those residents there. It was a positive thing, something got cut and through their efforts something got restored.

Finally, six respondents reported using citizen feedback to help establish organizational goals as illustrated in Table 6. Goals impacted by citizen feedback which were mentioned by respondents included service targets, strategic plans and legislative priority areas. Describing the integral role that feedback from stakeholders including clients played in her organization's strategic planning process, one respondent commented:

We have a strategic plan, so we need to think about where we are going in the future. We have to know. We can't just sit in the room and talk amongst ourselves. We have to have an awareness of what people think we should be doing, are we doing it right, or do we need more of it.

While organizations were able to use citizen feedback in a variety of ways, fifteen respondents also reported that they experienced some challenges when engaging citizens. Several respondents mentioned experiencing a few of the challenges but for the most part there was not a consistent pattern with the challenges that different respondents faced. For instance, four respondents indicated that sometimes clients did not understand the limitations of the services that could be provided. As described by one respondent, "the challenge is the nature of the feedback we get when people don't understand what we do and want more or expect something different." In addition, four respondents sometimes had difficulty finding clients and citizens who were willing to provide feedback. In the words of one of these respondents: "The challenge always is getting people that are willing to give their time and participate. That's the biggest [challenge], time." All of the other challenges discussed by respondents came up in just one or two of the interviews.

Discussion

In the post- New Public Management era, “public managers increasingly regard the public as customers to be served rather than as citizens who govern themselves through collective discourse processes. They keep the public at a distance by conducting surveys and focus groups to identify existing opinions rather than engaging citizens face-to-face in exchanges of information, ideas, and values that result in informed governance (Box 1999, p. 22).” This concern may be particularly relevant to the private provision of government services, since private providers may be likely to adopt a “customer” rather than a “citizen” orientation with respect to their clients. As the ideas of the New Public Service movement gain recognition, public and private providers of publicly funded services should conceptualize democratic citizenship beyond citizens’ self-interested choices and individual rights and incorporate a broader long term perspective “that requires a knowledge of public affairs and also a sense of belonging, a concern for the whole, and a moral bond with the community whose fate is at stake” (Denhardt and Denhardt 2000, p. 552).

The impetus for this study was to examine whether local government contracts in the field of health and human services truly are “community owned.” Or, in other words, are the individual citizens and various community organizations actively engaged in the selection, implementation and evaluation of government contracts? We find that the local governments and contractors in this study indeed use a broad array of public participation mechanisms in the context of their health and human services contracts. Overall, our findings are consistent with past research on the extent of citizen participation in health and human services contracts (LeRoux 2009). Our analysis suggests counties and contractors try to create interactive dialogues with citizens. The communication goes well beyond information sharing and involves

seeking ongoing feedback from key stakeholders. Seeking feedback from organizational clients is particularly prevalent, especially among private vendors. This is likely because clients are most immediately affected by the scope and the design of the contracted services, they are likely to have the first-hand knowledge of what works and what doesn't in service provision, and they are also likely to have many opportunities to interact with contractor staff.

In addition to gathering input directly from clients, county governments seek citizen feedback through advisory boards and other public discussion forums. Often providing additional oversight for contracted services, advisory boards included various task forces, committees, and councils. Citizen also sometimes participated in the contract selection process through selection advisory committees where former clients, family members and some “prominent” community members participate in reviewing funding requests and interviewing the providers. The county government often maintained control over the appointment of individual participants on these committees. County governments also frequently organized open public discussions in order to seek feedback on their future service delivery plans. Rather than bringing in an independent facilitator, counties typically served as a convener for these public participation opportunities, and the participants generally included the providers, policy experts, clients and citizens at large. Most of the public hearings described by our respondents include citizen testimonies or other opportunities for citizens to ask questions, comment on the importance of a service or identify areas for improvement.

Activities organized by contractors through their private advisory boards and boards of directors supplemented government efforts to gather citizen feedback. Most of these boards provided support and advice on the overall mission and programs of the private organization but did not provide feedback on specific contracts. Just five vendors in our study had current clients,

former clients and/or their families serve on their boards. These groups are likely to add a unique perspective to discussions of organizational priorities and program assessment. In addition to the “open” discussion forums, private providers cited several examples of outreach to various stakeholders in the community to help identify gaps in service provision and improve current services.

The vast majority of our respondents sought citizen input using one or more of the methods described above and were able provide examples of specific feedback they had received. While many citizen engagement efforts were discussed, it is unclear how much feedback was provided by individual citizens who were not somehow affiliated with the service delivery system. Much of the “citizen feedback” that respondents cited as examples came from clients, their families and community members directly interacting with clients rather than individual citizens who were not somehow affiliated with the service delivery system. Some of the citizen engagement efforts by design targeted specific stakeholder groups such as client satisfaction surveys. In other cases such as Community Service Boards, feedback from all citizens was welcome, but input from individual citizens was sometimes limited. In addition, there is limited empirical evidence suggesting that counties tend to appoint “prominent” community residents to serve on various advisory boards. More data analysis is needed to examine role of the “general public” in these public participation opportunities.

Drawing on Natatchi’s (2012) dimensions of citizen participation mechanisms, the data collected and analyzed for this study suggests counties and contractors try to cultivate cooperative relationships with citizens. While some citizen feedback may be adversarial such as community concerns regarding disruptive behavior of group home residents, the efforts of the county and the contractors appear to be focused on listening to the stakeholders’ concerns,

educating them about the nature of the social problem and resolving the conflict cooperatively. The cooperative nature of these citizen participation opportunities is also reflected in the fact that community education is a common reason for motivating citizen participation efforts. Citizen participation forums create an opportunity for the county and providers to educate various stakeholders and improve the overall awareness of public services and community needs not only among the clients but also among the general public. Other common reasons for creating opportunities for citizen participation included: (1) to assess and improve programs and (2) to respond to client needs. The fact that service improvement was cited more frequently as a goal by the private contractors may suggest not only these contractors' commitment to excellence, but also that these contractors are mindful of the fact that they must demonstrate program effectiveness to ensure that their contract is renewed.

Perhaps the most important test for the role of citizen participation in government contracting is its effect on the contracted services. One of the key dimensions of public participation discussed by Nabatchi (2012) relates to citizens decision-making authority. Our analysis suggests that citizen feedback received by respondents in this study impacted decision-making in a variety of ways: 73% of respondents reported feedback resulted in service delivery changes, 24% of respondents reported feedback influenced funding decisions and 18% of respondents reporting using feedback to set organizational goals. In addition, 73% of respondents reported sharing citizen feedback with their contracting partner and/or having had their contracting partner share feedback information with them. While one cannot exclude the possibility of some input not being taken into account, these findings suggest that contracted public services are not static and are indeed influenced by input from various community members. The challenges noted by some respondents suggest that it is not always easy to

“energize” the public and suggests that more creative approaches may be needed to be used to engage the citizens, e.g., through the use of social media.

Denhardt and Denhardt argue that “[i]n public administration, the quest for community has been reflected in the view that the role of government, especially local government, is indeed to help create and support ‘community.’” (Denhardt and Denhardt 2000: 552). Our study suggests that the local governments and their private partners are indeed taking important steps in making sure that the services are community owned. They create opportunities for citizen participation and in some instances respond to the citizens’ concerns by making minor or major program or policy changes. However, the findings of this study should be examined with a number of important limitations in mind.

First, our sample includes four jurisdictions in the Northeastern part of the United States. While being quite different demographically, these locations may share a common political culture that influences these counties’ propensity to create mechanisms for public participation. The provider markets may also be more competitive in three of the jurisdictions, which may create some incentives for the providers to be responsive to their clients’ preferences. Hence, the findings of this analysis are more readily generalizable to similar jurisdictions. More research is needed to study citizen participation in other parts of the country. Second, as noted earlier, our research focuses on the field of health and human services where clients are typically more vulnerable than in other service areas. It would be interesting to examine and compare the nature of citizen participation practices in the context of other services that have a broader impact on the general population. Third, the current sample incorporates very few for-profit service providers, whose practices and prospective may be different from those of the nonprofit providers. Understanding this difference in a larger sample that includes more for-profit providers is among

next steps of this research project. Fourth, this is a qualitative study which allowed us to explore the richness of the context and nature of citizen participation practices. Unfortunately, this design prevents us from drawing conclusions about the causal relationships between a broader set of organizational and environmental factors and the prevalence of citizen participation.

One possible direction for the future research relates examining the extent to which citizen engagement influences the way success is defined in government contracts. If citizen participation is extensive and the views of numerous constituencies are taken into account, a broader definition of program performance may be adopted, incorporating objective, perceptual, quantitative, qualitative, organizational-level, partnership-level,¹⁰ policy-level,¹¹ and community-level¹² outcome measures. On the other hand, if citizen participation is limited to a group of “insiders,” contractor advocacy may in fact create a narrower conceptualization of expected contract outcomes. Understanding these and other consequences of citizen participation in local government contracting is an important direction for the future research in this area.

¹⁰ Such as the attainment of long-term capacities, greater efficiency, and identifying additional partners for the future projects.

¹¹ Such as bringing together resources to achieve larger policy outcomes, or raising policy legitimacy by involving multiple local partners (McQuaid 2000; Osborne 2000).

¹² Such as greater goal congruence between organizations, greater information sharing, awareness of community-wide problems, increased efficiency and reduction of service overlap, greater social inclusion of vulnerable groups, and more democratic decision-making (Bovaird 2010; Hodge, Greve, and Boardman 2010; McQuaid, 2000)

Table 1. Services included in the sample.		
Types of Services	# respondents	%
Services for adults/kids with mental illness (therapy, congregate homes, referrals)	7	21
Home care services for disabled individuals (ADL, IADL, or nursing)	5	16
Shelter and services for homeless individuals or victims of domestic violence	4	13
Services for at risk children/youth (violence prevention or afterschool programs)	2	6
Food services/distribution to low income residents	2	6
Housing subsidy and case management for individuals at risk for homelessness	1	3
Family planning services	1	3
Substance abuse treatment	1	3
Education on sexual violence for middle and high school children	1	3
Intergenerational services for the elderly and youth	1	3
Welfare to work program or supported employment for disabled individuals	2	6
Pediatric therapy services	1	3
Nursing home care	1	3
Services for persons with HIV/AIDS (mental health, medical, and other)	1	3
Health insurance counseling/information for seniors (Medigap)	1	3
Services for immigrants (employment, health, legal assistance).	1	3
Production of advertising on sexual assault for county residents	1	3
TOTAL	33	100

Table 2. Additional Descriptive Statistics		
	Contractor Sample	Government Sample
Respondent's work experience (# years)	27.15	30.15
Respondent's highest degree, Masters vs Bachelors (% Masters)	75%	67%
Interview focused on a nonprofit/forprofit contract (% nonprofit)	65%	92%
# employees working on the contract* (# individuals)	19.4	7.2
Perceived level of public attention to respondent's service area (1-10)	5.6	5.15
Part of the contractor's budget spent on advocacy (% yes)	30%	
County active in citizen participation (1-10)		8.62
* Counties asked to identify # county employees; contractors were asked to identify private sector employees working on the contract		

Table 3. Citizen Participation (CP) practices created/used by Government Contractors and Government Agencies

	Respondent (ID #)	Contractors' CP Practices						Governments' CP Practices			
		client input	advisory boards	board of directors	clients on BD	public meetings	social media	client input	advisory boards	public meetings	social media
1	Contractor (id #1)	1		1	1		1			1	
2	Contractor (id #2)	1	1	1				1	1	1	
3	Contractor (id #3)	1	1	1		1			1	1	
4	Contractor (id #4)	1		1							
5	Contractor (id #5)	1	1	1	1			1			
6	Contractor (id #6)							1			
7	Contractor (id #7)		1	1		1		1			
8	Contractor (id #8)	1	1	1	1			1	1	1	
9	Contractor (id #9)	1	1					1		1	
10	Contractor (id #10)	1	1						1		
11	Contractor (id #11)	1		1					1		
12	Contractor (id #12)	1	1			1			1		
13	Contractor (id #13)	1		1	1			1	1		
14	Contractor (id #18)	1						1		1	
15	Contractor (id #19)	1						1		1	
16	Contractor (id #24)	1	1	1		1			1		
17	Contractor (id #25)	1		1					1		
18	Contractor (id #26)	1		1				1			
19	Contractor (id #32)	1		1		1			1	1	
20	Contractor (id #33)	1		1	1				1	1	
% Contractors reporting...		90.00	45.00	70.00	25.00	25.00	5.00	50.00	55.00	45.00	0.00
1	Government (id #20)	1	1	1				1	1		
2	Government (id #21)							1			
3	Government (id #14)	1	1	1	1			1	1	1	
4	Government (id #15)							1			
5	Government (id #16)	1		1	1			1	1	1	
6	Government (id #17)	1		1				1		1	
7	Government (id #22)	1						1	1		
8	Government (id #23)	1		1		1			1	1	
9	Government (id #27)	1		1	1			1	1	1	
10	Government (id #28)	1		1	1	1					
11	Government (id #29)	1						1	1	1	
12	Government (id #30)	1		1		1					
13	Government (id #31)	1		1	1	1			1	1	
% Counties reporting...		84.62	15.38	69.23	38.46	30.77	0.00	69.23	61.54	53.85	0.00
Total # R's reporting...		29	11	23	10	9	1	19	19	16	0
% R's reporting...		87.88	33.33	69.70	30.30	27.27	3.03	57.58	57.58	48.48	0.00

Note 1. "1" denotes cases when respondents positively identified a mechanism for CP, as opposed to saying "don't know" or "no."

Note 2. "Shaded "1" denotes Public-Private advisory boards initiated jointly by both the county and the private organization.

Note 3. The intensity of various public participation forums varies (e.g., inactive boards of directors vs. frequent public hearings).

Note 4. Interview (ID#31) was conducted with a third party contract monitor that was representing the county in our interview.

Table 4. Examples of Citizens' Feedback

Feedback on...	Frequency (%)
Living conditions and staffing	16 (49%)
Overall scope of services	11 (33%)
New emphasis or additional services	13 (39%)
Fewer rules and more choice	9 (27%)
Appreciation or dissatisfaction	11 (33%)

Table 5. Most Common Reasons for Creating Citizen Participation Opportunities.

Most Common Reasons for Creating Citizen Participation Opportunities	County Count (%) N=13	Contractor Count (%) N=20	Total Respondent Count (%) N=33
Assess and/or improve program	5 (38%)	15 (75%)	20 (61%)
Understand and/or respond to client needs	6 (46%)	7 (35%)	13 (39%)
Educate community about clients and/or services	3 (23%)	2 (10%)	5 (15%)
Fulfill legal requirements	5 (38%)	0 (0%)	5 (15%)
Reflect county culture	4 (31%)	1 (5%)	5 (15%)
Share information about available services	2 (15%)	2 (10%)	4 (12%)
Empower clients	0 (8%)	3 (15%)	3 (9%)
Ensure public accountability	2 (15%)	1 (5%)	3 (9%)

Note: Several other reasons were mentioned just one or two respondents. These reasons are not included in this table.

Table 6. Ways Citizens' Feedback is Used.

Ways Feedback is Used	Respondent Count (%) N=33
Changed service delivery	24 (73%)
Shared between government and contractor	24 (73%)
Influenced funding decisions	8 (24%)
Changed contract	6 (18%)
Set goals	6 (18%)

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Appendix A. Private Contractor Questionnaire

Background Information on Contract

1. What services are provided through this contract?
2. When contracting out public programs, government agencies usually expect their contractors to achieve certain goals. What are the goals of this contract?
3. How do you monitor the success of this contracted service?
 - a. *Probe:* For instance, what type of information do you look at to make sure the contractor is doing what the contract requires?

Governments: Public Participation (PP) Forums

4. We are interested in understanding the role of public participation in government contracting. We define public participation as different ways community members, individuals or organizations provide feedback to the government in order to influence government programs and policies. In the context of this contract, has your agency created any opportunities for public participation before or after this contract has been awarded? *Please, explain.*
 - a. *Probe:* Has your agency collected information about client satisfaction, suggestions or complaints? I am not asking whether the private contractor has collected this information. *Please, explain.*
 - b. *Probe:* Has your agency ever had an advisory board making recommendations on services delivered as part of this contract? *Please, explain.*
 - c. *Probe:* Have you held public hearings or any other discussion forums about this contract? *Please, explain.*
 - d. *Probe:* Have you used social media or online forums to get feedback from community members or clients about this contract? *Please, explain.*
5. Can you give me an example of specific feedback that you received as a result of the public participation?
6. Why did you create these opportunities for public participation?
7. Which community members have been involved in these public participation forums?
 - a. *Probes:* Clients? Service providers? Other community groups? Individual citizens?

Governments: Implications of PP

8. Thinking of the different things you have done to create opportunities for public participation, how have you used the information you received?
 - a. *Probe:* Have you shared this information with the private contractor?
 - b. *Probe:* Have you changed the way contracted services are delivered?
 - c. *Probe:* Have you changed the contractual agreement?
9. In what other ways, if any, have you benefitted from the public participation? What challenges, if any, have you experienced with these efforts?

Contractors: PP Forums

10. Does your contractual agreement formally encourage or require that the contractor create opportunities for the public participation?
- a. *If yes, ask: Why is this provision included in the contract?*
11. To the best of your knowledge, has the contractor created any opportunities for public participation? *Please, explain.*
- a. *Probe: Has your contractor collected information about client satisfaction, suggestions or complaints? Please, explain.*
- b. *Probe: Has your contractor ever had an advisory board making recommendations on services delivered as part of this contract? Please, explain.*
- c. *Probe: Does your contractor have a board of directors? Do clients participate on the board of directors? Please, explain.*
- d. *Probe: Has your contractor held public meetings or any other discussion forums about this contract? Please, explain.*
- e. *Probe: Has your contractor used social media or online forums to get feedback from community members or clients about this contract? Please, explain.*

Contractors: Implications of PP

12. Can you give me an example of specific feedback that the contractor has shared with you about what they have learned?
13. To the best of your knowledge, has the information that the contractor collected influenced this contract in any way? *Please, explain.*

Self-Assessment of Success

14. In your opinion, to what extent is this contract responsive to the needs of clients, on a scale from 1-10, 10 being most responsive?
15. Think about the goals of this contract. To what extent are these goals being achieved, on a scale from 1-10, 10 being full goal achievement?

Other Determinants of PP

16. How many years of work experience do you have?
17. What is the highest educational degree you have completed?
18. Is the contractor nonprofit or for-profit?
19. How many employees in your organization work on this contract?
20. Would you characterize this contract as a relationship between your agency and the contractor or do you feel more organizations are involved in this partnership?
21. How influential and politically active are advocacy groups in this service area, on a scale from 1 to 10, 10 being the most influential and most politically active?
22. How much public attention has been paid to this service area, on a scale from 1 to 10, 10 being a great deal of attention?
23. Leaving this contract aside, how active is your county in trying to create opportunities for public participation in its various programs, on a scale from 1 to 10, 10 being very active?

Appendix B. Private Contractor Questionnaire

Background Information on Contract

1. What services are provided through this contract?
2. When contracting out public programs, government agencies usually expect their contractors to achieve certain goals. Based on your formal contract and your informal communication with the government agency, what are the goals of this contract?
3. How does the government agency monitor what you do as a contractor?
 - a. *Probe:* For instance, what type of information do they look at to make sure you are doing what the contract requires?

Contractors: Public Participation (PP) Forums

4. We are interested in understanding the role of public participation in government contracting. We define public participation as different ways community members, individuals or organizations provide feedback to the government in order to influence government programs and policies. In the context of this contract, has your organization created any opportunities for public participation? *If yes, can you describe them?*
 - a. *Probe:* Have you collected information about client satisfaction, suggestions or complaints? *Please, explain.*
 - b. *Probe:* Do you have a board of directors? Do clients participate on your board of directors? *Please, explain.*
 - c. *Probe:* Have you ever had an advisory board making recommendations on services delivered as part of this contract? *Please, explain.*
 - d. *Probe:* Have you held public meetings or any other discussion forums about this contract? *Please, explain.*
 - e. *Probe:* Have you used social media or online forums to get feedback from community members or clients about this contract? *Please, explain.*

If no citizen participation mechanisms were identified, go to Question 10.
5. Can you give me an example of specific feedback that you received as a result of the public participation?
6. Why did you create these opportunities for public participation?
 - a. *Probe:* Does your contract with the government agency formally encourage or require citizen participation?
7. Which community members have been involved in these public participation forums?
 - a. *Probes:* Clients? Other service providers? Other community groups? Individual citizens?

Contractors: Implications of PP

8. Thinking of the different things you have done to create opportunities for public participation, how have you used the information you received?
 - a. *Probe:* Have you changed the way you deliver services?
 - b. *Probe:* Have you shared this information with the government agency?
 - c. *Probe:* Have you asked the government agency for any changes in the contractual agreement?
9. In what other ways, if any, have you benefitted from the public participation? What challenges, if any, have you experienced with these efforts?

Government: PP Forums

10. To the best of your knowledge, has the government agency created any forums for citizen participation before or after you were awarded this contract? *If yes, ask: Can you describe these activities?*

a. *Probe: Has the government agency ever had an advisory board making recommendations on services delivered as part of this contract? Can citizen participate on this advisory board? Please, explain.*

b. *Probe: Has the government agency held any public hearings or other discussion forums encouraging public feedback on this contract? Please, explain.*

If no citizen participation mechanisms were identified, go to Question 13.

Government: Implications of PP

11. Can you give me an example of specific feedback that the government agency shared with you about what they have learned?

12. To the best of your knowledge, has the information that the government agency collected influenced this contract in any way? *Please, explain.*

Self-Assessment of Success

13. In your opinion, to what extent are the services in this contract responsive to the needs of clients, on a scale from 1-10, 10 being most responsive?

14. Think about the goals of this service. To what extent are these goals being achieved, on a scale from 1-10, 10 being full goal achievement?

Other Determinants of PP

15. How many years of work experience do you have?

16. What is the highest educational degree you have completed?

17. Is your organization nonprofit or for-profit?

18. How many full-time employees work on this contract?

19. Does your organization allocate a portion of its budget to be spent on advocating for any causes?

20. Would you characterize this contract as a relationship between your organization and the government agency or do you feel more organizations are involved in this partnership?

21. How influential and politically active are advocacy groups in this service area, on a scale from 1 to 10, 10 being the most influential and most politically active?

22. How much public attention has been paid to this service area, on a scale from 1 to 10, 10 being a great deal of attention?