

District Level Decentralization and Public Service Delivery in Ethiopia: Cases from Amhara region.

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Abstract

This study assessed how decentralization facilitates public service delivery in Enbse Sarmidir and Dejen Districts of Amhara Region. The assessment was conducted in selected public services: education, health, water supply and rural roads in light of the services delivered before and after the district level decentralization process began. Both qualitative and quantitative data were collected from primary and secondary sources. Primary data were collected from 18 key sector office and district administration heads through interviews whereas secondary data were collected from planning and performance reports, financial and human power reports and other related sources. The findings indicated that the overall performances of the delivery of services have shown significant improvements after decentralization. However, the improvements were constrained by lack of financial and human resources and problems of coordination and participation. The study also revealed that sustainable and effective decentralized public service delivery does not only depend on institutional and human resources capacity building at local level, but also a functional financial mechanism, clear and appropriate allocation of roles and responsibilities.

Keywords: District, Decentralisation, Public Service, Service Delivery

Introduction

1.1 Background and Rationales

Many countries around the world have engaged in the process of decentralization by transferring responsibilities of the state to lower tiers of government. Such transfer of power is believed to bring about not only political stability and contribute to democratic governance, but also improves service delivery. After coming to power, the current government officially declared a federalist and decentralised form of governance based on both the Transitional Charter (1991) and FDRE Constitution (1995) (Mehret, 1998). Both documents devolved fiscal, political and administrative powers to the regional state governments to bring about harmony and cooperation to promote local self-rule and better service delivery.

The decentralization drive in Ethiopia has proceeded in two phases – first from the federal to regions and subsequently into districts. First, it was from the federal to the regional states and subsequently into districts. Some researchers have argued that while the first wave of decentralization [1991-2001] has registered significant achievements, it did not bring better service delivery particularly at lower levels of administration (Taye & Tegegne, 2007). Though the constitution allows for the creation of districts with their elected councils, lack of capacity, resources and decision power has limited them to deliver effective services. In addition, zonal and regional authorities had an unlimited controlling, checking and monitoring power over the activities of the district governments (Ibid). All of these prompted the central government to take an initiative to further devolve powers and responsibilities to the districts in 2002/2003. This was carried out through the District Level Decentralization Program (DLDP). Unlike the first wave of decentralization, which has a simultaneous country-wide coverage, the second wave (since 2002/03) was initially limited to the four regional states, namely, Oromia, Amhara, Tigray and SNNPR (Garcia & Rajkumar, 2008). In this second move, districts were allowed to establish more offices manned by redeploying personnel from the regional and zonal level offices. The main instrument of DLDP, however, was the districts block grant which made resources available to districts through transfers from regions. This provided the basis for a meaningful participation by the people in local development programs. Typically, this also entailed primary education, primary health care, rural water supply, rural roads and agricultural extension services (Taye & Tegegne, 2007).

The Amhara regional constitution defined the duties and responsibilities of the district administration and had also given them the autonomy of expenditure prioritization when planning the basic services. Consequently, the districts have been empowered to deliver services such as agricultural extension, education, health, water supply, rural roads etc. within their respective jurisdictions (ANRS Revised Constitution, 2001:Art.83-95).

There is now a broad consensus that decentralizing power and authority to districts is the key for public service delivery improvement. However, the contribution of district decentralization and challenges faced in the process are not properly assessed. This paper, therefore, aims to examine how decentralization facilitates public-service delivery at lower levels of governance in the two selected districts (Dejen and Enbse SarMidir) of Amhara regional state based on the education, health, water and road service delivery before and after districts

level decentralization.

1.2 Statement of the Problem

Decentralization has been regarded as a viable alternative to centralized governance in that it enhances peoples' participation in the decision-making processes and facilitates service delivery at local levels (Taye & Tegegne, 2007). Since 1991, a series of reform measures were introduced in Ethiopia to effectively institute a multifaceted decentralized system. With the adoption of a decentralized approach, it was expected that the system would create vibrant local governance systems, that can make public leaders become more accountable to their constituencies aimed at enhancing self-reliance, democratic decision-making, citizen participation and better service delivery (Kumera, 2006). One key area of focus and attention of the reform has been service delivery, which is one of the major objectives of district decentralization. In line with this, different public sector offices have also been re-instituted at district level with the objective of making districts the center of socio-economic development. It was also to provide a basis for meaningful participation of the people in local development programs. This was mainly designed to be implemented through the provision of primary education, primary health care, rural water supply, rural roads and agricultural extension. The focus given to these sectors and their delivery at local level is due to their main role in realizing national development objectives.

However, delivering such services is still posing significant challenges in the two selected districts in particular and in Ethiopia in general. The coverage of social services is very low and the majority of the population faces difficulties in having access to such services. For instance, according to the MoFED's country-wide progress report towards achieving Millennium Development Goals (2011), primary school gross enrollment has risen from 32% in 1990/91 to over 90% by the end of 2010. At the same time, increasing the quality of education, and reducing drop-outs rates and repetition rates remain a challenge. The proportion of children fully immunized, against all major childhood diseases increased from 22.3% in 1999/2000 to 63% in 2011. However, the challenge is to sustain progress in strengthening delivery of basic health services, especially in rural areas. Access to clean water in rural areas has increased from 23% in 1990 to 48% in 2011. However, still large number of communities is without safe drinking water. These are reflections of the problem in public service delivery at local levels. Formally, the district level of administration is legally an independent local government authority and has been given powers and functions guaranteed by the regional state's constitution. In practice, however, it does not exercise sufficient local autonomy on budgetary matters related to economic and social affairs and is tightly controlled by non-elected zonal administrations in the region. As a result, inadequacy of its administrative and personnel capacity to carry out socio-economic functions and a poor revenue base are the main reasons for the continued dependence of the districts on the regional government (Kumara, 2006). The extent of decision-making authority and fiscal and budgetary autonomy at the local level are major criteria that are increasingly being used to measure the success of official decentralization policies in bringing about better service delivery.

In view of the foregoing bottlenecks, the study assesses the performance of public service delivery and the major constraints inhibiting delivery of public services after decentralization. The assessment is in accordance with the local preferences and priorities in the selected study areas based on four main criteria: institutional structure, budget, personnel, coverage of social services and community participation.

1.3 Research Questions

The guiding research question is 'How does decentralization affect the delivery of public services at the district level?' Based on this guiding question, the study addresses the following specific questions: (1) Does decentralisation change the mode and scale of revenue generation and expenditure patterns at district level? (2) Can decentralisation provide local control over human, financial and organizational responsibilities to lower tiers of government? (3) Can local governments at district level exercise their new roles and responsibilities? (4) Do the institutional arrangements put in place enhance the provision of improved services to beneficiaries? (5) What are the main achievements and constraints of district decentralization in the delivery of basic services?

1.4 Objectives of the Study

The main objective of the study is to examine how decentralization facilitates public-service delivery at lower level of governance in the two selected study districts. Specifically, the study aims to achieve the following objectives: (1) to assess the level of decision making autonomy of local governments; (2) to examine into the administrative and institutional capacities of the study districts in the provision of social services; (3) to explore the level of budget accession and revenue generation capacity of districts to provide effective services; and (4) to examine the participation of citizens in different service provision activities.

1.5 Significance of the Study

Currently, decentralization is recognized as a pre-requisite for facilitating public service delivery and promoting

good governance. It is, therefore, crucial that policy-makers, scholars and practitioners and other stakeholders in Ethiopia should advance this important governance mechanism which is the basis of good governance and active popular participation at the grass root level. Though there are different reform measures taking place in the country, there is little empirical evidence on the improvement of service delivery at district level. Therefore, it is important to find out to what extent district decentralization facilitates service delivery at the lower level of governance. The researcher also believes that the study will shed light and give an insight for policy makers as to how to make service delivery at lower level of governance can become effective and efficient through reform measure under consideration. Furthermore, the study will add values to the existing body of knowledge in the area in country.

1.6 Scope and Limitation

There are many districts in Amhara Regional State. However, this study was delimited to Enbse Sarmidir and Dejen districts only. It focused on education, health, water and road services because of the constraints of time, cost and availability of information at this level. The study used four selected service delivery criteria: institutional structure, personnel, budget, and community participation to check the performance and see how decentralization facilitates service delivery at study level. However, many factors can affect service delivery performance and it is very difficult to conclude that decentralization is the only one. Since the study depended mainly on secondary data, inconsistencies, unavailability of relevant and up-to-date information have, to some extent, affected its quality. Moreover, as the research was a case study, based on only two districts, it did not give the real picture of the region. The study didn't also venture to take analysis of Kebele¹ level situation into account.

Approaches and Methodology

This research was a case study based on descriptive approach. Both qualitative and quantitative data from primary and mainly secondary sources were collected. Semi-structured interviews were used to collect primary information from 18 key informant sector offices and district administration heads. Secondary data were obtained from published and unpublished materials, which are available in the form of books, journals, articles, proclamations, policy briefs, federal and regional constitutions, laws, regulations, performance reports, and pertinent academic papers. In particular, data pertaining to fiscal and budget reports, human power reports, public service planning and implementation reports, periodic and statistical reports which have been crucial for analyzing and presenting of the findings were collected from the Amhara Regional State and the study district institutions.

District level administration was taken as the main theme of the study because of its strategic place in the present state structure. The researcher purposively selected two districts from Amhara Regional State to check whether district level decentralization has led to effective public service delivery. The reason for selecting these districts was that both districts were not restructured or merged with other districts for the last 10 years. Dejen is believed to be in an advantageous administrative location whereas Enbse Sarmidir is the remotest and disadvantaged district. The researcher believed that taking this two as a case study will be indicative of the fact how decentralization affected public service delivery. Four public institutions that have more relevance to the study have been selected purposively. These include education, health, water supply and rural roads. Related institutions whose working relations and position is vital to the performances of public services were also contacted for the purpose of supplementing the data obtained from other institutions. These are District Administration, Finance and Economic Development and Capacity Building Offices.

The study used descriptive data analysis that combines both qualitative and quantitative data. Data were organized in view of the performances of the selected public services and analyzed using percentages. The secondary data were categorized as before (2002/03) and after (2012/13) to serve as reference points to the period before and after district decentralization. This allows comparison of the two periods.

Theoretical Discussion

2.1 Decentralisation

The term decentralization has different meanings for different people. However, most authors on the subject agree that decentralization means transfer of authority and responsibility from higher to lower level government bodies and functionaries. According to Falleti (2005), 'decentralization is a process of state reform composed by a set of public policies that transfer responsibilities, resources, or authority from higher to lower levels of government in the context of a specific type of state'. Decentralization by Rondinelli and Nellis (1989) is described as transfer of responsibilities for planning, management, and the rising and allocation of resources from the central government and its agencies to field units of the central government, semi-autonomous public

¹ Kebele refers to the smallest government unit in Ethiopia

authorities, regional authorities, or non-governmental, private or voluntary organization. It was also defined by Tegegne & Kassahun (2004) as ‘the transfer of legal and political authority from a central government and its affiliates to sub national units of government in the process of making decisions and managing public functions’.

In the context of service delivery, decentralization is defined as a transfer of authority to provide some services to the public from an individual or agency in central government to some other individual or agency, which is closer to the public to be served (Turner & Hulme, 1997).

2.2 Types of Decentralization

Generally speaking, there are four types of decentralization- namely political, administrative, fiscal, and market decentralization (Turner & Hulme, 1997; Falleti, 2005; Martinussen, 1997), which are distinguishable by their different characteristics, policy implications and conditions for success.

2.2.1 Political Decentralization.

Political decentralization refers to the decentralization of political power and authority to sub-national or local levels where elected and empowered sub-national government units exist (Martinussen, 1997). The most obvious manifestation of this type of decentralization are elected and empowered sub-national forms of government ranging from village councils to state level bodies. The creation of these elected bodies is best undertaken as a result of an overall strategic vision and usually involves a review of legal frameworks including constitutional reforms. Devolution is considered a form of political decentralization (Scott-Herridge, 2002). It refers to a full transfer of responsibility, decision making, resources and revenue generation to a local level of public authority that is autonomous and fully independent from the devolving authority. Advocates of political decentralization assume that decisions made with greater participation will be better informed and more relevant to diverse interests in society than those made only by national political authorities. The concept implies that the selection of representatives from local electoral jurisdictions allows citizens to know better their political representatives and allows elected officials to know better the needs and desires of their constituents.

2.2.2 Administrative Decentralization

Administrative decentralization seeks to redistribute authority, responsibility and financial resources for providing public services among different levels of government (Falleti, 2005). It is the transfer of responsibility for the planning, financing and management of certain public functions from the central government and its agencies to field units of government agencies, subordinate units or levels of government, semi-autonomous public authorities or corporations, or area-wide, regional or functional authorities. The three major forms of administrative decentralization (UNDP, 1997; Falleti, 2005) are deconcentration, delegation, and devolution. Deconcentration redistributes decision making authority and financial and management responsibilities among different levels of the central government. It can merely shift responsibilities from central government officials in the capital city to those working in regions, provinces or districts, or it can create strong field administration or local administrative capacity under the supervision of central government ministries. Delegation is a more extensive form of decentralization. Through delegation central governments transfer responsibility for decision-making and administration of public functions to semi-autonomous organizations not wholly controlled by the central government, but ultimately accountable to it. Governments delegate responsibilities when they create public enterprises or corporations, housing authorities, transportation authorities, special service districts, semi-autonomous school districts, regional development corporations, or special project implementation units. Usually these organizations have a great deal of discretion in decision-making. They may be exempt from constraints on regular civil service personnel and may be able to charge users directly for services. A third type of administrative decentralization is devolution. When governments devolve functions, they transfer authority for decision-making, finance, and management to quasi-autonomous units of local government with corporate status. Devolution usually transfers responsibilities for services to municipalities that elect their own mayors and councils, raise their own revenues, and have independent authority to make investment decisions. In a devolved system, local governments have clear and legally recognized geographical boundaries over which they exercise authority and within which they perform public functions. It is this type of administrative decentralization that underlies most political decentralization.

2.2.3 Fiscal Decentralization

Fiscal decentralization involves the reallocation of resources or transfer of resource decisions to local governments to allow them to undertake their function properly. The decision to allocate or transfer of resources usually depends on factors such as interregional equity, availability of central and local resources and local fiscal management capacity (Thakur & Newman, 2000, Falleti, 2005). If local governments and private organizations are to carry out decentralized functions effectively, they must have an adequate level of revenues –either raised locally or transferred from the central government– as well as the authority to make decisions about expenditures. Fiscal decentralization can take many forms (UNDP,1997), including a) self-financing or cost recovery through user charges, b) co-financing or coproduction arrangements through which the users participate in providing services and infrastructure through monetary or labor contributions; c) expansion of local revenues

through property or sales taxes, or indirect charges; d) intergovernmental transfers that shift general revenues from taxes collected by the central government to local governments for general or specific uses; and e) authorization of municipal borrowing and the mobilization of either national or local government resources through loan guarantees. In many developing countries local governments or administrative units possess the legal authority to impose taxes, but the tax base is so weak and the dependence on central government subsidies so ingrained that no attempt is made to exercise that authority.

2.2.4 Market Decentralization

Market decentralization refers to decentralization of government services to private organizations or firms (Matinussen, 1997; Turner & Hulme, 1997; Walsh, 1969; Meheret, 1998). This form of transfer of government responsibilities and authority is done in favor of non-public entities where planning and administrative responsibility or other public functions are transferred from government to voluntary, private, or non-governmental institutions with clear benefits to and involvement of the public. This often involves contracting out partial service provision or administration functions, deregulation or full privatization. This is typically undertaken for services that had been monopolies of the central government and ideally are earmarked for divestment to local entities where the benefits are accruing to the local population.

2.3 Service Delivery Arrangements

Traditionally, service delivery was based on either public or private provision depending on a variety of factors like political and economic structures, interest or capability of private providers, local finances, consumer/societal preferences, geographic dispersal of service beneficiaries, equity and properties of the service itself (Barlow, 1981). Hence, a country may organize service delivery in a variety of ways and levels ranging from private to public and from highly centralized to highly decentralized levels. Services could be centralized by assigning the function to a regional or state government, creation of an area wide special-purpose government, and shared service agreements between two or more government agencies. Although some services are provided by private agencies, the need for public control over certain services has increased to safeguard the provision of some basic services to enable equitable and uniform service provision irrespective of socio-economic category of customers or consumers (Kumera, 2006).

In the case of developing countries, problem of affordability is an issue. Hence, provision of basic services such as: health, education, water and sanitation, and energy have remained public responsibility for a long time (ibid). However, the public sector is incapable of providing services according to the needs of users. Nor the centralized form of service delivery arrangement has been capable of discharging its responsibilities to fulfill these needs (Hailu, 2003). According to Elcak (1994), this is because of the limitations of the state, the inefficiency and ineffectiveness of state services to meet public needs and the evolution of new approaches for service delivery such as privatization and expansion of other local actors in providing services. This situation has also changed the functions and issues of local government by bringing local governments in a competitive situation by either competing among themselves or outsourcing services to competitive tendering. However, there are services which are better delivered under centralized system or decentralized system or both depending on the scope of their benefits. As argued by Kibre (1994), services such as defense, foreign policy, and services whose benefits and costs spillovers from one jurisdiction to another, services which will be cost-effective if provided beyond one or more jurisdiction (transportation, electricity, communications etc) and issues of stabilization (monetary and fiscal functions) are generally undertaken at central level.

Therefore, service delivery arrangements or models vary between the continuums of purely private to purely public, with numerous hybrid cases in between involving different agencies. These include: contracting out services to the private sector, NGOs and others, transferring responsibilities to lower tiers of government and transferring responsibilities to communities or to households or to the clients themselves. All these methods are either operating one after the other or side-by-side in the area of providing any given service (World Development Report, 2004). With demands for resources and the need for more economical management and better services, it also requires changes in the relationship both at central and local levels by altering the dual relationship between the politicians and service providers related to the expansion of interactions among different actors. Consequently, most basic services are becoming under the responsibility of local governments under a decentralized governance system with a devolved system at the local level (Elcak, 1994).

2.4 Decentralisation Vs Service Delivery

While decentralization of service delivery may be attributed to different purposes in different countries, improving service delivery has been a common factor (Ahmed et al., 2005; Shah & Thompson, 2004). However, decentralization has not always been effective in improving service delivery by local governments, mainly because of lack of commensurate revenue assignments, inadequate access to financial markets, and lack of necessary administrative capacity on the part of local authorities. Decentralization is desirable but where the ingredients necessary for its proper implementation are lacking, service delivery at lower levels of government

remains problematic. According to Ahmad et al. (2005), one of the common problems associated with decentralization's impact on service delivery is lack of capacity at sub-national levels of government in exercising responsibility for public services. For instance, in Uganda and Tanzania, the lower tiers of government lacked the ability to manage public finances and maintain proper accounting procedures. Consequently, lower levels of government received less money than before decentralization (Tidemand et al., 2008). For decentralization to lead to a greater accountability and hence to increased prospects that services would reach targeted groups, it is important to strengthen the institutional capability at the local level (Fosu & Ryan, 2004). Institutions are needed in order to ensure greater public participation and accountability on the part of policy-makers, service providers, and users.

The adverse effects of decentralization on service delivery arise due to a number of common factors. These factors include lack of capacity at sub-national government level, which restricts local service delivery because local authorities lack the ability to manage public finances and keep proper accounting procedures; misalignment of responsibilities owing to incomplete decentralization and elite capture when civic participation in local government is low. In addition, budget constraints that leads to over borrowing by sub-national governments are some of the factors. To overcome these challenges, optimal assignment of expenditure and tax responsibilities should be based on such criteria as economies of scale, spillover benefits, and cost of administering taxes, tax efficiency, and equity. In practice, however, fiscal decentralization often depends on political realities, expediencies and historical legacies (Ahmed et al., 2005).

2.5 Decentralization: Some Empirical Evidences

Decentralization is currently practiced by several countries in sub-Saharan Africa (SSA) and other developing nations. It is, however, interesting to note that empirical evidence on the impact of decentralization is limited and also mixed (Epko, 2007). There has been little empirical research on SSA countries regarding the argument that decentralization promotes demand responsiveness of government services. Most of the available research concentrates on the effect of decentralization on expenditure allocation or on the impact of public services provided and does not focus on whether resource allocation meets local demand (ibid).

Uganda is one of the best examples in SSA that decentralizes power in order to deliver better public services to the people. The Local Government Act of Uganda 1997 places responsibility for delivery of most services with local government. The objective was to ensure that delivery of services was responsive to local needs and also that the available limited resources were utilized in the efficient and effective manner (Epko, 2007). Some authors have argued that decentralization in Uganda generally resulted in improvements in service delivery (Kator, 1997). However, others indicate that there have not yet been much real improvements of service delivery as a result of decentralization (Saito, 2000). Obwona et al (2000) concludes that "financial and institutional constraints have adversely affected the ability of the sub-national governments to adequately deliver services of sufficient quality".

According to a study made by the JICA (2008), major service provision responsibilities are devolved to local governments in Tanzania and Uganda, whereas in Kenya local governments have very limited mandates. In Uganda and Tanzania, responsibilities for local service delivery in the three key sectors analyzed in the study (primary health, primary education and agricultural extension) are firmly placed with local government. In Kenya, the system is substantially more complex. Central government has put in place a general deconcentrated administration with broad local planning responsibilities, plus separate sector systems that are mainly responsible through a deconcentrated structure for service delivery in rural areas.

In contrast, in Uganda, local governments manage approximately 25% of public expenditure and have wide-ranging service delivery responsibilities. Approximately 70% of all public servants are locally hired and managed. However, with Constitutional amendments (2006), Uganda has moved towards the re-centralization of its public service delivery system. As a result, the appointments of local governments' Chief Executive Officers, the abolishing of several local taxes (2004), as well as a new centralized system of payment of councilors came to its prior practices of governance. The system of local government has arguably also been weakened by introducing unfunded added layers, including an additional regional tier and continued creation of new districts (Tidemand, 2009). Local governments in Tanzania currently manage approximately 22% of the public expenditure. However, the scope of local autonomy of local governments has not expanded in the last decade, and in particular the area of human resource management appears unlikely to be devolved in the near future (Ibid).

In Kenya, the Local Government Act has remained relatively unchanged for a long period. It gives local governments a very limited mandate and they have few staff and manage only approximately 4% of the total public expenditures. In their present form, local governments are becoming increasingly irrelevant for delivery of local services. In the institutional vacuum, sectors have gone ahead and established structures to effectively decentralize service delivery and promote community involvement in the planning, implementation and monitoring of local level service delivery, just as a Constituency Development Fund has initiated processes

of cross sectoral sub-district and community level planning (Tidemand et al., 2008). These moves may all feed into ultimate reforms, but currently lead to significant problems of cross-sector coordination and problems with linking recurrent and capital investments.

The potential impact of decentralized service delivery through local governments in Uganda and Tanzania is not fully realized because sector funding modalities and sector control of staff remain so persistent. The absence of similar systems in Kenya is widely recognized as a constraining factor, and the current multiple institutional arrangements are considered more wasteful as reflected in less cross- sector coordination (Tidemand et al., 2008).

2.6 Decentralization in Ethiopia

Ethiopia's decentralization policy, elaborated in the 1991 transitional charter and the 1995 constitution, was created by the current ruling party (EPRDF) to devolve fiscal, political and administrative power to the ethnically organized regional governments and chartered cities to bring political stability and contribute to democratic governance, and improve service delivery. Unlike previous, heavily centralized Ethiopian regimes, the EPRDF introduced decentralized federal system, and officially allowed different political parties to compete and participate at both central and regional government levels (Taye, 2008). The first phase of decentralisation has created federal state structure, consisting of 9 ethnic regional states and 2 city administrations responsible for a broad range of the country's political, economic and social objectives (Mehret 1998, FDRE, 1995). This was supported through fiscal measures such as the use of a formula-driven block grant transfers and the redeployment of civil service staff to the regional states (Taye and Tegegne, 2007). However, initially decentralization did not involve local communities in decision-making and local governments enjoyed little political and administrative and fiscal autonomy.

While the first wave of decentralization has registered significant achievements, it was not capable of bringing genuine self-rule particularly at lower levels of administration. Though the constitution allows for the creation of districts with their elected councils, the lack of power, resources and authorities has limited them to effectively engage in democratic self-rule. It is within this back-drop that in 2002/03 the government launched a second phase of decentralization, designed to shift the decision-making process closer to the community level and to improve the responsiveness of service delivery. This was achieved through the District Level Decentralization Program (DLDP) and Urban Management Program (UMP) (Taye, 2008). The process entailed enabling legislation for local governments, fiscal reform, institutional restructuring, and capacity development.

According to Taye and Tegegne (2007), for effective DLDP implementation, it was hoped that district governments would be empowered to implement their administrative and development plans without undue interference from higher tiers of authority. Accordingly, this creates and brings situations closer to genuine local self-rule through block grants, redeployment of skilled and experienced personnel to serve in local government sector offices. In this way, district's real autonomy in activity and budgetary planning, expanded freedom of operation in terms of raising and putting to use resources originating from own revenue resources, hiring required staff, etc could be exercised.

As one of the regional states in Ethiopia, the Amhara Regional State pioneered decentralization from regional to local level, and introduced a number of legal, fiscal and administrative changes. According to Article 91 (1) of the Amhara National Regional State (ANRS) Constitution, the major constitutional powers and duties of the district council include: (1) approving the district social service, economic development, and administrative plans and programs; (2) levying and collection of land use taxes, agricultural income revenues, and other local taxes; (3) utilizing the District's sources of revenues, excluding such other revenues allocated and administered by the region;(4) preparing and approving the district budget;(5) construction and maintenance of lower grade rural roads;(6) administering primary schools and junior health institutions within the District; and (7) directing basic agricultural development activities and administering and protecting the natural resources of the district (ANRS, 1995).

Along this line, it is not difficult to see that there is a room for improvement in order to maximize the benefits of decentralization. However, while decentralization has changed the political climate of the country, it has certainly led to questions regarding its various procedures, ramifications and impact. According to Paulos Chanie (2007), on the political front, the EPRDF controls all the regional state governments in the Ethiopian federation, either directly through its member parties or indirectly through affiliate parties. The relationship between the central and regional parties is between patron and clients. Therefore, a lot remains to be done to get deeper into the decentralization process in Ethiopia, particularly in light of recent developments. This will fill knowledge gaps and provide policy makers with adequate sufficient and reliable data to improve the decentralization drive in Ethiopia and this research is part of this ground.

Data Presentation and Analysis

3.1 Socio-economic and Demographic Profile

The two selected districts for this study were Enbse SarMidir and Dejen from East Gojam zone of Amhara regional state. Enbse Sar Midir is the zone's remotest and food insecure wereda with nearly 134,841 inhabitants. The capital of the district, Mertule Mariam, is located 191 km far from Debre Markos to the north, and 180 and 370 km far from Bahirdar, north and south respectively. It comprises of 35 kebele administrations, of which 33 are rural and 2 are found at the urban town of the district, Mertule Mariam (Enbse Sarmidir District Finance and Economic Development Office, 2013).

Dejen district is located 335km from Bahirdar, 70km from Debre Markos, and 230 km from Addis Ababa respectively. The district contains 21 rural and 2 urban kebeles with the total population of 103,052. The economy of the two districts is highly dependent on agriculture and experiencing erratic rainfall. Agricultural production is below subsistence and the inhabitants are often exposed to structural food deficit where poverty is rampant (Dejen District Finance and Economic Development Office, 2013).

The offices and desks that exist in the two districts include: the administrative council, office of agriculture, health, education, information, finance and economic development, capacity building, micro enterprise development, water resources development desk, and women affairs. At the grass roots level, there are government, non government and local institutions involved in different economic and social development activities. Kebele-level government institutions include kebele administrations, development centers of the district office of agriculture, schools and health centers/clinics/posts. However, they are working under the direct supervision of the district administration.

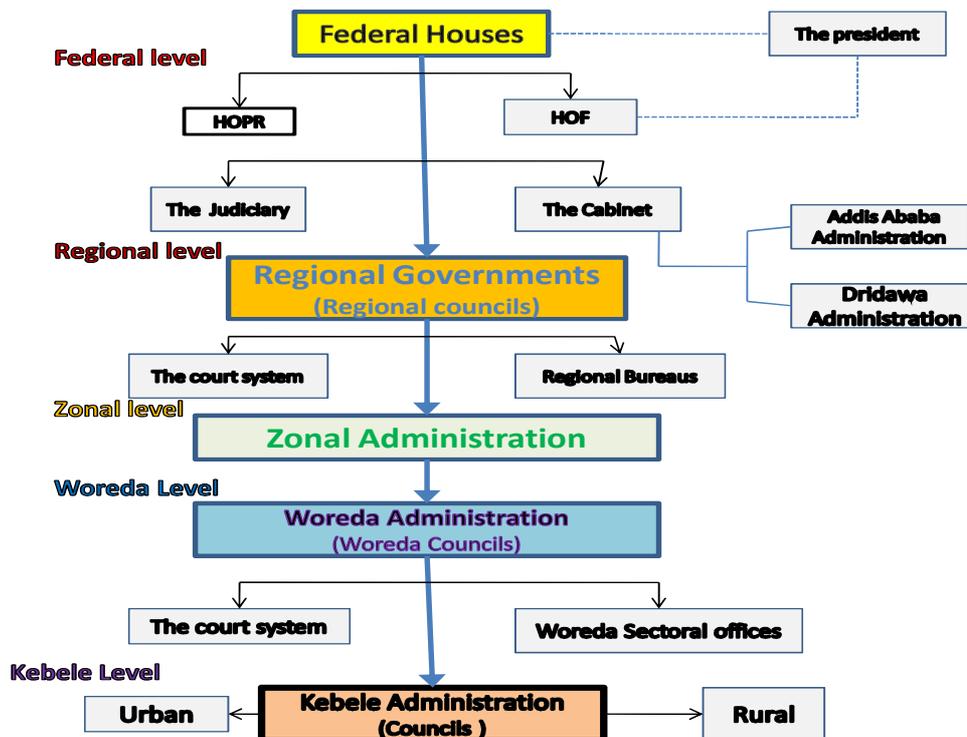
Both Weredas have assumed extensive powers and responsibilities *in the service delivery fronts*. They are responsible for running all socio-economic development programs in the area. In practice, however, it is subject to the control and supervision of the zonal and regional government in matters ranging from budget preparation and approval to undertaking most of the socio-economic development projects in the districts under consideration.

3.2 Institutional and Resource Capacity

3.2.1 Institutional Structure

The government structure in the country recognizes five comprising federal, regional, zonal, district and kebeles. The lowest tier is the kebele administration. At each tier of the government structure, there are three organs namely, the council, the executive committee and the judicial branch.

Figure 1: Five Levels of Government Structure in Ethiopia



Source: Mehret (2006) in Taye and Tegegne, 2007

The district is a multi-purpose local government unit in the current state structure. It has been given elaborate powers and responsibilities. As an autonomous self-governing unit, it can prepare and approve its own budget, prepare and implement economic and social development projects, set up and manage public services and exercise democratic decision making. While these listings indicate the devolution of power, the extent to which these are exercised in practice is not much clear.

The District Administration Office and the Office of Finance and Economic Development are the main institutions that play coordination roles. The district administration has overall responsibility for coordination and District Finance and Economic Development office is established to play an important role in coordination and integration of various office plans and matching these plans with the available budget. However, the respondents in both sectors confirmed that, these two sectors do not have the necessary human resource and budget to coordinate and support other development sectors.

The two districts are working under the supervision of East Gojam Zone administration. According to the respondents, during the initial period of decentralization, both districts were directly communicating with the regional state. Currently, however, the zones are delegated by the region and supervising all districts. Consequently, the Amhara regional state is re-organized, to some extent, going back to the pre-decentralization period with regard to the role and mandate of the offices at zonal level. Zonal government offices are strengthened in terms of staff in consequence.

Being the lowest tier of administration in Ethiopia's state structure, it is an important unit of local administration. It is responsible for managing and coordinating the implementation of overall political, social and economic activities within the kebele but they are working under the supervision of the district administration. However, it was reported that many of the kebeles in both districts were under-staffed and under-financed, and thus unable to deliver services to the community. In addition, kebeles are not involved in development planning and the plan is usually prepared by the district experts mainly by the office of finance and economic development in cooperation with sector offices based on the projection given by the regional government. Although there are kebele officers, they are not paid and they usually meet once a week to solve the problem of the kebele people. Understanding the problem, currently there is assignment of one manager with a diploma holder per each kebele administration to manage the overall activities. However, this could not be the solution as compared to the demand of services required by the community.

3.2.2 Personnel

Since district level decentralization, one of the major challenges in public service delivery has been the problem related with the availability of human power both in quality and quantity. All the interviewed officials from both districts frequently mentioned staff shortage as their major problem. This has been confirmed by the secondary data collected from the two districts as depicted in Table 1.

Table 1: Required and Existing Manpower

Items	Enbse Sar Midir District (2012/13)			Dejen District (2012/13)		
	Required	Assigned	Difference (%)	Required	Assigned	Difference (%)
Education Sector	1254	1086	-13.40	822	691	-15.94
Health Sector	304	193	-36.51	306	124	-59.48
Water Sector	35	13	-62.86	39	14	-64.10
Road Sector	6	2	-66.67	6	3	-50.00
District (All sectors)	2240	1798	-19.73	2039	1462	-28.30

Source: *Enbse Sar Midir and Dejen District Finance and Economic Development Office, 2013*

The above table shows that there is a human power problem in the four selected sectors of the two districts in particular and at district level in general. The majority of positions in the selected sectors of the two districts are vacant. According to respondents in all sectors, even the already assigned employees do not have the necessary skills. For example, a certificate qualification is the requirement which the staffs are made eligible for the first cycle primary school, diploma holders are eligible to teach up to grade 8 and degree holders are expected to teach grade 9-10. In the two districts, teachers with certificates qualification teach up to 8th grade and diploma graduates teach up to 10th grade (Enbse Sar Midir and Dejen District Education Office, 2013).

The situation is similar in the health sector. Enbse, For example, health extension workers assigned in health posts do not have the required qualification to provide health service at local level. Similarly, in water and road sectors, not only the posts are vacant but also the assigned employees do not have the required qualification.

Mechanisms that are employed in the country to mitigate the human power problem are through employment, transfer, promotion and capacity building. However, the districts are constrained by lack of budget and other institutional issues related with regulations made at regional and zonal levels. Devolution of power is meant to be having power over hiring, firing and promotion of employees. But the two districts are restricted with internal regulations. For example, diploma level teachers, nurses and degree holders are employed by the region or zonal level government against the rights of districts. This shows that the powers of the districts have

been limited and it is difficult to fill vacant positions with highly needed staff. Although the reason behind the restriction is to balance the flow of human power among the districts and to control employment in terms of priority needs due to budget limitations, the mechanism has imposed restrictions on the exercise of the power given to the districts.

3.2.3 Budget

Although the districts have been structured to provide public services, there is a great mismatch between their expenditure obligation and the financial resources they actually receive in the form of block grant. As indicated in Table 2, locally generated own revenue increased after decentralization in both districts as compared to the period before decentralization. However, in terms of the share from total district budget, there is a decreasing trend in Dejen (from 22.6% in 2002/03 to 26.4% in 2012/13) and an increasing trend in Enbse (from 27.1% in 2002/03 to 22.6% in 2012/13). This was expected to show an increasing trend after decentralization in order to minimize heavy dependency on regional government's transfer.

Table 2: District and Sector Budget (in Million Birr)

Items	Enbse Sar Midir District			Dejen District		
	Before WLD ² (2002/03)	After WLD (2012/13)	% Change	Before WLD (2002/03)	After WLD (2012/13)	% Change
Own revenue	1.4 (22.6%)	10.6 (26.4%)	86.8	1.6 (27.1%)	7.5 (22.6%)	78.67
Block grant	4.8 (77.4%)	29.5 (73.6%)	83.7	4.3 (72.9%)	25.6 (77.4%)	83.20
Total District budget	6.2	40.1	84.5	5.9	33.1	82.18
Education budget	2.5 (40.3%)	16.4 (40.1%)	84.7	2.3 (38.9%)	14.6 (44%)	84.25
Health budget	0.7 (11.3%)	7.3 (18.2 %)	90.4	0.55 (9.3 %)	3.5 (10.5%)	84.29
Water budget	NA	2 (4.9%)	NA	0.018 (0.3 %)	0.43 (1.3 %)	95.81

Source: Enbse and Dejen District Finance Offices, 2013

In both districts, their own revenue collection is not significantly changed after decentralization. Finance office heads from the two districts confirmed that, low revenue source, lack of awareness, lack of interest to pay tax, fluctuation of climatic conditions are the reasons for poor performance in collecting revenue locally. In addition, absence of appropriate assessment in local potentials and inadequacies associated with collection affects their performance. The annual collection plan is prepared and sent by the regional authorities and the role of the district has been limited in meeting the target. The effort is limited to meeting the plan and no further effort is made on the part of the district to go beyond the plan. If they collect less revenue than the target level, they are often penalised. Conversely, revenues in excess of the targets are often offset against the districts' block grant allocations so that districts in effect do not retain any excess revenues and so have no incentive to collect revenues beyond a certain level. However, the expenditure need of the districts increased annually since decentralization and the district remained dependent on regionally transferred grants.

As indicated in Table 2, education has the biggest share with more than 40 percent of the total budget whereas health, water and road sectors receive the lowest share. Even in education where there is relatively better allocation, the sector faces constraints. Health, water and road sectors of the two districts complain of scarcity of budget and its unfair allocation. Although the region has planned to use unit cost approach and some poverty indicator sectors to allocate the budget to districts (BoFED, 2009), the two districts are allocating the budget to different sectors based on the traditional ways adopted in the past. The finance and economic office heads confirmed that even they don't know the indicators as well as the unit cost approach method adopted by the regional government.

3.3 Coverage of Public Services

3.3.1 Education

Before decentralization, education service delivery coordination and implementation has been brought under the responsibility of zonal education department and district education offices were used to serve as branches of the zonal department. After the district level decentralization, district education office has been empowered to coordinate and provide education services and since then both districts witnessed rapid improvements in primary education access. The total numbers of primary schools, students and teachers have risen substantially in both

² District Level Decentralization

districts. When average performance of the two periods is compared, gross enrollment rate at primary level has increased by 39% in both Enbse SarMidir and Dejen than prior to decentralization. The pupil - teacher and pupil - section ratios, repetition and dropout rates have reduced substantially after the district level decentralization in both districts.

Table 3: Primary School Education Service Indicators

Items	Enbse Sar Midir District			Dejen District		
	Before WLD (2002/03)	After WLD (2012/13)	% Change	Before WLD (2002/03)	After WLD (2012/13)	% Change
Number of Schools	29	68	57.35 %	23	48	52.08 %
Gross enrolment rate	56.65	94	39.7 %	54.57	89.4	38.96 %
Pupil - Teacher ratio	1: 54	1: 50	-8.00 %	1: 68	1: 53	-28.30 %
Pupil - Section ratio	1: 72	1: 55	-30.9 %	1: 60	1: 55	-9.09 %
Repetition rate	15.18	7.6	-99.74 %	20	8.0	-150 %
Dropout rate	5.58	4.82	-15.77 %	7.0	5.9	-18.64 %

Source: Enbse Sar Midir and Dejen Districts Education Offices, 2013

3.3.2 Health

Health service delivery in the district before decentralization was coordinated and implemented under the immediate supervision of the Zonal Health Department. This responsibility has been transferred to the district health office, which has been established after decentralization. Before decentralization, the number of health infrastructures existed were 1 health center, and 5 health posts/clinics in Dejen and 1 health center, and 7 health posts/clinics in Enbse. After decentralization the figure has been changed in to 2 health centers in both districts and 32 and 22 health posts/ clinics in Sarmidir and Dejen respectively.

Table 4: Health Institutions and Professionals

Items	Enbse Sar Midir District			Dejen District		
	Before WLD	After WLD	% Change	Before WLD	After WLD (2012/13)	% Change
Health Post / clinic	7	32	78.13 %	5	22	77.27%
Health Center	1	3	66.67 %	1	2	50.00%
Health officer	2	3	33.33 %	1	2	50.00%
Nurses	14	32	56.25 %	7	28	75.00%
Pha. Tech	2	6	66.67 %	1	5	80.00%
Lab. Tech	3	8	62.50 %	2	7	71.43%
Health Post :POP	1:20,289	1:4,214	-381.47%	1:20,225	1:4,684	-331.79%
Health Center: POP	1:142,028	1:44,947	-215.99%	1:101,123	1:51,526	-96.26%
Health officer: POP	1:71,014	1:44,947	-57.99%	1:101,123	1:51,526	-96.26%
Nurses: POP	1:10,145	1:4,214	-140.75%	1:14,446	1:3,964	-264.43%

Source: Enbse Sar Midir and Dejen District Health Offices, 2013

Both districts met the MOH standard of the number of population served by one health post [1 health post for 5000 people]. However, they didn't meet the standard of the number of population served by one health center [1 health center for 25,000 people] even after decentralization. When the number of health professionals is compared with the period before decentralization, the number of nurses, laboratory technicians and pharmacy technicians have relatively increased after decentralization. Similarly the number of population served by one health professional is also decreased after decentralization relatively than before. However, still the health service delivery needs to be improved in both districts.

Table 5: Health Performance Indicators

Items	Enbse Sar Midir District			Dejen District ³		
	Before WLD (2002/03)	After WLD (2012/13)	% Change	Before WLD (2002/03)	After WLD (2012/13)	% Change
BCG	78.91 %	92 %	14.23 %	2191	3557	38.40%
Measles	82.7 %	98 %	15.61%	2180	3589	39.26%
DPT3	92.03 %	99.4 %	7.41%	2149	3779	43.13%
ANC	34.32 %	68.6 %	49.97%	1362	4269	68.10%
Family planning	25.11 %	81.16 %	69.06%	5826	23371	75.07%

Source: *Enbse Sar Midir and Dejen District Health Offices, 2013*

When health sector performance is compared with the planned target of services during the years of decentralization the performance is on average increasing in both districts. Child immunization coverage (BCG, Measles, and DPT3) after decentralization has increased as compared to before decentralization in both districts. The total number of people who received service pertaining to maternal care and family planning has on average increased more than what was prior to decentralization in both districts .

3.3.3 Water Supply

Coverage of water services in both districts increased, with the proportion of households with access to safe drinking water. However, the coverage is still below 60% in both districts showing that more than 40% of the populations living in the two districts do not have access to safe drinking water. The main problems mentioned by the districts are budget limitation and staff problems.

Table 6: Water Service Coverage

Items	Enbse Sar Midir District			Dejen District		
	Before WLD (2002/03)	After WLD (2012/13)	% Change	Before WLD (2002/03)	After WLD (2012/13)	% Change
Schemes	14	48	70.83%	10	26	61.54%
Beneficiaries	38420	75810	49.32%	32080	62860	48.97%
coverage	27%	56%	51.79%	31.7%	60.6%	47.69%

Source: Enbse Sar Midir and Dejen Districts Water Offices, 2013

3.3.4 Rural Road

Although rural road has been given emphasis by the government in both districts, the road desk is structured under the office of agriculture and rural development. The mandate of the district rural road desk under the office of agriculture and rural development is to construct and maintain rural roads through hand tools and community labor. On the other hand, there are only 5.5 km all-weather roads and 90 km dry-weather roads that are in use in Sarmidir, which is constructed with “food for work” program. In Dejen district, with the assistance of SIDA, they constructed 46 km rural roads, of which 21km are all-weather roads and the remaining km dry-weather roads which are providing service today. However, government didn't allocate adequate budget for road construction in both districts.

Table 7: Road Constructed by the Districts

Items	Enbse Sar Midir District			Dejen District		
	Before WLD (2002/03)	After WLD (2012/13)	% Change	Before WLD (2002/03)	After WLD (2012/13)	% Change
Road Construction (km)	8	95.5	91.62%	18	46	60.87%
Road Maintenance (km)	18	160	88.75%	31	104	70.19%
Total Beneficiaries	42,000	78,500	46.50%	36,854	70,563	47.77%

Source: Enbse Sar Midir and Dejen District Road Desk, 2013

According to Sarmidir road desk, the community participated in the rural road construction. However, the participation of the population was highly related to the benefits they have got from food for work program. This was not the case in Dejen district. According to the district road desk head, the population participated voluntarily without any payment.

³ The data was available in number of children vaccinated and number of women who have got ANC and family planning services

3.4 Community Participation

The basic aim of district level decentralization is to serve as a means of empowering local communities, developing democratization, and improving delivery of basic services. This process requires participation of different actors and coordination among them in prioritizing public services. Sector offices with the coordination of Finance office at district level plan their activities and budget but kebeles do not directly participate in the planning process. Service delivery role in the two districts is highly concentrated at the district level with limited role given to lower administrative tiers, the kebeles and the community at large. Kebeles mainly involve in the implementation of plans prepared by the district sector offices like school construction and maintenance, construction of school latrines, and construction of teacher's residences, employment of teachers, and guards, construction of village roads all of which require community inputs in terms of labor and finance.

According to the interviewees in both districts, the community members participated in schools management, clinics/health posts management and labor contribution for water point and road construction. However, in general, it is possible to conclude that popular participation in the district is very limited and participation is confined to labor and financial contribution. Coordination at kebele level to enhance the participation of the community in public service delivery is weak due to lack of clearly institutionalized structures. Though kebele structures are organized as a means to reach people at grass roots level, there is no clearly institutionalized structure for coordination and participation of local communities in decisions concerning public service delivery.

Findings and Observations

This study shows that public service delivery has been improved after decentralization. However, the demand for social and economic services is still increasing after decentralization and both Districts have not been able to meet the expectations of the community due to inadequate finances and shortage of skilled local government personal capable of delivering efficient services.

The fiscal and financial independence of local governments is a critical factor affecting their autonomy and effectiveness in public service delivery. However, the major constraint seen in both studied districts is the inadequate funding for basic services provided to lower tiers of government. Both districts are heavily dependent on regional government transfer. This study shows the reality that in both districts, they could cover only a maximum of 26 per cent of the budgetary expenditures from their own source (see Table 2). Nearly 74 per cent of the annual budget of the districts comes from the regional government in the form of transfers. Such financial dependence has serious implications for the autonomy and independence of district governments.

District officials also report that zonal and regional governments routinely assigned functions to districts without adequate resources (skilled personnel, money, equipment and vehicles etc) to carry them out. According to them such kind of mandates without the needed resources will create public mistrust about the ability of local government to deliver efficient services.

Although the region adopted unit cost approach in allocating block grants to districts, the two districts are still allocating budgets to different sectors without clear indicators. As a result, mainly health, water and road sectors of the two districts complain of the scarcity of budget and its unfair allocation.

Apart from financial constraints, both districts lack skilled personnel. Administrative and technical posts created to handle administrative responsibilities have not been fully filled or have been filled by untrained personnel with limited capacity. In addition, shortages of equipment and facilities such as cars, computers, printers and other office supplies were frequently cited as recurring problems.

While districts were legally declared to be independent local government entities, in reality inter-governmental relationships among the region, districts and kebele administration and their lines of authority are not clearly defined. The structure is characterized by a top-down approach of control and supervision. Although not formally recognized by the law, zonal administration exerts considerable a degree of influence on district administrations. Similarly, kebele administration works under the direct supervision of the district administration. Many of the kebeles in both districts are under-staffed and under-financed, and thus unable to deliver services to the community. In addition, kebeles do not directly involve in development planning and the plan is usually prepared by the district experts. Kebeles most often operated as recipients and implementers of decisions and orders from district governments rather than semi-independent institutions of self-government at the grassroots level.

Citizen participation is significant in managing social institutions through labor and financial contribution. However, coordination at the kebele level to enhance the participation of the community in public service delivery is weak due to lack of clearly institutionalized structures. Though kebele structures are organized as a means to reach people at grass roots level, there is no clearly institutionalized structure for coordination and participation of local communities in decisions concerning public service delivery.

Conclusions

The purpose of decentralization in Ethiopia is to progressively transfer the delivery and management of public services from the central government bureaucracy to democratic sub-national governments. The constitution and the various policies provide for the formal transfer of powers and responsibilities from the central government to regional, zonal and district levels of administration. The findings of this study indicated that the overall performances of the delivery of basic services have shown improvements after decentralization. The improvements, however, have been found to be low which makes it difficult to conclude that there is significant change contrary to the expectations hoped to be realized after decentralization. Formally, the district government has been given full powers to exercise complete decision-making authority. In practice, however, commands and instructions flow from top to bottom in an unbroken bureaucratic line from the regional government to the zones, districts and kebeles. The bureaucratic chain of command has limited the local discretionary power and decision-making authority of the district tiers of government.

In all of the studied sectors, findings have shown that scarcity of budget and inadequacies of the allocation system and availability of manpower has greatly affected the delivery of public services in the district. Local revenue was found to be low and the districts are becoming more and more dependent on regional block grants. Employment, transfer and promotion of personnel were restricted due to budget constraints and insensitivity of regional and zonal authorities to the problem. In this case, the finding has confirmed that availability of both financial and human resources, and other institutional amenities play significant role in efficient public service delivery. This also confirms that sustainable and effective decentralized service delivery need not only be confined to institutional, organizational and human resources capacity building at local level, but also a functional financial mechanism, and a clear and appropriate allocation of roles and responsibilities. Political, administrative and fiscal decentralization should go hand in hand. That means decision-making power, institutional capacity; fiscal and technical resources for services delivery and their management have to be devolved in an adequate and equitable ways. In addition, roles and responsibilities in the respective social sectors should be devolved to the lowest appropriate and competent level.

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