

DECENTRALISED PLANNING AND ITS EFFECTS ON SERVICE DELIVERY IN LOCAL GOVERNMENTS IN UGANDA: A CASE STUDY OF SOROTI DISTRICT

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DECLARATION

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APPROVAL

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LIST OF ABBREVIATIONS

BFP – Budget Framework Paper
CAO – Chief Administrative Officer
CSO – Civil Society Organization
DDP – District Development Plan
DTPC –District Technical Planning Committee
HIV/AIDS –Human Immune-deficiency Virus / Acquired Immune Deficiency Syndrome
LGBFP – Local Government Budget Framework Paper
LGDP – Local Government Development Program
L.C – Local Council
LG – Local Government
LLG – Lower Local Government
MDG –Millennium Development Goals
MOH – Ministry of Health
MOFPED – Ministry of Finance Planning and Economic Development
MOLG – Ministry of Local Government
NGO – Non Governmental Organization
PAF – Poverty Action Fund
PDC – Parish Development Committee
PEAP – Poverty Eradication Action Program
PMA – Plan for Modernization of Agriculture
PPS – Priority Program Areas
PRSP – Poverty Reduction Strategy Paper

SPSS – Stastical Package for Social sciences

UNDP – United Nation Development Program

STPC – Sub County Technical Planning Committee

ABSTRACT

This study examined the effects of decentralized planning on service delivery in Local governments, using Soroti district as a case study. The study adopted multiple methods for data collection and in terms of analysis; both quantitative and qualitative data analysis techniques were used. Results were first examined for reliability and the Cronbach's alpha for all the variables was found to be .814. The findings indicate that planning for services is done without setting targets/ goals which are a primary guide for effective service delivery. Priority identification is not done at the village level and local governments sometimes plan outside central government priority areas and what is implemented is not what is identified by the communities. The findings further indicated that, there is poor involvement of the stakeholders in the process of service provision. The study also discovered that whereas implementation of services is at all levels of service provision, its not equally distributed and greatly influenced by politics. It was also found that, there are various limitations that local governments face when trying to provide services to the people including: - limited finances, low capacity to formulate plans, poor feedback mechanism, frequent changes of guidelines and political influence that adversely affects the implementation of services. The study concludes that setting goals and reviewing them periodically is a comprehensive and efficient way of improving service delivery in local governments. Local governments undertake planning in isolation of their communities and this reduces the logic of bottom up planning and the identification of development programs by the targeted beneficiaries, stakeholder input is important for improved service delivery and L.Gs have conflicts and disagreements over implementation. Local governments should therefore, reach out to the community and solicit a dialogue with respect to major decisions and actions for local service delivery, peoples priorities should always be identified, appropriate strategies must be designed by local government to enable all stakeholders participate in planning process and Implementers need to take into consideration the associated management development processes.

CHAPTER ONE

INTRODUCTION

1.0 Introduction:

This study was an investigation into the relationship between decentralized planning and service delivery in local governments in Uganda, a case study of Soroti district. Decentralization planning was conceived as the independent variable while affects on service delivery the dependent variable. This chapter presents the background to the study (grouped under historical, theoretical, conceptual and contextual background,) (Amin, 2005), the statement of the problem, the purpose, objectives, the research questions, the hypotheses, the scope of the study, the significance, justifications and operational definitions of terms and concepts.

1.1.1 Historical Background

During the past quarter century, decentralization of government has been under way in all parts of the world. Renewed interest in decentralization in developing countries was brought about mainly by the spread of market and democratic principles, (Brixiova, 2008). There was also consensus that decentralized planning creates conditions for sustainable development and poverty reduction, (World Bank, 2001), It is further increasingly understood that achieving the Millennium Development Goals (MDGs) and eradicating poverty needs to be done at the local level and thus, requires the involvement of the local authorities,(Robinson,2002). In developed countries such as Netherlands, local governments have been increasingly accepted as full partners in the process of plan formulation and not as a mere agent of plan execution, (Allen, 1990). The formulation of National budget within the framework of the development plan is a priority to the Korea Government, Tacoi (2006); argues that states would have increased involvement in the development of the economy and

the society if the formulation of plans and supervision of their implementation was integrated. In India, planning process is being increasingly decentralized and this has given rise to the concept of bare foot planner, which is conversant with economic conditions and needs of people for whom the whole planning exercise is undertaken. In Bangladesh, two innovations being piloted are participatory local government planning and budgeting, and performance based block grant funding of union councils, providing initiatives for local institutions change and accountability.

The Mozambique Government has a long term objective of decentralized planning: improving access by rural communities especially those most marginalized, to basic infrastructures and public services, through sustainable and replicable forms of decentralized participatory planning, financing and capacity building at the district level, (Robinson, 2003). Integrated plans in South Africa have served to ensure effective use of scarce resources in local governments, speed up the delivery of services, attract additional funding, strengthen participatory democracy, promote coordination between local provincial, and national governments, Cheema, & Rondinelli, (2007). In spite of these initiatives, poor quality and inefficient delivery of public services still exists, (Singh, 2007).

In Uganda, since 1997, local governments have assumed more planning and budgetary responsibilities in a view of improving service delivery (World Bank, 2002).

The PEAP which serves as Ugandan's PRSP provides the framework within which both local and national planning efforts are conducted (MoLG, 2004). The essence of participatory decentralized planning is poverty reduction. Whereas the economic growth in the 1990 was associated with poverty reduction (Deininger & Okidi, 2003), around 1990/2002, poverty slightly increased despite continued growth (Kappel et al., 2005). Statistics show that absolute poverty declined from 56% in 1992 to 35% in 2002, but rose slightly to 38% in 2004, (UNDP, 2005). Almost 20% of the population suffered from chronic poverty in the last

decade some of the factors associated to this are, poor planning and insecurity in other areas, (MoFPED, 2005). Its from this historical background that the study of decentralized planning and its effects on service delivery in local government systems is conceived.

1.1.2 Theoretical Background

By defining the ultimate aim of social and societal progress, the rational comprehensive theory advances the notion of public interest. Public interest means planning solutions that are of common benefit, (Comte, 1857), Gunton and Hodge (1960) argued that rational actors make decisions through a purely rational process that defines the problem, objectively ranks the goals, analyses competing alternatives, conducts cost benefit analysis and makes the decisions that accrue to the maximum net benefit. Rational comprehensive planning theory corresponds closely to what is termed as policy making. Discussions on planning often attempt to draw a sharp distinction between formulations of policy and planning. The former is frequently viewed as being a political activity while the latter is considered technical and administrative. Planning is therefore an effort to express this rationality and relates it to the purposiveness

of development, (Myrdal, 1960).

This theory guides the study since it applies rational decision making to planning. How planning is to be done and how the same can be best implemented through effective decision making from bottom to top level- village, parish, sub county, district and the national level. Gunton and Hodge (1960) note that rational comprehensive planning theory rose in response to problems brought on by urban growth when scientific methods were applied to find solutions to urban problems. The parameters of such solutions were to be defined:- wide roads without traffic jams, equal access to services among others. In the study, public services such as roads, water and sanitation, Education and Health were analyzed using

quantifiable factors such as the sizes and distances of public services in relation to their user base.

The rational comprehensive planning theory links to the conceptual framework basing on four typical elements; goal setting, identification of policy alternatives, evaluation of means against ends, and implementation of decisions with feed back. Using this method requires exhaustive information gathering and analysis. It stresses objectivity, the public interest, information and analysis which allow planners to identify the best possible course of action.

1.1.3 Conceptual Background.

Decentralization is an act through which a central government formally transfers power to actors and institutions at lower levels in a political, administrative and territorial hierarchy (Stein, 2000). This means local governments act on behalf of the central government, strengthening state capacity in service delivery to the people (Lwedo, 2008). Rondinelli, (1981) defines decentralization as transfer or delegation of legal and political authority to plan, make decisions and manage public functions from the central government and its agencies to field organizations.

Decentralized planning of governments and service delivery are rapidly becoming key features in popular strategies to remedy problems of governance in both developed and developing countries, (Virmani, A. 2007). The need and relevance of planning in social development is extremely important from the stand point of initiating a sustainable process of change for the community in the operational area.

Singh, (2003), noted that a slight shift in focus from planning may lead to disastrous consequences for the target community. Decentralized planning is used in the study to mean

plans which are made by those who are going to be directly affected by them and not by absentee bureaucracy.

Uganda has implemented decentralization both as a system and process of devolution of power from the central to local authorities (MoLG, 2006). And Decentralized planning focuses on bottom-up approach as opposed to top down approach. It gives people at lower level of administrative units the opportunity to participate in problem identification, prioritization, search for solutions, implementation, monitoring and evaluation of development programs in their areas. Article, 176 (c) of the Constitution of the republic of Uganda, gives powers to local government units to plan, initiate, and execute policies in respect of all matters affecting the people within their jurisdiction. Decentralized planning however, as a concept has been much talked about than practiced, most countries in the world have not made adequate effort to engage stakeholders in the development of local governance and this affects service delivery, (Robinson, 2006).

Commins,(2004); asserts that services are failing poor people in quality, quantity and access. This study therefore, was aimed at examining how decentralized planning affects service delivery in local governments.

1.1.4 Contextual Background

Local governments are mandated to provide permissive and mandatory services to the people, (Local government Act 1997). In line with this mandate, Soroti District has an overall goal which is to contribute towards poverty reduction among the population of Soroti district by improving service delivery to the population. Despite this goal, the delivery of services is still inadequate. According to the Uganda participatory poverty assessment study, 2006 carried out in Soroti, inadequate and poor access to service delivery were identified as major causes of community household poverty. In water sub-sector whereas the coverage is

at 76%, the average supply is inadequate and poorly distributed. In hygiene and sanitation, the coverage is poor with some communities standing at 37%, and the district coverage is still at 55% and it has registered little or no improvement in this area in the last 4 years (District status report 2008). In the Health sector, infrastructure gap still exists particularly in distant locations in remote sub-counties. The population living within 5km radius from a Health Unit is approximately 19.1% which is lower than the national coverage of 49% (MOH: Health Facility Inventory 2002).

In spite of the massive government intervention in the education sector, the school infrastructure in the district is still low given the total enrolment of 122,993 the district requires a total of 1.760 classrooms to accommodate all the pupils comfortably.

The District Planning Unit which facilitates the participatory formulation of comprehensive 3 years plans both for the district and the sub-counties use secondary data especially from the national data collection exercises.

Some of the factors responsible for this low coverage of service delivery are poor community participation, inadequate awareness especially on planning process (District status report, 2008). There are also concerns that planning is poorly done, does not involve the beneficiaries of services, lacks vision, does not reflect the real needs and priorities of the local people and implementation of the planned activities is un satisfactory. It's on this contextual background that the study was conceived and hoped to address some of the factors responsible for inadequate / poor service delivery in Soroti District, as manifested in decentralized planning.

1.2 Statement of the Problem

Planning is a fundamental function of managing any process and it is considered an important element for the successful delivery of services in districts. Plans are needed to ensure that local councils are able to deliver services. In spite of the increasing resources committed to this, district plans are partially being implemented (MoLG, 2002). This situation has not changed much judging from recent assessments of the efficiency of PAF, the second PEAP / PRSP review (2006) highlights difficulties in the delivery of important health services and inefficiency in the water sector, where significantly increased funding has led to modest increases in annual outputs. In health, whereas access increased, service quality has deteriorated, likewise in education, the UPE reforms have resulted to large class sizes and unfavorable pupil texts book ratios. Gains in the water and sanitation sector have occurred at the cost of low value for money, (Republic of Uganda, 2002b). Stake holder relationships that influence efficiency and effectiveness levels are not having the desired impact.

While service delivery remains the ultimate goal, access is still difficult, waiting times are long, services such as education, drinking water and sanitation are still meager and the variation in the quality of services supplied by local Governments has widened relative to those offered by private providers. There are also issues to do with the use of service points as well as equitable distribution of the benefits. There are also concerns that planning is poorly done, does not involve the beneficiaries of services, lacks vision, does not reflect the real needs and priorities of the local people and implementation of the planned activities is unsatisfactory,(Kajungu,2007). If this trend continues, the spread of opportunistic diseases will increase, roads will become impassable, there will be no food for households and the general standard of living will go high, hence the study therefore sought to investigate the extent to which decentralized planning affects service delivery in Soroti district Local governments.

1.3. Purpose of the study

This study was carried out to examine the extent to which decentralized planning affects service delivery in local governments using Soroti district as a case study.

1.4. Objectives of the study

The following objectives guided the study;

- To examine the extent to which goal setting affects service delivery in Soroti Local Government.
- To find out how identification of priorities affects services delivery in Soroti Local Government.
- To examine the extent to which stakeholders participate in service delivery in Soroti Local Government.
- 4. To analyze how implementation of plans affects service delivery in Soroti District.

1.5. Research Questions

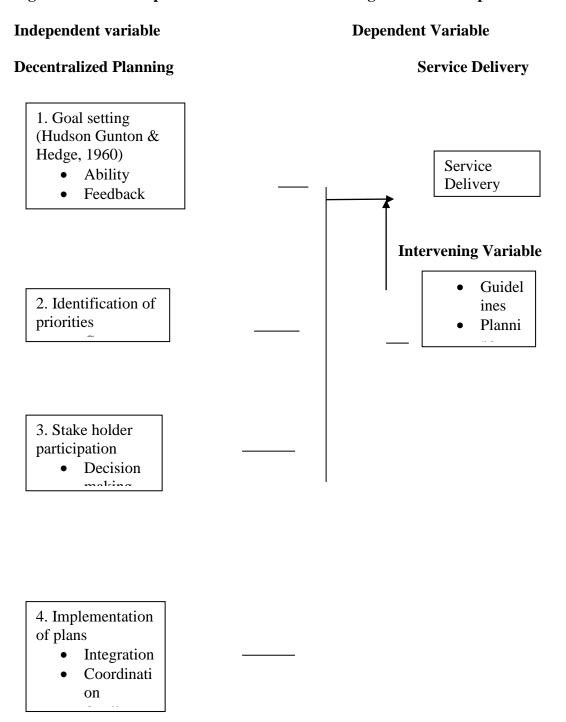
- 1. To what extent does goal setting affect service delivery in Soroti local government?
- 2. How does identification of priorities affect service delivery in Soroti local government?
- 3. To what extent do stakeholders participate in service delivery in Soroti local government?
- 4. How does implementation of plans affect service delivery in Soroti District?

1.6. Hypotheses of the study

- 1. Goal setting significantly affects service delivery in Soroti local government.
- 2. Identification of priorities significantly affects service delivery in Soroti local government.
- 3. Stakeholders participation significantly affects service delivery in Soroti local government system
- 4. Implementation of plans significantly affects service delivery in Soroti District

1.7. Conceptual framework

Figure: 1. The conceptual framework model showing the relationship between variables



Source: Huson Guanton & Hedge, 1960. lockes & Lathan, 1990. Rational comprehensive planning theory and motivational theory.

The conceptual model is adopted from the rational comprehensive planning theory advanced by Gunton and Hodge in 1960, Augustee Comte, 1857. The theory requires exhaustive information gathering and analysis which allows planners to identify the best possible courses of action.

The conceptual model above in figure1 shows the relationship between decentralized planning as the independent variable and service delivery as the dependent variable. It further shows the indicators of each sub variable, goal setting (Ability, feedback, Task complexity and situational constraints), Identification of priorities (cost and time), stakeholder participation (Decision making, Skills and Accountability), Implementation (Integration, Coordination, Quantity, Target and Quality). There are other factors that influence planning of services as guidelines, planning skills, and political influence. The assumption is that for planning to be effective, there are a number of components that must be included; Setting clear objectives of what needs to be accomplished, carefully prioritizing what to do since not all activities can be done in the right place at the right time in the right way and by the right people, involving different stake holders in the process of service provision and implementing the planned activities, (Reynolds, 1993). The study was conceptualized on the premise that decentralized planning influences service delivery in Local Governments.

1.8 Significance of the study

This study was significant in three aspects. First, it was hoped that the outcome from the study would enable Soroti district Local government and the rest of the districts of Uganda to get an insight into the extent to which decentralized planning affects service delivery. The findings of this study will hopefully go a long way in enabling the leadership of Soroti district to find appropriate solutions to the problems, which in turn could lead to improved service delivery. Secondly, the study was intended to guide the policy makers; MoLG and MoFPED in formulating appropriate policies and programs for service provision. Lastly it

was hoped that the study could form a useful foundation and a stepping stone for embracing research work on decentralized planning and its effects on service delivery in local governments and equally make contribution to the field of knowledge.

1.9 Justification of the study

It is generally accepted that in every community and at every level of government there is a need for planning to define objectives, to identify the optimal investments and programs, to achieve those objectives, to allocate human, financial, physical resources, to carry out such programs in a specified time and to monitor successes and failures in order to improve future plans on rational basis (Allen, 1990). In Soroti District Local Government, decentralized planning has not been easy and has raised concerns that planning is poorly done, does not involve the beneficiaries of services, Lacks vision and does not reflect the real needs of the community, some sector guidelines are rigid and largely bypass local government structures and the implementation of planned activities is unsatisfactory (MoLG, 2006). Criticism on the planning process has been that plans exist only on paper and bear little relation to what happens on the ground, (Arvind V, 2007). It was hoped that the study in decentralized planning and service delivery shall go a long way to contribute to the country's development.

1.10 Scope of the study

1.10.1 Geographical scope

The study was conducted in Soroti district local government and particularly in 3 rural subcounties, and one urban division in the municipality, to give the decentralized planning experience for an urban setting so that the researcher compares the data, from the urban and rural areas.

The study was limited to a certain period of time that is 2005-2008. The choice for this period is that graduated tax as a major tax was abolished and this affected the implementation

of planned activities and the same period saw increased penalties in local government in national assessment of minimum conditions and performance measures conducted by ministry of local government, decentralized planning therefore, and its effects on service delivery in local governments

was analyzed within this specified period.

1.10.2 Content Scope.

The study investigated the extent to which decentralized planning affects service delivery in Local Governments and it focused mainly on goal setting, priority identification, stakeholder participation and implementation of the planned activities.

1.11 Operational definitions

Decentralization entails the transfer of planning, decision making, and administrative authority from the central to local government. The term can be used to mean a system of government in which power is granted to local authorities or a process by which governance is moving from a centralized to decentralized system (prudhomme, 2003).

Delegation is the transfer of authority from the central government to an autonomous institution that is not part of the central government but report to it.

Fiscal decentralization refers to the transfer of power over budgets and financial decision to lower government levels that may in some cases include the increased power to raise taxes.

Decentralized planning: - is a tool of organizing development activities of local government in order to meet community needs and aspirations

Devolution in democratic decentralization is the strengthening or creation of sub-national levels of Government by transferring authority and resources down stream. The lower levels of Government are wholly or partially independent of higher levels of government.

Decentralization and devolution are often times viewed as mutually exclusive smoke: (2003).

Centralized planning is an approach to planning whereby central government line ministries and agencies plan for the country with minimal consultation with the beneficiaries and lower administrative limits

Decentralized planning is a tool of organizing development activities of local Government in order to meet community needs and aspirations.

Service delivery; this means in the research, where people meet most directly as providers and users of the interventions

Participatory Planning is a kind of planning that engages all key local institutions and players (both men and women) in the setting of vision, development objectives and privatization of investments activities and the allocation of resources to the activities in Local Governments.

Planning is a continuous process of identifying problems, priorities, making decisions regarding the allocation of resources among the set priorities aimed at achieving the set objectives.

Stakeholder Participation is a process whereby those with rights or interests play an active role is decision making and in the consequent activities which affect them

Disable: Any person with physical impairment which stops him/her from operating normally.

Community: The term community here includes various sizes of groups, ranging from those functional groups composed of several households bound together for certain specific activities, to those residential unit like a village, composed of several hundreds of households.

Technical planning committee - A committee comprised of technical officers charged with responsibility of planning at any local government level and harmonizing, integrating plans and views of all stakeholders in the mainstream planning system.

Goal setting- This involves establishing specific measurable and time targeted objectives/ a tool for making progress by ensuring that participants in a group with a common goal are clearly aware of what is expected from them if an objective is to be achieved.

The term "local" also covers different concepts. It refers to a specific (often the lowest Level) territorial unit (a district, a sub-district), that may benefit from

Budgetary autonomy and financial transfers in the frame of fiscal decentralization. The principle here is that there should be local public sector planning only where local public sector financing can be institutionalized and sustained.

Implementation – where the bulk of the resources, time and activity are invested.

Strategy – those unique tactics or courses of action that should be necessary to make sure the aspirations are realized.

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

In this chapter, literature related to the topic under study is reviewed thematically based on the study variables. This was done in accordance with the objectives and research questions of the study that guided the researcher in understanding the research problem. The literature reviewed also gives a theoretical understanding of the concept of decentralized planning and its effects on service delivery, goal/target setting, priorities identification, stakeholder participation and level of implementation of services, in the decentralized planning process.

2.1 Theoretical Review

There are multiple approaches to model public planning and decision making processes. Gunton and Hodge: (1960) who developed the rational comprehensive model, argued that rational actors make decisions through a purely rational process that defines the problem, objectively ranks the goals, analyses competing tasks, conducts cost benefits analysis and makes the decision that accrues the maximum net benefit. The theories of rational comprehensive planning thought that the more comprehensive the analyses of the planning problem were, the better the plan would be. Alternatives to the rational comprehensive model were the bounded rationality approach to decision making that replaces optimization with satisfactory and instrumentalism. (Brooke & Lindblom, 1963).

Lindblom in his theory, partisan mutual adjustment as a model of decision-making in public planning was concerned with how to bring the interests of different groups in the agenda of public planning and how agreement could be reached between these diverse and conflicting interests. Lindblom's advice to planners was threefold:

 Concentrate only on short term planning. The longer the time scale, the greater the uncertainty.

- Rely only on the existing planning policy and experiences gained from former similar planning tasks, so that you direct your resources of analysis in the current planning to the unique features of which there is no prior experience and no ready solutions on courses of action available. Thereby a new short term plan would provide a new increment with marginal changes to the existing planning policy and as such a new increment in the store of planning experiences on which to draw on in future incremental planning task.
- Broaden the knowledge base of planning by introducing various interest groups to the planning process.

Forester, (1993) advances the communicative planning theory - planning as consensus seeking. He advocates for legitimacy of the ends and means of planning. According to forester, facing uncertainty the planner is in need for more information and facing ambiguity he is in need of practical judgment. Ambiguity has to do with questions about the content of the planning methods itself. Legitimacy is at stake, How to justify the proposed choices "What to use as the standard of what works" (Forester, 1993) (Sotarauta, 1996).

2.2 Goal setting and service delivery in Local Government systems:

For planning to be effective, it should go through a systematic process to achieve the set targets. The ministry of local government (2004) notes that at the national level there is abroad outline of what needs to be done and the resources needed to enable the achievement of the stated policy objectives. The above argument is in line with the purpose of planning which is to formulate programs of action that influence development processes or new ones, which would change the existing situations in such a way that at the end of the planned period a situation is reached that agrees with the goals that were set at the time the plan was made. This can only be done if the planning process is participatory and bottom up,

(MoFPED: 2006). Successful organizations typically create ambitious performance goals aimed at achieving dramatic improvements in performance rather than settling for marginal improvements of just a few percentage points. Locke (2002) asserts that Managers do this both in response to competition or budget pressures and to force their organization to think beyond constraints that may have gone unquestioned for years.

MoLG, (2004) defines planning as setting of goals, identification of priorities, mobilization and allocation of resources as well as implementation of activities in order to achieve intended objectives. Planning involves a review of the past, the current situation and based on the analysis that predict how things should go in future. In essence, Locke, (2002), explained that the planning functions include those managerial activities that determine objectives for the future and appropriate means for achieving those objectives- feed back and task complexity. He affirms that without proper feedback channels it is impossible to adapt or adjust to the required behavior and those more difficult goals requires more cognitive strategies and well developed skills. From an organization perspective it is there by more difficult to successfully attain more difficult goals since resources become scarce. Locke, & Lathan, (2002) further points out thus; goals provide a sense of direction and purpose. When examining the behavioral effects of goal setting, they concluded that 90% of laboratory and field studies involving specific and challenging goals led to higher performance than easy or no goals. This conclusion is in line with what Kendall, (2002), pointed out concerning community based services, He asserted thus; goals are the primary guide for service delivery, facilitating the planning and implementation of appropriate rehabilitation services and community supports to meet the unique needs and interests of each person in their community.

2.3 Priority Identification and service delivery in Local Government systems:

In a decentralized system, every body at every level of the local government is responsible for the planning process. Councils provide the vision and goals for development as well as determine the priorities, (MoLG, 2003). The technical staff interprets the decisions of the council and translates them into development projects and programs. All these efforts are aimed at making services available to the population. (PEAP revised guide 2004). In Uganda, the annual medium term planning process of preparing the national budget frame work paper (BFP) has been expanded to include the preparation of BFP by all Local governments. Local Governments now have better budgeted for revenues and the priority programs identified have high congruence with nationally identified priorities (World Bank 1999). Analysis of the context in which local planning takes place in Uganda shows how local planning is related to national development priorities (The revised PEAP 2000). However, improving the planning process both in terms of its linkages with the national budget but also in terms of how well responds to local needs remain a challenge.

The Poverty Action Fund has become the major vehicle for directing ex ante and ex post resources to the poverty specific priority programs of government (Bevan, 2001) while it represents a successful institutional device at earmarking resources to priorities and ensuring that resources are actually spent on the priorities, its existence represents a second best scenario giving the existence of the MTEF (Republic of Uganda, 2001). As the Uganda case shows, priorities set out in the PEAP / PRSP play and overreaching strategic role of guiding planning at sub-national level. There is evidence that setting the PEAP/PRSP as the overreaching strategic framework serves as a useful role of integrating local and central government planning efforts (DFID, 2003a and 2003b). As Hiroshi, (2008) ,asserts that one of the ways by which local government planning is made to reflect national priorities is

through harmonizing central and local government planning and budgeting cycles to ensure that local needs and priorities do feed back in to the National budget.

2.4 Stakeholder Participation and service delivery in Local Government systems:

Identification of stakeholders has been problematic in past participatory evaluation studies, (Green, 1988). Therefore, the first step in this study was to identify and select stakeholders based on theoretical definitions of stakeholders. Guba & Lincoln, (1989), placed stakeholders into the three categories of agent, beneficiary, and under-represented. Agents are those persons involved in producing, using and implementing the program. Beneficiaries are those persons who profit in some way from the use of the program and underrepresented are those persons who are negatively affected by the program. Stakeholder participation is therefore a process whereby those with rights or interests play an active role in decision making and in the consequent activities which affect them. Participation in decentralized planning is known to lead to the timely completion of projects. Once the people accept the project as their own, they willingly come forward to implement it. They become concerned that their labor starts bearing fruits as soon as possible, (Kajungu: 2007)

Kassami, (1997), as cited by Asiimwe, (2007), points out that in Uganda from 1970 to 1986, planning was under central Government control, with very limited participation from districts and lower administrative units. Participation of grassroots therefore had little significance in the pre-and immediate post independence years. The decentralization policy strategic framework, (2006), re- enforces the above views that the 1962 Ugandan constitution, through the local administration ordinance of (1962), granted significant powers to local councils with regard to their own composition. However, the system that was created had the components that related differently to central government and whose powers over those functions differed as well.

Participation relates to the institutionalized engagement and involvement of the beneficiaries in development efforts at all crucial stages and levels. In order for participation to be meaningful in process and outcomes, spaces must be created for individuals to engage in consultations, planning Program identification analysis, and prioritization (Robinson: 2000). The decentralization policy strategic frame work, (2006), clearly points out that development planning and budgeting will be participatory to ensure that all local development programs reflect citizen input and priorities. However, community participation is easier said than done, as Hiroshi Kato, (2008), put it; even if residents have a thorough knowledge of matters close to them, they have no knowledge of their broader matters outside the world around them, or of more sophisticated technical matters. He adds that, impoverished residents are completely occupied with just leading their day- to- day lives, and they are either indifferent to broader distant matters, or they do not have the time to attend meetings. Popular participation as one of the objectives of decentralization is based on a democratic principles to enable active participation of people at all levels of local government in matters that affect them. The argument here is that citizens are required to be involved in the implementation of development interventions and on holding local officials accountable for their actions in order to ensure improved services.

The constitution highlights the key aspects of popular participation in decision making processes in order to ensure the full realization of democratic governance.

Decentralization in Uganda relies on participation of the people to:

- Promote a sense of self reliance, responsibility and ownership that is vital for maintenance and sustainability of community development initiatives.
- Ensure that the actual needs and priorities of the whole communities are identified by them.

- Enable the people to make decisions that concern them and have a say in managing their own development.
- Provide reliable fora for planning and implementation that are easy since each member understands right from the start what they are doing and why they do it.
 Local Government Act, (1997) and the Constitution, (1995).

The local government budget framework papers also provide an opportunity for grassroots participation through the preparatory processes held at the village Council level upwards through the parish sub-county and the district council. The most basic administrative unit of Local Government is the village council (L.C.I), which comprises of all persons above eighteen years in that village. All Ugandans are incorporated into their local governments at this level and can participate in the meetings convened by the village executive committees. The Local Government Act, further attempts to foster participation and inclusion by creating structures and mechanisms for involvement of the people through the election of councilors, and by setting up consultative process and fora in the various development planning processes. Individuals are able to participate through their elected representatives and directly at certain levels such as the village council meeting and budget conferences.

However, the act does not specifically provide for the functions or required capacities of councilors and the staff of technical departments, limiting the opportunity for exchange and the free flow of information that would enhance planning and decision making. The Local Government Act does not consider educational qualifications a prerequisite for the election of councilors. Decentralization may increase chances of local capture of decision making systems by the local elite and decisions may reflect their private preference. There is no systematic / comparative evidence on whether increased participation in the decentralized local governance generates better "outputs" in terms of improvements in the provision of health, Education, drinking water, sanitation services for the poor and marginalized people (Robinson, 2000).

Rietbergen J & MacCracken, (1998) mentioned that stakeholder analysis provides a foundation and structure of participatory planning, design, implementation and monitoring. Stakeholder analysis is a vital tool for understanding the social and institutional context of project or policy. Its findings can provide early and essential information about who could influence the project positively or negatively. Which individuals, groups or agencies need to be involved, and how or whose capacity needs to be built to enable them participate.

Working with stakeholders therefore implies that the organization is inclusive and uses a participatory approach, the stakeholder should also have a good understanding of the organization, there will usually be different levels of stakeholders in service delivery, and generally there will be the decision makers, and implementers. The willingness to participate by stakeholders will depend on whether they are convinced that their views will be considered and on their ability to participate objectively. For example it takes time and costs to prepare for and attend meetings.

Studies of decentralization reforms in the highly stratified societies of South Asia have shown that the local elite may take advantage of the opportunities and capture the benefits associated with decentralized planning, leaving the poor in a state of identical if not increased marginalization, (Romeo, 2003). This leads to the somehow obvious need for a better understanding of the local power structures and dynamics in order to maximize the chances of increasing popular participation in local governments. The ultimate cause of such betrayal can be traced to the lack of central commitment and adequate incentives for the professional reorientation of deconcentrated state agents as both supervisors and facilitators of local planning. This lack of real commitment—disguised under the rhetoric of decentralization and local autonomy—has proved fatal to decentralization reforms in general and to their participatory development goals in particular.

2.5 Implementation and service delivery in Local Government systems:

The local governments are responsible for implementing the government policy of poverty reduction through the delivery of services in all the key priority program areas (PPAs) of government. These include primary education, primary health care, water and sanitation, rural roads and agriculture extension including mainstreaming gender, HIV/AIDS and environment in local development agenda. Marginalized groups have been incorporated in to local government through legally sanctioned affirmative action, (MoLG, 2006).

The decentralization strategic paper, (MoLG 2006) asserts that a number of challenges have emerged in the implementation of the decentralization policy underscoring the need for policy, institutional coordination adjustment and more so service delivery. The planning processes of the decentralized sectors are at least in theory, to be incorporated in to the overall system of the comprehensive (cross-sect oral) local development planning process. However the reality is that as cited by Kato, (2008), each local government technical department determines their own sector plans independently from the aforementioned process based on the guidelines given by their central ministries. Each sector justifies the need to ensure technical quality and viability as well as consistency with the national sector strategies on the one hand and on the other, there is distrust in the local councilors' capabilities as well as in this type of planning system itself. He concludes that in each local government, the participatory local development approach and the sector approach are proceeding in parallel, and planning officers are bundling them together as background material.

The decentralization policy strategic frame work, (2006), goes ahead to explain the need to establish, understanding on how local governments political and administrative structures can better support the quality of service delivery, sustainability in sectors and defining mechanisms for sustainability.

Under the local Government Act 1997, district/municipality as planning authority is required to prepare and implement a comprehensive and integrated medium term (3 year) rolling development plan incorporating the plans of lower Local Governments and councils in their respective areas of jurisdiction. (Magyezi, 2002).

Cheema & Rondinelli, (2007), affirm that integrated development plans have served to ensure effective use of scarce resources in local governments, speeded the delivery of services, attract additional funding, strengthen participatory democracy, promote coordination between local governments and central governments but above all these plans have institutionalized participatory decision making in local governments and given a whole meaning to political decentralization. This argument is also in line with Uganda's overall efforts at integrating poverty reduction in to local planning and budgeting processes which have been impressive, MoLG; (2006). By instituting reforms in intergovernmental relations, the country has largely overcome its legacy of vertical and horizontal imbalances, MoLG, (2005).

However, the Joint Annual Review of Decentralization, (2006) points out other challenges that still lay a head despite these improvements; significant challenges remain in aligning local targets and outcomes with national priorities, and in building local capacity desperately needed to handle greater responsibilities of managing public service in a decentralized context.

While local governments have been made responsible for service delivery inadequate incentives and capacity exists for local government to meet their obligation. This has been exacerbated further through the creation of new district with attendant administrative structures and costs, Kato, (2008). Planning and implementation therefore remain ineffective and central government dictates activity through operation condition grants, (Steven, 2002). The argument here is that even if local plans are formulated, unless the necessary budget is

allocated, they won't be realized. (Hiroshi, 2008). The implementation of the decentralization policy has given rise to a number of experiences some of which indicate that it is not enough to strengthen institutions and to increase access to services if this is not accompanied by increases in peoples incomes. In recognition of this facts and the need to sustain ably address poverty in communities the policy will promote local economic development, to enhance people incomes and expand the tax base for local governments. (Decentralization policy strategic framework, 2006).

2.6 Summary of the literature review.

Principally the literature reviewed provided an overall understanding of the problem being investigated. The reviewed literature raises interesting issues that need to be explored further. For example, decentralized planning is looked at as a means of achieving efficient and effective service delivery, greater involvement and responsiveness to communities and greater coordination between social sectors. How true is this, when it comes to service provision in Soroti district, Are managers of public services facing any challenge particularly as regards to identification of priorities and stakeholder participation? How strong is intersect oral collaboration during the implementation of projects? The literature also presents decentralized planning as an opportunity of giving the district a greater autonomy to spend resources according to their needs and likewise sees it as an opportunity for providing services to the people.

The study explored the reality of service delivery in the district. The key issues learnt that came from the literature review that have been addressed in the subsequent chapters include; limited capacity to plan and implement programs in local governments, and lack of meaningful participation of all stakeholders, especially in priority identification and political influence in implementation of service delivery. It's hoped that this study has contributed to the body of knowledge among others.

CHAPTER THREE

METHODOLOGY

3.0 Introduction

This chapter presents the methodology of the study: it presents description of research design, study population, sample size and selection, sampling techniques and procedures, Data collection methods and instruments, pre- testing techniques, procedure of data collection, data analysis and measurements of variables to give deeper understanding of service delivery into decentralized planning.

3.1 Research Design.

The research design was based on the case study approach with a focus on 3 (three) rural sub counties and one urban Division. The case study approach was used because it provided an opportunity for intensive and holistic descriptions and analysis of decentralized planning and its effects on service delivery as suggested by Yin, (1994).

The case study approach called for the researcher to make choices from among a number of possible events, people and organizations, (Denscombe, 2000). The choice for the case study design was to enable the researcher to understand the study in detail so as to get solutions to the problems in the area of study. Secondly, the design could be used for the purposes of theory testing as well as theory building. Layders, (1993), points out that; "the rationale for choosing a specific case, can be that, it contains crucial elements that are especially significant and that the researcher should be able to predict certain outcomes if the theory holds true."

Both qualitative and quantitative approaches were used because they complement each other. Qualitative approach is descriptive, uses conceptualization and helps in explaining variables and quantitative approach which uses statistics explained numerical values, (Mugenda & Mugenda, 1999). The choice of these approaches was that qualitative helped in

exploring the application of the theory and quantitative approach helps in testing of theory through the testing of hypothesis. The qualitative methods used included interview that was conducted at parish level and focus group discussion at the village level.

3.2 Study population

The study population included civil servants, political leaders both at the district and the sampled sub counties, chairpersons of the Parish Development Committees(PDCs) representatives of the interest groups at parish/ sub county level, (youth, women & people with disability), CBOs leaders and the community beneficiaries from the sampled villages. Population is the complete collection (or universe) of all the elements (units) that are of interest in a particular investigation, (Amin, 2005). A total of 300 subjects were sampled for study from Dokolo parish- Gweri sub county, Otatai parish- Asuret Sub County, Opuure parish- Atiira Sub County and Nakatunya ward in western division. These had a total population of 26,087 people as per the 2000 national census. Soroti district has a total population of 371, 986 out of this, 181, 399 are male, while 190, 587 are female. The district has a population density of over 150 persons per sq. km. The population growth rate is 5.1% greater than the national average of 3.3% (District status report 2008)

The study population of 440 subjects was sampled to select a sample size of 300 respondents basing on different roles played in the planning process and level of implementing the decentralized services.

3.3. Sample size and selection.

A sample is the collection of some (a subset) elements of a population. (Deniscombe, 2000). And size of sample is a number of items to be selected from the universe to constitute a sample. The size of the sample should be optimum. An optimum sample is one which fulfills the requirements of efficiency, representativeness, reliability and flexibility, (Kothari, 1990).

The aim was to be able to generalize the results of the data from the sample to the entire population. Probability sampling was used; this is where by elements in the population have some known chance / probability of being selected as sample subjects. (Sekaran, 2000). Random sampling was used to select parishes and villages.

In order to establish a higher degree of reliability and generalization of the results obtained, the researcher examined the basic characteristics of the respondents in Soroti district. These included civil servants, councilors and members of the PDCs, NGOs/CBOs workers, and representatives of the interest groups. The assessment of these characteristics was carried out in order to ascertain whether the subject under study has the basic knowledge to respond to the inquiry. It had also been assumed that basic knowledge would help to obtain reliable information regarding the study of decentralized planning and its effects on service delivery. Secondly, knowledge about the respondents' designation, occupation (management position) and a period of time served would help the researcher to assess the degree of influence and experience attained by the employees in order to give explanations to some questions which appeared technical in the field of local governments. Thirdly, the period of time served would also help the researcher to establish the level of manpower experience in the organization and to know whether the respondents have stayed for enough periods in their respective organizations to give reliable information to the study.

Table 1: Categories of respondents sampled for the study

Category	Accessible	Sample	Percentages	Sampling technique
	population	size		
District Technical staff	25	24	96%	Purposive
L.C. V councilors	33	28	84%	Simple Random sampling
Sub- county technical	25	24	96%	Purposive
staff.				
PDCs members	35	32	91%	Simple Random
Representatives of the	10	10	100%	Simple Random
interest groups				
CBOs leaders	15	14	93%	Simple Random
Community/Beneficiaries	300	168	56%	Simple Random
TOTAL	440	300		

Source: by Morgan and Krejie as cited by Amin, (2005).

The respondents were sampled according to the categories specified in the above table to get a fair representation of the study. Saunders et al (2003) have recommended that with all probability samples, it is important that the sample size should be large enough to provide the necessary confidence. A sample size of 300 respondents as a representative sample was used.

3.4. Sampling methods and procedure.

Having selected the acceptable sample size of 440 subjects for the study (Table 1), the researcher considered the appropriate techniques that depended on the research questions and objectives. Purposive and random sampling was therefore used. Purposive is where the researcher selected only those observations that meet her defined parameters and this was applied at the district level, random sampling is the process of selecting a sample in such a

way that all individuals in the defined population have an equal chance of being selected, (Mugenda & Mugenda, 1999).

Sub-counties were the sample units where 3 rural sub-counties and one urban division were randomly sampled in the district. Simple random sampling was also applied at the sub-county, parish and village levels to analyze the participation of various stakeholders. Numbers were given to every parish and village of the accessible population. Parishes selected included; Dokolo parish in Gweri sub county, Otatai parish in Asuret sub county, Opuure parish in Atiira sub county, and Nakatunya ward in Western Division. Selected villages included; Acuma, Dokolo, Abiya, Akisim, Angaro, and Ookai in Dokolo parish. Okidoi, Obutet, Otatai central, Olura B, Orimai, Omulala, and Ochero in Otatai parish. Abil, Otaaba, Adipala- Agule, Omugenya, Akisim, Aukot, and ongor in Opuure parish. Maliga cell, Lubiri, Odeke cell, Wire cell, nursery cell in Nakatunya ward. The choice for this method is because of the large population, limited funds and time.

3.5. Data collection methods

The task of data collection begins after a research problem has been defined and research design spelt out, (Kothari, 1990). While deciding about the method of data collection to be used for the study, the researcher kept in mind two types of data viz; primary and secondary. Primary data are those that are collected afresh and for the first time, and thus happen to be original in character. While secondary data on the other hand, are those which have already been collected by someone else and which have already been passed through the statistical process, (Kothari, 1990: 117).

The data collection methods for this study were: interviewing, administering questionnaires and focus group discussion. Interview for structured interview- face-to- face interviews were conducted, questionnaires for quantitative data that was personally administered, focused group discussions at village level and documentation review.

3.5.1 Focus Group discussions

This is a data collection method which gathers people from similar background or settings / experiences to handle / discuss an issue of interest to the researcher, (Denscombe, 2000). The purpose of the study was explained to the participants to enable them explore their knowledge on the topic of study. Participants were divided into groups of not more than 6 persons who discussed the topic of decentralized planning separately. Questions were formulated on the four main thematic areas to guide the discussion. Apart from questions for further information and clarification, participants were encouraged to share other experiences that cross- fertilize the subject under discussion. Key lessons and recommendations were developed under each topic and feedback to the main grand plenary. The focused group discussion was developed to elicit the participants' impressions of the current service system strengths and recommendations from key stakeholders regarding service delivery by local government. The protocol contained the same questions at each time/point. The choice of the method was to enable the researcher collect in- depth information about groups' perceptions, attitudes and experiences of the topic under study.

3.5.2 Documentation.

This method involves delivering information by carefully studying written documents, or visual information from sources called documents. These are text books, news papers, journals, Article speeches, Advertisements, Pictures etc. (Amin; 2005). Secondary data from District, sub- county plans, Reports, recent studies, books and journals were reviewed to test and enrich results from other methods as well as attain available information on area of study.

3.6 Data Collection instruments.

The data collection instruments are tools that the researcher used to collect data from the respondents. A combination of instruments was used as appropriate to make use of their different strengths, because none of the methods when used exclusively may collect sufficient data.

The following instruments were used; questionnaire interview Guide with structured questions, and focus group discussion checklist and document review.

3.6.1 Questionnaire

Questionnaire is a list of carefully structured questions chosen after considerable testing with a view of eliciting reliable responses from a chosen sample (Hussey& Hussey 1997). Or is a carefully designed instrument for collecting data in accordance with the specifications of the research questions and hypotheses. It consists of questions in which the subject responds in writing. (Denscombe, 2000)

The choice of a questionnaire is justified by the fact that is the best tool in collecting quantitative data from a big number of respondents. Questionnaire provides with information based on facts and opinion. These were self constructed with semi-structured set of question, open and closed ended.

Semi structured questionnaire were used because large samples can be made of use and thus, the results can be made more dependable and reliable, offers the greatest assurance of unanimity, cheaper than other methods and free from bias. A total of 132 questionnaires were distributed to the selected respondents. To find out the views of the respondents on the relationship between decentralized planning and service delivery, the independent variable was grouped into 4 (four) variables namely; goal setting (10 items), identification of priorities (10 items), stakeholder participation (10 items), implementation (10

items),efficiency (10 items)and effectiveness (5 items). The self administered questionnaire was used at Sub County, town division and district level.

3.6.2. Interviewing

This is a data collection instrument in which selected participants are asked questions in order to find out what they do, think or feel to enable the researcher solicit information of the subject under study through probing, (Denscombe, 2000).interviewing is a face to face interaction where the interviewer asks questionnaires to the interviewee, (Amin 2005). The choice of the instrument is that it's flexible and its easy way of finding information out. Also permits the researcher to ask more complex questions and it takes into account verbal communications such as attitudes and behavior of the interviewer in relation to the subject being discussed. Guided interviews were conducted in parishes and wards with parish local council executive committee members who included those responsible for youth, women, and disability, the chairpersons PDCs and the parish chiefs. The purpose of the interview was to determine the extent to which those stakeholders participate in decentralized planning. The choice of the method was supported by the fact that it is flexible and an adoptable way of finding things out.

Structured interview guide was formulated where specific questions were asked to all respondents. Participants included 36 interviewees, who by virtue of their experience through direct involvement of parish / sub county planning activities were purposefully identified and interviewed as key informants. A self- styled interview guide was used, (Kojo E. S, 2008).

3.7 Pre-testing

The research instruments were pre-tested in one rural sub county and one urban division to minimize the random error and increase the reliability of the data collected. The results of the

pre-testing led to adjustment of the questionnaire to make them more focused and enlist more data from the respondents. Further more; the questionnaire was adjusted by adding more close- ended questions to make ten items per each independent variable and fifteen items for the dependent variable so as to make the study more focused and enlist relevant data from the respondents. A total of twenty questionnaires were administered to Arapai Sub County and Northern division ten questionnaires each. Fifteen percent of the total questionnaires were used for pre-testing. Mugenda & Mugenda (1999) recommends fifteen percent as appropriate for pre-testing purposes. The findings indicated that 17 of the respondents agreed and only 2 disagreed, while 1 respondent was undecided.

Validity of the instrument was determined by content validity which refers to the degree to which the test actually measures or is specifically related to the traits for which it was designed, (Amin, 2005). An important question then was 'how do we establish a Content Validity Index (CVI). Therefore, coefficient of validity is calculated as; Number of respondents who agreed / Total number of respondents issued with questionnaires

The agreed respondents = 17, Total number = 20. To determine whether the instrument was really valid, the results were computed using the following formula: - $CVI = \underline{n-N} / \underline{N}$

n = Number of respondents who agreed

N = Total number of respondents

20/2 = 10.

17-10 = 7

7/10 = 0.7

For the instrument to be accepted as valid, the average index should be 0.7 or above. (Amin, 2005).

3.7.1 Validity

Validity is the ability to produce findings that are in agreement with the theoretical or conceptual values. I.e, to produce accurate results and to measure what is supposed to be measured, (Amin; 2005).

The study's strategy for enhancing validity include, obtaining data from multiple sources. In this case 36 interviews were conducted at parish level from stakeholders and 28 FGDs at the village level along with document analysis and written observation by the research team. The choice of this instrument is that, it contains all possible items that should be used in measuring the concepts. (Mugenda & Mugenda, 1999).

3.7.2 Reliability

While reliability is a measure of the degree to which a research instrument yields consistent results/ data after repeated trials. (Mugenda and Mugenda 1999).

Reliability of research instruments was pre-tested in two (2) villages, one (1) parish to get the rural experience and one (1) ward in the division to get the urban experience. The results of the pre-testing led to adjustment of the questionnaire, interview guide and focus group discussion guide to make them more focused and enlist more data from the respondents. Further more; the questionnaire was adjusted by adding more close- ended questions so as to make the study more focused and enlist relevant data from the respondents.

Table 2: Reliability results table

Variable	Cronbach's Alpha	No. of Items
Goal setting	0.61	10
Identification of priorities	0.38	10
Stakeholder participation	0.40	10
Implementation	0.72	10
Service delivery	0.72	15

From the reliability results above, it's clear that implementation items were the most reliable, followed by goal setting and the least was stakeholder participation. Service delivery as dependent variable was also reliable up to 71.8%. In a research study, a reliability coefficient can be computed to indicate how reliable data are. The Cronbach's Alpha for all the variables was .814 implying that the results are reliable up to 81.4%. Cronbachs' Alpha is an index of reliability associated with the variation accounted for by the true score of the 'underlying construct', (Hatcher, 1994). If an instrument were perfectly reliable, the coefficient would be 1.00 meaning that the respondents' true score is perfectly reflected on her or his true status with respect of the variable being measured. If the coefficient is .00, it indicates no reliability, (Amin, 2005).

Nunnaly, (1978), has indicated 0.7 to be an acceptable reliability coefficient but lower thresholds like the ones in this study (0.378 and 0.399) of identification of priorities and stakeholder participation respectively are sometimes used/ accepted and since the overall Cronbach alpha is 0.814, I presume that the results collected are reliable.

3.8. Procedure of data collection

The researcher discussed the content of the research and instruments to be used with both the work based and UMI based supervisors. In addition to that, the research instruments were pre-tested in the two (2) selected villages, 1 parish of Arapai sub county and one (1) cell and 0ne (1) ward in Northern division. An introductory letter for the researcher was obtained at Uganda management institute (UMI) and the district.

Visits to the district sector heads, sub-counties and divisions, parishes and villages selected was made to introduce the study before actual data collection started. The purpose of the study and its possible benefits to the community was explained to the respondents before commencement of the interviews. The introductory letter was also attached to the

questionnaire to give a brief introduction to the subject matter. The questionnaire was in English since it was meant for the elite class. The interview guide was also in English with room for translation into the local language spoken in Soroti district i.e. Ateso. Research assistants were selected, trained and recruited to carry on the data collection activity in each of the sub-counties chosen. Four (4) research assistants who were assisted by four (4) record assistants to take record of relevant information and avoid a break in discussion were recruited. The researcher conducted interviews by recording and transcribing the information from the respondents. Key beliefs and opinions were recorded verbatim to avoid mis interpretation. Research assistants also made follow- up visits to sub county respondents of the questionnaire to explain unclear questions and ensure proper filling of the questionnaire. In addition more data was collected from available records, literature at sub county/town division level and the district planning unit in form of 3 year District development plan, annual work plans budgets and minutes of the council.

On the techniques of data collections, a filling system was introduced- a record of how many questionnaires were sent out, to whom they are sent and when they were sent was kept. Allocation of serial numbers was done for easy computer analysis. On interview technique, a representative sample was selected and interviews conducted within the time available, the purpose of the research was also explained to the respondents, and what the information is intended for.

3.9 Data management and analysis.

3.9.1 Quantitative data analysis

After data collection and clearing, the quantitative data was subjected to analysis. The analysis was done using the SPSS version 16.0 due to its comprehensive user friendly and statistical compatibility among its simplicity. Data was analyzed taking into account the unit of analysis and five levels of measurement. To apply the correlation and inferential

techniques, reliability analysis was first computed and emerging results examined. The dependent variable (service delivery) and the independent variable (goal setting, priority identification, stakeholder participation and implementation) were analyzed using a statistical technique of regression which gives relationships and magnitude of the relationship between variables.

Regression is a technique used to predict the value of a dependent variable using one or more independent variables, for example in this case, there were different measures of decentralized planning and those regressed a against each other. There are two types of regression analysis; namely simple and multiple regressions. Simple regression involves two variables, the dependent variable and one independent variable. Multiple regressions involve many variables; one dependent variable and many independent variables. It must be noted that in this case, multiple regression was used since service delivery was tested from other independent variables, (Efficiency and effectiveness).

Analysis of variance (ANOVA) was also used to determine the sum of squares and the F statistics with the rule of significance (0.05) to determine the ideal of a model to measure variation. Analysis of variance is a data analysis procedure that is used to determine whether there are significant differences between two or more groups or samples at a selected probability level. The questions to be answered by analysis of variance include;

"What is the probability that the variation among a group of sample means has occurred as a result of randomly selecting the samples from common population".

"Are the differences among the groups due to the treatments given or to chance" (Deniscombe, 2000). The model was determined through the analysis of means of sub variables that are indicators of dependent variables for example; efficiency and effectiveness were indicators of service delivery and questions in a 5 likert scale were administered per

indicator and their means computed to give means of sub variables. This was applied to both the independent variable and the dependent variable.

It must be known that linear regression estimates the coefficients of a linear equation involving one or more independent variables that best predicts the value of the dependent variable. And the variables to be regressed should follow/ be normally distributed for predictions of variation by independent variable as a statistical assumption.

General findings are presented in form of graphs, pie chart and tables with explanatory notes in each case in chapter four.

It must be noted also that, both quantitative and qualitative techniques were used, and the choice of these two methods is justified by the fact that different instruments of data collection were used.

3.9.2 Qualitative data analysis

Qualitative data analysis refers to non-numerical analysis- analyzing information in a systematic way in order to come to some useful conclusions and recommendations, (Mugenda & Mugenda, 1999). Content analysis for the qualitative data was done manually. Content analysis consists of reading and re-reading the transcripts looking for similarities & differences in order to find themes and to develop categories, (Amin, 2005). Qualitative data was analyzed using themes and code categories in the study. A list of the key beliefs, opinions, ideas and sentiments were coded according to the themes of the study and were used to illustrate the findings in chapter five. Further more, relevant reviewed literature was used to discuss and illustrate the study findings.

3.10. Measurements of variables

The variables of the study were measured using the five-likert scale. A likert scale consists of a number of statements which express either favorable or unfavorable attitudes towards

the given object to which the respondent is asked to respond. Each response is given a numerical score, indicating its favorableness or un favorableness and the scores are totaled to measure the respondents' attitudes. All the measures of goal setting, identification of priorities, stakeholder participation and implementation were measured using a 5 likert scale ranging from strongly agree. Agree undecided, disagree and strongly disagree. (Denscombe, 2000) The choice of this measurement is that each point on the scale carries a score and it's the most frequently used summated scale in the study of social attitudes.

CHAPTER FOUR

PRESENTATION, ANALYSIS AND INTERPRETATION OF RESULTS

4.0 Introduction

This chapter contains the presentation, analysis and interpretation of the research findings related to the study objectives. This study was conducted with the main purpose of establishing the relationship between decentralized planning and its effects on service delivery. The study tried to fulfill these objectives by answering four research questions and this was adequately done by the use of SPSS technique and presentation of means and percentages for the response attained through questionnaire.

4.1 Response rate

In the study, data was collected from a representative sample of 300 subjects and all were selected using the table by Morgan and Krejie adopted from Amin, (2005)

Table 3: Analysis of the response rate

Category of the	Targeted	Response	Percentage
respondent	sample	received	
DTPC members	24	24	100%
L.CV councilors	28	28	100%
STPC members	24	24	100%
PDCs members	32	19	59%
Interest groups	10	10	100%
CBOs leaders	14	14	100%
Community/ beneficiaries	168	168	100%

Source: primary data.

As indicated above, there were a total of 300 subjects that included both male and female selected to be appropriate for this study. Of these sampled respondents, 132 were issued with questionnaires but only 119 returned the instrument that was fully completed implying a response of 90%. Response rate gives perspective to the data and results and consequently the framework in which conclusions can be made.

4.2 Social Demographic indicators

In this section, the background characteristics of respondents are presented. The section presents the gender distribution, age, level of education, management position and duration of service. A self administered questionnaire that included a section of the demographic characteristics of respondents was administered. Data was collected on age, sex, level of education, duration of service and management position held as background information to the study. It was intended to guide the researcher in respondent behavior in relation to the later findings.

4.2.1 Age of respondents

Respondents were asked about their ages in categories of intervals of ten. The pie chart below shows that a majority of respondents were of 31-40. It shows distributed response age group with those below 20 years and above 61 years contributing to least of responses which give a view of experienced/ knowledgeable age group sampled. The individual age was included in the study because age is considered important in many communities and aspects of life. Some obligations and responsibilities are assigned to an individual according to one's age. In many societies, someone below the age of 18 years is considered a minor and therefore not capable of taking decisions. The age category of 31-40 years have attained better education more exposure and skills necessary for planning. The age category of 60 years above commands respect in society which is an asset when mobilizing communities to plan for services.

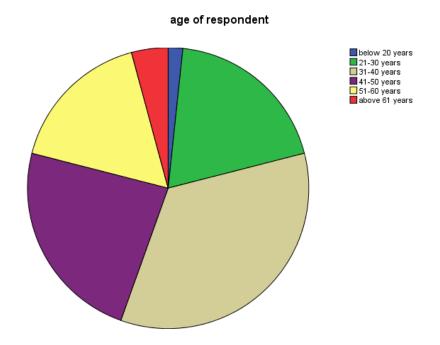
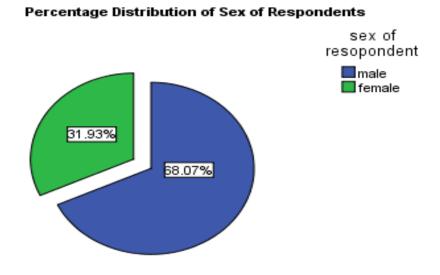


Figure 2: Age Distribution of Respondents

The pie chart (Fig.1) above shows that a majority of respondents were of 31-40 age brackets with an average age of 3.47 and standard deviation of 1.156. It shows distributed response age group with those below 20 years and above 61 years contributing to least of responses which give a view of experienced/knowledgeable age group sampled.

4.2.2 Sex of respondents

The respondents asked were a majority male with more than 68% male compared to female constituting 32% as shown below.



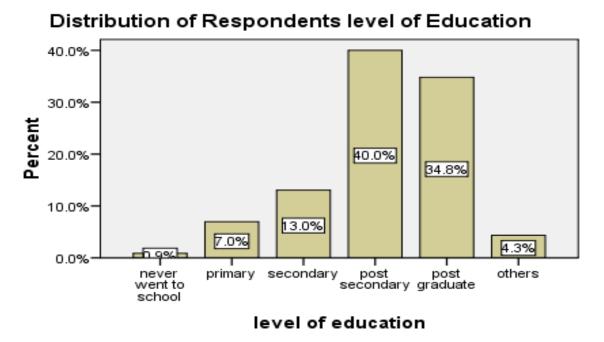
From fig.3 above, it's clear that males were the majority respondent, (82) and female were only (37). The emergent results therefore, on the gender distribution are suggestive on the existing gender discrepancy in civil service, but are also an indication of the deliberate strategies that have been taken to improve this discrepancy in public service in Uganda.

4.2.3 Level of education

In a study of decentralized planning, the level of education is of key importance as it gives an informed opinion and picture. A majority of respondents interviewed were at post secondary 46 (38.7%) and post graduate level of education with 40 (33.6%). Post secondary level include certificate and diploma holders and post graduate include degree holders. Other level of education contributed 5 (4.2%) and this include masters holders as shown in figure 3. Only 0.8% never went to school an equivalent of one person.

The chosen sample gives a good balance of opinions from the respondents in terms of level of education. With the highly educated individuals forming the bulk of cadres who undertake

decentralized planning, this should have a positive bearing on the quality of planning and better management of service delivery in the district.



Decentralised Planning & Service delivery- Akol Jane

Fig. 4: Respondents level of Education

4.2.4 Management position and duration of service

To ascertain the level of experience and positions in civil service held by respondents, data was collected for this variable to give a distribution of respondents' opinion without bias to key positions. The findings revealed that civil servants 53 (44.5%) were the main respondents with elders contributing to only 3 (2.5%), the political leadership was also interviewed with 28 member of sub county and district council and 12 chairpersons interviewed contributing to 23.5 percent and 10.1 percent respectively. The elders, ordinary citizens and others are respondents who in one way or the other contribute to decentralized planning and service delivery though not in substantive positions. They include; opinion leaders, members of the parish development committee and members of the civil society.

Percentage Distribution of Duration of Service by Management Position

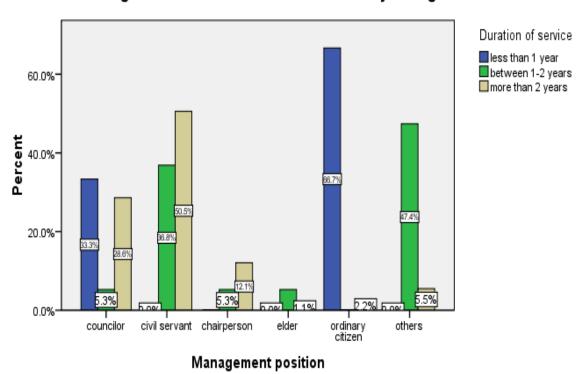


Figure.5: Duration of Service and Management Position

Regarding the duration of service as indicated in fig.4 above, of a majority of civil servants interviewed, more than half served for more than 2 years with very few 3(2.5%) less than 1 year. A majority of ordinary citizens of 66.7 percent served for less than 1 year compared to 33.3 percent of councilors see figure above.

In totality,(96) 80.5 percent of respondents served for a duration of more than 2 years with only 2.7 percent serving for less than 1 year; this gives an experience for an informed opinion on decentralized planning and service delivery in local governments. The management and duration of service was included in the study because the study was interested in establishing the positions at which the respondents operate within the district system. This is vital in determining an individuals' level of involvement in service delivery process.

4.3 Empirical Findings

This study was designed to examine the extent to which decentralized planning affects service delivery in local governments of Uganda. Preliminary statistical analyses explained broad perceptions on service delivery and descriptive statistics presented general opinion regarding respondent's opinion.

A two- way ANOVA was conducted to examine the perceptions of respondents on service delivery. The relationships between independent variable and the dependent variable were computed, presented, examined and then interpreted. All these factors were correlated and results are presented.

4.3.1 Hypothesis Number One: Goal setting affects Service Delivery

The concern of this theme was to examine the extent to which goal setting affects service delivery in local governments. Ten variables were used to measure how goal setting affects service delivery and the findings are described below.

In the table below, the strongly agree and agree responses were added together and disagree and strongly disagree were also summed for easy interpretation. As also explained from the table below, response number and their percentages are all included.

Table 4: Descriptive results showing responses on goal setting and service delivery

	SA	A	U	D	SD
	No. %	No. %	No. %	No. %	No. %
Soroti district is said to be operating on	37(3.1%)	57(47%)	5(4.2%)	16(13.4%)	4(3.4%)
written and clear mission statement					
Soroti district has its mission statement	4 (3.4%)	25(21.0)	6(5.0%)	67(56.3%)	17(14.3%)
known to all her stakeholders					
Its easy to interpret the district mission	4 (3.4%)	22(18.5)	4(3.4%)	66(55.5%)	23(19.5%)
statement					
Goals set are said to be responsive to	3 (2.5%)	23(19.3)	1(0.8%)	66(55.5%)	26(21.8%)
community needs					
Guidelines influences the process of	28(23.5)	69(58.0)	4(3.4%)	14(11.8%)	4 (3.4%)
goal setting					
Goals and strategy are clearly	15(12.6)	34(28.6)	6(5.0%)	47(39.5%)	17(14.3%)
understood inside and outside my					
organization					
Feed back to communities is important	43(36.1)	56(48.7)	6(5.0%)	9(7.6%)	3 (2.5%)
for proper goal setting					
Resources limit goal setting	39(32.8)	61(51.3)	3(2.5%)	12(10.1%)	4 (3.4%)
Goals are linked to situational	22(18.5)	43(36.1)	2(1.7%)	48(40.3%)	4(3.4%)
	22(10.5)	15(50.1)	2(1.770)	10(10.570)	1(3.170)
	6(50/)	17(14.2)	4(2.40/)	72(60.50/)	10(16%)
District formulates realistic plans	0(3%)	1/(14.3)	4(3.4%)	/2(00.3%)	19(10%)
District formulates realistic plans	6(5%)	17(14.3)	4(3.4%)	72(60.5%)	19(16%)

Source: Primary data.

As depicted in the table above, (94) 78 percent agreed that the district is operating on a written and clear mission statement, (20) 16.8 percent disagreed and 4.2 percent were undecided. Asked whether the mission statement was known to all her stakeholders; 70.6 percent disagreed, 24.4 percent agreed and only 5 percent were undecided. On interpretation of the mission statement, 75 percent disagreed, 21.9 percent agreed and 3.4 percent were undecided. The respondents were asked whether the goals set were responsive to the

community needs; 77.3 percent disagreed, 21.8 percent agreed and 0.8 percent were undecided. Asked whether the guidelines used had any influence on goal setting; 81.5 percent agreed that it had influence, 15.2 percent disagreed and 3.4 percent were undecided. 53.8 percent disagreed that goals and strategy were not clearly understood inside and outside the organization, 41.2 percent agreed and only 5 percent were undecided. Asked whether feedback was an important element in goal setting, 84.8 percent agreed, and 10.1 percent disagreed and 5 percent undecided. Respondents were also asked whether resources were a constraint to goal setting activity; 84.1 percent agreed, 13.5 percent disagreed and 2.5 percent were undecided. On whether goals set were linked to situational constraints, 54.6 percent agreed that they were linked, 43.7 percent disagreed and 1.7 percent were undecided.

Table 5: Correlation Results for Goal Setting and Service Delivery

Correlations

	-	Goal setting	Service delivery
Goal setting	Pearson Correlation	1.000	.415**
	Sig. (2-tailed)		.000
	N	119.000	119
Service delivery	Pearson Correlation	.415**	1.000
	Sig. (2-tailed)	.000	
	N	119	119.000

^{**.} Correlation is significant at the 0.01 level (2-tailed).

With the above table, there is a significant relationship between service delivery and goal setting with a correlation coefficient of (Sig.0.000) implying the relationship is positive and moderate. This explains that strengthening or improving goal setting will in turn improve service delivery by 41.5%. As a rule of thumb, correlation coefficient between .00 and .03 are considered weak, those between .03 and .07 are moderate and coefficient between .07 and 1.00 are considered high, (Amin, 2005). 0.415** is moderate and therefore acceptable in determining the magnitude of the relationship between two variables. It is important to appreciate that correlation is different from cause. The connection between variables that

might be demonstrated using a correlation test says nothing about which is the cause and which is the effect. It only establishes that there is a connection, with a specified closeness of fit between the variables, (Denscombe, 2000:204). With need to establish the connections in terms of cause and effect, regression analysis was also considered.

Table 6: Regression results for Goal Setting and Service Delivery

Model	В	Std.error	Beta	t	Sum of	df	Mean	F	Sig.
					squares		square		
Constant	1.624	.244		6.643	5.488	1	5.488	24.358	.000
Goal	.413	.084	.415	4.935	26.362	117	.225		
setting									

a. Dependent Variable: service delivery

Using multiple regressions, it was found that regression coefficient (R) was 0.415. It implies that by strengthening goal setting, service delivery will be improved. From column B, the regression equation can be written as:

Service delivery = 1.624 + 41.3 goal setting

It therefore shows a positive relationship with service delivery and goal setting as a useful predictor since the t- statistic of 4.935 is greater than 2.

In the findings above, the Beta reciprocal relationship was 0.415, that is, among all respondents interviewed, at least 41.5% said goal setting is important for service delivery improvement and the same findings shows that goal setting accounts for a small variation in service delivery and other factors account for much of the variation as shown by a high residual sum of squares of 26.362. However it does a good job in explaining variation in service delivery because of a high significance level of 0.000 and a favorable mean square of 5.488.

4.3.2 Hypothesis number 2: Identification of Priorities affects Service Delivery

In establishing the relationship between identification of priorities and service delivery, ten variables were used to measure the respondents' views on how identification of priorities affects service delivery and the results of these are shown in the table below.

Table 7: Descriptive results showing responses on identification of priorities and service delivery

Item	SA	A	U	DA	SD
	No. %	No. %	No. %	No. %	No. %
Identification of priorities is done	35(29.4%)	31(26.1%)	4(3.4%)	35(29.4%)	13(10.9%)
Community is aware of the predefined lists of priorities	5 (4.2%)	28(23.5%)	7(5.9%)	63(52.9%)	15(12.6%)
Cost and time determine priorities	9 (7.6%)	52(43.7%)	3(2.3%)	45(37.8%)	10(8.4%)
There is influence by civil servants	17(14.3%)	46(38.7%)	1(0.8%)	50(42.0%)	5(4.2%)
Priorities identified meet the needs	11(9.2%)	35(29.4%)	3(2.5%)	59(49.6%)	11(9.2%)
Priorities are harmonized	29(22.7%)	63(48.7%)	1(1.7%)	23(21.0%)	3(5.4%)
Plan formulation is subject to guidelines	27(22.7%)	58(48.7%)	2(1.7%)	25(21.0%)	7(5.9%)
L.Gs sometimes plans outside	15(12.6%)	53(44.5%)	3(2.5%)	33(27.7%)	15(12.6%)
Politics influences priorities	19(16.0%)	51(42.9%)	3(2.5%)	29(24.4%)	16(13.4%)
Given a chance LGs would rather not plan	12(10.1%)	26(21.8%)	5(4.2%)	51(42.8%)	23(14.3%)

Source: Primary data.

From the above table 7, the strongly agree and agree responses were added together just like disagree and strongly disagree for easy interpretation of results. The respondents were asked whether identification of priorities was done at the village level, (66) respondents 55.5 percent agreed that it was done at the village level, 48 respondents (40.3) percent disagreed and only (4) 3.4 percent were undecided. Asked whether the community was aware of the priorities in their area (48) 65.5 percent disagreed, (33) 27.8 percent agreed and (7) 6 percent were undecided. Respondents were also asked whether cost and time had a bearing on

priorities identified, 51.3 percent agreed, 46.2 percent disagreed and 2.3 percent were undecided. (63) 53 percent agreed that there is influence by top civil servants in decision making, 46.2 percent disagreed and only 0.8 percent were undecided. In the same findings, 55.4 percent disagreed with the question that priorities identified meet the real needs of the consumers, 43.7 percent agreed and only 0.8 percent had no opinion. On harmonization of priorities by the local government, 71.4 percent agreed, 26.4 percent disagreed and 1.7 percent was undecided. Asked whether plan formulation was subject to guidelines, 71.4 percent agreed, 26.9 percent disagreed and 1.7 percent was undecided. 57.1 percent agreed that local governments sometimes plans outside central government priority areas,40.3 percent disagreed and 2.5 percent was undecided. Findings also indicated that 58.9 percent had agreed that politics do influence the priorities identified, 37.8 percent disagreed and only 2.5 percent was undecided. Respondents were also asked whether it was really necessary for local governments to plan; 31.9 percent agreed that it was necessary, 57.1 percent disagreed and 4.2 percent was undecided.

Lower local governments are required to hold planning meetings to discuss their priorities in the different sectors for both recurrent and development activities. At these discussions, parishes and sub counties will identify investment activities to be carried out in the following financial year and in the medium term, taking into account the resources available (Medium term indicative planning figures).

From the above findings, its clear that priorities were not identified by the communities and where it was done, civil servants had influence, this lives a lot to be desired in carrying out priority identification by the local governments because politics also do influence the process

Table 8: Correlation results for identification of priorities and service delivery

Correlations

	-	Identification of priorities	Service delivery
Identification of priorities	Pearson Correlation	1.000	.250**
	Sig. (2-tailed)		.006
	N	119.000	119
Service delivery	Pearson Correlation	.250**	1.000
	Sig. (2-tailed)	.006	
	N	119	119.000

^{**.} Correlation is significant at the 0.01 level (2-tailed).

According to the above table, there is a significant relationship between service delivery and identification of priorities with a correlation significance level of (Sig. 0.006), implying that the relationship is positive. It indicates that strengthening or improving identification of priorities will in turn improve service delivery by 25%.

Table 9: Regression results for identification of priorities and service delivery.

Model	В	Std.error	Beta	t	Sum of	df	Mean	F	Sig.
					squares		square		
constant	2.054	275		7.456	1.983	1	1.983	7.768	.006
Identification	.264	.095	.250	2.787	29.868	117	.225		
of priorities									

a. Dependent Variable: service delivery

The Table above shows that identification of priorities accounts for a small variation in service delivery and other factors account for much of the variation as shown by a low Beta of 0.250 and does not explain well the variations in service delivery because of a low significance level of 0.006 but shows a positive relationship. This therefore calls for more research on other factors that could explain the variation well.

The model can be summarized as; service delivery =2.054 +26.4 identification of priorities. However identification of priorities is significant predictor of service delivery because t-

statistic was 2.787 which are greater than 2 and the analysis of variance yield the F-statistics of 7.768 with (1,117) degrees of freedom which are significant at .006, hence performance of service delivery is determined by identification of priorities by 95% as a rule of thumb that significant coefficient of 000 accounts for 99%, 00 accounts for 95% and 0 is 90%, (Mugenda & Mugenda, 1999).

4.3.3 Hypothesis number 3: Stakeholder participation affects service delivery

The concern of this theme was to assess the level of participation of stakeholders in service delivery. In order to answer this question, the researcher measured participation of stakeholders from different sub-counties sampled and the district staff by asking the respondents ten items.

Table 10: Descriptive results showing responses on Stakeholder Participation and service delivery

	SA		A		U		DA		SD	
	No.	%	No.	%	No.	%	No.	%	No.	%
My council has approved plan	52(43	3.7%)	53(44	1.5%)	1(0.8	3%)	7(5.9	%)	54(.29	%)
L.Gs consults the communities	11(9.	2%)	32(26	5.9%)	5(4.2	2%)	45(40	0.3%)	23(19	.3%)
A minority of stakeholders are	42(35	5.3%)	65(54	1.6%)	2(1.7	7%)	7(5.9	%)	3 (2.5	%)
invited										
The district considers opinions	28(23	3.5%)	63(52	2.9%)	1(0.8	3)	25(2)	1.0%)	2 (1.7	(%)
Plans of LLGs are a times not	28(23	3.5%)	58(48	3.7%)	1(0.8	3%)	24(20	0.2%)	5(4.29	%)
integrated										
Stakeholders are more	11(9.	2%)	49(41	.2%)	5(4.2	2%)	50(42	2.0%)	4 (3.4	·%)
committed										
Civil servants decide on the	12(10	0.1%)	38(31	.9%)	3(2.5	5%)	58(48	8.7%)	7 (5.9	%)
community										
Wider consultation is done	7(5.9	%)	12(10	0.1%)	3(2.5	5%)	77(64	4.7%)	20(16	5.8%)
Central Government	15(12	2.6%)	40(33	3.6%)	4(3.4	1%)	51(42	2.9%)	9 (7.6	5%)
determines plans										
Stakeholder participation	16(13	3.4%)	46(38	3.7%)	4(3.4	1%)	41(34	4.5%)	12(10	.1%)
enhances project										

Source: Primary data.

From the descriptive results above, 88.2 percent agreed that their councils have approved plans, 10.1percent disagreed and 0.8 percent were undecided. Asked whether communities are consulted when planning, 59.6 percent disagreed, 36.1 percent agreed, and 4.2 percent were undecided. The findings also revealed that a minority of stakeholders are called for planning meetings where 89.9 percent agreed, 8.4 percent disagreed and 1.7 percent were undecided. Asked whether the district considers opinion of her stakeholders, 76.4 percent agreed, 22.7 percent disagreed and 0.8 percent was undecided. Respondents were asked whether integration of plans was done by the higher L.G; 72.2 percent agreed, 24.4 percent disagreed and only (1 respondent) 0.8percent was undecided. On commitment of stakeholders to their decisions; 50.4 percent agreed that they were committed, 45.4 percent disagreed and 4.2 percent were undecided. Asked whether civil servants decide on the community for projects; 42 percent agreed, 54.6 percent disagreed and 2.5 percent were undecided. Respondents were also asked whether there was wider consultation before approval and implementation; 81.5 percent disagreed that this was not done, 16 percent agreed and only 2.5 percent were among the undecided respondents. On who determines what to plan; 46.2 percent agreed that it was the central government, 50.5 percent disagreed and 3.4 percent were undecided.

The research findings above indicates that the level of participation of stakeholders in service delivery in the district is low and poor as further depicted in table below.

Whereas a majority of respondents interviewed agreed on the existence of 3 Year Development Plan in their councils, a good number also accepted that there is limited participation of stakeholders during planning process though legal institutions exist through which the stakeholders can participate in service delivery. Without stakeholder input, programs will not be sensitive to emerging needs of individuals as asserted by Dale, (2000) in his study of reshaping the institutions; without including stakeholders in planning loops, citizens will be underserved by the institutions designed to serve them.

Table 11: Correlation results for stakeholder participation and service delivery

Correlations

		Stakeholder participation	Service delivery
Stakeholder participation	Pearson Correlation	1.000	.196*
	Sig. (2-tailed)		.032
	N	119.000	119
Service delivery	Pearson Correlation	.196 [*]	1.000
	Sig. (2-tailed)	.032	
	N	119	119.000

^{*.} Correlation is significant at the 0.05 level (2-tailed).

From table 11 above, there is a significant relationship between service delivery and stakeholder participation with the correlation coefficient of (Sig.0.032), though implying that the relationship is low and just struggling, it means that strengthening or improving stakeholder participation will in turn improve service delivery by only 19.6 percent.

Table 12: Regression results for stakeholder participation and service delivery.

Model	В	Std.error	Beta	t	Sum of	df	Mean	F	Sig.
					squares		square		
constant	2.199	.286		7.675	1.229	1	1.229	4.694	.032
Stakeholder	.225	.104	.196	2.167	30.622	117	.262		
participation									

a. Dependent Variable: service delivery

From the above table 12 above, there is a significant relationship between service delivery and stakeholder participation with a significant coefficient of 0.032 which implies that the relationship is low. It means that strengthening or improving stakeholder participation will in turn improve service delivery by only 32 percent and the model, from B values, may be summarized as service delivery = 2.199 + 0.225 stakeholder participation. It therefore shows a positive relationship with service delivery and stakeholder participation is a useful predictor since the t- statistic is 2.167 higher than 2 and with a favorable Beta of 0.196 and F-

statistics of 4.694. The analysis of variance as explained by sum of squares and degree of freedom suggests that service delivery varies according to stakeholder participation.

4.3.4 Hypothesis number 4: Implementation affects service delivery.

The concern of this theme was to analyze how implementation of plans affects Service delivery and the responses are summarized in the table below. The number of responses and percentages are all indicated. For easy interpretation of findings the strongly agree and agree responses were summed and strongly disagree and disagree were also added.

Table 13: Descriptive results for implementation of plans and service delivery

SA		A		U		DA		SD	
No.	%	No.	%	No.	%	No.	%	No.	%
22(18	3.5%)	54(45	.4%)	5(4.	2%)	31(26	5.1%)	7 (5.9	9%)
161(3	3.4%)	53(44	.5%)	6(5.	0%)	36(30).3%)	8(6.7	%)
7(5.9	%)	34(28	5.6%)	4(3.	4%)	49(41	1.2%)	25(2)	1.0%)
24(20).2%)	62(52	.1%)	3(2	5%)	23(19	9.3%)	6(5.0	%)
12(10	0.1%)	39(32	8%)	1(0.	8%)	49(41	1.2%)	18(1:	5.1%)
15(12	2.6%)	58(48	5.7%)	2(1.	7%)	36(30	0.3%)	8(6.7	%)
14(1)	1.8%)	71(59	0.7%)	1(0.	8%)	23(19	9.3%)	10(8.	4%)
5(4.2	%)	30(25	(.2%)	1(0.	8%)	59(49	9.6%)	24(20	0.2%)
9(7.6	%)	26(21	.8%)	3(2	5%)	57(47	7.9%)	24(20	0.2%)
9(7.6	%)	25(21	.0%)	1(0.	8%)	58(48	3.7%)	26(2	1.8%)
	No. 22(18) 161(3) 7(5.9) 24(20) 12(10) 15(12) 14(11) 5(4.2)		No. % No. 22(18.5%) 54(45) 161(3.4%) 53(44) 7(5.9%) 34(28) 24(20.2%) 62(52) 12(10.1%) 39(32) 15(12.6%) 58(48) 14(11.8%) 71(59) 5(4.2%) 30(25) 9(7.6%) 26(21)	No. % 22(18.5%) 54(45.4%) 161(3.4%) 53(44.5%) 7(5.9%) 34(28.6%) 24(20.2%) 62(52.1%) 12(10.1%) 39(32.8%) 15(12.6%) 58(48.7%) 14(11.8%) 71(59.7%) 5(4.2%) 30(25.2%) 9(7.6%) 26(21.8%)	No. % No. % No. 22(18.5%) 54(45.4%) 5(4.2%) 161(3.4%) 53(44.5%) 6(5.9%) 7(5.9%) 34(28.6%) 4(3.2%) 24(20.2%) 62(52.1%) 3(2.2%) 12(10.1%) 39(32.8%) 1(0.3%) 15(12.6%) 58(48.7%) 2(1.2%) 14(11.8%) 71(59.7%) 1(0.3%) 5(4.2%) 30(25.2%) 1(0.3%) 9(7.6%) 26(21.8%) 3(2.3%)	No. % No. % No. % 22(18.5%) 54(45.4%) 5(4.2%) 161(3.4%) 53(44.5%) 6(5.0%) 7(5.9%) 34(28.6%) 4(3.4%) 24(20.2%) 62(52.1%) 3(2.5%) 12(10.1%) 39(32.8%) 1(0.8%) 15(12.6%) 58(48.7%) 2(1.7%) 14(11.8%) 71(59.7%) 1(0.8%) 5(4.2%) 30(25.2%) 1(0.8%) 9(7.6%) 26(21.8%) 3(2.5%)	No. % No. % No. 22(18.5%) 54(45.4%) 5(4.2%) 31(26) 161(3.4%) 53(44.5%) 6(5.0%) 36(30) 7(5.9%) 34(28.6%) 4(3.4%) 49(41) 24(20.2%) 62(52.1%) 3(2.5%) 23(19) 12(10.1%) 39(32.8%) 1(0.8%) 49(41) 15(12.6%) 58(48.7%) 2(1.7%) 36(30) 14(11.8%) 71(59.7%) 1(0.8%) 23(19) 5(4.2%) 30(25.2%) 1(0.8%) 59(49) 9(7.6%) 26(21.8%) 3(2.5%) 57(47)	No. % No. % No. % 22(18.5%) 54(45.4%) 5(4.2%) 31(26.1%) 161(3.4%) 53(44.5%) 6(5.0%) 36(30.3%) 7(5.9%) 34(28.6%) 4(3.4%) 49(41.2%) 24(20.2%) 62(52.1%) 3(2.5%) 23(19.3%) 12(10.1%) 39(32.8%) 1(0.8%) 49(41.2%) 15(12.6%) 58(48.7%) 2(1.7%) 36(30.3%) 14(11.8%) 71(59.7%) 1(0.8%) 23(19.3%) 5(4.2%) 30(25.2%) 1(0.8%) 59(49.6%) 9(7.6%) 26(21.8%) 3(2.5%) 57(47.9%)	No. % No. % No. % No. 22(18.5%) 54(45.4%) 5(4.2%) 31(26.1%) 7 (5.9%) 161(3.4%) 53(44.5%) 6(5.0%) 36(30.3%) 8(6.7 7(5.9%) 34(28.6%) 4(3.4%) 49(41.2%) 25(2.2%) 24(20.2%) 62(52.1%) 3(2.5%) 23(19.3%) 6(5.0%) 12(10.1%) 39(32.8%) 1(0.8%) 49(41.2%) 18(1.2%) 15(12.6%) 58(48.7%) 2(1.7%) 36(30.3%) 8(6.7 14(11.8%) 71(59.7%) 1(0.8%) 23(19.3%) 10(8.2%) 5(4.2%) 30(25.2%) 1(0.8%) 59(49.6%) 24(20.2%) 9(7.6%) 26(21.8%) 3(2.5%) 57(47.9%) 24(20.2%)

Source: Primary data.

Asked whether implementation of plans was done at all levels of service provision, (76) of 63.9 percent agreed that it was done, (38) of 32 percent disagreed and (5) of 4.2 percent were

undecided. Where as 57.9 percent agreed that local governments have clear implementation guidelines, 37 percent disagreed and 5 percent were undecided. On realization of plans; 62.2 percent disagreed that they were not realized, 34.5 percent agreed and 3.4 percent were undecided. On the issue of equitable distribution of services; 68.1 percent disagreed that services were not equitably distributed, 29.5 percent agreed and 2.5 percent were undecided. Opinions were also thought on quality of services; (83 respondents) 69.8 percent disagreed that this had not improved, (35) 29.4 percent agreed and (1) 0.8 percent was undecided. Respondents were also asked whether there was political will in implementation of activities; (84) 70.5 percent disagreed, (34) 28.6 percent agreed and (1) 0.8 percent was undecided. Details of the findings are depicted in table 13 above from the questionnaires.

Table 14: Correlation results for implementation of plans and service delivery

Correlations

	-	implementation	Service delivery
Implementation	Pearson Correlation	1.000	.373**
	Sig. (2-tailed)		.000
	N	119.000	119
Service delivery	Pearson Correlation	.373**	1.000
	Sig. (2-tailed)	.000	
	N	119	119.000

^{**.} Correlation is significant at the 0.01 level (2-tailed).

The correlation table 14 above displays Pearson correlation coefficients, significance values, and the number of cases correlated. Pearson correlation coefficients assume the data are normally distributed and there is a significant relationship between service delivery and implementation with a coefficient of determination of 0.373** (sig. 0.000), implying that the relationship is high and gives a direction. It implies that strengthening or improving implementation will in turn improve service delivery by 37.3%.

Table 15: Regression results for implementation of plans and service delivery.

Model	В	Std.error	Beta	t	Sum of	df	Mean	F	Sig.
					squares		square		
constant	1.946	204		9.529	1.229	1	1.229	4.694	.000
Implementation	.286	.066	.373	4.342	30.622	117	.262		

a. Dependent Variable: service delivery

The unstandardized coefficients are the coefficients of the estimated regression model and the estimated model is service delivery = 1.946 + 0.286 implementation as donated by B. It therefore shows that implementation is a good predictor of service delivery and strengthening or improving implementation will significantly improve service delivery in local governments by 37.3 percent as shown by the Beta values of .373.

The regression analysis above indicates that implementation accounts for t-statistic of 4.342 which is greater than 2 and has significance of 0.000 and there fore shows appositive relationship with service delivery. It means that service delivery varies according to implementation as indicated by favorable mean square values and F-statistic values of 1.229 and 4.694 respectively.

Table 16: Descriptive results for service delivery

Item in percentages	SA		A		U		DA		SD	
	No.	%	No.	%	No.	%	No.	%	No.	%
There is political influence in	24(20	0.2%)	60(50	0.4%)	6(5.0)%)	27(22	.1%)	2 (1.7	7%)
execution										
Drugs and workers are	4 (3.4	4%)	21(17	7.6%)	1(0.8	3%)	73(61	.3%)	19(16	5.0%)
available										
Service provision in education	3(2.5	%)	28(23	3.5%)	9(7.0	5%)	65(54	.6%)	14(11	1.8%)
sector has improved										
Roads are well maintained in	5(4.2	%)	28(23	3.5%)	2(1.7	7%)	68(57	(.1%)	16(13	3.4%)
the district										
Agricultural services have	13(10	0.9%)	38(31	.9%)	(1 0.	8%	53(44	.5%)	14(11	1.8%)
improved										
Most communities access water	12(10	0.1%)	49(41	.2%)	1(0.8	3%)	46(38	5.7%)	11(9.	2%)
Official procedures delay	19(10	5.0%)	48(40	0.3%)	5(4.2	2%)	41(34	.5%)	4 (3.5	5%)
approval										
Payment of council allowances	28(23	3.5%)	67(56	5.3%)	3(2.5	5%)	20(16	5.8%)	1 (0.8	3%)
delay approval										
Inter-sect oral collaboration is	16(13	3.4%)	47(39	0.5%)	3(2.5	5%)	39(32	8%)	13(10).9%)
effective										

Source: primary data

From the table above, a majority of the respondents disagreed significantly on health, education, roads, agriculture except water which a majority agrees to have improved as can also be reflected clearly on table above that shows the number of responses and their percentages. A few respondents were undecided on the performance. The variations of feelings on performance show that there is a relationship between service delivery and decentralized planning. Politicians were said to actively influence the execution of activities especially where resources should go some times not where the services are most needed. In decentralization where 'power' is given back to the people, political influence is considered an important aspect in influencing the implementation of service delivery. It was also agreed

that payment of council allowances delays the approval and therefore subsequent implementation of the activities. It was observed that councilors would not sit to approve plans if payment of their allowances is not clear. Intersect oral collaboration with other sectors is said to increase service delivery, from the above table, 52.9 percent agreed that this was done, however, the 43.7 percent responses can not be undermined because assessment of the planning minutes revealed that each sector does their own thing especially with the introduction of LGDP and PMA grants. Intersect oral collaboration is not favored. Ideally these grants would encourage different sectors to come together and plan which would foster intersect oral collaboration for effective service delivery, this is however different in Soroti district.

Respondents were also asked to mention major limitations associated with service provision in the district, table 17 below summarizes these responses.

Table 17: Limitations to Service Delivery

1tem	frequency	percentages
Limited funding	39	32.8%
Not all stakeholders are involved	27	22.7%
Poor collaboration	9	7.6%
Bottom up planning not followed	18	15.1%
Low capacity to plan for services	9	7.6%
Poor feed back mechanism	9	7.6%
Changes in guidelines	6	5%

The table 17 above shows that the majority of respondents named limited finances as limitations associated with district service delivery, followed by non involvement of all stakeholders. Limited finances is said to act as a demoralizing factor for the individuals involved in developing the plans and later implementing the planned activities. This is especially true when activities included in the plans are not implemented due to lack of sufficient funds.

Respondents were also asked for solutions to the limitations and the table 18 below summarizes these suggestions.

Table 18: Suggestions to limitations

item	frequency	percentages
Increased funding	31	26.1%
Involve all stakeholders	25	21%
Harmonize plans	13	10.9%
Follow bottom up planning	25	21%
Capacity building	9	7.6%
Ensure feed back	9	7.6%
Sensitization of Communities	7	5.9%

The above table 18 displays respondents' thoughts as to how best to improve service delivery process. Findings indicate that the majority of the respondents interviewed, 26% suggested increased funding and the least was sensitization of the community.

4.3.5 Qualitative findings

Guided interviews were conducted in parishes and wards with parish local council executive committee members who included those responsible for youth, women, and disability, the chairpersons PDCs and the parish chiefs. The purpose of the interview was to determine the extent to which those stakeholders participate in decentralized planning and service delivery. Questions were asked for each of the variables stated, responses gathered and content analysis was applied. Responses were grouped, categorized and codes developed for similarities and differences. Descriptive frequencies were run and results are summarized in the table 19 below.

4.3.5.1 Goal setting affects service delivery

Table 19: Qualitative Results for goal setting

Item	response	No. of	%
		responses	
Do you attend planning meetings?	Yes	12	31.6
	No	24	63.2
Why don't you attend meetings?	Not organized	16	42.1
	Not informed	8	21.1
	Lack of interest	4	10.5
	Lack of time	3	7.9
	No meetings ever	5	13.2
Does your council set targets?	never	10	26.3
	sometime	19	50
	always	7	18.4

Respondents were asked whether they attend planning meetings, 31.6% said they do attend while 63.2% responded that they don't reason that meetings were not organized as was indicated by 42.1% and not informed represented by 21.1%. On whether councils set targets when planning for services, 50% said that sometimes they do set targets as primary guide for effective service delivery, 26% said they never set these targets and 18.4% responded that they always set targets.

4.3.5.2 Identification of priorities affects service delivery

Table 20: Qualitative Results for Identification of Priorities

Item	Responses	No of	%
		responses	
How often are parish meetings held?	Once a year	19	50
	Once a month	4	10.5
	Quarterly	1	2.6
	Never at all	11	28.9
	I don't know	1	2.6

From the above table, 50% of the respondents indicated that planning meetings at this level were organized once in a year, and 28% said meetings were never organized.

Lower local governments are required to hold planning meetings to discuss their priorities in the different sectors for both recurrent and development activities hence if these meetings are not held, then the real needs of the communities are not identified.

4.3.5.3 Stakeholder participation affects service delivery

Table 21: Qualitative results for stake holder Participation

Item	Responses	No. of	%
		responses	
Does your council have a development plan?	Yes	14	36.8%
	No	22	57.9%
Who is involved in making of these plans?	Parish chiefs	14	36.8%
	PDCs	8	21.1%
	Executive	5	13.2%
	Community	4	10.5%
	All above	5	13.2%
Do all stakeholders participate?	Never	18	47.4%
	Sometimes	9	23.7%
	often	4	10.3%
	always	5	13.2%

From the findings above, respondents were asked whether their councils have development plans, only 36.8% said they do have and 57.9% responded that their councils do not have plans. Asked who was responsible for making these plans, a bigger percentage indicated that it was the parish chiefs' with 36.8% followed by 21.1% for the PDCs and the least was 10.5% by the community. To find out the participation of stakeholders in service delivery, respondents were asked to state whether they really participate; 47.4% said they never participate in the planning of services, 23.7% said that they do participate sometimes, 10.3%

indicated that they often participate and 13.2% said they do it always. The research findings above indicate that, the level of participation of stakeholders in service delivery in the district is low and poor. This implies that decisions are decided by civil servants and executive committee on behalf of the community. Which is not a guarantee that the interest of both the majority and the minority will be represented?

4.3.5.4 Implementation affects service delivery

Table 22: Qualitative results for Implementation

item	responses	frequency	%
How do you rate the implementation?	V. good	1	2.6%
	Good	7	18.4%
	Fair	13	34.2%
	Bad	8	21.1%
	Very bad	7	18.4%
Could you mention 5 projects implemented	Water	15	39.5%
	Roads	3	7.9%
	Agric	8	21.1%
	Education	4	10.5%
	Health	6	15.8%
Are projects equitably distributed?	Never	23	60.5%
	Sometimes	4	10.5%
	Always	2	5.3%
	Don't know	7	18.4%

From the table above, 20.6% rated the implementation of activities as good, 34.2% said it was fair and 39.5% indicated that it was bad. Asked to mention 5 projects implemented; 39.5% indicated water projects followed by agric with 21.1% and the least was roads with 7.9%. On equitable distribution of services 60.5% indicated that services are never equally distributed and only 5.3% said it's always equitably distributed.

Focus Group Discussion (FGD)

Focus group participants included L.CI executives and beneficiaries of service /community members. Seven focus group discussions were conducted per parish each with six participants and a total of 28 Focus Group Discussions were conducted across the four selected sub counties /wards. The focus group was designed to elicit the participants' impression of current system of service delivery. The protocol contained the same questions at each time point.

Data: the focus group data indicated the following; local councils at the village level were operational. They are always involved in settling disputes. Planning meetings are held once a year or not at all. Weak planning process and absence of clear guidelines and consultations affects service provision. Planning for services is done by the parish chiefs, PDCs and elected councilors/ representatives of the people. Local government and the people themselves should prioritize for services. But there is need to empower people to undertake planning and setting of priorities and to increase participation of stakeholders in decision making. Inadequate information- the flow of information is not the best, lower local council leaders need to travel to sub county/division/district for information and directives as to what to do. Structures are constructed but not operational-no health workers and drugs. Resources are insufficient to implement planned activities. Needs of different target groups are not adequately met by the services offered. Let government ensure that programs reach the common person in the village.

4.3.6 Hypotheses testing

The model service delivery = 1.090 + 0.413 goal setting + 0.264 identification of priorities + 0.225 stakeholder participation + 0.286 implementation has shown that there is a positive relationship between service delivery. It also shows the magnitude of the contribution of goal setting, identification of priorities, stakeholder participation ad implementation to service delivery.

The researcher failed to reject the hypotheses of the study and reliably conclude on the presence of the relationships between goal setting, identification of priorities, stakeholder participation and implementation.

It must also be noted that goal setting is the main variable that determined service delivery followed by implementation with the least being stakeholder participation. It is therefore important to strengthen implementation and goal setting in order to improve service delivery in local governments.

CHAPTER FIVE

SUMMARY, DISCUSSIONS, CONCLUSIONS AND RECOMMENDATIONS

5.0 Introduction

The purpose of the study was to examine the extent to which decentralized planning affects service delivery in local government systems using Soroti District as a case study. This chapter presents summary of the findings, discussions, conclusions and recommendations.

5.1 Summary

This dissertation outlines the research work that has been completed in 3 rural sub counties and one urban division of Soroti district regarding decentralized planning and its effects on service delivery. Decentralized planning was considered as the predictor variable (Independent) while service delivery constituted the dependent variable.

The conceptual framework in chapter one was defined by the rational comprehensive planning theory advanced by Gunton and Hodge in 1960, Augustee Comte, 1857. The theory requires exhaustive information gathering and analysis. It stresses the public interest, information and analysis, which allows planners to identify the best possible course of action. Four objectives were formulated to guide the study and corresponding research questions and hypotheses were formulated as presented in chapter one. The study answered four research questions and findings presented in chapter four indicate that; planning is done without setting targets (goals) which are a primary guide for effective service delivery, real needs of the communities are not identified, participation of various stakeholders was minimal and implementation of public service was unsatisfactory.

In chapter two of this study, the theoretical and conceptual reviews were presented based on the themes that were generated from the objectives of the study. In chapter three, the methodology was presented and a case study design was adopted. In chapter four, the results were presented, discussed and analyzed starting with the demographic results and followed by empirical findings obtained from regression analysis. In chapter five, the summary, discussion, conclusion and recommendations are addressed and the same chapter will presents the contribution of the study to the body of knowledge within the limitations of the study and further suggests areas of more research.

5.2 Discussions

5.2.1 Goal setting affects service delivery

Under this research objective, the study was interested in establishing whether goal setting affects service delivery in Soroti Local Government. The results that have been presented in chapter four indicated that there was a significant relationship with relevance of (R squared = 0.415 sig. = 0.000). this implies that improving goal setting will in turn improve service delivery by 41.5%, as Guba & Lincoln, (1989); asserts thus; goal setting plays an important role in shaping the outcomes. Menu of specific goals must be drawn up to achieve the intended objectives. Detailed operational plans must be drawn up to achieve these goals. This has been the most neglected and deficient area of our planning process. A plan is not just a fine document of intent but a series of steps to implement it in a coordinated and effective manner and it begins with goal setting, (Virmani, 2007).

The findings confirms that of Kendall,(2000) in his study of community based services, when he explained that goals are a primary guide for service delivery, facilitating the planning and implementation of appropriate rehabilitation services and community supports to meet the unique needs and interests of each person in their community. And that of Locke, (2002) when he examined the behavioral effect of goal setting; concluded that 90% of laboratory and field studies involving specific and challenging goals led to higher performance than easy or no goals. And therefore are in agreement with the literature reviewed.

In the findings in chapter four further, percentages or frequency of relationship was 0.415 in other wards among all respondents interviewed, at least 41.5% said goal setting is important for service delivery improvement and therefore local governments must ensure that

decentralized planning moves toward meeting this objective if service delivery in districts is to be improved.

5.2.2 Identification of priorities affects service delivery.

It was reported in chapter four that there was a significant relationship between service delivery and identification of priorities with a coefficient of .250** implying the relationship does exists. It implies that strengthening or improving identification of priority will in turn improve service delivery by only 25%. The findings clearly indicate that real needs of the communities are not identified. Also results of the interviews indicated that half of the case respondents were not in line with the priorities of their communities, as one PDC chairperson of Nakatunya ward asserts thus;

'Every year our identified priorities are rolled over not implemented, so identifying more is a waste of time, we are not facilitated to plan therefore we don't even call for planning meetings'. This shows that a truly participatory bottom- up and cross-sector planning system for service delivery left a lot to be desired, primarily because there were not enough resources available, planning meetings were reported to have been organized once a year or never at all as was reported by 50% and 28.9% of the respondents interviewed. The study also found out that in the Town council, priorities set by the cells/ wards are not implemented. An executive committee member from Maliga cell, western division observed that;

The town council provides what is not our priority, the concern of the cell was a road rehabilitated to serve both the community and pupils but instead benches for primary schools were bought".

When stakeholders are asked to participate in priority setting, a greater understanding between groups may result, (Mathie & Greene, 1997), thus soliciting peoples' inputs into priority setting can greatly contribute to improve service delivery that genuinely serves

community needs. However, according to respondents interviewed in Opuure parish, Atiira Sub County, the findings indicated that priorities were grass root generated. In other wards, there was participation of the people at the local level who identify deserving issues and address this to local government. This is done through village planning meetings, and deliberations are held on priorities, which change from year to year as was evident from the planning minutes and it's contrary to what is done in the town council.

This finding compares well with the revised PEAP, (2000) which indicated that improving the planning process both in terms of its linkages with the national budget but also in terms of how well it responds to local needs remained a challenge because real needs are not identified. The stark reality is that what services may be delivered may not tally with what the community wants/ needs and the community members are quick to complain about disparities in program implementation. In Maliga cell- Western Division for example, it emerged that the community's agenda as shaped by the people is only met as a matter of coincidence if its concerns fall within predetermined town council's priorities. This makes the people subsequently reluctant to participate in identifying priority areas in planning process. This therefore implies that when services provided fail to reflect the priorities of lower levels, communities will find if hard to hold their representatives accountable and therefore inefficiency in service provision results.

5.2.3 Stakeholder participation and service delivery.

In this study it was found out that participation of stakeholders in the service delivery process was minimum and this findings confirms well with the existing literature as; Hiroshi Kato, (2008), puts it; even if residents have a thorough knowledge of matters close to them, they have no knowledge of their broader matters outside the world a round them, or of more sophisticated technical matters. He adds that , impoverished residence are completely occupied with just leading their day- to- day lives, and they are either indifferent to broader

distant matters, or they do not have the time to attend meetings. what the findings suggest is, although planning responsibility has shifted from the centre to districts, the degree of stakeholder engagement and participation especially L.Gs, NGO, and the communities has not changed significantly.

The interview findings indicated that, despite the existence of operational local executive committee which handles civil cases and enforce self help programs, participation of the majority of the village residents in planning for services for their area is minimal. Village council meetings were reported to be held once a year and in some cases not at all and where they were held, very poor turns up of residents for those meetings were registered. The L.C I of Akisim village Dokolo parish Gweri Sub County lamented that;

'We no longer mobilize the community for planning meetings because 25% of the local revenue is not given to us,' these people' when they come also want some money.'

'In the division, sitting allowances encourages most stakeholders to go for planning meetings'. Explained one PDC member of Malinga ward.

The study also established that the lower local governments plan for the people without consultations; the PDC chairperson of Otatai parish Asuret sub country during an interview with the researcher stated that;

'At the parish leve, l the parish chief and his committee sit and develop a parish development plan and quite often do not involve the entire membership of the village'.

The findings clearly showed that plans for service delivery were developed by the parish chiefs, PDCs and executive committee as indicated by 36.8%, 21.1% and 13.2% respectively compared to 10.5% who said that it was the community.

The women and youth council representatives complained of not being involved in the planning for services and are in most cases neglected in development programs in the community.

'We only see projects being implemented for women but there are no women in the group'.

Lamented a woman leader in Opuure parish Atiira Sub County.

"Civil servants have never come to discuss with us about our problems/ needs, we only hear them talk on radio but they do even nothing," Commented one PDC chairperson of Dokolo parish Gweri Sub County.

The research found evidence of some degree of stakeholder participation in Atiira Sub County where one elder of Adipala- agule village Opuure parish reported that;

"we often hold planning meetings though the attendance is poor, at least planning is conducted at village level".

But a review of the planning minutes indicated that a majority of the stakeholders never participated in the planning process which is a setback in the decentralized planning of services. The general opinion was that there has been significant increase in control and participation in the district through LGDP program in rural sub counties compared to the urban divisions. The LGDP program is designed to promote planning and implementation capacities at all levels of local government and to involve the whole community in scheme selection and prioritization. However stakeholders interviewed pointed out that despite positive signs about participatory planning of activities; the planning process is overly dominated and monopolized by local government officials.

The research findings therefore established the fact that stakeholder participation in decentralized planning for services at village/ cell level is for the few leaders and elites but not the majority. This findings confirms that of Hollstein, (1976:8), in her first mode of participation, where she defined it to involve only the educated leaders, and the elites without the participation of the "grassroots" / beneficiaries. And that of Conyers (1990:18) that decentralization can increase participation of the people at local level but some times it is only a small privileged elite group that participates.

The challenge is to identify the conditions under which increased participation in local governments is conducive to enhanced outputs in terms of the equity, quality and efficiency of services. This may require further comparative research which was beyond the limits of this research.

The interviews further from the parishes expressed a contrary view, explained that stakeholders don't participate because they are not invited to attend these planning meetings where various sector projects are generated and this was represented by 21.1% of the respondents. It is evident that when institutions for local participation and control have been created, it is rare for significant powers to be devolved to them as noted by Smith, (1985). He further points out that plans are formulated centrally. Administrators dominate representative institutions. Participation has been an instrument to instruct, guide and legitimize rather than to locate decision making powers in the hands of local people. This argument is in line with Kiberus' (2001) findings in his study on participation where he noted that, no consultative meetings are held at the village /cell levels to consult them on their priority programs. Participation in service delivery is by and large through people's representatives. The above findings, was evident to prove that participation had not enhanced efficient and effective service delivery in local governments because of poor involvement of the stakeholders in the process.

The Local Government Budget Framework Paper (LGBFP) also provides an opportunity for grassroots participation through the preparatory processes held at the village council levels upwards through the parish, sub county and district council. At the budget conferences, individual NGOs and CSOs are eligible to attend – in practice, a high non – attendance rate is often registered due to a lack of adequate information and timely publishing of these important processes, (Nyirinkindi, 2007). Participation of stakeholders was reported as sometimes been compromised by technocrats in the prioritization of development plans who hijack the opportunity for inclusion and bottom up planning of services. The findings indicate

that, there was lack of inputs from all stakeholders. The process was not embracing and a majority of the stakeholders were left out. The main challenge limiting stakeholder participation was sited to be limited funds to enable all stakeholders participate in decentralized planning process.

From the above findings, it is important to note that when local governments neglect gathering arrange of stakeholders inputs, they put themselves at risk in several ways, one without stakeholder inputs programs will not be sensitive to emerging needs, two, communities will be under served and thirdly, local governments will risk losing community support.

5.2.4 Implementation affects service delivery

As described in chapter four, the findings indicate that implementation of public services was unsatisfactory. The major challenge raised by a number of the respondents interviewed was inadequate funds to implement the planned projects and these finding agrees with the stated literature when (Steven, 2002) asserts that;

Planning and implementation remain ineffective and central government dictates activity through operation condition grants. Accordingly, the LGA (Local Government Act 2007) provided the frame work for an implementation strategy that designated and gave effect to local authorities to become the primary service providers in their various localities. The poverty action fund (PAF) began in 1997 also geared towards implementing services by the local governments in the areas of primary education, agriculture, roads, primary health care, water and sanitation. But the findings of this study still indicate that these services have not improved.

A majority disagreed significantly on health, education, roads, agriculture except water which a majority agrees to have improved as reflected in chapter four. The interview responses rated implementation of activities as good 20.65%, fair 34.2% and bad 39.5% and

39.5% respectively also indicated that water services were fairly provided compared to roads that was represented by only 7.9%.

Criticism of district implementation has been that 3 year plans exist only on paper and bear little relation to what happens on the ground. Though this criticism is exaggerated and ignores the limits that the Local Government Act (2001 amended) places on various arms and levels of government, it has an element of truth in it. This is the failure to develop, approve and implement the operational plans before the financial allocations are made/released/spent. . Findings indicate further that out of 36 interviews conducted, 26% suggested increased funding. This finding confirms with the literature reviewed; when (Robinson, 2003) affirms thus; resources have not been adequate to ensure effective coverage and quality. Decentralized planning, its ideal verses service delivery, the question is how should crosssector and across – the board participatory community development plans that emerge from the village be integrated with sector plans that are vertically formulated for each sector at the district level? Careful examination is needed as well in harmonization of respective sector plans in service delivery process. There is a problem of resistance from each sector against it. On the other hand, there is a more fundamental question as to whether it is really feasible and effective to do so in the first place. Sectors can not make their plans on the basis of the wishes of the public alone, but technical analyses as well as strategic perspectives of each sector are indispensable even for the local service delivery.

There is also a problem of the inconsistency of the development projects planned and implemented in a participatory manner, for example, there were cases observed in Asuret and Atiira sub counties where schools or dispensaries were built but no arrangements have been made for the assignment of teachers or medical staff to work there. Considerations must also be given to consistency if service delivery is to be improved.

5.3 Conclusions

This research has raised a number of issues about the extent to which decentralized planning affects service delivery in local governments.

Based on the research findings, the following conclusions were drawn.

5.3.1 Goal setting affects service delivery

Goal setting plays an important role in shaping the outcomes, setting goals and reviewing them periodically is a comprehensive and efficient way of improving service delivery in local governments. Goals enhance self regulation through their effects on motivation and self evaluation.

5.3.2 Identification of priorities affects service delivery

Local governments have been known to undertake planning in isolation of their communities and these reduces the logic of bottom up planning and the identification of development programs by the targeted beneficiaries. Identification of priorities and the gaps that exist between what is desired and the prevailing situation is the responsibility of communities.

5.3.3 Stakeholders participation affects service delivery

For service delivery to be successful, participation of stakeholders is important at all levels of local government. Without their input, programs will not be sensitive to the emerging needs and ownership of such services will be lost. But the basic problem in service delivery is achieving the maximum feasible degree of grassroots participation within the formal systems of local public sector planning.

5.3.4 Implementation affects service delivery

This study has argued that service delivery has not been conceptualized clearly neither has the manner of implementation; through sub county / district level plans. This study has learnt that decentralized planning seeks to achieve multiple goals that have the tendency to generate conflicts and disagreements over implementation of decisions among stakeholders at the district level. The question is, whether or not decentralized planning leads to better service delivery and more efficiency is debated.

5.4 RECOMMENDATIONS

This section presents recommendations based on the research findings of the study.

5.4.1 Goal setting affects service delivery

The study recommends that a national goal of improving service delivery outcomes may be achieved by increasing capacity of the lower local governments while simultaneously putting the onus on all concern to carry out their constitutional responsibilities for service provision therefore; detailed operational plans must be drawn up to achieve these goals which will subsequently improve service delivery in local governments.

5.4.2 Identification of priorities affects service delivery

Plans should be made more relevant to local needs through needs assessment and resource allocation. Local governments should reach out the community and solicit a dialogue with respect to major decisions and actions for local service delivery.

5.4.3 Stakeholder participation affects service delivery

Effective citizen participation presupposes an informed citizenry of public policies and how they relate to their diversified circumstances. Appropriate strategies must be designed by local government to enable all stakeholders participate in planning process, the more stakeholders participate in the planning process, the more collectively they own the ultimate product of the process. Local governments need to be supported and where need be facilitated to organize communities for effective participation in identification of needs and priorities so as to provide appropriate supportive service.

5.4.4 Implementation affects service delivery

There is need to establish understanding on how L.G political and administrative structures can better support the implementation of service delivery. However

Implementers need to take in to consideration the associated management development processes that need to be promoted at both local and central levels so as to minimize resistance to services provided, specifically the adoption of a 'participative and management-skill-led a approach' is fundamental for successful implementation of services

The capacity of local government officials to engage in service delivery must be greatly boosted, especially in harmonizing and integrating of the many guidelines. Guidelines issued to L.G by central ministries and agencies are not sufficiently harmonized. Local governments should develop awareness and information dissemination mechanism in user friendly forms and avail these regularly in order to build the capacity of communities to engage in decentralized planning process. Local governments must seek various motivational factors for local government officials especially those at the parish and village levels. Intersect oral collaboration must be fostered for maximizing synergies with sectors whose activities contribute to improved service delivery, and lastly while service delivery remains the ultimate goal, both quantity and quality specifications and standards of service delivery should be improved greatly, in other wards, for decentralized planning to have a positive impact on service delivery, the focus should be on local choice in which local governments could transfer finances of local priorities. The application of these recommendations will see service delivery improvements in local governments.

Suggestions for further research

The researcher proposes that further research should be carried out in decentralized planning process. A comprehensive evaluation of lower local governments and their effectiveness in service delivery should be done. Its effectiveness would then be established and gaps that exist particularly as regards the issues highlighted in this research such as limited funds, low capacity to plan could be addressed. Other area of research should be the link between decentralized planning, improved local governance and service delivery, more so on the same topic including those factors that contributed to the higher residual value.

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Appendix 1

Soroti District L.G P.o Box 61, Soroti - Uganda

Questionnaire for general respondents

Dear respondents

This is a researcher leading to the ward of a master's degree in public administration and management of UMI.

The purpose of this study is to investigate the extent to which decentralized planning affects service delivery in Soroti local government system.

You are kindly requested to feel free and express your opinion on each of the issues raised as objectively as possible.

The information that you will provide will be treated with utmost confidentiality and under no circumstance will it be personalized. The basic research ethics are to be observed and adhered to.

Your positive and quick response will be highly appreciated.

Thank you.

AKIROR JANE (masters candidate)

SECTION A: background information (data about respondents)

In this section of the questionnaire, please tick or mark the response you feel is most appropriate

Age

- 1. Below 20 years
- 2. 21-30 years
- 3. 31-40 years
- 4. 41-50 years
- 5. 51-60 years
- 6. above 61 years

Sex

- 1. Male
- 2. Female

Level of education attained

- 1. Never went to school
- 2. Primary
- 3. Secondary
- 4. Post secondary
- 5. Post graduate
- 6. Others (specify)

What management position do you hold in your organization?

- 1. Councilor
- 2. Civil servant
- 3. Chairperson
- 4. Elder
- 5. Ordinary citizen
- 6. Others (specify)

Duration of service/ employment with the organization you represent (tick)

- 1. Less than 1 year
- 2. Between 1-2 years
- 3. More than 2 years

In this section B, you are requested to objectively express your opinion in regard to the extent to which decentralized planning affects on service delivery

Thematic areas are being considered, please simply tick

Scale: 1 = strongly agree, 2 = agree, 3 = undecided, 4 = disagree, 5 = strongly disagree

SECTION B goal setting	1	2	3	4	5
1. Soroti District is said to be operating on written and clear mission					
statement					
2. Soroti district has its mission statement known to all her stakeholders					
3. It is easy to interpret the district mission statement					
4. Goals set are said to be responsive to community needs					
5. Guidelines influences the process of goal setting					
6. Goals and strategy are clearly understood inside and outside my					
organization					
7. Feed back to communities is important for proper goal setting					
8. Resources limit goal setting					
9. Goals set are linked to situational constraints					
10. Soroti district formulates realistic plans to better service delivery					
SECTION C: Identification of priorities					
1. Identification of priorities is done at the village level					
2. Community is aware of the predefined list of priorities in their area					
3. Cost and time determines the priorities to be identified					
4. There is influence by the top civil servants during decision making					
process					
5. Priorities identified meet the real need of the consumer/ stake holder					
6. Priorities of the communities are harmonized by the LG					
7. Plan formulation is subject to guidelines					
8. L.G some times plans outside central government priority areas					
9. Politics influences priorities to be identified					
10. Given chance local governments would rather not plan					
SECTION D: stakeholder participation					
1. My council has approved 3 year development plan					
2. The LG consults the communities when planning					
3. A minority of stakeholders are usually called for planning meetings					
4. The district considers opinions of its stake holders					
5. Plans of lower local governments are a times not integrated in to a					
higher LG plan					
6. Stakeholders are more committed to their decisions when involved in					

bottom up planning		
7. Civil servants decide on the community for projects		
8. Wider consultation with other stakeholders is always done before		
approval and implementation		
9. Central government determines what to plan		
10. Participation of stakeholders in planning and decision making enhances		
their ownership of district plans		
SECTION E: Implementation		
1. The implementation of plans is at all levels of service delivery		
2.Local governments have a clear implementation plan		
3. Local development plans are always realized		
4. Plan integration promotes implementation of district plans		
5. The council puts its peoples interest above everything else		
6. The district a ways follows the guidelines governing the implementation		
of projects irrespective of evidence on the ground		
7. Bottom up planning leads to increased access to basic social services		
8. Quality of services in soroti local government have improved for the last		
3 years		
9. My organization equitably distributes public services when		
implementing		
10. There is a high political will in implementation of activities		
SECTION F: efficiency		
1. In my opinion implementers do the assigned work well		
2.Decentralised planning has led to timely delivery of services		
3. Decentralized planning has improved the cost of services delivered		
4. There is political influence in execution of local government activities		
5. Drugs and workers are readily available at health centers		
6. Service provision in education sector has improved for the last 3 years		
7. Roads in the district are constructed and well maintained for		
accessibility by all		
8. Agricultural extension services has improved the lives of the		
communities in the last 3 years		
9. most communities access clean and safe drinking water in the district		
10. Public services in the district are not well handled by all stakeholders		

SECTION G: Effectiveness			
1. Official procedures delays approval of he 3 years development plans			
2. Plans of local government are linked to guidelines for effectiveness			
3. Payment of council allowances delays the approval of the plans			
4. The local government trusts the competences of its employees			
5. Intersect oral collaboration during the planning process is effectively			
done			

In this part of the questionnaire please, give your opinion on the following questions;

1. Are there limitations associated with the local government planning/ service delivery process? Yes/No
2. Please support your answer by citing three limitations above
3. What should be done to improve the planning / service delivery process in local governments?
4. In your opinion, what do you say about the effects of decentralized planning on service delivery in Soroti district?

Thank you very much for your time

Appendix 2 Topic guide for FGD

The purpose of this activity is to allow the participants explore their knowledge about decentralized planning and service delivery.

Discussion groups of not more than 6 participants will be established and each will be required to discuss what they know about decentralized planning.

Specific materials such as flip chats, makers, note books and masking tape will be provided for the activity.

Group Questions

- 1. Are Local Councils at the village level operational?
- 2. What is the evidence that they are operational?
- 3. Do they hold regular planning meetings? If Yes how regular
- 4. How do people plan for government services in this area?
- 5. According to you, who should priorities for the activities / services provided?
- 6. Is there a feed back mechanism from district, sub- County /Town council to parish /wards, village / zone and vice versa.
- 7. Are there benefits arising from peoples participation in service delivery process?
- 8. What is your recommendation for better services delivery?
- 9. Do you have the following service in your area?
 - Health services
 - Primary schools
 - Accessible roads
 - Agricultural services
 - Water sources
- 10. How were the above facilities obtained and who manages them?

Thank you for your time.

APPENDIX 3

INTERVIEW GUIDE FOR PARISH RESPONDENTS

- 1. What management position do you hold in this community?
 - 1. Councilor
 - 2. PDC member
 - 3. Elder
 - 4. Technical staff
 - 5. Chairperson L.CII
- 2. Are you a member of the parish council? Yes/ No.
- **3**. If yes in question (2) above, do you attend council meetings?
- 4. If no in question (2) above, why don't you attend meetings?
 - 1. Meetings not organized due to lack of funds.
 - 2. Not informed
 - 3. Lack of interest
 - 4. Lack of time to attend meetings
 - 5 .No meetings ever organised.
- 5. Does your council have a development plan? Yes/ No
- 6. If yes, who is involved in making of these plans?
 - 1. Parish chief
 - 2. PDCs
 - 3. Executive committee
 - 4. The community
 - 5. All the above
- 7. How often are parish meetings held?
 - 1. Once a year
 - 2. Once a month
 - 3. Quarterly
 - 4. Never at all
 - 5. I don't know
- 8. Does your council set targets when planning?
- 9. What is the role of each of the stakeholders mentioned above? (Mention the listed stakeholders one by one to refresh their memory).
- 10. Do all stakeholders participate in making the parish plans?
 - 1. Never
 - 2. Sometimes.

- 3. Often
 4. Always.
 (Probe further)
 11. How would you rate the implementation of projects in your parish / sub county?
 1. V. good
 2. Good
 3. Fair
 4. Bad
 5. V. bad
- (Why do you say so?)
- 12. Could you please mention any 5 projects implemented in your parish which you participated in during planning and implementation?
- 13. Are these projects equitably distributed in your area?
 - -Never
 - -Sometimes
 - Always
 - -Don't know
- 14. Which of the following sectors is well handled by the sub county parish council?
 - 1. Schools
 - 2. Health units
 - 3. Agriculture
 - 4. Water
 - 5. Roads
 - 6. Revenue
 - 7. None

(Why do you say so, probe further)

- 15. Can you please describe the process undertaken in identifying priorities for parish/ Sub County plans? (Probe for general process that runs throughout the year, guide the discussion to keep focused).
- 16. In your opinion, what do you say about the effects of decentralized planning on service delivery in soroti district?
- 17. Do you have any other thoughts or feelings about service provision by the local government and what are your recommendations?