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**ADDIS ABABA UNIVERSITY
COLLEGE OF DEVELOPMENT STUDIES
INSTITUTE OF REGIONAL AND LOCAL DEVELOPMENT
STUDIES**

**THE STATE OF DECENTRALIZED SERVICE DELIVERY: THE CASE OF
ABOBO AND GOG WOREDAS IN GAMBELLA REGIONAL STATE**

**BY
TSEGAYE TILAHUN**

**ADDIS ABABA
JUNE 2008**

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ABSTRACT

The purpose of this study was to assess the state of decentralized services delivery in view of having the required institutions and their performance, the power/authority of local governments, the financial and human resources and level of community participation of the study woredas. The study was conducted in two woredas in Gambella Regional State. To meet the above objective Focus group discussions, interviews and observation were also conducted with key informants, professionals and community representatives. Moreover, observation and appropriate documents were also used to triangulate the existing data. Qualitative data analysis was employed to assess the true nature of the topic under investigation. In Ethiopia the second phase of DLDP has launched in 2004 but it has implemented at Gambella Regional State since 2005. The main objectives of DLDP includes deepening devolution of power to the lower level governments, institutionalizing the decision making power, enhancing the democratization process or promoting good governance, improving service delivery and creating viable development centers at the woreda level. However, despite such legal frameworks, the study found out that woreda decentralization in general and service delivery in particular had not been implemented adequately due to several reasons. It is challenged by many problems such as limited autonomy, severe skilled human resources capacity, acute budget shortage, lower revenue bases, weak organizational and institutional capacity, Poor inter-governmental relations and partners with different stakeholders, a top down hierarchical relationship between sectors offices and services units (schools and health units). Regarding participation, there is no well established mechanisms and capacity for conducting real community participation. Thus, Power is not yet adequately devolved and resources are not transferred to local governments and the expected expansion of public services has not been achieved. Hence, there is mismatch between legal and political pronouncements and an actual practice. It was generally recommended that to make decentralization meaningful and improve service delivery, woreda government should be capacitated with financial and manpower resources. Power should be developed adequately to the woredas and sector offices.

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ACRONYMS

AAU	Addis Ababa University
ADF	African development Fund
CSA	Central Statistics Authority
DLDP	District Level Decentralization Programme
EPRDF	Ethiopian Peoples Republic Democratic Front
ESDP	Education Sector Development Program
FDRE	Federal Democratic Republic of Ethiopia
FSS	Forum for Social Studies
GER	Gross Enrolment Ratio
GPDF	Gambella Peoples Democratic Front
GPNRS	Gambella Peoples National Regional State
GOE	Government of Ethiopia
HSDP	Health Sector Development Program
MOCF	Ministry of Capacity Building
MOE	Ministry of Education
MOFED	Ministry of Economic and Finance
MOH	Ministry of Health
NGOs	Non Governmental Organizations
PSCAP	Public Sector Capacity Building Program
TGE	Transitional Government of Ethiopia
UNESCO	United Nation Education Scientific and Cultural Organization
USAID	United States Agency International Development
WB	World Bank
WDR	World Development Report

ABSTRACT

The purpose of this study was to assess the state of decentralized services delivery in view of having the required institutions and their performance, the power/authority of local governments, the financial and human resources and level of community participation of the study woredas. The study was conducted in two woredas in Gambella Regional State. To meet the above objective Focus group discussions, interviews and observation were also conducted with key informants, professionals and community representatives. Moreover, observation and appropriate documents were also used to triangulate the existing data. Qualitative data analysis was employed to assess the true nature of the topic under investigation. In Ethiopia the second phase of DLDP has launched in 2004 but it has implemented at Gambella Regional State since 2005. The main objectives of DLDP includes deepening devolution of power to the lower level governments, institutionalizing the decision making power, enhancing the democratization process or promoting good governance, improving service delivery and creating viable development centers at the woreda level. However, despite such legal frameworks, the study found out that woreda decentralization in general and service delivery in particular had not been implemented adequately due to several reasons. It is challenged by many problems such as limited autonomy, severe skilled human resources capacity, acute budget shortage, lower revenue bases, weak organizational and institutional capacity, Poor inter-governmental relations and partners with different stakeholders, a top down hierarchical relationship between sectors offices and services units (schools and health units). Regarding participation, there is no well established mechanisms and capacity for conducting real community participation. Thus, Power is not yet adequately devolved and resources are not transferred to local governments and the expected expansion of public services has not been achieved. Hence, there is mismatch between legal and political pronouncements and an actual practice. It was generally recommended that to make decentralization meaningful and improve service delivery, woreda government should be capacitated with financial and manpower resources. Power should be developed adequately to the woredas and sector offices.

CHAPTER ONE

1. Introduction

1.1. Background of the Study

Currently, decentralization policy is becoming a popular and prominent development strategy in most developing countries. Most research findings indicate that it has been highly accepted since the 1980s. It helps to reduce the highly centralized system of government and administration in developing countries. It is also considered as a paradigm shift from top-down to bottom-up and participatory approaches. A complete centralization of provision of public services increasingly led to problems. This is mainly because in a centralized system, all government activities regardless of their complexities are vested up on consolidated agencies of the central government. Consequently, many countries have implemented decentralization policy to provide effective public service delivery and local self-rule. Ethiopia with different ethnic, linguistic and cultural diversity requires state organizations that allow autonomy/power and decision making authority at regional and local levels

In this regard, Tegegne (2007) indicates that many countries have practiced decentralization by devolving authorities and responsibilities of the central state to local government. This attributes to a belief to improve government's responsiveness to the public and increase the quality of the services it provides. Furthermore, decentralization is considered as a way of mobilizing support for national development policies at local level. Additionally, greater participation in development planning, management and decision making promotes national unity and it maintains political stability. Thus, transfer of power brings political stability, increases democratic governance and improves service delivery. Moreover, Kumera (2006) also indicates that delivery of basic services at the local level is one of the means that drives towards decentralized governance. Improvement of basic services delivery by using the system of decentralized administration is one of the core objectives of decentralized programme. Service delivery improvement on its part is aimed at enhancing all aspects of development effort (Mohammed, 2006).

The global political changes have given focus to local demands and the need to bring economic and political systems near to local communities. This helps to adopt the system of decentralization

to manage a country's political, social, administrative and economic activities effectively and efficiently. In this regard, the central government may not have full capacity and sufficient time to implement and deal all issues, services and local development efforts that could be better handled at the local level. But, the achievements of local governments rely on the existing resources, capacities, and the power of decision making (Tesfaye, 2006).

Different scholars also affirm that decentralization improves productive efficiency by fostering accountability, reducing corruption and increasing cost effectiveness of governments (Derese, 2003). Accordingly, decentralization is a means of increasing the number of people involved in planning and implementing development activities and increasing the influence of those at the local level vis-a-vis those at the center. Consequently, most government stress the participatory benefits of decentralization policies, claiming that they will bring power to people, bringing government closer to people, strengthen democracy, etc. Decentralization also increases access to services delivery, particularly it neglected, peripheral and remote areas. It is also considered as indicator of good governance (Derese, 2003).

On the other hand, other writers affirmed that developing countries are reluctant to implement decentralization policy adequately. This is mainly due to weak organizational structure systems, poor information, unlimited needs, weak capacity and administrative diseconomies. This problem is significantly seen in most emerging regions in developing countries like Ethiopia (Meheret, 1998; Fenta, 1998).

Starting from the late 19th century, Ethiopia had been exercising a strong centralized state. The first serious attempts to introduce a centralized system of administration in Ethiopia were undertaken during the period of Menelik II. But the process of centralization was further strengthened and institutionalized in modern sense during the Imperial Regime (Eshetu, 1994; Tegegne, 1998). During this period, the proposal was presented to the parliament so as to experiment decentralized administration in certain selected 'Awrajas'. However, the then parliament did not accept the proposal as it was perceived as a threat for "national unity".

The military government (1974-91) that replaced the Imperial Regime also continued and strengthened the centralized government administration and finance. Although the military government made some attempts of decentralization through the formation of autonomous regions

and other sub administrative structures, they had no power to make major decisions (Tegegne, 1998, Meheret, 1998; Eshetu, 1994; Berket, 2000).

The Transitional Government of Ethiopia (TGE), which overthrew the Derg in 1991, adopted a federal form of state in 1992 (Meheret, 1998). He also stated that since 1992 the power and responsibilities of the central government were devolved legally to regions based on proclamations 7/1992, 33/9992 and 41/1993.

The Ethiopian federal system assumed its present shape and form in 1995 following the adoption of national constitution (Meheret, 1998). The 1995 federal constitution recognized nine regional states with equal powers and rights as member states of the Ethiopian federation.

Initially, the country was divided into 14 national regional state governments, which were primarily constituted on the basis of Ethno-linguistic criteria of qualification: but this later reduced to nine regional states (Tigray, Afar, Amhara, Oromia, Benishangul Gumuz, Gambella, SNNPRS, Somali and Harari) and two special administration areas (the cities of Dire Dawa and Addis Ababa) (Tegegne and Kassahun, 2007). These nine regional states were further divided into 66 zones, 550 woredas and 6 special woredas (Meheret, 1998).

All of the regional states are considered as semi-sovereign state because each has its own flag, constitution, government, defined territory and population (Meheret, 1998). The constitution of the Federal Democratic Republic of Ethiopian (FDRE, 1995) is the legal basis for ensuring citizen voice and participation in socio-economic and political processes (Tegegne and Kassahun, 2007). Similarly, article 43 (sub-article 2) categorically spells out that citizens have the right to “participate in national development and in particular, to be consulted with respect to policies and projects affecting their community.”

Throughout the 1990s, the initiative for decentralization has been limited to the regional level without any clear definition of the role of the lower tiers of government (Tesfaye, 2006). It is only from 2001 onwards that Ethiopian began to adopt a decentralized form of local governance characterized by devolution. Woreda decentralization has been initiated as one of the reform measures in the country underlining on poverty reduction.

In the Ethiopian Sustainable Development and Poverty Reduction Program, decentralization has been considered as one of the pillars of the Ethiopian poverty reduction strategy (MOFED, 2002b). It is also viewed as an effective way of bringing the decision making power closer to the people who in turn enable the people to directly participate in their own development programs.

According to Tegegne and Kassahun (2007), zonal and regional authorities had controlling mechanism to check and monitor the powers and responsibilities of woreda government structures. This situation promoted the central government to take the initiative to further devolve powers and responsibilities to woredas in 2001.

1.2. Statement of the Problem

As stated earlier, since 1991, Ethiopia has embarked on extensive decentralized system of administration which is mainly to improve democracy, popular participation and service delivery. Meheret (2007) also confirms that one of the main objectives of decentralization is to increase the coverage/access, effectiveness, efficiency and quality of social services in accountable, responsive and transparent fashion.

The decentralization policy in Ethiopia also attempts to make governance closer to people, so that local governments become responsive to the needs and interests of the communities. It is also assumed that the closeness of governance would lead to better service delivery, popular participation, autonomy and accountability of the local government (MOCB, 2004).

Based on this, different attempts have been made to devolve power to wordas that have been mandated to prepare and implement development plans and programs and projects and set priorities of the needs of their respective communities. Accordingly, a number of public sector offices have been organized at woreda level with the objective of making woredas the center of socio-economic development (Kumera, 2006). The program is mainly designed to promote the provision and expansion of primary education, primary health care, rural roads, water supply and agricultural extension.

The decentralization process of Ethiopia has two phases. The 1st was practiced from 1991-2002 which was known as mid level decentralization; and the 2nd phase which has been practiced since

2002/2003, is the District-Level Decentralization Program (DLDP) to expand the process of decentralization to woreda level.

However, local governments in the country have different problems. The majors among which are the following:

- Inadequate capacity to implement development programs and provide social services in their localities.
- Insufficient administration and institutional capacity as well as lack of trained civil servants have crippled the implementation of decentralization at regional and local levels (Meheret, 2007).

However, recently the central government has made significant attempts in transferring major functions and decision making powers to woreda and kebele levels. But still, adequate labor force, administrative capacity and experiences are crucial factors in region's, zone's and woreda's ability to implement socio-economic development policies, strategies and plans (Meheret, 2007).

As it was already noted above, inadequate inter-regional cooperation, insufficient devolution of authority to sub-regional governments and administration, institutional capacity of regional states and wide disparities among regions are some of the challenges that face the leadership capability of the federal government of Ethiopia (Meheret, 1998 and 2007).

The DLDP was initially limited to the four major regions (Amhara, Tigray, Oromia and SNNPRs) but it was also continued to be implemented in the other regions (Tegegne and Kassahun, 2007; Meheret, 2007).

The main agenda of the recent woreda decentralization is to enable local governments provide quality and efficient services with increasing good governance, organizational effectiveness and improving human power (Kumera, 2006; Mohammed, 2006). Moreover, the most visible impact of decentralization on socio-economic development is in the area of education, health, rural road, and other public services and development sectors (Tegegne and Kassahun, 2007).

Its main objective is to devolve decision-making authority to woredas and transform them into strong institutions of local democratic governance and enhance efficient ways/methods of delivering public services.

However, some studies undertaken on the decentralization process in Ethiopia indicate that the usual problems associated with decentralization are cropping up (Tadesse, 1996; Meheret, 1998; Tegegne, 1998; Derebessa, 1998 and Berket, 2000). There have also been challenges in institutionalizing viable woredas administration with the requisite capacity for self-government and local economic development (Meheret, 2007).

As Meheret (1998), Worku (2005), Mohammed (2006) and Nigussie (2007) pointed out that most of the problems at woreda level governments are:

- Poor and inadequate revenue base to undertake meaningful local economic development.
- Scarcity of skilled manpower in public service delivery.
- Lack of experience in decentralized governance and effective legal and policy framework.
- Absence the process of popular participation and consultation in place.
- Systems and procedures for decentralized service delivery have not been developed to ensure good governance.

These affect the implementation of programs and projects at lower levels of government in Ethiopia. This is particularly an acute problem for emerging regions such as: Gambella, Benshangul Gumez and Afar.

With regard to this, the MOCB (2004) as cited in Tegegne and Kassahun (2007) indicate the serious problems faced in the process of implementing the wereda decentralization program as: lack of an integrated system of procedure in service delivery, lack of efficient organizational structure, well coordinated structure and locally adopted working system for planning and budgeting are among the constraints challenging the performance of woreda decentralization in Ethiopia.

Furthermore, insufficient experiences in managing federalism, wide gap in administrative and institutional capacity among the regions have posed serious challenges to the success of Ethiopia's decentralization policy. Especially, regions like Gambella, Afar, Benshangul Gumuz

and Somalia suffer from a death problems related to administrative and institutional capacity to undertake development on their own and exercise self-rule (Fenta, 1998).

The challenges stated above happened mainly due to various reasons. These factors crippled the implementation of decentralization policies. This has an implication on the provision of effective service delivery for the users especially in emerging regions. In order to address these problems an investigation of the existing gaps is highly relevant and crucial. However, the practices, challenges, performances and prospects of the decentralized service delivery have not been studied in Gambella region. Accordingly, the purpose of this study is to assess the state of decentralized service delivery by focusing on education and health services.

Therefore, the study attempts to assess the practices, challenges and prospects of decentralized service delivery in two local governments: Abobo and Gog woredas in Gambella Regional State.

1.3. Objectives of the Study

1.3.1. General Objective

The general objective of the study is to assess the state of decentralized service delivery particularly emphasizing on education and health services in the study areas by concentrating on variables like power devolution, capacity, financing (budget and its adequacy) and community participation.

1.3.2. Specific Objectives

The specific objectives of the study are to:-

- Assess the existing practices, challenges, achievements and prospects of decentralized service delivery.
- Analysis whether District Level Decentralization Programme (DLDP) facilitated for service delivery or not.
- Identify factors that affect the performance of services delivery.
- Examine the performance and challenges of education and health service delivery in selected woredas.
- Assess the level of participation of local communities and institutions in services delivery.

- Forward relevant and feasible recommendations which would minimize problems of decentralized service delivery based on the findings.

1.4. Research Questions

This research seeks to give answers for the following basic questions:

- Is decentralization particularly DLDP scaling up the performance of service delivery in the study woredas?
- What is the current status of decentralized education and health services delivery in selected woredas?
- Are human and financial resources adequate to provide education and health services effectively?
- To what extent do communities participate in service delivery?
- What are the achievements, challenges and prospects of decentralized service delivery?

1.5. Approach and Methodology

1.5.1. Methodology of the Study

The nature of a research problem most often dictates the methodology of the study (Aronson et al, 1990).The methodology of the study was descriptive to assess the challenges and prospects of decentralized service delivery in Abobo and Gog woredas of Gambela Region.

The woreda level administration and sector offices were taken as units of analysis for the study because these are strategic levels in the present state structure. Furthermore, woreda level government structure was considered due to its relative closeness to the grassroots population and its being viable unit of government for meaningful socio- economic development at the local level. In support of this, a writer noted that: ‘‘In Ethiopia, woredas are also considered to be the key local units of government since they play key roles in prioritizing the provision of public services’’ (Loop, 2002).

1.5.2. Sampling Techniques

The implementation of DPLP in general and the decentralized services delivery in particular have not been studied in emerging regions of Ethiopia like Gambella. To fill this gap, particularly Forum for Social Studies (FSS) in collaboration with RLDS department invited students to conduct a research in either of the emerging regions on the state of decentralization. Fortunately, the writer got the chance to conduct the study in Gambella Region to assess the state of decentralized service delivery. Consequently, two local governments: Abobo and Gog woreda in Anywaak Zone of Gambella Regional State were purposely selected.

These two local governments were selected for reasons of convenience to the writer in view of data collection. Furthermore, Abobo is close to the regional town and has relatively better infrastructure facilities. On the other hand, Gog is the remotest and seen as one of the poorly operating woredas. This contrast between the woredas was taken into account to find out the differences it makes into the decentralization process and service delivery (education and health services).

With regard to the service delivery selection, two sectors that have more relevance to the study due to their nature in providing public services have been selected purposively. These were health and education sectors. This is because they are the bases of social and economic development. Moreover, due to their nature in providing public services and it was better to get the necessary data to conduct the research as compared with other public sectors especially in Gambella.

Here, investigating the situation of such sectors would enable to draw lessons for other sectors. Other institutions which were deemed is crucial to the performances of the selected public services were consulted during data collection. These were woreda Administration and Finance and Economic Development offices of the selected woredas.

Furthermore, kebeles, schools and health units were selected randomly. Prior to the selection, a very close consultation was undertaken with Woreda Health as well as Woreda Education and Capacity Building Officials. First schools and health units were clustered based on the closeness and remoteness from the woredas towns and then selected randomly. Similarly, kebeles were also clustered according to their proximity, accessibility and existence of the selected public services (schools and health units). Thus, 10 schools (4 schools from Gog and 6 schools from Abobo) and

6 health units (3 health units from each woreda) and 8 Kebeles (3 from Gog and 5 from Abobo woreda) were selected randomly.

Regarding, the subjects under study, the whole group can be the target of the study. But given the large broad category of population that the study comprises, it is ideal to find a complete list or sample frame in one and it is also impractical and time-consuming to compile an exhaustive list of elements comprising the target population. Thus, as it is hardly possible to include all elements of the group in the study, drawing samples was found to be imperative. Hence, the cross-sectional study was found to be more appropriate for this study since it involves sampling various segments of population at a point in time.

Accordingly, the study population was grouped into cabinet members and woreda administrators, government employees, NGOs employees and community representatives for the sake of homogeneity. Thus, key informants were approached from each institution purposively where as samples of teachers and health professionals have been selected using simple random sampling technique. The list of teachers and health professionals obtained from the offices of education and health. Furthermore, community representatives were also selected purposively. They were selected based on their availability and those who were established relatively long time than others. In general the samples of respondents of the study were grouped into:

- Woreda administrators and members of the executive committee (i.e., cabinet) and keble administrators
- Woreda Office Heads (Education, Health, Capacity Building, Finance and Economic Development).
- Regional Health and Education Bureau Head.
- Regional DLDP Coordinator
- NGOs that was working on health and education.
- Health and education professionals/experts and supervisors.
- School directors.
- Teachers.
- Community members (Parent Teachers Association, Peace building and development community committees and health community committees.

Sample kebeles, schools, health units and different respondents contacted and the corresponding instrument applied is attached as annex.

1.5.3. Sources of Data and Data Collection Tools

Primary and secondary data were employed to assess the situation of decentralized service delivery in two woredas. The use of several qualitative and quantitative methods such as focus group discussion, in-depth interviews and observation are helpful to collect adequate information and get individual, group and institutional views (Yeraswork, 2000). Similarly, in this study: in-depth interviews, focus group discussions and observation were used in order to get sufficient information on the issue under the study. During the data collection the researcher has three assistances (one research assistance and two language translator).

1.5.3.1 Primary sources

The researcher used in-depth interview, focus group discussion and field observations to collect qualitative data. In collecting primary data, interview was made with key informants by using unstructured questionnaire where as discussion guide or semi structured questionnaire was employed for the focus group discussion.

In-depth interviews were conducted with key informants who were assumed to be knowledgeable on issues of decentralization and the state of decentralized service delivery due to their experience, political position or professional capacity concerning the achievements, challenges and prospects of the decentralized services delivery in the study areas. Woreda administrators, other members of the executive committee (i.e. cabinet), kebele administrators, woreda health, education and capacity building office heads , school directors and NGO head were interviewed..

Focus group discussions were also held with the community members, teachers and health professionals to get sufficient information on basic services delivery such as access to education and health services, quality of services and the level of community participation. Each focus group had 5-10 members or participants.

A. List of key informants (interviewees in both woredas)

Regional Bureaus

1. Head, plan and programme Gambella education bureau
2. Deputy Head, Gambella Health bureau
3. Regional government DLDP coordinator

Abobo and Gog woredas

No	Persons to be interviewed	Number
1	Woreda Chief administrators	2(one in each woreda)
2	Woredas deputy administrator	2
3	Woreda education and capacity building office heads	2
4	Woredas capacity building coordinator	2
5	Woreda education plan and programme senior expert	2
6	Primary education expert	2
7	Woreda health office head	2
8	Woreda health office disease prevention and control team leader	2
9	Woreda health center/higer clinic head	2
10	Woredas finance and economic development office head	2
11	ANFEAF coordinator(at Gog woreda)	1
12	Eduation supervisors	2
13	Woreda education office head	2
14	Kebele Administrators	8(4 in each woreda)
15	School directors	10
16	Total	42

B. List of Focus group Discussants

No	Groups	No
1	Health professionals	10(5 in each woreda)
2	No of teachers	20(10 in each woreda)
3	PTA members	10(five each woreda)
4	Health Community Committee members	9
5	Peace building committee members	10(five each woreda)
6	Total	59

1.5.3.2. Secondary Sources

In this study secondary sources both published and unpublished materials such as: government policy documents, official reports and publications, federal and regional constitutions and other guidelines, laws .books, workshop proceedings, research reports and periodic and statistical reports, Journals, etc. were reviewed. An attempt was also made to analyze the powers and duties of woredas level the institutions vis-à-vis the federal, zonal and kebele administrations/institutions. Moreover, semi structured document review check list was used to collect secondary data on the socio economic and demographic profile of the sample woredas: their current administration structure, distribution and coverage of the social services and the institutional, financial and human resource capacities of the wordas under study. Such data also used for assessing the state of decentralized social services delivery in the woredas administrations.

1.5.4. Data Analysis

The researcher mainly used descriptive method to analyze the primary and secondary data. In this regard, different tables, percentages, frequencies and simple averages were used for data presentation and analysis.

1.6. Significance of the Study

Currently, decentralized service delivery approach is considered as a key to provide better services for beneficiaries, achieve sustainable development and promote good governance. The Ethiopian Public Sector Capacity Building Program document indicates that power to make decisions in service delivery has greatly been devolved and significant proportions of services personnel have been redeployed to strengthen woredas. Ethiopia has little experience in the decentralization process and it is also recent phenomenon. Therefore, this study will help to:

- High light the challenges that need attention for future interventions in the study area.
- Provide valuable information on the existing practices decentralized service delivery in health and education and forward relevant intervention modalities to minimize the identified gaps.
- Create the awareness to the concerned government authorities so that they can take corrective measures accordingly.
- Design policies and strategies which will help in promoting decentralized service delivery on planning and administration of woreda/local levels of the emerging regions.

It may also pave a way for interested groups for further and in-depth studies on such issues especially for emerging regions.

1.7. Scope and Limitations of the Study

All Regional States have been implementing Woreda decentralization policy in Ethiopia. But the scope of this study is geographically limited to two woredas (Abobo and Gog) of Gambella regional state of Ethiopia. Additionally, the study focused on two public service sectors (education and health) to assess the state of decentralized services delivery in the study woredas. This is due to time and financial constraints.

Lack of update and compiled data about the state of basic public services and decentralization issues and absence of officials and some experts from office during data collection were some of the limitations that the researcher confronted during the study. In addition, high staff turnover and frequent restructuring of the woreda government offices also made the data collection tedious conditions.

1.8. Organization of the Thesis

This thesis is arranged into five chapters. The first chapter is an introductory part, which includes background of the study, statement of the problem, objectives of the study, basic questions, approach and methodology, significance and scope of the study. Chapter two deals with literature review in which some of the major concepts in the study such as: decentralization, decentralized service delivery, community participation, and brief historical overview of decentralization in Ethiopia were presented to provide conceptual framework for investigating the current state of decentralized service delivery. The third chapter is devoted to give an overview of the profile of the study areas. The fourth chapter focuses on the presentation of results and analysis of the field data collected through different instruments and observations based on the focus group discussions and interviews with different participants of the study. Findings that came out of the study are discussed in chapter five. Lastly, conclusion and recommendations are presented in chapter six.

CHAPTER TWO

2. Conceptual and Theoretical Framework

This chapter focuses on assessing the pertinent conceptual issues, empirical studies, and theories that have relevance to the subject of the study.

2.1. The Concept of Decentralization and Service Delivery

2.1.1. Decentralization

Decentralization as an approach to development administration occupies an imperative and conceptual position within the development discourse. Different scholars and researchers talk about the issue of decentralization. The meaning of decentralization differs from scholars to scholars and has been defined and understood in various ways. The concept of decentralization is not easily defined. It has too many definitions. It is very broad, complex and has many forms and dimensions. Hence, the concept has led to different definition, wide range of ambiguities and even confusion in design and implementation of decentralization policies. Because of this different authors and scholars defined it in different ways. Although it has many definitions, there are some definitions and concepts that are widely accepted. The following are some among the several conceptions and definitions:

In its basic definition, decentralization is the transfer of part of the power of the central government to regional or local authorities (Adarkwa, 2005; Yigremew et al. 2005; Tegegne and Kassahun, 2004; Meheret; 2000). It is also defined as the transfer of responsibility and authority for planning, management and the raising and allocation of resources from the central government and its agencies to field units level of government, semi-autonomous public authorities or corporations area wide regional or functional authorities or non-governmental private voluntary organizations that are closer to the public to be served (Rondelli, 1998; Turner and Mulme, 1997).

Furthermore, it is also the transfer of legal and political authority from a central government and its affiliates to sub national units of government into the process of making decision and managing public functions (Tegengn and Kassahun, 2004). This means the transfer of authority from a central government to a sub-national entity at lower unit. Decentralization is a means to ensure the participation of the public in the diverse affairs of their locality. It is not only allows

local governments to effectively attend to the tastes and needs of local residents but also enhances inter-jurisdictional competition and innovations in the provision of public services and ensures consistency of level and mix of public services with voters' preferences (WB, 1999/2000).

There are at least two basic requirements for decentralization. The 1st is territorial where authority, power and responsibilities are transferred lower levels in territorial hierarchy while the second is functional where authority and responsibilities are transferred to lower agencies that are functionally specialized (Tuner and Hume, 1997).

As indicated from the above, many scholars defined decentralization as the transfer of authority from central government to a sub-national entity, but beyond this general definition, the process of decentralization is a complex undertaking, taking on different meanings in different contexts and according to the desires and plans of those in charge of its design and implementation.

All in all, the concept of decentralization is a vague term because of the varied meanings it conveys. Hence, several understandings are being used for the same term. However, what should be noted is that none of the conceptions offers a comprehensive theoretical methodological solution that will help us determine how decentralization should be carried out. But different approaches provided important concepts and guidelines for designing and implementing decentralization policies as a strategy for development in general and service delivery in particular (Fenta, 1998).

2.1.2. Service Delivery and Decentralization

It is challenging to define service delivery in a precise way. But in general service delivery basically refers to the systematic arrangements of activities in service giving institutions with the objective of fulfilling the needs and expectations of service users and other stakeholders use the optimum use of resources (Tesfaye, 2006).

Accordingly, services are related with sectoral development issues which are provided by different agencies and defined as accesses to basic developmental goods or services or services available to citizens and contribute to human needs or development (Kumera, 2006). Mostly basic public sector services like education and health are provided at local level. The benefits of decentralization in relation to service delivery are usually underpinned by different theorists.

Similarly, World Development Report (WDR) points out that decentralization offers the chance to match public services more closely with the local demands and preferences and to build more responsive and accountable government from below it. This means it increases the efficiency and responsiveness of government, locally elected leaders know their constituents better than authorities at the national level and so should be well positioned to provide public services local dwellers want and need. It argues that physical proximity makes it easier for citizens to hold local officials accountable for their preferences. However, the report also notes that decentralization is unlikely to work without effective institutional arrangements to foster accountability at the local level (WDR, 2001).

The main drawbacks of centralization are believed to be its failure to adjust services to heterogeneous local needs. Accordingly, decentralized service delivery means decentralized the administrative from the center to the regions, districts, woredas and local communities can be effective users. Furthermore, it can be a means of achieving critical objectives of sustainable human development vision, increased community participation in decision affecting their lives, enhancing government responsiveness and increased access to services and employment(Mookherjee, 2003; WB, 1997).

Dissatisfied with centralized approaches to delivering localized approaches to delivering local public service a large number of countries are decentralizing responsibility for these services to lower level elected governments. Local communities have an ample capacity for planning and implementing local projects. They can generate highly productive innovations and can usually deliver service more efficiently than conventional bureaucracies (WB, 1997).

WB (2001) also demonstrates that decentralization of public service delivery in primary health care and education services is positively correlated with improved child mortality and school enrollment in South Africa.

Generally, in this study service refers to basic public sector services like education and health; the provision of which are under the jurisdiction of the woreda administration.

2.1.3. Dimensions/Types of Decentralization

There are many ways in which a government may devolve power to the sub-national level. Thus, decentralization can be political, administrative, fiscal and economic (Boko, 2002). Drawing

distinctions between these various concepts is useful for highlighting many dimensions to successful decentralization and the need for coordination among them. Political, administrative, fiscal and economic decentralization can also appear in different forms and combinations across countries, within countries and even within sectors.

2.1.3.1 Dimensions of Decentralization

A. Political Decentralization

Political decentralization aims to empower citizens or their elected representatives by giving more power of decision making. It is usually based on constitutional reforms, the development of multi-party politics, the presence of strong legislatures and the encouragement of effective public interest groups (WB, 1997).

Political decentralization/devolution refers to devolve powers to democratically elected local government or in much weaker forms, to attempt to local governments more accountable to communities through the establishment of oversight boards or the introduction of new forms of citizen participation in development of projects and policy making. It also refers to the means of sharing state powers and responsibilities between the central government and sub regional and local entities (Meheret, 1998).

Thus, it is a response to political pressure associated with pluralistic politics and representative government but it can also support democratization by giving citizens or their representatives, more influence in their formulation and implementation of policies (Boko, 2002; Rondinelli, 1998).

B. Administrative Decentralization

Administrative decentralization is the sharing of authority and responsibility between headquarter and field offices (Meheret, 1998; Vander Loop, 2002). It aims to redistribute authority and resources among different levels of government. It refers to the transfer of responsibility for the planning, financing and management of selected public functions from the central government and its agencies to field units of government agencies, sub-ordinate units or levels of government, semi-autonomous public authorities or lower tier units of the government and agencies. It seeks the sharing of responsibility and authority between head quarters and field office (Meheret, 1998).

C. Fiscal Decentralization

Fiscal decentralization refers broadly to efforts to change the distribution and sources of resources available to local governments. Such efforts can take many forms, including transfer between levels of government, authorization of local/borrowing cost recovery, changes to revenue sources available to local government through taxes, user fees and contributions. If decentralization is to be successful, there must be a clear definition and alignment of the successful functions among different levels of government. The responsibilities of which level of government sets and collects, what taxes or which tier undertakes and what expenditures must be clearly spelled out (Boko, 2002). This is because financial responsibility is a crucial element for the success of decentralization. Fiscal decentralization deals with how tax, revenues and public expenditures are distributed among the different tiers (Derese, 2003).

D. Economic Decentralization/Market Decentralization

Economic decentralization which involves the transfer of functions government services to private sector or voluntary organizations or firms. It is also the shift of the responsibility for the provision of goods and delivery of services from the central government/public to the private sector like private corporations, community groups, cooperatives and non-governmental organizations (Boko, 2002; Turner & Hume, 1997; Meheret 1998). Market decentralization is transfer of substantive control over resource allocation to non-state actors.

Economic decentralization is vital because the private sector is often more creative than government entities in devising efficient ways of producing and providing a given good or services, making government provision of such a good or service an inefficient use of societal resources (Boko, 2002).

2.1.3.2. Types of Decentralization

Recent discussions in decentralization have identified four basic standard types of decentralization on the bases of the level of autonomy and accountability between central and local governments. These are deconcentration, devolution, delegation and privatization.

A. Deconcentration

Deconcentration means the delegation/transfer of responsibility for managing the activities or services in question (education, health, etc) from the national level to a local level of a ministry or central institution. Here, decision making and policy formulation remain largely centralized. It involves the geographic distribution or dispersal of central government responsibilities to lower territorial levels of central government ministries and agencies. This means it occurs when the central government disperses responsibilities for certain services to its regional branch offices that implement decisions taken at the center. Here, an independent local governments does not exist, local/regional branch offices are simply used to improve the efficiency and effectiveness of services delivery (Derese, 2003; Helmsing et al. 1991). It is often considered to be the weakest forms of decentralization and used in many unitary states.

B. Delegation

Delegation is defined as an authority for certain functions are transferred to lower levels that remain substantially accountable to the central level. It is the transfer of managerial responsibility for specifically defined functions to semi-autonomous organizations to plan, implement and manage specific services or projects on behalf of the central government. In this case, local government or agencies have a great deal of discretion in decision making though the central government is ultimately accountable to it. Delegation is a more extensive form of decentralization than deconcentration and it is one way to balance local and national government interests. It may involve a principal agent type of a relationship, in which the central government is the principal and local organizations are agents (Boko, 2002; Derese, 2003).

C. Devolution

Devolution is also a political decentralization. In this kind of decentralization, authority for decision making with respect to finance and management is transferred to quasi-autonomous units of local governments that are accountable to their constituents. In such a system, local governments have legally recognized geographic boundaries within which they exercise their authority and perform public functions. This fits the position of states within a federation and legally established and typically elected local governments (Derese, 2003; Boko, 2002; Helmsing et al. 1991).

Devolution is the most extensive form of decentralization. Many scholars indicated that devolved political entities such as regional or local governments are responsible politically to the local population who elected them for their decisions and activities outside the direct control of the central government. Therefore, devolution is the best form of decentralization because devolved form of governance is considered as more efficient, effective and responsive than other form/type of decentralization. It is also assumed that it increases community participation and confers full authority and responsibility in resource mobilization and investment decision (Nigussie, 2007; Slater, 1989; Hemsing et al. 1991).

D. Privatization

It is leaving the provision of goods and services entirely to the free operation of the market to private public partnerships or voluntary organizations or different associations to provide services. Privatization is also stated that it is the transfer of responsibility from government to NGOs, voluntary organization, community associations or private enterprises for specified functions (Boko, 2002; Nigussie, 2000; Rondillie, 1989).

2.1.4. Rationales for Decentralization

The rationale and objectives of decentralization are often varied and ambitious. Much of the decentralization which has taken place in the past decade has been motivated by political concern. Thus, political forces are the most common impetus for decentralization processes in many developing countries.

Decentralization provides more possibilities and scope for making social resource provision for such human development institutions like basic education, primary health care, and environment and resource conversion, etc. Most conspicuous features of decentralization at locality level is that the freedom for decision making choice with in the regional, national, global scale frame work. Such a situation allows for the search by localities of their unique resourcefulness, assets and liabilities and then emphasizes to capitalize on their strong points to attract growth and investments and enabling infrastructures from the government (Mookherjee, 2003).

Decentralization has been used as a mechanism to disperse power, to ensure political stability, to bring representative government closer to citizens and to improve the accountability and responsiveness of local leaders. In Africa the spread of multi part political system is creating

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demand for more local voice in decision making. In some countries like Ethiopia, decentralization has been a response to pressures from regional or ethnic groups for more control or participation in the political process. In the extreme, decentralization represents a desperate attempt to keep the country together in the face of these pressures by granting more autonomy to all localities or by forming a symmetrical federation (WB, 2000a).

Economists justify decentralization in the grounds of allocate efficiency. The rationale is that decisions about public expenditure that are taken by a level of likely to reflect the demand for local services than similar decisions taken by a remote central government. Moreover, it has also important benefit in that people are more willing to pay for services which they find to be responsive to their priorities, especially if they have been involved in the decision making process with regard to delivering the services. One argument asserts that a primary economic rationale for decentralization is to improve the 'competitiveness' of government and enhance innovation. It is usually argue that ultimately central governments are responsible for ensuring interpersonal equity but local governments also play very important roles in implementing central distributional programs (Hutchinson, 2004).

Moreover, a leading rationale for decentralization is that it can generate financial, efficiency and quality gains by developing resources and decision making powers to local governments for delivery of services. It is financially attractive to national governments because part of the burden of financing services can be shifted to sub national units and private providers (Hutchinson, 2004).

The efficiency arguments that productivity of health, education and other services will be maximized by allowing local governments to take decisions on the allocation of scarce resources, since they have better sense of local priorities. In the process of decentralized unit of government can be more accountable in resource allocation decisions (Robinson, 2004).

Decentralization is a means for practicing or exercising checks and balances in the different structures and tiers of government, facilitates the participation of non-governmental actors and grass roots of organizations to gain a say in the governance realm, provides options for individual citizens by promoting government responsiveness, enhances opportunities for local economic

activity and facilitates the taking shape of an active and vibrant civil society (Tegegn and Kassahun, 2004).

It also enables citizens to express their needs and demands and press claims for national and local development resources. It is a means of improving planning and implementation of development activities in most flexible and innovative manner. In this regard, decentralization is expected to achieve increased popular participation, to make plans more relevant to local needs, to facilitate integrated planning to increase the spread and flexibility of decision making to ensure effectiveness of economic activities and minimize wastage, to generate additional resources and achieving equitable distribution as well as efficient use of resources (Tegegne G/Egziabeher, 1998).

Some researcher have even argued that higher information and transactions costs in developing countries make moving decision maker closer to the people even more appropriate for developing countries than developed countries(Shah, 2006).It is also advocated as a way of improving the management of development by enhancing the governance of development, increasing flexibility and responsiveness. Hence, projects and programs that are implemented at the local level can be adjusted more easily when an anticipated change are required instead of such matters of a local nature being determined by central governments authorities.

As argued by the World Bank in countries where managerial resources are scarce, communication is difficult, transportation is slow and many people are isolated, decentralization of the government services system should be considered as one possible way to improve efficiency (WB, 1987).Hence, using the weakness of the central government for justification, in the 1980s and 90s decentralization has been explicitly driven by neo-liberal ideologies which propose markets for improved and efficient provision of public services are marked under the banner of 'the current wave of democratization' (Magniza and Conyers, 1996).

On the other hand, scholars noted that decentralization can not be a panacea for all development ills. There are limits to decentralization. Decentralization policies do not always achieve their declared objectives. Ideological and political, administrative and planning, human and financial resource considerations and constraints affect the outcomes. Defining tasks and responsibilities to be transferred and how to finance them at the local level is also an essential task. As much as

decentralization is now an accepted strategy, it has its own pitfalls arising from design, implementation and impact (Boko, 2002).

Thus, the definitions and rationales given above by the authors may give us a clue about the subject and the discussion of decentralization in this paper can be understood in the same manner.

2.1.5. Theoretical Debate on Decentralization

Economic theorists indicate centralized decision-making is likely resulted in inefficient use of resources. A policy of decentralization has been persuading for both developmental and political reasons. The first wave of decentralization in the late 1950s and early 1960s resulted from the desire of newly independent governments to replace colonial structures of local government with indigenous ones. In the period, following independence most post colonial states face the typical condition that the main productive sectors in agriculture and industry are controlled by groups different from those which the state derives its political support. This condition is typical in so far as it reflects the post colonial situation, in contrast with capitalist states that have been independent for a longer period of time (Vack and Wekwete, 1990).

The major distinction among approaches to capacity building which the emergence of structural and new development administrative theorists have highlighted is that between 'supply' and 'demand driven' orientations. Supply driven theorist tend to view local government deficiency in capacity as a function of limited human and financial resources, which should remedied, in Rondinelli's revealing phrase 'tutorial' i.e. gradually through patient central government and donor intervention, if possible prior to initiating (Frizen and Lim, 2006).

Those who favor centralization maintain that redistribution by central government is necessary to overcome the influence of the local elites or to perform certain core functions, which can not be effectively carried out by local governments. Boko (2002) suggests that 'certain stabilization functions are best carried out by a central government'. These groups of scholars further argue that local government cannot use fiscal policy efficiently, because the multiplier effects of a fiscal induced increase in local expenditure may be transmitted outside the local community and may cause a spillover effect.

Other important argument in contrast to centralization is decentralization creates an efficient and reliable administration, intensifies and improves a local population to have a voice in government

and better protects minorities. To accomplish this, local governments need to have a certain security in their existence, sufficient resources, capacity and autonomy (Turner and Hulme, 1997). Similarly, decentralization promotes effective performances increased accountability, flexibility realization of local preferences. It is a remedy to the problems associated with decentralized system in distribution. This is due to the fact that decentralization is characterized by proximity, relevance, autonomy, participation, accountability and democracy (Turner and Hulme, 1997; WB, 1999/2000; Kumera, 2006;; Nigussie, 2007).

There is no doubt that decentralization has once again acquired a prominent place in the development policy. The debate is not only simply about the division between the state and private sector but also about the division among central authorities, local government and local communities. Accordingly, the main objective of decentralization is to promote efficiency of government machinery through dialogue as well as spatial equity in the distribution of 'political' and 'administrative' powers for development decision making to reduce poverty from the grassroots.

Therefore, one can infer from the above discussions that decentralization is the system of government which lays down the structures for political, functional and administrative authority to be transferred institutions representing identified socio-cultural and political as well as territorial interests.

2.1.6. Reasons for Decentralization

There are a number of justifications, which are put forward that decentralization increases effectiveness and efficiency of government functions (Fenta, 1998). Some of these justifications are indicated in below.

One of the benefits of decentralization with respect to efficiency and effectiveness is related to the possibilities it grants to formulate 'more realistic and locally relevant plans (Conyers, 1999).Decentralization also enhances inter-jurisdictional competition and innovation in the provision of public services, cost effectiveness and efficient provision of government services can be best be adopted among constituent decentralized units through diffusion process (Fenta, 1998).

Decentralization provided the means for exercising checks and balances in the different structures and tiers of government, facilitates the participation of non-governmental actors and grass roots organizations in endeavours towards entrenching the governance realm, provides options for individual citizens by promoting government responsiveness, enhances opportunity for local economic activity and facilitates the taking shape of an active and vibrant civil society (Tegegne et al., 2005).

- Decentralization is therefore widely regarded as a necessary condition for social, economic and political development. Whatever its ideological foundation or level of intervention, contemporary state must localize its governmental apparatus (Fenta, 1998; Smith, 1996). In general, as Fenta (1998) mentions decentralization as:-
- Improves the efficiency with which demands for locally produced services are expressed and public goods provided
- Reduces cost, improves output and promotes more effective utilization of human resources, strengthens accountability and political skills as well as promotes local unity, sense of community and self-reliance by allowing citizens greater access to decision making.
- Promotes economic development which in turn will lay the foundation to reduce social inequalities.
- Empowers citizens, especially disadvantaged groups, in their relationship to a large, hierarchical, bureaucratic and distant government.

Despite the fact that decentralization appears to offer an attractive solution to a variety of social, political and economic problems, it is earlier said than done because the matter of its execution is more complex and may in practice produce results which are contrary to those intended or desired (Fenta, 1998).

Decentralization has also attempted to remove inefficient levels of bureaucracy, allowing for decision making that is both faster and more appropriate for local circumstances. Decentralization may permit efficiency gains by reducing the costs to the central governments of coordinating activities across large population or geographic areas, i.e. the removal of diseconomies of scale, particularly as local health officials may have greater knowledge of local health situations. Often decentralization is tied effort to promote political stability and to formalize institutional mechanisms that allow disparate groups to participate in governance (Vack and Wekwete, 1990).

Hence, one can understand that decentralization increases the efficiency and responsiveness of governments. Because locally elected leaders know their constituents better than authorities at the national level and so well positioned to provide the public services local residents want and need.

2.1.7. Conditions for Effective decentralization

Decentralization demands some kind of commitments and also the existence of well framed institutional structures to facilitate the development effort both at national, regional and local levels (Fenta, 1998; Fritzen and Lim, 2006). These scholars indicate the following points that are necessary conditions for effective decentralization. These are:-

- Political commitment- decentralization cannot occur until it is supported by the highest political authority. The degree to which national political leaders throughout the political hierarchy are committed to decentralize planning objectives determines the effectiveness of decentralization policies.
- Effective inter-organizational relations – Decentralization requires some sort of special implementing machinery, including an agency specifically responsible for coordinating and implementation an action plan and a public relations exercise to ensure understanding and support for the form.
- Availability and access to resources required – lack of resources implies incapacity of any agency. Most developing countries are mostly constrained by lack of finance to implement decentralization policies.
- Capacity of implementing agencies- genuine decentralization has to be institutionalized and integrating their own organization policies in to practice. The nature and capacity of that agency determine the outcome of decentralization policy.
- Complementary support- an effective process of decentralization must be based on a proper understanding of the limitations and the possibilities of top-down directives and bottom-up initiatives and impulses.

2.1.8. Decentralized Service Delivery

In recent years, countries throughout the developing world have been attempting to combat problems of poor public sector efficiency by decentralizing functions and responsibilities from their central governments to lower levels of the public sector. Many countries have resorted to decentralization measures as a way of realizing effective public service delivery and local self-rule.

Proponents of decentralization base their arguments on widely differing ranging from expected improvements in allocate efficiency, welfare and equity, through to increased participation, accountability and responsiveness on the part of local authorities and are framed in terms of the costs and benefits of decentralization while the latter are favored by social scientists and practitioners concerned with democratic aspects of the process. Decentralization has also attempted to remove inefficient levels of bureaucracy, allowing for decision making that is both faster and more appropriate for local circumstances (Hutchinson, 2004).

Decentralization is the heart of a range of reforms seeking to improve service delivery through paving a 'short road to accountability' citizens under a centralized regime normally have to voice their demand for better services to local level bureaucrats to respond. The nature of decentralization to local governments and communities often takes the forms of delegation of service delivery systems, without an accompanying devolution of financing authority. This is particularly so in many African and Asian countries (Robinson, 2004).

Changes in resources allocations, efficiency of service provision, quality of care, and utilization of services are all likely to be of relevance in both routine system monitoring and in evaluation studies specific decentralization. Decentralization reduces delays as well as indifferences in satisfying the needs of the clients are achieved. It can also create competition among local governments to better satisfy citizens needs (WDR, 1999/2000).

Additionally, decentralization is seen as a way of increasing the accountability of governments to their citizens and in improving transparency of government decisions. It also opens space for more community participation in policy making at local level but this required action community organization in relation to decentralized institutions. Because social services are at the local level, the quality of service becomes a key aspect in any process of decentralization (Commins, 2007).

2.1.8.1. Decentralization of Health

Countries often cite multiple reasons for decentralizing their health sectors. Decentralization has been linked to efforts by international donors promote public provision of primary health care. The World Health Organization stressed the importance of primary health care and the role of community participation in planning and providing health services in policy documents such as

1978 WHO/UNICEF primary health care declaration of Alma Ata and the 1981 Health for all by the year 2000 (WB, 1987).

Often health sector decentralization has been swept up in larger democratization and good governance; efforts which have helped promote greater political stability and local government responsiveness. The proximity between stakeholders brought on by decentralization can ease the flow of information for decision making and for holding officials and health workers accountable for performance. Building organizational and technical capacity in this area, including the capacity to generate and use information are critical elements of decentralization process and their monitoring and evaluation (Hutchinso, 2004).

Evaluation of decentralization as a process involves determining the success of the collection of interventions that might constitute a decentralization program in attaining definable goals. For example, more efficiently delivered health services, more responsive governments, and greater accessibility to health services for the poor and other vulnerable groups or improved equality of care and the stages of changes that take place along the way (WB, 1995).

Donors have often advocated decentralization either as a mechanism to encourage sustainability and to promote primary health care or for the potential efficiency gains that might be realized by incorporating local information in decision making, removing layers of bureaucracy or removing diseconomies of scale. The stated goals of health sector decentralization generally include improving the efficiency, equity accessibility, responsiveness and quality of health services delivery and the health of a country's population (WB, 2001b).

2.1.8.2. Decentralization of Education

Education decentralization and planning in general raise the question of how far decision-making should be decentralized for each level or type of education and how responsibilities will be allocated for the development of curricula and teaching methods, evaluation text book production and distribution, recruitment and maintenance, the establishment of links between parents and teachers, generating revenues, spending funds, managing local schools (UNESCO, 2005).

Decentralization of schools is becoming a global phenomenon (Fiske, 1996). International donors like USAID highly encourage strong community involvement in educational planning (Tesfaye,

2006). Decentralization of education is seen as one means of incorporating marginal groups in public decision making and improving the quality of services they receive (Wikler, 1989).

According to USAID (1997) governments in developing countries decentralize their basic education system: to save money and improve management efficiency and flexibility, to transfer responsibility should be vested to the lowest level of government, to give users a greater choice in decision that affect them, and to better recognize local resource mobilization, gives schools, an autonomy to use instructional inputs are not used by the schools and community conditions.

When decentralization in education takes the form of deconcentration, it is very difficult to ensure accountability of local administrative units and support structures. Educational decentralization which is currently engaging in the minds of planner and policy makers should be viewed as part of this larger phenomenon of referring governance structures and processes (Fiske, 1996).

Decentralization is being particularly recommended as an important means of achieving processes in mass education. All countries of the world reach the goals of education for all as endorsed by Dakar declaration. In fact, the Dakar Framework of Action explicitly calls for developing responsive participatory and accountable systems of educational governance and management. The experience of the past decades has underscored the need for better governance of education systems in terms of efficiency accountability, transparency and flexibility. So that they can responded more effectively to the diverse and continuously changing (UNESCO, 2005).

2.2. Community Participation

2.2.1. Definition of Participation

Academician, development agencies, and politicians have used the concept of participation differently. It is an elastic concept that can be used or abused. As a result, many agencies attempt to define what they mean by participation in their own context. Like WB and USAID consider participation as sharing of activities, resources, and decision makings in the development initiatives by all those who have interest on the interventions. The following are definitions of participation in their own words.

WB (1997) defines participation as it is a process through which stakeholders influence and share control over development initiatives and the decision and resources which affect them. It is the

process where by all those with an interest play an active role in decision making, and in consequent activities which affect them. USAID (1997) also defined as it is the active engagement of partners and customers in sharing ideas, committing time and resource, making decisions and taking action to bring about a desired development objective.

Participatory development stands for partnership which is built upon the basis of dialogue among the various factors during which the agenda is jointly set, and local views and indigenous knowledge are deliberately sought and respected. This implies negotiation rather than the dominance of an externally set project agenda. Thus, people become actors instead of being beneficiaries (Litvack, 1998).

To a family or household, participation is an internalized or deep feeling of obligation to take part in an activity for the welfare of the family. In a community, participation is the spirit of togetherness, solidarity and coherence that encourages taking part in an activity. Active participation implies a process of social transformation. As such it requires commitment and flexibility over long periods and does not always fit target-oriented agendas; be by governments alone or with the support of donors. Participation is often seen as an increase of responsibility given to local people, but without a corresponding increase in their rights and access to benefits. As such, participation actually becomes a burden and is usually refused or passively accepted (Smith, 1996; Irwin, 1997).

In all above cases, participation is sharing of activities, make decisions, resources and responsibilities in a certain intervention. Basically, participation is sought to make development intervention successful by using local knowledge, institutions, material and labor resources and scientific knowledge.

2.2.2. Types and Levels of Participation

According to Tekele (1990), there are three types of participation:

1. Participation traditionally- identified with political behaviors, voting, campaigning and lobbying.
2. Participation where clients and administrators develop a particular relationship for the purpose of receiving certain benefits.
3. Participation in administrative process: in decision making, implementation, benefiting and evaluation.

Furthermore, different scholars and donor agencies stated the levels of community participation in different social, economical and political issues. They also attempted to measure the community participation based on the level of participation. The following is table is showed the level of participation in a summarized way.

2.2.3. Levels of Participation

<u>Level</u>	<u>Characteristics</u>
1. Manipulative participation	<ul style="list-style-type: none"> • Participation is a presence with people's representatives on official boards but unelected and having no power.
2. Passive participation	<ul style="list-style-type: none"> • People participate by being told what has been decided or has already happened. It involves unilateral announcements by an administration or project management without listening to people's responses. The information being shared belongs only to external professionals.
3. Participation by consultation	People participate by being consulted or answering question. External agents define problems and information gathering process, and so control analysis. Such a consultative process does not concede any share in decision making, and professionals are under no obligation to take on board people's view.
4. Participation for material incentives	People participate by contributing resources. For example labor, in return for food, cash or other material incentives. Farmers may provide the fields and labor but are not involved in the experimentation or learning process. This is commonly called participation but people have no stake in prolonging technologies or practices once incentives have been removed.
5. Functional participation	Participation seen by external agencies as a means to achieve project goals, especially reduced costs. People may participate by forming groups to meet predetermined objectives related to the project. Such involvement may interactive and involve shared decision-making, but tends to arise only after major decisions have been made by external agents. At worst, local people may still only be coopted to serve external goals.
6. Interactive participation	People participate in joint analysis, development of action plans and formation of strengthening of local institutions. Participation is seen as a right, not just as a means to achieving project goals. The process involves interdisciplinary methodologies that seek multiple perspectives and make use of systematic and structured learning processes. As groups take control over local decisions and determine how available resources are used, so they have a stake in maintain structures and practices.
7. Self-mobilization	People participate by taking initiatives independently of external institutions to change systems. They develop contacts with external institutions for resources and technical advice they need, but certain control over how resources are used. Self mobilization can spread if governments and NGOs provide an enabling framework for support. Such self initiated mobilization may or may not challenge existing distribution of wealth and power.

Sources: Hobley (1996), Pretty (1995) as cited in Irwin (1997).

A World Bank review concluded that attempts to involve local people in the process of change and development was largely rhetorical and most projects treated local people as “passive beneficiaries”(Colchester 1994 as cited in Irwin, 1997).

2.2.4. Community Participation and Decentralized Service Delivery

Recently, community participation has become a central issue in development discourse. The connection between various forms of community participation and effective systems of service delivery can be assessed in a variety of ways including improvements in basic human development indicators.

Community participation in service delivery involves far more than getting direct services. A central issue is how different types of participation may contribute to strengthening both the short and long routes accountability for service delivery. Effective forms of community participation in service delivery provide both opportunities and incentives for local government officials to respond to community needs. This can create opportunities for more downward accountability and thus reduce the accountability gap between the citizens and policy makers (Commins, 2007).

Popular participation is the empowerment of people to effectively involve themselves creating the structures and designing policies and proposals that serve the interest of all (Sirak, 2004). Participation includes people’s involvement in decision making process, in implementing programs, their sharing in the benefits of development programs and their involvement in effort to evaluate such programs(Nigussie, 2007).

The principles of participation derive from and acceptances that people are at the heart of development. They are not only the ultimate beneficiaries of development, but also the agents of development. The rationale behind people’s participation in development is that participation strengthens as people’s capacities and their efforts to create and sustain the collective growth and development (Lopes and Theisohn, 2003; Goss, 2001, Nigussie, 2007). People are ready to contribute to local development projects if they can participate in the decision making and feel that the particular project improves their situation.

Genuine decentralization in a local government structures is devolution and assumed to enhance community participation for appropriate local development implementation. Popular participation is also assumed to be a good indicator of decentralization (Turner and Hulme, 1997).

Decentralized local governance assumes a participatory grass root level approach which the community become active participants starting from planning to implementation of development projects and become beneficiaries.

Community participation processes and mechanisms can strength accountability and also affect service delivery outcomes. Citizens can exert their collective voice /which occurs in the relationships between citizens and policy makers) to influence policy, strategies and expenditure priorities at different levels of policy making /national and local/ according to their wishes and preferences. Strengthening the citizen's voice enhances accountability of policy makers motivating them to be responsive the needs of communities and stimulates demand for better public services from service providers (WB, 2001b; Robinson, 2004).

Clients are usually a better position to monitor programs and services than supervisors in public sector agencies. When the policy makers provide link weak clients may be the best positioned due to their regular interaction with frontline providers. A transparent information system is the key to credible participation and a system of public accountability (Tsegaye Tegenue, 2006).

2.3. Decentralization in Ethiopia: Overview Historical Background

Like many African countries, Ethiopia is a complex mosaic of ethnic groups with different religious and cultural backgrounds. In Ethiopia, the request for regional autonomy or local self-administration has a long history (Fenta, 1998).Decentralization has become the political agenda of the Ethiopian government since 1991(Yigremew et al., 2005).

The 1995 Federal Democratic Republic of Ethiopia constitution clearly laid down the foundation of a decentralized system of governance by giving decision making powers to regional states. The constitution defined the powers of the federal and regional states. Regional states have been granted a substantial degree of decision making authority with a decentralized system of fiscal and infrastructure administration. The constitution also makes clear references to and justification for the decentralization process to grant adequate power to the lowest units of government to enable men and women to equally participate directly in the administration of their own affairs.

A. The Imperial Regime

Previously, Ethiopia was a highly centralized unitary state because the politics of nation building has been anchored on a strong centralist state that jealously guarded its sacrosanct central power (Meheret, 2000). Emperor Menelik II, who was regarded as the founder of modern system of governance in the history of Ethiopia (Asmelash, 1987). He was a pioneer of central administration. But the formalization of the central bureaucracy dated back to the times of emperor Haile Selassie I.

In the past, Ethiopia had made some preliminary attempts at decentralization. One of the earliest such attempts was in the form of local self-administration at Awraja by order No. 43 of 1996 (Meheret, 1998; Tegegne G/Egiziabiher, 1998). Though this indicates an interest in decentralization, it did not succeed in developing a framework and in fact the order was rejected by the members of parliament, and the Ministry of Interior could not defend the order.

The first move towards institutional decentralization in Ethiopia dates back to the imperial era when the Haile Selassie I government submitted to the parliament, the Awraja local self-administration No. 43 of 1966. The draft bill proposed to grant administrative autonomy to 50 'Awraja governments drawn from the majority of the country, 14 provinces on the basis of their potential to be self-sufficient. Despite strong resistance from parliament, the program was implemented in 17 selected Awrajas on experimental basis (Meheret, 1998).

However, conservative members of parliament were not ready to devolve authority to local governments due to their doubt that this would in danger the unity of the country. They suspected that the decentralization process may encourage secession instead of modernizing the country (Meheret, 1998; Muhammed, 2006). Therefore, there is no real decentralization that was aimed at bringing about empowerment and participation of the people during the emperor's regime (Kassahun, 2000).

B. Military/ Social Regime

The second experiment to decentralize state was made by Derg Regime. However, the Derg had no better record than the imperial in decentralizing the Ethiopian state. The Derg's plan was a response to political pressure intended to give some kind of autonomy to groups fiercely opposed to central rule. Hence, Derg established autonomous and administrative regions by proclamation

No.14 of 1987. This proclamation was necessitated by increasing instability in some provinces of the country notably, Eritria, Dire Dawa, Asseb, Tigray and Ogaden areas. These were the troubled areas where both ethnic/civil conflicts were raging and sentiments for separation were running high throughout most of the 19970s and 1980s. These regions were given autonomous status while the rest of the country was divided in to 25 administrative regions. The autonomous and administrative regions were further divided in to awrajas thus establishing three-tier divisions of center, regions and awraja (Meheret, 1998; Tegegne G/Egziabeher, 1998). Then, the attempts Derg's decentralization policy was futile due to the fact that it not basically designed to grant self-administration secure the preservation of place and stability of the country (Fenta, 1998).

C. The EPRDF

Following the fall of the Derg, the establishment of the Transitional Government in 1991 brought a new era in decentralization in the country. As a result of the various acts it introduced political decentralization is manifested through a change of government from a unitary form to a federal one composed of regions in 1992. Initially, the country was divided in to fourteen transitional regional governments but this was later reduced to nine regional states and two special administration areas. The 1995 federal constitution of the Federal Democratic Republic of Ethiopia indicates that regions are formed on the basis of population, settlement, language and identity. The constitution clearly laid down the foundation of a decentralized system of governance by giving decision making powers to regional states. Regional states have been granted a substation degree of decision making authority a decentralized system on fiscal and infrastructure administration.

The constitution also recognized nine regional states with equal powers and rights as member states of the Ethiopian Federation. The regions are divided into zones and the zones into woredas. The nine regions of Ethiopia are: Tigray, Afar, Amhara, Oromia, Somaliz, Benshangul/Gumuz, and Southern Nations-Nationalities. All of the regional states can be considered to have semi-sovereign status because each has its own flag, a constitution, a government, defined territory and population (Meheret, 1998; Tegegne G/Egizabher, 1998; TGE, 1992).

2.3.1. Decentralization and Basic Service Delivery in Ethiopia

Many countries in Africa are embarking on national policies of decentralization in public service delivery. Ethiopia is among the poorest countries in the world with per capita income of only US \$ 130. Poverty in Ethiopia is characterized by very low levels of education, poor health, low asset base and low productivity. These factors are self-reinforcing which makes it difficult to break the vicious cycle of poverty. The government is determined to scale up its poverty reduction efforts and has prepared Plan Accelerated Sustainable Development Ending Poverty (PASDEP). The PASDEP is covered from 2005/06- 2009/10 period (Africa Development Fund, 2006).

Decentralization has been the corner stone of Ethiopia's state transformation process and democratic governance since the early 1990s. The rationale behind decentralization is to bring accountability and decision making closer to the people to ensure that the delivery of basic services responds to local needs. The government initiated the first and second waves of decentralization in 1994 and 2002 respectively by devolving administrative and expenditures responsibilities, firstly to regional governments and secondly to Woreda (district) administrations. This was deliberately pursued with the view to link decentralization, local governance and provision of proper services (MOCB, 2004).

Following the implementation of decentralization, Woredas, have now assumed that the major responsibility for the provision of basic social and economic services such as primary education and health, agriculture, extension services, water and sanitation and rural roads. But, Various study results indicate that although regional governments and woredas have been assigned spending responsibilities for social and economic infrastructure and provision of basic services, their revenue raising capacity is not sufficient to enable them discharge their mandates effectively (Worku, 2005).

The GOE has developed policies, strategies and programs in all the sectors that provide basic service necessary for human development inclusive growth. These include like education, health and water. For instance, a key priority in GOE's existing health sector strategy is to strengthen the provision of preventive and primary health care services with a focus on diseases that afflict the poor most, such as malaria and tuberculosis. Donors have been supporting the sector within the framework of the twenty years Health Sector Development Program (HSDP). The third phase of

HSDP was launched recently following completion of HSDP II and covers the 2005-2008 period. A major component to HSDP III is the Health service extension programme, which seeks to the strengthen community based delivery of basic services and expands outreach (MOH, 2005).

By the sametoken, since 1997 the GOE has been implementing an Education Sector Development Program (ESDP), which is part of a twenty year education sector indicate plan for operationalizing the 1994 National Education and Training Policy. The ESDP is a collaborative effort between the GOE, and various stake holders, including parents, regional and Woreda authorities and development partners (MOE, 2005).The driving force of the ESDP is to expand enrollment at all levels of education, the goal of attaining universal primary education by 2015. The other objectives of the ESDP are: to improve educational quality, relevance and efficiency, expand access to underserved areas and promote girls education. The program is in the 3rd phase of implementation which will run up to 2010/11. A major focus on ESDP III is on quality improvement, expansion of teachers training, enhancement in the efficient use of resources, reduction in pupil/teacher ratios, and promoting equity in access to education to address regional and gender disparities.

2.3.2. District Level Decentralization (DLDP)

Recently devolution of power to lower level units has become a vital concern in many developing countries. The task indeed has also become a complex process as it involves resource mobilization and service delivery. It has also become an issue of povery reduction, good governance and capacity building (Litvack et al. 1998; Worku, 2005, Yigremew, 2005). The woreda is considered the key level of local government.

The Federal constitution reveals a strong preference for activist welfare state oriented government that is heavily involved in providing social and economic infrastructure for development. Article 90(1) states that ‘to the extent the country’s resources permit policies shall aim to provide all Ethiopians access to public health and education, clean water, food and social security(WB, 2001).

At present, there are five levels of government in the Ethiopian Federal structure: the federal, regional, zonal, woreda and kebele levels of government (Meheret, 2007).The functions assigned to the Federal Government are national in scope: monetary policy, foreign relations and defense.

While regions are responsible for drawing and implementing budgets, providing public services such as primary and secondary education and health, carrying out socio-economic and infrastructure development at regional and local levels (Mehert, 2007).

Following the depending of decentralization woredas have now assumed that the major responsibility for the provision of basic social and economic services such as primary education and health, agriculture, extension services, water and sanitation and rural roads. Although Regional governments and woredas have been assigned spending responsibilities for social and economic infrastructure and provision of basic services, their revenue raising capacity is not sufficient to enable them discharge their mandates effectively (ADF, 2006)

The woredas which are the lowest and basic units in the hierarchy of the government structure are also provided with more power than it had been before to play a much greater role. With in the framework of current state structure, woredas and kebeles are constitutionally recognized tiers of local government. By law, these two levels of government have elected councils and executive committees that are responsible for local governance, provision of public services and socio economic development (Meheret, 2007).

The DLDP sub-programme is aimed at supporting the decentralization and democratization efforts of the Government to alleviate poverty. The overall objective of DLDP is to enhance the institutions, working systems and human capital in an integrated and coordinated manner at Woreda and kebele levels to insure democratization, empowerment and good governance (Ministry of Capacity Building, 2004). The objective of DLDP also include deepening devolution of power to those lower level governments, institutionalizing the decision making power, enhancing the democratization process, promoting good governance, improving service delivery and creating viable development centers at the woreda level. DLDP has been under implementation in Amhara, SNNPR, Oromia, and Tigray Region since 2001, with a plan to start in the remaining five regions as of 2004. The implementation of DLDP was divided in to two phases of three and our years each. First phase (2002-2004) comprised of initial interventions in selected Woredas of regions. Second phase (2005-2008) was to focus on deepening and consolidating capacity building activities in the first four regions and continuing initial interventions as well as deepening and consolidation in the remaining five regions. As important

principle that should underline any form of decentralized government should be transparent and rational (logically lay down) decision making structures and processes.

The current brand of Ethiopia's state structure can be characterized as ethnic federalism. Since the country embarked up on ethnic-based institutional federalism some 15 years ago, serious shortcomings have been observed in promoting democratic governance and active public participation in the development power and authority at regional government levels, which has rendered may woredas depend on regions for matters that are largely local jurisdiction. An additional challenge to bring about effective devolution of responsibilities has been the limited administrative and resource capacity of woreda governments. Many woreda administrations are poorly staffed and under-financed to carry out the functions and responsibilities bestowed up on them, including managing the administration of their areas, providing public services and conducting democratic governance (Meheret, 2007; Meheret, 2000; Worku, 2005).

The policy of Woreda decentralization has not fully achieved its target of democratic governance and participatory development. Insufficient administration and institutional capacity such as lack of well-trained local government personnel; top-down decision and authority structures afflicting the state system: absence of transparency and accountability at the local level. Limited political space for non-state actors and non-ruling party organizations to partake in governance and development and shortage of budgetary and financial resources frequently faced by wereda governments are often cited as major limitations for promoting effective decentralization.

By 2001, Woredas were still deconcentrated units of regions rather than genuine local governments' administrator by democratically elected executives (Yigremew et al., 2005). A district level decentralization programme was then announced and became part of the broader Programme of Public Sector Capacity Building Programme (PSCAP).

2.3.3. DLDP Performance: Brief overview

The Federal DLDP office document (2004) indicated that despite legal frameworks for decentralized Woreda governments by 2004, it was found that Woreda continued to depend partially on zonal and regional governments. Thus, it was noted that Woreda decentralization has not been fully translated in to action due to lack of capacity associated with administrative and personnel problems as well as meagre revenue base. Woreda also lacked a well-functioning

organizational structure and faced an acute shortage of skilled personnel; office space and equipment to effectively discharge their constitutional responsibilities. It was also found that the process of democratic participation and consultation was not put in place and system and procedures for decentralized service delivery had not been developed to ensure good governance (Yigremew et al., 2005).

Decision making power in many cases such as in areas of personnel and finance is largely withheld at regional level justified by lack of capacity at the Woredas. Lack of adequate personnel and budget to practice the existing woredas structures (Worku, 2005) Service delivery was not improved as expected as a result of decentralization process. Despite the legal powers assigned to Woredas to administer services such as education and health, resources and capacity constraints have undermined the exercise of such powers. There are no systematic mechanisms for conducting real participation. Issues of accountability and transparency are not adequately addressed (Yigremew et al., 2005; Worku, 2005; Meheret, 2007).

Despite there is a positive political and legal pronouncements, decentralization in the form of devolution of power to local accountable governments and the people is far from being realized in Ethiopia. Decentralization policy is more of a high level political restructuring/ethnic federalism than devolution of power to local governments and citizen, despite constitutional provisions decision making power is not yet adequately devolved and resources are not transferred to local governments and the desired expansions of public services has not been achieved(Yigremew et al., 2005).

2.4. Service Delivery (Education and Health)

The intensifying of decentralization to woreda level has contributed to strengthening of woreda level educational and health institutions. It also provides opportunities to strengthen local governance, increases of sense of accountability, and broadens the participation of communities (MOE, 2005; MOH, 2005).

Efforts have been made to build the capacity of the woreda offices particularly woreda education office through intensive training organized in the areas of educational planning and management, financial management, auditing and procurement. It is also noted that schools and Parent Teachers

Associations (PTAs) need to build their capacity before more responsibility could be given in the area of financial management (MOE, 2005)

The Ministry of Education was involved in all aspects of public education including planning, budgeting, school construction, and the production and distribution of text books and other educational materials. Following the shift to a federal structure, five main managerial and administrative organs constitute the education sector; central, regional, zonal, woreda and institutional. The functions of the Ministry of Education have reduced to setting fundamental educational policy, broad educational, planning and programming, maintaining standards and setting procedures and providing technical assistance where needed presently more responsibility and authority is being devolved to lower administrative levels such as the woreda which is the focus of this section(MOE, 2005).

After 2001, as power assume devolved to woreda, the woreda has been structured in to different offices in accordance with the provision of the revised regional/state constitution, which laid down the legal basis for decentralized service delivery. The woreda has both legislative and executive organs. Its council is elected from the kebeles and issues directives and policies to the woreda executive committee. The woreda prepares economic development and social plans as well as implements laws, regulations, policy and directives issued by the regional council.

The woreda is responsible for supervision, coordination and implementation of primary education services and health services, agricultural services, rural roads, water supply and sanitation, rural transport services, justice, information, etc. within its jurisdiction.

Health services in the woreda are also related with primary health care activities provided as health centers, health stations and health posts. According to the health policy, the objective of health service in the future is to give a comprehensive and integrated primary health care in the health institution at the community level by emphasizing the preventive aspect of health care (communicable disease, common nutritional disorder and environmental health and hygiene).In addition, the policy aims at democratizing the health system by establishing health council and health committee at grass roots with strong community representation(MOH,2005).

The major objective establishing health committee is to empower the grass roots in identifying major health problems, budgeting, planning, implementing monitoring and evaluating health

activities. It also points out that decentralization shall be realized through the transfer of major parts of decision making, health care organization, capacity building, planning implementation and monitoring to regions with clear definition of roles (Bereket, 2000).

Then, the theoretical and conceptual issues that are discussed on the above will be used to assess the situation of the state of decentralized service delivery in Abobo and Gog woredas in Gambella region.

CHAPTER THREE

3. Background of the Study Area

This chapter deals with description of the profile of the regional state of Gambella and the two districts Abobo and Gog. The chapter focuses on the physical features and socio-economic activities of the region and the local governments on which the services delivery activities are grounded.

3.1. Profile of Gambella People's National Regional State

Gambella People's National Regional State (GPNRS) is one of the nine regions that are provided with power of autonomy under the Federal Government of Ethiopia. It was established in 1992 based on Proclamation No. 1/1992 which was issued to establish National Regional states in the country. The region is found in the south western part of the country and borders with the Oromia and Southern Nations and Nationalities and Peoples Region in the South East and the Sudan Republic in the west. The distance of the region is 777kms away from Addis Ababa.

Currently, the region is administratively restructured into three zones (Anwyaa, Nuer and Majanger), eleven woredas and one city administration. It has the following nationalities in order of population size: Anwyaa, Nuer, Majanger, OPo and Komo. According to the 1994 census, the Gambella population was about 228,000 in the year 1994. There are five ethno-linguistic groups living in the region: the Anywaa (27%), the Nuer (40%), the Majangir (6%), the Opo and the Komo (3%). There are also significant number of highlanders migrants who constitute (24%) of the Gambella population.

Anywaa, Nuer and Majangir languages are being used as medium of instruction in primary schools. Gambella is also a home for migrant people who come from different parts of the country at various times that belong to diversified ethnic groups mainly Oromo, Amhara, Tigray and Gurage. The migrants do not form an ethnic group per se. They are referred by the generic term Degegna ('Highlanders'), in reference to their place of origin that is the highland regions of the country. In addition, there were also refugees residing in Gambella. In this regard, the total number of refugees was 16,455 in Bonga, 34,418 people in Pugnidu and 10,547 people in Dimma refugee camp.

3.1.1. Geographical Location, Topography and Climate

A. Location

The Gambella Regional State is located in the Southern part of Ethiopia. The region extends from 7°5' -8°45' South latitude and 33° -35° 15' longitude. The region is bounded by Benishangul Gumz and Oromia regional states in North, Southern Nations Nationalities and Peoples Region in south, Oromia and SNNPR in the East and Sudan Republic on the West. It covers a total area of 34,063 km² (Gambella Regional State Startegic Plan, 2006)

B. Topography

The study area is situated between altitude ranges of 300-2300 meters above sea level and characterized by different topographic features. The average temperature of the region ranges from 27°-33° but sometimes it reaches 45° c during March and May.

The eastern part is characterized by high mountains rugged terrain (about 20% of the area is highland at altitude of over 1500m) and upper reaches high Peak mountains and steep slopes, the elevation of which is over 2000 meters. Most of flashing rivers and streams originate from these areas and are directed to western direction. These areas include the highland of Godere and Dimma Woredas.

The central part of the region that covers about 44% of the total area is characterized by an undulating plains and lies between elevations of 500-1000 meters. It includes most parts of Gambella, Abobo, Itang, southern parts of Godere, eastern parts of Jikawo and some parts of Gog and Jor woredas. Low lying flat plain land is found in the western part of Gambella and estimated to occupy some 48% of the total areas and the elevation varies between 300-500m (Gambella Regional State Strategic Plan, 2006).

C. Climate

The Gambella People's Regional State is characterized by different climatic features. The region is divided into three agro-climatic zones namely, Woina-dega, Kolla and Bereha. In zones falls Godere and part of Dimma wereds fall in Woina-dega; in the Kolla zone falls, Abobo, Itang and Gog woreda; and Jor, Jikawo and Nkobo woredas are in the Bereha climate zones. Regional mean temperature and rainfall decreases from east to west (mountains to plain areas) depending on the

agro-ecology of the area. Hence, the mean annual temperature of the region varies from 17.3°C to 28°C in plain. The temperature ranges from 10.3°C to 47°C and reaches its maximum around mid March. The region has an elevation that ranges from 400-500 meters above sea level and has annual rainfall 900-1500mm.

D. Demographic Features

According to the 1994 census, the population size of Gambella region was about 228,000. The total population of the region for the year 2006 is estimated to be 253,000 (CSA, 2006). Among this, 129,000 are (49%) males and 124,000 (51%) are females. From the age structures perspective, people under 15 years of age were about 41.8%, 15-64 of ages, 72% were economically active and 27% were economically inactive. As far as distribution of population by place of residence is concerned, in 1994 the urban and rural residents were 27,863 and 165,118 respectively.

E. Socio Economic Features of the Region

In Gambella region, all the rural communities practice very small scale rain fed agriculture. The communities also practice livestock rearing. Hence, it would be very appropriate to consider the community as leading agro-pastoral mode of production. Very small number of people in community practice fishery business and almost all portion of the community members who have suitable conditions are also traditionally engage in bee keeping. Petty trade is also the practice in the urban community.

Agriculture is the main stay of the economy in Gambella region. The region has great potential of the agricultural development either rain fed or irrigation. It also has fertile land and water resources, which were suitable for crop production and animal husbandry. Thus, it is possible to produce exportable agricultural out puts that could bring economic development to the region as well as to the country.

However, the use of low agriculture inputs, erratic and unreliable rainfall pattern and lack of adequate and efficient extension service contribute to the frequent drought and famine in most parts of the region. As a result, productivity is low.

The main stakes of economy are farming and animal husbandry for Anywaa and Nuer respectively. Hunting, fishing and bee keeping are used as supplementary source by Anywaa and Nuer but bee keeping has been the main source of income for Majanger ethnic group. The various groups of people are differentiated along their livelihood strategies. For instance, the Anywaa and the Opo are predominantly cultivators, the Nuer are agro-pastoralists while the Majanger combine hunting and gathering with shifting cultivation.

Regarding the transport network, there is only a bit more than 350 kilometers, all weather roads and the rest are seasonal roads. Furthermore, the Baro river of Gambella is the only navigable river in Ethiopia. Nevertheless, due to breakage and lack of maintenance of the boats, the river is not frequently used.

Provision of social services is not still adequate. The health coverage of the region is 47%. There are 1 hospital, 5 health centers, 29 clinics (22 government and 7 private clinics), 42 health stations and health posts. But, among these, more than 1/3rd of them are dysfunctional due to shortage of manpower and other factors. Regarding, health personnel there are concerned, there are 3 doctors only, 1 for about 90,000 people. In the region only 33 health extension works and they graduate last October in 2007. The prevalence rate of HIV/AIDS in the region is 1.47% in rural areas and 14.87% in urban areas (Regional Health Bureau, 2006).

During the last five years, efforts have been made to provide education for children, youth and adults through formal and non-formal approach. As a result, a significant change is observed in the number of students enrolled both in primary and secondary schools although still it is inadequate and the quality is in big question. The change is brought about the regions commitment to give priority to this sector. However, the region also understands the huge task that should be accomplished to further strengthen the sector.

Regarding literacy rate, the 1999 socio-economic survey of the region shows that larger proportions (54.1%) of the population in the surveyed area were reported to be illiterate. The proportion of literate people in the area accounted for 43.3%, of these, 38.2% had completed only grades 1 to 6. In the region, there are 158 primary, 6 secondary, 2 preparatory, 1 technical and vocational schools and 1 Teachers and Health Science College in the region. However, 40% of the schools are made of grass roots or under free shade and severe manpower problem. In addition to

these, there are also 9 Kindergarten in the region. These are found that in the region capital Gambella and other cash crop production areas like Godere woreda. But the participation rate at this level is very minimal; only 1,134 preschool children are enrolled at this level.

The Bureau was also reported that the Gross Enrollment Ratio (GER) at primary school is 124.4 and 127.4 in 1995 and 1997 E.C respectively. Whereas, the GER of 1996 was lower than the respective year, which was 106.6% due to insecurity problem that occurred prevail in the region. It noticed that December 1996 insecurity has caused a destruction of about 33 primary schools mainly located in Anywaa Zone. The net enrollment rate is not as significant as GER. Net Enrollment ratio at primary schools in 1995, 1996 and 1997 are 88.9, 72.5 and 59.6 respectively.

School enrolment of children is very low. According to 1997 E.C. academic calendar, enrollment in lower primary schools (1-4) was 35, 728, of which female students accounted to 14,959. The share of female students in this level was 41.9%. In the upper primary schools, out of 18,140 students 6,184 were female. This accounted for about 34.1%.

Agriculture is the major economic activity in the region followed by petty trade. More than 90 % of population the region is living in rural areas. The rural population derives its livelihoods from mixed farming and non-farm activities such as trade, handicraft production. The major agricultural activities include cereal, oil seeds, tobacco, horticulture production and animal husbandry.

Agricultural production is at subsistence level and largely depends on traditional means of farming. Oxen plough, which mostly done by males, and traditional simple agricultural implements are the means for farming in the region.

The main actors both in traditional agriculture and off-farm activities in the region are females. Females mostly generate off-farm activities, which supplement rural households' incomes and make significant contribution to the maintenance of the rural people. Development of commerce is also very low even in urban centers of the region. A commercial farm development is still in its rudimentary stage

Though there is vast land suitable for agriculture, the average size of rural land holding by rural households is less than 1 hectare per household. The average yield from this holding is 10 quintals

per hectare, hardly enough to feed the household until the next harvest. Agricultural production thus falls far short of ensuring food security in the region and leaves the population much to depend on food aid in effect specially females and children are more vulnerable.

The region is constrained by multidimensional social and economic problem. Weak public service capacity, high illiteracy rate, poor access to health services and absence of rural infrastructure to support rural households improve agricultural activities have posed tremendous development challenges to the regional government. As the result, poverty is pervasive; with about 60% of the population living below the poverty line in the region. The illiteracy rate is very high for females compared to males. It is the females who suffer most because of lack of health facilities, poor infrastructure and harvest in the region (Gambella Regional State Strategic Plan, 2006).

3.2. Profile of Woredas under study

This section gives an overview of profiles of the two study areas. It highlights bio-physical setting, socio-economic features and development opportunities of the local governments. This information helps for planners and policy makers understand the challenges and development potential of the areas. The information also helps to plan for effective public service delivery that can bring about local development.

3.2.1. Abobo Wereda

3.2.1.1. Location, Demographic and Socio-Economic Features

Abobo is one of the 11 weredas in Gambella Regional State. It is found in Anywaa Zone. There are 5 weredas in Anywaa zone. It is located at 45 kilometers away from Gambella town (the regional capital city).The woreda shares boundaries with the Gambella town in south, Gog woreda in the East, Godere and Jinkawa in the West. According to CSA (2006), Abobo has a total area of 3,515.78 km² which divided into 16 administrative rural kebeles and one town. Abobo town is the administrative center of the district/woreda.

The total population of the Abobo woreda in the year 2006 is estimated to be 19,039. Among these, 9,824 are males where as 9,218 are females. The population is characterized by high growth rate increasing at a rate of 3.1 annually.

The population density was 5.4 per square kilometer. There are 9 primary schools, 8 junior secondary schools (1-8), 1 senior secondary school (9-10) and 4 Alternative Basic Education Centers (Non-formal schools) in the woreda. According to the information obtained from the education office of the woreda: the GER of primary school in 2005/06 was 112.4 % while the NER (Net Enrollment Ratio) was 56.6 %. The energy sources in the district are firewood, charcoal, animal dung, crop residue, kerosene and hydroelectric power. The education coverage of the woreda was 65% but the quality is very low.

About 85% of the woreda population lives in rural areas with the major occupation of raising livestock and farming in traditional way. Abobo is a better production area of crops like maize and sorghum in the region. These crops are better produced than other crops with small holding subsistence farming system in the woreda. The natives used to plough the land with hand that is called 'Shalla'. In this district, a large number of highlanders are living in the rural area. They came to the region during the Derg regime through the program of resettlement because of the drought, mainly from Wollo. These highlanders had better economic status when compared with the natives because they used farming with oxen and using extension packages.

Additionally, the woreda has high potential for agriculture, cotton production and fishing. There is one state farm and recently one investor started in the cotton production. There are many hectares of potential fertile for cultivated land.

3.2.2. Gog Woreda

3.2.2.1. Location, Demographic and Socio-Economic profile

Gog woreda is one of the 11 woredas in Gambella People's Regional State in Anyawaa zone. According to CSA (2006), the woreda has a total area of 7,138.60 km² which divided into 10 administrative Keble. It is about 116 kilometers away from Gambella town. Pignido town is the administrative center of the district/woreda. The neighbors to the Gog Woreda are Abobo woreda in the North, Dimma in the South East, Jor in the west and Sudan in the South West.

The total population of the woreda for the year 2006 as CSA's estimate is 20,755, males are 9,572 and 11,183 are females. The total population density was 2.9 per square kilometer. The woreda has a hot climate condition with high range of rainfall. There are 5 health posts (among this one is not functional) and in the woreda there is one refugee's camp with about a population of 21,000. The

woreda health coverage is 30% and the service delivery coverage is very low due to different problems like poor motivation, inaccessibility, lack of poor motivation, inaccessibility, lack of budget, poor management of available resource, lack of community participation, etc.

Table 1. Population of size of sample districts

No	Name of woreda	Population		Total
		Male	Female	
1	Abobo	9,824	9,218	19,039
2	Gog	9,572	11,183	20,755

Source: Woredas Administrative Office 2007/8

In the woreda, there are 13 offices. It has no electric power. It has got generator power only from 6 pm-11pm and 7am-12am per day. In the woreda there are also one senior secondary school (9-10), 8 junior secondary schools (1-8), 4 first primary schools (1-4) and 6 Alternative Basic Education. The total education coverage of the woreda was 35 % (Gambella Education office, 2006)

From the above data one can understand that both woredas are predominantly agricultural and largely subsistence rural economies. However, there is a difference between the two woredas in terms of infrastructure development, coverage and people's access to social and economic services.

The two woredas have been able to provide elementary and secondary education 65% and 47.5% in Abobo and Gog respectively. By the same token, on a comparative basis, Abobo (47%) and Gog (35%) have provided higher access to health services, which have only a relatively low. This indicates more people have got access to education than to health in both woredas.

During the interviews, woreda officials revealed that the reason for the disparities in the provision of basic services between the two woredas is that Abobo is located near the regional town and has better infrastructure like electricity and transportation system. Consequently, the woreda has got better manpower than Gog woreda. In addition to this they mentioned that close monitoring of social and economic programs by the regional government; administrative capacities for implementing development programs; and/or political commitment by woreda leaderships, have contributed for the success in providing improved and better public services.

Table 2. Access to public services

No	Name of woreda	Education	Health
1	Abobo	65%	47%
2	Gog	47.5%	35%

Source: woreda Finance and Economic Office and Field data; 2007/08

3.2.3. Duties and Responsibilities of the Woreda in Public Service Delivery

The State of Gambella Peoples revised the constitution of 2003 which was established woreda administrations with necessary legal, institutional and financial powers. This was aimed at making them effective and efficient institutions of local government for effective public service delivery and economic development. The constitution also provides for direct election of woredas and kebele administrations (the council) by local people and also recognizes woreda and kebeles institutions as institutions closer to the peoples, kebeles institutions.

Accordingly, like any other woredas in the country in general and the woredas in the region in particular, the woreda study woredas are empowered to undertake the following duties and responsibilities. These include among others:-

- Preparation and approval of annual woreda socio-economic development plans and budgets
- Collecting local taxes and levies administering fiscal resources available to the woreda
- Constructing and monitoring low grade rural tracks, water point and woreda level infrastructure (offices, houses), managing agricultural development activities and protecting natural resources irrational use and depletion.
- Administration of primary schools and health institutions

Furthermore, the woreda is responsible for supervision, coordination and implementation of education services, health services, agricultural development activities, rural roads, water supply and sanitation, rural transport services, justices, information etc, within its jurisdiction.

For narrowing any expenditure gap that may surface due to low revenue capacity, the woreda is also entitled to receive regional transfers in the form of block grants since 2002. The grant is aimed at offsetting the budgetary constraints in financing woreda expenditure needs. Then, the woreda council makes budgetary decisions on the block grant it receives from the regional state.

3.2.4. Overview of Public Services Delivery and Organizational Structure the Woredas

In discharging its duties and responsibilities in public service delivery in an efficient, effective and responsive manner, the woreda is structured and organized with its own manpower since 2003. The woreda's public service delivery involves different public sectors and community structures in the woreda and other actors outside the woreda. The main stakeholders in the delivery of public services at woreda level are the communities, other stakeholders including regional and zonal bodies, private organizations, sectoral offices and the woreda administration through the provision of general guidelines and technical supports.

Public service delivery in the woreda has been structured at two levels like any other woredas in the country. The first level which is structured at the woreda capital includes the administrative council and public service institutions that include different sector offices.

Woreda structure has these 3 organs. The highest administrative organ of the woreda is the woreda council that is directly elected by the woreda community through periodic elections and constitutionally accountable to the electorate. The woreda executive organ is composed of woreda administrator, deputy administrator and heads service offices. At the lower level, there is the kebeles administration.

As table 1 .indicated that in the woredas under study there are 10 and 17 Kebeles at Gog and Abobo woreda respectively. The respective communities in each Keble elect Keble Council, the chairman and his deputy. There are also social courts and security organs. Though Keble administration does not enjoy a wide range of constitutional power as the regions and woredas, they undertake day-to-day administrative activities in their respective areas.

Table 3. Number of kebeles in the study woredas

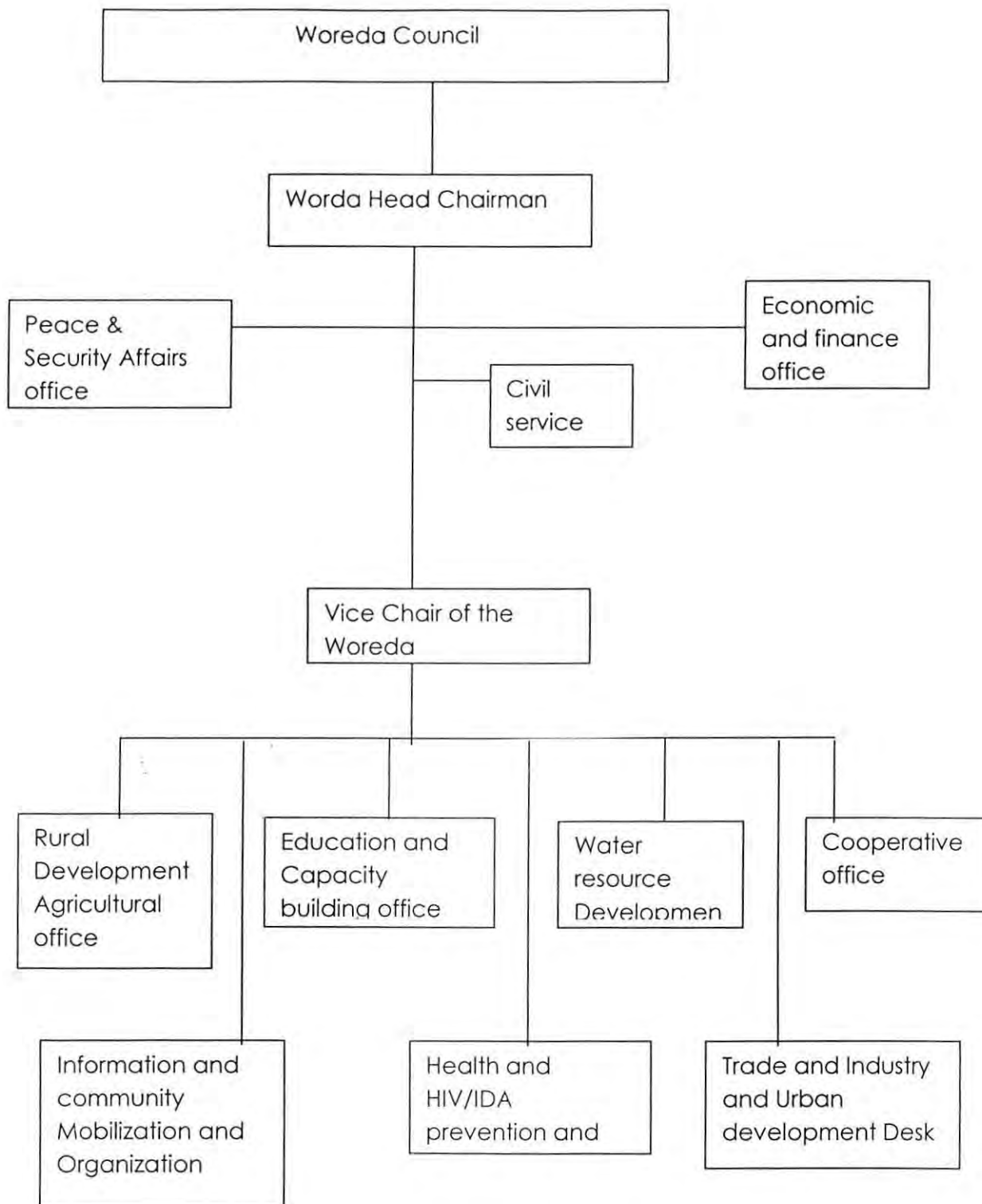
No	Woreda	Number kebeles
1	Abobo	17
2	Gog	10

Source: Woredas Administration office in 2007/2008

Under Keble level, people are grouped into sub-kebles/village but these are not legally instituted structures and are not recognized officially.

Public service delivery organizations in the woreda include different sector offices. This is presented below on the chart.

Chart 1. Organizational Structure of the wordas Administration (Abobo and Gog – Similar)



Source: Woreda Administration Office (2007/2008)

The education office coordinates and implements primary educational services of the woreda in different Kebles. Similarly, the health office also coordinates and implements health care activities through health centers and health posts. By the same token, the structure of different sector offices has similar arrangements with the exception of some modification in restructuring or reorganizing the services of support staff in a pool system.

In the interviews and discussions woreda officials explained that the pool system is a system or an arrangement to deploy staff at woreda levels to reduce the cost of decentralization and improve efficiency. Accordingly, administrative service is provided only with one pool system. The first pool for administrative service is located under the woreda administration office while the second is located under the Economic and Finance office. All administrative matters related to personnel administration is handled by these offices and all the woreda offices get services from the two main offices so that they don't have their own administrative section.

All sector offices in the woreda also financial, audit and inspection and procurement services under finance and economic development offices. The office deals with day-to-day activities of financial matters. Each office makes only payment requests as per its accounts within the office. This implies that personnel administration, procurements and other financial management activities are not dealt by each office contrary to the structures before decentralization. Though there are lots of complaints as to the efficiency and convenience of the pool system for the activities of different offices in the woreda, woreda administration officials mentioned that the pool system has some contributions to minimize the problem of coordination and manpower constraints.

Among public service organizations in the woreda the study focuses on the offices dealing with education and health sector in the woreda. These services play significant role in human, social and economic development and are also considered as basic services at local level. In view of this, the offices were structured in line with their respective duties and responsibilities at worda level.

CHAPTER FOUR

4. Data Presentation and Analysis

This section presents and discusses findings which obtained and observations drawn on through interviews, focus group discussions and observations in the study areas. This section also analysis the performance of education and health sectors as a measure for the performance of decentralized service delivery.

4.1. Power of the Woredas

The legal basis of woreda and kebele is laid down in the 2003 revised constitutions of the Gambella National Peoples Regional State (GPNRS). In this regard, the Ethiopian legislative provision of powers and responsibilities to regions is given in article 52 of 1995 FDRE Constitution. The constitution does not make a clear reference to the woreda administration structure in its articles. However, article 50(4) of the constitution in reference to the organizational structure; give the regional state the power to establish the local government and other necessary administrative levels. Adequate power shall be granted to the lowest unit of government to enable them participate directly in administration of such units. Besides, proclamation number 4/2003, the revised constitution of GPNRS in its part dealing with organization and powers of woreda administrative, specify that the woreda administration shall have the following major organs: the woreda council, the woreda administration and first instance court. The constitution stated the woreda is subordinate to zonal Administration.

The woreda administration shall have the power to prepare and decide on economic development and social services, plans and implement policies and directives issued by the Regional State and Zone Organs. The woreda council within the woreda of its establishment is the highest body of the state. In attempt to show the accountability of the woreda council, the constitution of the regional state indicate that without prejudice to its rights and powers to exercise self administration, develop its woreda and determine its own internal affairs. Woredas are responsible to regional government and zonal administration.

According to the data from the field study, the principal organs of woreda governments comprise of the woreda council, the woreda administration and first instance court. The administration

structures of woreda consist of an executive committee, an elected council and a pool of civil servants. The executive committee and the permanent assembly meet every three months to discuss and decide on the social and economic development plans of the district. The executive committees are fulltime employees.

The woreda council has an authority to approve the woreda's budgets and review the work progress of the different sector offices and the executive committee.

A woreda is administered by an executive committee, it is also known as the cabinet, whose members are 11 elected individuals. The chairman of the executive committee is the chief administrator of the woreda and the deputy usually serves as the vice administrator and the secretary of the cabinet.

Most other members of the committee are heads of sectoral offices, such as education, health, agriculture and rural development, youth and social affairs, finance and economic, etc. In the council allocates block grants received from regional state whereas the main duty of the executive committee is to implement policies and decisions made by the council. Thus, the executive committee is drawn from the woreda council and is responsible for the day-to-day activities.

Although the regional constitution put the powers of the woreda and kebele administrations, findings of the study indicate that the powers of both administration units do not enjoy their decision making power; because power is not devolved in the real sense. For instance, in GPRS still woredas are accountable to Zones. However, woredas report their activity performance or other issues to regional state. Due to this there is no good relationship between the woreda and zone. This indicates there is no clear inter- governmental relations between woreda and zones. This creates confusion of accountability.

According to the law, wordas are formally declared to be independent local government authorities but in reality there is a great deal of supervision and control by regional governments over woredas affairs. In the study woredas, most capital projects(construction of schools and health units) have been carried out by regional state. Regarding this Meheret (2007) noted that in Ethiopian situation where local governments are heavily dependent on regional and central governments for budgets and single party dominance; the independence and autonomy of woreda

governments as well as their accountability and responsiveness to local communities will much to be desired.

In the discussion time woreda officials raised both zonal and regional administration interfered and ordered the woredas. It was also found that there was not enough decision-making power transferred to lower level local governments. Studies showed that in spite of the existence of a system which aspires to decentralize power to democratically elected political executives at the district level, Woredas were found acting as deconcentrated administrative units of regional and zonal sector bureaus and administrations. Woredas enjoyed little fiscal or administrative autonomy to respond to the local needs of their constituencies.

Some Kebeles collect taxes but submit all of it to the woreda. Mostly kebeles are engaged at peace keeping and order and mobilization of people for Administrative and political purpose rather mobilizes the community to participate in different development activities. According to this finding:

- All visited kebeles did not have office and archives.
- Officials were neither permanently employed nor paid anything; they just give free service with their free time.
- There is no budget allocated to the kebeles nor they have revenue sources; some kebeles collect revenues but submitted all to the woredas.
- Kebeles were highly engaged in peace keeping and order and community mobilization for administrative and political purpose rather than mobilizing the community to participate in different development activities.

Hence, the field data revealed that power is deconcentrated not devolved fully on main issues like revenue generating, manpower recruitment, implementing capital projects and to fill the capacity gaps(woredas can not give trainings for their employees)

4.2. Level of Education of Woreda Executive Committee Members

Woreda executive committee members are key players in decision making and promoting decentralized service delivery and good governance at the local level. Several studies indicate that

the acute shortage of personnel with sufficient educational qualifications, training and experience is a major capacity constrain in implementing the woreda decentralization agenda and provide quality public services.

As can be observed in table 4, the majority of the cabinet members of the woreda are below the level of diploma in their educational qualification. It was also revealed that most of the cabinet members were former elementary and secondary school teachers with little or no formal training in the critical areas of public service delivery, good governance and local economic development. This may also show the lack of capacity among the executive (cabinet) members of the woreda to shoulder the responsibilities vested on them.

It is very difficult for both local governments to plan, implement and manage appropriate social and economic development projects in their respective areas. Consequently, it is challenging to expect from these officials to effectively and efficiently implement and manage development projects and the state basic public services in their locality.

One can easily see the difficulty for decentralization programs and policies to be properly implemented in the woreda. As it mentioned in the literature part genuine decentralization has to be institutionalized and integrating their own organization policies in to practice. The nature and capacity of that agency determine the outcome of decentralization policy. The idea of bringing service closer to the client is appealing but it has been found that local governments lack skilled manpower for managing and implementing different public services. It is also challenging to bring about effective devolution of responsibilities has been the limited administrative and resource capacity of woreda governments.

Moreover, the proportion of women in the woreda executive committee is insignificant. There were only two women in the two woredas. It is; therefore, possible to conclude that males dominate the leadership position of government offices in both woredas. Equity is one of main concern of decentralization policy.

Table 4. Educational level the woreda executive committee member

No	Woreda	1 st degree & above	College diploma/certificate	High school diploma	Below high school	sex		Total
						M	F	
1	Abobo	-	3	3	5	10	1	11
2	Gog	-	2	3	6	10	1	11

Source: Offices of local governments

Furthermore, focus group discussions and interviews conducted reveal that there is also misplacement of officials. As a result of decentralization policy in the country there are shifts of duties and responsibilities from regional governments to woredas. This makes the role of executives and employees more complex and demanding at the local level than it was before. This has an implication on the implementation of decentralized service delivery. As it was stated previously the availability of qualified human resources has direct impact on the local governance and decentralized service delivery. Planning, implementing and evaluating various development and public service projects have a positive correlation with the skilled and experienced manpower. Mobilizing, coordinating and empowering the community for participation in development projects is also highly depend on the skill and the number of the manpower of the local governments. This was missed in the study areas due to the capacity problem. Then, the executive committee could not carry out the duties and responsibilities given by the regional constitution.

4.3. Party Politics in the Woreda

The involvement of different party politics at the local level is a crucial element in democratic governance. One of the greatest benefits of different parties acting at the local level is that they can deliver different policies and programmes as alternatives to citizen; and widen the political space for different actors to participate in economic and political decision making (Meheret, 2007).

In GPNRS there is only one party that is known as Gambella Peoples Democratic Movement (GPDM). This was established in 2003 from the three major ethnic groups (Ayanna, Majanger and Nuer). As woreda officials reported during the interview; the party was established mainly to

avoid the ethnic conflicts in the region and to devolve power to the woredas. The region is totally dominated by one party. Similarly, in group discussions and field interviews with administrators and sector office heads, it was pointed out that the GPDM is a sister organization of EPRDF. Indirectly, the party is under the control of ruling party.

Consequently, all sector office heads and members of the executive committee are members of GPDM party. This affects the creation of competitive politics and participatory governance at the local level negatively. Hence, as Meheret (2007) indicated that enveloping party control of executive leaderships and important sector offices will most likely result in the disappearance of the distinction between government and party functions at the woreda level.

Consequently, there is no chance for different parties acting at the local level to offer different policies and programs as alternatives to the local community and widen the political space for different actors to participate in economic and political decision making.

Furthermore, focus group discussions with participants disclosed that GPDM membership has become number one criteria to get position in the region than merits/capacity of the individuals. This encouraged upward accountability for regional and federal politics instead of the local community. From this, one can easily understand that political membership has better value than qualification. This also encourages officials to be loyal for political party instead of upgrade themselves with education and training to provide quality services for their community and make themselves competent.

During the discussion with community representatives and civil servants (health professionals and teachers) frequently cited woreda officials usually worried for political issues and highly engaged with political meetings instead of prioritizing and addressing the needs of the community. In addition to this, participants in both woredas revealed that it becomes difficult to distinct the government and party functions.

4.4. Inter -Governmental Relations

As was explained in the literature, currently Ethiopia has a 5-tier system of government: federal, regional, zonal, woreda and kebele levels of administration. The powers, duties and responsibilities of each tier are defined by law. According to the federal constitution, local

government is responsible to regional governments, which determine the power, authority and functions of any sub-national governments like woreda and kebele administrations (Meheret, 2007).

During the field study it was observed that although the constitutions and law stated the accountability of each tiers on paper, the actual practice in inter-governmental relation is not clear in GPRS. The lines of authority and accountability between woreda, zone and regional government is not clearly defined. For instance, in the revised regional constitution woredas defined as are subordinate to zonal administration but in practice woredas are reported to regional state.

Due to this, there is an authority and accountability claims between woreda and zonal administrations. It created a confusion of accountability and lack of transparency between the tiers. Much of the functional and authority relationships are largely governed by political considerations rather than by clearly defined set of authority and accountability parameters at each level of government. From we can infer, though the law recognizes the formal independence of each tier of government, the governmental structure is generally characterized by the top-down modes of control and supervision.

4.5. Access and Coverage of Public Services

The major objective of the decentralization of programme is to enhance the coverage and quality of the public services. Accordingly, one of the objectives of the study is to assess the level and distribution of basic public services (education and health). As can be observed in table 5, the coverage of the education and health services in both woredas before and after decentralization is almost similar. This indicated that decentralization has no bring significant change in the study areas.

The data obtained during the interviews and discussions from participants showed inadequate capacity of the woredas, and budget and limited decision making power were major factors that can not make a difference with decentralization. The policy alone can not bring change but especially as many research findings indicated that capacity, finance and the level of devolution of power/decision making power and the community participation are the prerequisite factor to materialize decentralization in general and service delivery in particular.

On a comparative base, Abobo has provided better access to both education and health services than Gog woreda. For this, Woreda Education and Health Office heads reported that the reason for the disparities in the provision of basic services between the two woredas is Abobo is located near the regional town and has better infrastructure like electricity, water and transportation facility. Consequently, the woreda has got better manpower than Gog woreda.

Table 5. An average Access to public services of before decentralization (2002-2004) and after decentralization (2005-2007)

No	Name of woreda	Education		Health	
		Before decentralization	After Decentralization	Before decentralization	After decentralization
1	Abobo	52%	65%	43%	47%
2	Gog	45%	47.5%	34%	37%

Source: woreda Finance and Economic Office and Field data; 2007/08

4.6. Budget Administration and Financial Capacity

In Ethiopia, block grants are the principal means by which regional governments transfer resources to woreda governments transfer resources to woreda governments. Block grant decisions by regional government are made on the basis of a set of criteria, which consisted of four variables: population (55%), development index (25%), revenue sharing effort (15%) and poverty level index (10%) (Tegegne and Kassun cited in Mehert, 2007).

According to the information obtained from woreda administrators, councilors and woredas Finance and Economic heads through the interviews, the council of the local governments is responsible for allocating the grants to different developmental and sectoral programs such health, education, water supply, rural and agriculture development activities mostly by depending on the directives given from regional and zonal administrations.

Table 6, presents annual budgets of the woredas for three years covering the period 1997-1999 E.C. In focus group discussions and interviews, administrators and council members pointed out that on average more than 96% of woreda budgets received from regional governments. This is a clear indication of the heavy financial dependence of the woreda governments on regional and central governments. This is also showed the narrow revenue base of woreda administrations. In

the field study, it was also disclosed that woreda governments have very little say on the amount of block grants received which is hardly enough for financing services and local economic development for the annum.

Table 6. Annual Budgets of the woredas 1997/1999 E.C. (in Birr/millions)

No	woreda	Total Annual Budgets			Three year average % share of administrative and operational expenditure
		1997	1998	1999	
1	Abobo	4.5	4.7	7	96
2	Gog	4.3	5.2	6.54	97

Source: Woreda Finance and Economic Office (2007/2008)

From table 6, it is also observed that 96.5% of the woreda's annual budgets are earmarked for administrative and operational expenditures. During the interviews and focus group discussions, it was disclosed that the largest share of this expenditure went to salaries and personnel work in woreda administrative offices. This situation left woreda governments with very little capacity to undertake capital projects and expand basic public services. Apart from budget shortfalls, recurring major challenge to woreda governments was found to be assignment of increasing functions and responsibilities without the financial resources to perform up to the expectations that woreda decentralization had created among the community.

Furthermore, table 7, shows that subsidy constitutes the major share of the local governments' budgets. As it is depicted in the above table, the budget transferred to local governments in the form of subsidy from the regional government is increasing and they have too weak revenue base. This shows that there is heavy financial dependence of the local governments on regional governments. According to the information of table 7, the woredas receive more than 97% from regional government as block grant.

Availability of financial resources is also important factor for better performance of local governments in decentralized service delivery in particular and for local development in general. Hence, financial authority is important to ensure local development.

It is also found that the revenue base of the local level governments is very weak. Moreover, the lion's share of the budgets of the local governments is also allocated for recurrent budget such as salaries, administrative and operational costs rather than capital (development) projects. This adversely affects the service delivery in particular and local development of the areas in general.

Table 7. Revenue performance of the woreda 1997/1999 E.C. (in Eth. Birr)

No	Woreda	Revenue raised and share from total budget					
		1997		198		1999	
1	Abobo	217,153	4.8%	218,201	4.6%	293,234	4.2%
2	Gog	105,832	2.5%	198,234	3.8%	197,456	3%

Source: Woreda Finance and Economic Office (2007/2008)

Therefore, from the above information one can infer that the financial capacities of the local government weak and local level administrations are given many responsibilities without corresponding financial capacity. This has also an adverse impact on true empowerment, autonomy and independence of local governments and on proper implementation of decentralization.

According to the information obtained from officials and civil servants through the interviews and focus group discussions indicated that in addition to human capacity limitations, woredas suffered from inadequate budget, facilities and systems. Both woredas complain that their budgets are too small to provide service as expected. Among the situations of limited capacity are that positions are opened but budgets are not released. Due to this many health units and some schools are not functional.

As education and health sectors are used as reference to assess the state of decentralized service delivery in this research, it is important to see into the service delivery in relation with power devolved to the woreda administrative structure, financing, capacity and community participation.

4.7. The Current Status of Education and Health Services in the Study Woredas

4.7.1. Education

The MOE provided various duties and responsibilities for woredas to make the education services decentralized. Accordingly, based on the guideline of MOE (2002) the Education Office of Abobo and Gog woreda adopt the following major duties and responsibilities.

- Plan the implementation of universal basic education programs in the Woredas,
- Identify, select and propose sites where schools and training centers can be constructed,
- Prioritize the implementation of schools and participate in the preparation of the five-year Education Sector Development Plan (ESDP)
- Recruit, assign and transfer 1st cycle primary school teachers from school to school within the Woreda.
- Organize the annual plan of schools and participate in the preparation of the five year Education Sector Development Plan (ESDP),
- Create inter-relationships with other sectors, institutions, associations and communities and devise strategies to obtain support for the education sector,
- Coordinate NGOs who are involved in education sector within the Woreda
- Monitor and evaluate the implementation of different programs, and prepare progressive (timely) report
- Allocate budget to schools and community skill training centers,
- Involve in supervision and administration of primary school construction,
- Strengthen school supervision and services to areas that need special support and to increase girl's participation in education.
- Make necessary efforts to integrate education with development.

To carry out the above duties and responsibilities and to improve the access to education, both woredas have been attempted to implement different activities. The education offices of both woredas explained that they prepared a three year strategic plan. The strategic plan in both cases focused on community participation for educational development and on enhancing the access, equity and quality education. But the plan was done without the participation of the main

stakeholders in the sector. According to the information obtained from the school directors, teachers and community members through interviews and focus group discussions pointed out that school directors, teachers, community or their representatives like PTAs were not participated at the planning stage.

Schools also prepared their own plans based on the framework of strategic plan. In both woredas schools are mainly focused on:

- Increasing number of student to enroll especially female students
- Upgrading school coverage
- Mobilizing the community to participate in school development
- Providing quality education
- Upgrading and expansion of class rooms
- Establish and strengthening Parent Teachers Association (PTAs)

Woreda officials, education experts, school directors and teachers; they disclosed that Schools planned the above and other activities and then submitted to the woreda education office. The woreda education office rejected, approved or modified the plans. This tells us schools decision making power is too limited or power is not devolved from worda to schools.

Additionally, although schools plan the above activities, some of the activities like upgrading and expansion of class rooms are carried out by the regional bureau of education. Even the Woreda Education office and Woreda Administration plan primary school construction projects but they did not have any power to implement and supervise it. All such activities and projects are implemented and supervised by the regional education office. However, since the office is far away from the project cites, they could not supervise easily which resulted in the delay of implementation and misuse of resources. Woreda officials and community members also disclosed that they were outsider for such projects. They attended during the inauguration of the completion of school constructions as gusts.

Regarding this, Regional Education Bureau officials were asked the reason during the interview; they pointed out that they implemented and supervised due to the capacity problems of the Woredas to carry out such projects. However, woreda officials did not accept the reason of

regional education bureau. Instead woreda officials and school directors replied that they were not given with the authority to implement and supervise the projects as a result of which projects were too delayed and resources misused.

From the above evidences, one can understand that power is not devolved to schools and woredas practically. Devolution grants decision making power to subnational political entities and allow then enforce an independent authority to plan and implement projects and programs (USAID, 1997). But, still there is big interference of regional government in woredas with the name of woredas capacity problems in Gambella. Such scenarios contradict with the objective of DLDP and remain a challenge to provide quality services for the local community. This leads woredas and schools to develop dependence syndrome on regional state rather than make efforts to build their capacity and takeover different education development projects.

Moreover, decentralized service delivery advocates for the participation of the community and lower tiers of administration from planning to monitoring and evaluation. But in the study woreda findings indicated that with reason of capacity; major projects were carried out by the regional education bureau with little or no participation of these tiers. This crippled the authority of the woreda sector office in particular and the genuine participation of the community in general. Woredas and kebele administration knows the need of the community better than region and zone as they are very close to the large community.

In general, efforts of the woredas to improve the education service are presented below based on the data from different sources during field work.

4.7.1.1. Abobo Woreda

I. Formal Education

In the interviews, woreda education officials reported that in each kebele there is one primary school then this very encouraging in education sector and they also reported that currently Abobo has 17 primary schools (1-8) and one high school (Grades 9-10) but no kindergarten school for details (see appendix XIV). Among 17, four schools which are found in rural areas are in poor state to deliver services. Their roofs were made from grass and other facilities were poorly equipped.

But the observation and information obtained from school directors and teachers indicated that although the number of school increased the quality of the service was found to be very low. For instance, the distance of the schools, the quality of class, chairs, student–class room ratio, student-book ratio and teacher-student ratio were too far from the minimum standard (i.e. the standard of ESDPII). There are many primary schools that give service to 90-120 students in one class room.

During rainy season schools that have grass roofs were in problem to teach students. These factors have an adverse effect on the quality of the services. Discussants also raised that the least or absences of community participation, lack of decision power/lack of authority to schools have great contribution in provision of low quality of education services and these affected the development of education sector.

They also illustrated that woreda education office, woreda administration and regional education bureau were highly worried on number of students enrolled per year and number of schools constructed rather than focused on quality of services.

They frequently cited as great success on increment of the number of school and students instead of the quality of the services, community participation in education development, decision power of school directors and teachers.

Schools which are organized to conduct primary education full cycle (grade 1-8) is only three in number in the woreda (see the details in the annex XV). According to the information obtained from Woreda Education officials and community members and the researcher observations indicated that full cycle primary schools are located in relatively closer distance to the woreda town that is on 10 to 20 kms and the rest of the schools which are located far from the woreda town are 25 to 50 km away. This scenario shows the difficulty of getting the next senior grade level which is in town and its contribution to increase dropout rates. Access to education is very much affected by family income status children attending high school in this case are forced to go outside their kebele which requires financial resources which is beyond most household's capacity. This was confirmed during the interviews made with woreda education officials, school directors and teachers.

With regard to students' enrollment, as it can be seen from table 2, in the year 1999 E.C the total numbers of students was 5,353. Out of which, amount 2,982 were boys and 2,371 were girls. The

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share of girls was 44.3%. The data shows that there is a progress in enrollment rate but the dropout rate is still continuing even in the first semester of 2000 E.C. There is only one first cycle (9-10) high school for the whole woreda. Students who registered in the year 2007/2008(2000 E.C.) were 430 out of this 293 are boys and 147 are girls.

During the discussion with school directors and woreda education officials, it was reported that due to economic problem, unwanted pregnancy, early marriage and lack of awareness especially that of parents to send their children particularly girls and encourage them to continue their education are among factors affecting the educational development.

Additionally, participants also reported that lack of qualified teachers and inadequate school facilities significantly affect the education services in general. The gross primary enrollment of Abobo woreda shows better performance. However, the remaining 35% in enrollment shows the number of school age children who are denied the access for several reasons. Woreda officials revealed that for the decentralization to succeed, this gap should be covered. But, given the current severe budget constraint and acute shortage of human resources issue of having additional schools and other infrastructure is really unthinkable.

II. Alternative Basic Education (Non-Formal Education) of the Woreda

In addition to the formal school, the woreda tried to access education through non formal schools. The status of the Basic Alternative Education presented in table 8 below.

Table 8. Alternative Basic Education Centers

Name of the Center	No. of students			No. of facilitators		
	Male	Female	Total	Male	Female	Total
Uchkichela	26	23	49	2	-	2
Ukuna Doy	26	33	59	2	-	2
Badpul	23	18	41	1	1	2
Total	75	74	149	5	1	6

Source: Woreda Education Office

With regard to Alternative Basic Education (ABE) in the year 2007/2008 a total of 140 children, 75 boys and 74 girls were enrolled to attend basic education programs. In relation with this, the

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woreda education officials notified that the numbers of basic alternative education centers are few in number when it compared with other woredas. According to them this is because the number of formal schools is better in number than many other woredas. But in the reality, although the numbers of schools is relatively high most of them are understaffed and are with inadequate facilities. Then, they do not give services as needed to the community. In addition to this, the settlement of the people in the wordas is highly dispersed and the community depends on forest shifting cultivation system (they move from one area to another easily or on the round way); therefore on such situation ABE is vital.

By nature, the ABE is flexible and can be operated with lower cost. This helps to expand access of education in the woreda especially in rural kebeles. Furthermore, it can be part of a solution for acute budget constraints in the woreda. Generally; it is highly recommended increasing the number of ABEC and their quality of services in addition to the expansion and strengthened the formal schools. One of the basic advantages of decentralized service delivery is approaching to the community and addresses their needs. Accordingly, the system should be implemented and address the community problems.

4.7.1.2. Gog Woreda

I. Formal Education

As the data obtained from the worda officials indicated that Gog woreda currently has one high school (9-10) and 11 primary level schools (grade 1-8). Among these 3 (1-4 grades) and 1(1-6) schools are constructed with grass roofs (for details see annex XV). In the discussion woreda Education officials revealed that most schools were not equipped with chairs and education materials. They also stated that schools suffer from lack of adequate qualified teachers and budget constraints. There is no private and kindergarten schools in the woreda. The situations of the schools were highly deteriorated when compared with Abobo. Abobo is found in a better status than Gog in manpower and facilities of schools. For instance, the Gog woreda's high school had no library, laboratory and three degree holder teachers. But the Abobo woreda's high school has library (although no sufficient books), laboratory and 6 degree holder teachers. Officials and school directors reported that out of the existing schools in the woreda, majority of them need maintenance and school facilities.

Moreover, like Abobo Woreda students from Gog woreda; after finishing their primary school are forced to come to the woreda town (Pignawudo) or Gog dipach keble(1-8 grade) to continue their education. Many of them may be forced to go from 25 to 45 kilometers to enroll the next cycle. This affects the quality, access and the equity of education. The majority of the schools are 1-4 grades and still there is no significant activity to upgrade and expand these schools.

It could be observed from the data obtained from education woreda office shows that, in each consecutive academic year generally there is an increasing in enrolment trend including the first semester of 2000 E.C (see the details appendix IV). But, the number of students decline as one goes from lower grades to higher like Abobo Woreda. The decline is more significant in upper grades like grade eight, nine and ten. Of course, in each year, the enrolment rate is increasing from year to year. However, the girls enrolment was too low even it is the worst compared to Abobo woreda. There is high drop out in the woreda. Moreover, there is a big gap between boys and girls enrollment. The variation of the two is almost nearly 50%.

There is an effort to solve the problem especially, female students council in some selected schools. The initiative is taken by the woreda Women Affairs desk. There is only one woman at the desk who supposed to carryout the activities of the desk. As a result, the strategy was not implemented effectively because of manpower problem and less capacity to mobilize the school community and parents.

In this woreda also the unavailability of qualified teachers and budget constraint were frequently mentioned by the discussants during the felid study. The challenge is more severe than Abobo woreda. During the interview and focus group discussion discussants gave due attention to the manpower problem existed due to the fact that the woreda is far from the regional town and lack of infrastructure like road and electric power. Teachers from other regions do not want to go there and the turnover is very high. Consequently, it has become difficult to make the decentralized education system effective and efficient.

II. Alternative Basic Education

In Gog woreda, the Alternative Basic Education (ABE) is carried out by Woreda education office in collaboration with one NGO. The NGO is known as Adult and Non Formal Education Association in Ethiopia (ANFEAE). As it observed at table 9, there are six centers which higher in number compare to Abobo. Among these three of them (Ojen, Oboro and Thata) have been established by ANFEAE. In

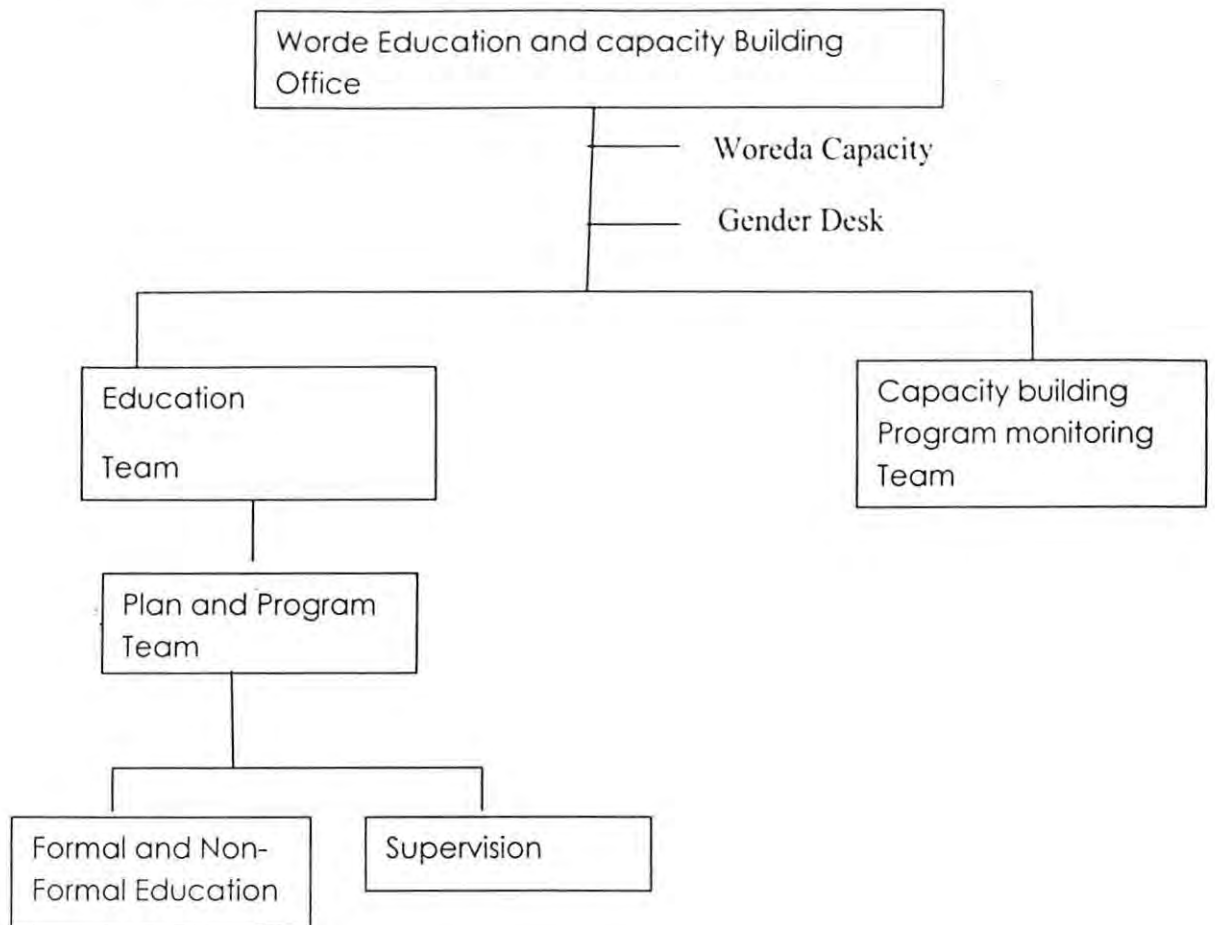
this woreda, Non-Formal Education has got better attention than in Abobo woreda. Woreda education officials responded that the reason of increasing the number of ABEC is the low access of the coverage of education in formal schools in the woedea and the contribution of ANFEAE. Among the centers, three of them have been fully operating with the support of ANFEAE. It also assists other centers with material and provides training opportunities for facilitators.

Table 9. Alternative Basic Education Centers

No	Name	Number of Students		
		Boys	Girls	Total
1	Abuha	19	23	42
2	Guma	25	28	53
3	Othiho	25	27	52
4	Ojone	31	26	57
5	Oboro	47	34	81
6	Thata	34	36	70
	Total	181	174	355

Source: Woreda Education and Capacity Building Office

Chart 2. Organizational structure of the woredas Education office



Source: Woreda Education Office, 2007/2008

According to the Education Office, the above structure requires the following professionals.

Table 10. The number of Posts and Personnel of the Woreda Education office

No	Post	Number
1	Head of Education office	1
2	Programs Coordination Head	VP*
3	Primary Education Expert	1
4	Pedagogical materials research expert	VP*
5	Educational Professional Training Expert	VP*
6	Non-Formal Education Expert	1
7	Physical Education and Health Expert	VP*
8	Teaching Aid and Record Professional	VP*
9	Extra Curricular Educational Activity Expert	VP*
10	Women Education Affairs Expert	VP*
11	Educational Materials Center Expert	VP*
12	Planning Expert	1
13	Supervisors	1
14	Total	5

*-VP-Vacant Post

Source: Woreda Education and Capacity Building office

Currently the education officials in the woreda reported that the structure is not filled by professionals except for the positions of: education head, women education affairs expert, non-formal education expert, supervisors and primary education Expert.

The office requires 4 supervisors but there were only two. This indicates the shortage of the manpower. The office had no a capacity to accomplish the duties and responsibilities of the Woreda Education Office. This has a negative impact on the education services totally. This was also frequently cited by the woreda education office and the school directors during our discussions. They said the woreda education office has significant shortage of personnel with desired educational qualifications. As it is observed from table 10, many posts are vacant. This makes big problem to implement education services in the woreda with sufficient quantity and quality.

Table 11. Woreda Education office Manpower with their Educational Level

position	Educational level
Education Head	10+1
Women education affairs expert	10+1
Non-formal education expert	10+1
Supervisors	10+1(1)10+4(1)

Source: woreda Education and Capacity Building office

According to the data obtained from the focus group discussion, though the structure required 14 professionals, work load was covered by only five persons. Among, these three of them are political appointees. From this, one can understand that the woreda is found in a severe condition with manpower problem. The acute constraints of the woreda capacity both in number and educational level creates big obstacle to implement decentralized education services. It is very challenging for the office to lead, coordinate and mobilize and solve the day to day administrative issues. In the focus group discussions and interview school directors and teachers stated that they complained to the office again and again in relation with administration and coordination problems.

Similarly, Abobo woreda organizational structure is similar to Gog woreda. By the same token the woreda education requires the following man power for the post.

Table12. The number of Posts and Personnel of the Abobo Woreda Education Office

No	Post	Number
1	Head of Education office	1
2	Programs Coordination Head	VP*
3	Primary Education Expert	1
4	Pedagogical materials research expert	VP*
5	Educational Professional Training Expert	1
6	Non-Formal Education Expert	1
7	Physical Education and Health Expert	VP*
8	Teaching Aid and Record Professional	1
9	Extra Curricular Educational Activity Expert	1
10	Women Education Affairs Expert	1
11	Educational Materials Center Expert	1
12	Planning Expert	1
13	Supervisors	3
14	Total	11

Source: Woreda Education and Capacity Building Office * -NA-Not Available

As table 14 reveals, posts relatively filled by manpower when compared with Gog woreda. Thus, Abobo woreda was better than Gog woreda in relation with number of personnel in education sector. Regarding this, during the interview the woreda education office heads stated that the office has also manpower problem, although it was not severe like Gog (refer table 11 and 12). Though, the woreda seems better in number of personnel, the level of educational status of the staffs were inadequate to provide the services effectively. Most of them were diploma and below. This capacity problem has an adverse effect on planning, implementing, evaluating, coordinating and mobilizing the local community in the education services of the woreda. As a result the staff affects the implementation of decentralized education system. As several studies indicated the qualification of the manpower and provision of quality public services like education and health have significant correlation.

Table 13. The following is the educational level of the experts and posts.

No	Post	Education level
1	Education Head	Diploma
2	Primary Education Expert	12+1
3	Education Team Head	10+1
4	Educational Professional Training Expert	10+1
5	Non-formal education expert	12+1
6	Teaching aid and record professionals	Diploma
7	Extracurricular education expert	12+1
8	Educational materials center experts	10+1
9	Planning Expert	Diploma
10	Supervisors	One diploma and one degree

Source: Woreda Education and Capacity Building Office, 2007/08

Generally, officials, teachers and community members were repeatedly mentioned that it is too difficult to get experts who have sufficient experiences and the required educational status. This is due to different reasons like the weather condition (too hot), poor facilities and benefits and the security problem of the region because of ethnic conflicts. These and other problems have big contribution to increase the turnover of qualified staff in woredas in particular and in the region in general. For instance, Woreda officials pointed out those professionals who come from highlands stay for the maximum of one year in Gog woredas. Besides this, they reported that the woreda education office has a power to employee only supporting staffs (or those staffs salaries of 445 Eth birr and below).

With regards to the manpower capacity of the woreda education office, different complains were repeatedly raised by woreda education experts, school directors, teachers and community members during the interviews and focus group discussions. The following are some samples that were frequently cited by the discussants. These are:

- “The woreda education office does not support us as except asking reports.”

- “The woreda Education office does not have sufficient man power to organize itself, school and community.”
- “There are no facilities in our school for teachers, to the extent that teacher buy pens and pencil by their own.”
- “Purchasing and distributing school materials are the responsibilities of the woreda but materials are provided sometimes at the end of the year.”
- “Authority without capacity cannot make the decentralization policy effective.”

Woreda education officials also revealed that the number of supervisors in both woredas were not adequate. They were forced to cover long distance on foot. In Gog woreda, only one car serves for all the woreda services. They said it is too difficult to get car for supervision and other office activities. There are no motorcycles. Because of this supervisors complained about facilities to carry out their work properly. Schools are found far apart from each other.

The major reasons mentioned for staff shortage include frequent ethnic conflicts, (budget limitations, high over especially the teachers who are from highlands and limited opportunities of being transferred to better sites) and unattractive work environment (remoteness and lack of facilities). For example, there were no adequate facilities like tables, cabinets, computers, telephone services and chairs. In general, the inadequate number and quality of staff and office facilities make more complicated the capacity of the Woredas education office. Thus, in both woredas, the education offices are highly challenged to implement the decentralized education services. Regarding this, Rondinelli (1998) argues that genuine decentralization has to be institutionalized. He noted that it must be equipped with trained and skilled personnel capable of coordinating and integrating their own organizations with other organizations to put decentralization policies into practice.

4.7.1.3. Human Resource of the Schools of the Woredas

The Woreda Education and capacity building officials notified there is very inadequate number and quality of manpower of the two woredas.

The current manpower situations of the two woredas' schools look like the following.

Table 14. Gog Woreda

Educational status	Number		Total	Vacant position
	Male	Female		
Degree	5	0	5	7
Diploma	43	3	46	30
Certificate (10+1)	164	37	201	20
Total	216	40	252	55

Source: field data, 2008; Woreda Education and Capacity building office

Table 15. Abobo Woreda

Educational status	Number		Total	Vacant position
	Male	Female		
Degree	10	-	10	5
Diploma	86	16	100	20
Certificate (10+1)	150	75	225	10
Total	246	91	335	35

Source: Woreda Education and Capacity building office in 2007/2008

As it is observed in the above tables, in both woredas, there were shortages of qualified teachers. Especially, in Gog woreda there was a shortage of more than 50% of degree holder teachers. But this is better at Abobo woreda. Additionally, in Abobo woreda, the number of female teachers are better in number than Gog woreda particularly at Diploma and Degree level.

Moreover, the education office of both woredas mentioned that 85% of the directors in schools have qualification that is below the standards. They also said that this has an impact on the service delivery in many dimensions like on leadership and mobilizing teachers and the community for education development. During focus group discussions with teachers and community members in both woredas; the discussants noted the following points:

- The existing number of teacher is not adequate.
- Many schools do not have adequate of educational materials like books, chairs, tables, desks.

- Inconvenient and uncondusive class rooms, shortage of classes
- Lack of trainings
- Lack of community participation.

From the above findings, one can understand that the awareness of both teachers and community members about the agenda of decentralization in general and decentralized services delivery in particular is low. Therefore, these would have an adverse effect on the provision quality educations services.

The MOE (1994) policy document indicated that addressing educational quality problem is one of the major challenges. The policy document elaborates this poor quality of education in terms of inadequate facilities, insufficient training of teachers, overcrowded of classes, shortage of text books. This problem stills remains the leading problem in Gambella region and especially the study woredas.

Quality education should allow children to reach their fullest potential in terms of cognitive, affective and creative capacities. Improving all aspects of the quality of education or enhancing the quality of education is the prime concern for ESDP III. Lack of availability of text books, qualified teachers, and class sizes are the major factors that affect quality of education.

In both woredas, tet book shortage is a big problem. According to ESDP II plan, the student book ratio was to be 5:1 at the beginning at the end of ESDP II to make it 2:1. But, in both woredas teachers reported that the currently, the student book ratio is on average 8:1. During focus group discussions, teachers, school directors and officials mentioned that the problem is happened due to budget constraint. They don't have sufficient budget for printing books and qualified experts and teacher to prepare the textbooks. Additionally, teachers claimed that getting teacher's guide is also a problem.

Furthermore, in both woredas, it is very common to observe that schools are made of grass roofs or under tree shade or stones. In many schools, especially in rural areas children sat on stones or dusty floors or under tree shade to attend the lessons. Schools are below minimum quality standard in terms of furniture and other facilities, water, latrine, library, laboratories, pedagogical center, clinics which are not available in the majority of the schools. From 158 primary schools 60 (40%) of them are made of the grass roofs or under tree shade.

In Gog woreda, a high school does not have a library and laboratories. I observed that 5 primary schools (Grade 1 and 2) schools in both woredas, students attend the lessons under the tree shade (3 at Gog and 2 at Abobo). These conditions highly affect the quality of education as well as the enrollment of children. The class room student ratio in both woreda on average 1:95. At Gog woreda the ratio in some schools reached 1:120. The woredas notified that there is a chronic budget constraint to reduce the above complex problems.

About this problem Meheret (1998) confirmed one of the real tests of an effective self government is adequate financial strength. He argues that woredas, administration in Ethiopia are financially strapped mainly because they cannot generate sufficient revenue from local sources. Thus, to provide adequate public services the question of budget should be solved. Otherwise the objective of ESDP III and the millennium goal of 2015 cannot be achieved. And it is difficult to realize decentralization.

As mentioned above, the status of manpower level in Gog woreda education office is a reflection of what Rondinelli (1998) illustrates. The situation in Abobo as compared to Gog woreda appears to be relatively a better one; there is a better attraction for professional in Abobo. This is because of the proximity of the woreda to the regional capital city and level of infrastructure development which have made it relatively attractive to professionals.

Regarding the cooperation of teachers Gaynor (1998) argues that the success of any decentralization of teacher management depends crucially on the cooperation of teachers themselves. Gaynor indicates that decentralization should not threaten teachers' job, promotion prospects, workload or conditions of services. A good system will also provided teachers with recognition and feedback on their contribution, including appropriate performance incentives to foster and reward good teaching take into account teachers' rights to contribute to and influence the decisions that affect them and promote good relations and communication between teachers and other stakeholders in education such as parents and educational management (Gaynor, cited in Tsefaye, 2006)

This indicates that there is a gap between what the above literature recommends and the situation of teachers in both woredas. There was no significant sensitization and consensus building effort

made to integrate teachers, the community and other stakeholders in the process of education service decentralization.

The task of mobilizing the community to enroll its school aged children and promote girls education appear to be imposed on the teacher as part of their regular duty. Had there been an effort to build consensus on the fact that extra efforts by teachers are necessary to assist the empowerment and consolidation of education decentralization, their solidarity and contribution could have been maximized and morally sustained.

4.7.1.4. Financial Capacity of the Woreda Education Sector

Availability of financial resources is also important factor for better performance of local governments in particular and for local development in general. Financial autonomy is important to ensure local development. Statistical data obtained from the offices of the local governments and through interviews show that the local governments have weak revenue base and totally depend on the regional government for their budgets. Many failures in decentralization program have been attributed to inadequate funding and it has been argued that finance will be the “make break” factor in decentralization (Asmelash, 2000). He argues that genuine decentralization programs should try to clarify the fiscal relationship between the center and unit to which power is being decentralized and resources should be made available to decentralized units if they are to effectively shoulder their responsibilities.

In the Ethiopian, situation one may say that decentralization has brought important development in local autonomy and this is evident in the local budget process too. Woredas are able to prepare and execute their budgets within the parameters of federal and regional development strategies.

As indicated in the table 16 &17, education sector has the highest recipient of budgets. But on the average 96% of the education budget allocated for salary and administrative expenditures. The major share in the sector goes to salaries. Interviews and focus group discussion made also reveals that the largest share of this expenditure went to salaries for teachers. Then, capital budget is the least. There were times nothing is allocated as capital budget. Both woreda education offices have big budget constraints for undertaking capital projects and expanding the education.

Table 16. Abobo Woreda Trends Annual Education Budgets

Year	Sector	Total Budget	Salary	Administrative operational cost	Capital budget
1997	Education	2,517,206.00	2,405,314.00 (95.5%)	98,000.00 (3.9%)	13,892.00 (0.6%)
1998	“	4,653,478.00	4,561,231.00 (98%)	50,000.00 (1.1%)	42,247 (0.9%)
1999	“	3,025,340.00	2,921,783.00 (96%)	74,224.00 (25%)	33,000 (1.5%)
2000	“	115,338.00	3,757,230.00 (91%)	74,108.00 (1.8%)	284,000 (6.9%)

Source: woreda Economic and Finance office

Table17.Gog Woreda

Year	Sector	Total Budget	Salary	Administrative operational cost	Capital budget
1997	Education	2,669,728.00	2,564,428.00 (96%)	84,876.00 (3%)	20,424.00 (1%)
1998	“	2,280,914.00	2,242,688.00 (98%)	38,226.00 (2%)	-
1999	“	1,819,414.00	1,455,557.00 (80%)	104,273.00 (20%)	-
2000	“	3,382,775.00	3,173,985.00 (93%)	100,000.00 (2.96%)	108,790 (3.2%)

Source: woreda Economic and Finance office

In addition, during discussions School directors and teachers of both woredas it was found that not only the inadequacy of the capital budget but also the education budget is controlled by the woreda education office level and schools receive only inkind depending on their request. Discussants also disclosed that the woreda education office shifts the budget for another purpose without the recognition of schools. Many school directors reported that they suffered a lot with

budget constraints. Even, they couldn't get their own budget. Then, findings show that schools do not have any means of generating income and they do not have any power on budget decisions. They only got stationary materials from the woredas education office which does not meet their annual needs. From the above findings one can say that there is no decentralized school administration in both woredas.

Schools are the lowest administrative organs that provide education services according to the MOE (2002) guidelines and the national curriculum. Administrative and financial measures at school level definitely influence efforts to transform and upgrade the educational opportunities offered by the national schooling system. Schools which are directly facing problems and are closer to the community are denied of budget control right. Because of this, schools complained that supply of school provision is delayed and at times they are forced to take supplies which they have not asked for.

4.7.1.5. Community Participation in Education Sector

Respondents in both woredas indicated that the level of the involvement of the larger community in identifying and setting priorities was too weak or almost nil. During the discussion, discussants revealed that there was no a trend of involving the community to participate in schools planning, prioritizing their needs and deciding on different education sector issues.

There is an instruction for schools that is predominantly annual plans at school level which is prepared by school directors and Parent Teacher Association (PTA) and approved by KETB (Kebele Education Training Board). But school directors and Teachers revealed that this was not practical in the study woredas due manpower constraint and capacity to coordinate it. Additionally, most of schools established the PTAs at the end of last year. Although, citizen engagement is one of the fundamental principles in decentralization, the level of participation of community representatives has been very low or nil and there was no strong established system to involve the community at large in the study areas.

As it was discussed in the literature, communities and village leaders in particular can play great role in increasing enrollment. For instance, in Philippines, village leaders assisted school officials with house to house campaigns and in authenticating the age of children. In Cambodia, as part of

the cluster project, parents participate in the process of surveying their community to find out the number of school age children and why some are not enrolled (UNESCO, 2005).

Moreover, one of the basic strategies to overcoming education problems as drafted into Ethiopia's national education policy is community engagement in schooling. Reflecting the country's new decentralized administrative structure, the education sector strategy released in 1994, explains that the national education system, itself undergo decentralization with the intention to realize more efficient service delivery and ensure the relevance of the services to the needs of local populations.

The strategy describing how the community's participation is intended to constitute the final level of the decentralized system; focused on local engagement in basic education delivery and management. Both the communities' responsibility and its decision-making role are explicitly mandated by the strategy. This is stated as schools will be strongly linked with community, which will take responsibility in its well-being and upkeep. They will be made to be responsive to the local needs and requirements and shall act as centers for all educational activities of the community. The management of each school will be democratized and run with the participation of the community, the teachers, the students and relevant government institutions (MOE, 1994). But this is not functional in the study areas.

This is emphasized in the subsequent education sector Development Programs I, II and III. The ESDP III from 2005/06 – 2010/11 further underlines the role of communities and PTAs in all aspects of education from raising resources to managing schools. The program stated that resources are mobilized through raising the awareness of the general community on the benefits of education; in encouraging parents to send their children to school so as to increase the access and reduce dropout. Financial resources are raised and used to purchase basic equipment and materials, to hire and even to pay contract teachers.

PTAs are involved in school management, preparing annual plans, follow up disciplinary cases. Hence, communities are funding new school buildings, building teachers' houses, running non-formal education initiatives, and encouraging girls to go to school and to retained in school until they complete a given education level. However, PTAs and communities still need capacity

enhancement in carrying out quality support to help schools to function as desired (MOE, 2005). However, the community participation in the study areas was found to be too weak.

According to the information obtained from key informants and community members through interviews and focus group discussions, the local community has been traditionally participated in teacher residence construction in rural areas but not involving in other issues. On the other had, discussants disclosed that recently people participate in the construction of ABE centers. The participation usually takes the form of labor contribution or the provision of local materials.

Similarly, during focus group discussions, community members' and kebele leaders mentioned that community did not actively participate in social and economic development activities in the woredas for the past many years. But as they explained since 1998 E.C. different trials were made to involve the community in peace keeping activities. kebele administrations work with elderly people in some cases like whenever disagreements arise in the kebele. There are members of elder people who are elected by the community for peace building issues. This committee acts as an advisory for woreda cabinet. Here, the problem is the Peace Building Community committee almost totally engaged with political and ethnic conflict issues. There were no initiatives and systems to use this committee for mobilizing the larger community for participation in social and economic development activities.

Table 18. Community Participation in Abobo woreda (in ETH/birr)

No	Name of Kebele	Activities	Contributions			Total
			In cash	In labor	In kind	
1	Dumbong	Teachers' house building	-	400.00	200.00	600.00
2	Village 11/12	Teachers' house building	-	400.00	216.00	616.00
3	Total					1216.00

Source: Woreda Education Office; Field data, 2008

Table 19. Community Contribution for the construction of ABE in Abobo in 2007/2008
(in ETH birr)

No	Name	Contribution			Total
		In cash	In Labor	In kind	
1	Ukena Doic	-	220.00	110.00	330.00
2	Badpol	-	217.00	111.00	328.00
3	Total				658.00

Source: Woreda Education Office in 2007/ 2008

1874 birr is the only contribution of the community so far. But in the discussion, education officials, school directors and teachers mentioned that if there is a strong system to mobilize the community; the community have positive attitude to contribute at least with in labor and inkind significantly.

Table 20. Community participation in Gog woreda in 2007/08

No	Name of the kebele	Activities	Contributions			Total
			In cash	In labor	In kind	
1	Tedo	Teacher's house building	-	219.00	100.00	319.00
2	Ujene	Teacher's house building	-	200.00	97.00	297.00
3	Total					616.00

Source: Woreda Education office in 2007/2008

Table 21. Community Contribution for ABE in Gog Woreda

No	Name	Contribution			Total
		In Cash	In labor	In kind	
1	Ujene	-	126.00	120.00	246.00
2	Thata	-	132.00	106.00	238.00
3	Total				484.00

Source: Woreda Education office in 2007/2008

As it indicated in table above tables, in both woredas the contribution of the community is too low even in labor. For example, in Gog woreda among the 6 ABECs, only two of them were constructed in collaboration with the community.

Findings of the data indicated that in both cases the community participates in teachers' house building and brings school materials from woreda town to school once or two times in a year but not in planning, implementing, monitoring and evaluating projects and different school and education activities. Woreda officials, school directors and teachers also revealed that the community contribution is insignificant due to lack of awareness, lack of systems to participate in the community and capacity to mobilize the community. Additionally, basic association like PTAs were not strengthened and well established. They are found at infant stage. Because of the above reasons the community participation not only in education sector but also in the other was too weak or almost nil.

In general, in discussions and interviews of the officials, directors, teachers and community representatives frequently cited the following factors as barriers for the community participation in education services in the study wordas:

- Lack of awareness
- Lack of capacity and experience for mobilizing the community
- The community is approached only when urgent problems occurred.
- Provide more attention for political issues
- Weak administrative structure at kebele level
- Lack of strong association or forums at community level
- Budget constraint to empower the community(at least representative of the community)

There is a strong link between decentralization in education as policy and the practice of community participation in education as a manifestation of that policy. This is because decentralization seeks to transfer decision making levels closer to the end users. Then, it is relevant to consider the efficacy of both decentralization and community participation with respect to strengthening institutions as a mechanism for addressing development issues.

Accordingly, since participation is an educative process in a way that it contributes to human resource development, the involvement of the large community needs to be reinforced. The present trend of involving the community only to contribute in material and labor in a very insignificant way should be upgraded to a level where community voices its needs and priorities and participate in decision making.

This is how one can ensure sustainability to educational development. Participation is believed to be efficient when institutionalized. Accordingly, the woredas in particular and the regional

government in general should investigate different means to harmonize and incorporate PTAs, KETBs, Peace and Development committees and the community in general and organizing the community is an important step for participation. Especially, PTAs and KETBs can bring big changes in various educational development areas. Thus, partnership between the community and government needs to be strengthened.

4.7.1.6. Girls Education/Equity

In both woredas attempts are being made to improve girls' access to education. But in the various focus group discussions and interviews, it was found out that despite an overall increase in proportion of girls enrolled in primary schools, the gap is still remain this is mainly due to factors like early marriage, unwanted pregnancy (Seeing girls getting pregnant has also been observed to discourage parents from sending their daughters to school) and cultural influence like negative attitude of the community to send female children to school. To tackle this problem, in both woredas girls committees were established, but it was not active to bring change.

4.7.2. Health

Currently, there has been significant transformation of the old six tier health delivery system into new four tier system. These are health post, health station, health center and district hospital (MOH, 2005).

Health services delivery in the woreda before decentralization was coordinated and implemented under the immediate supervision of the Zonal Health Department. But, during the implementation of the decentralization, all responsibilities have been devolved to the woreda health offices. But now as policy what is expected of woreda health offices is that it coordinates and implements health services in the woreda. MOH (2005) confirmed this health system has been decentralized initially to the Regional Bureaus and subsequently to woreda health offices to bring decision-making power closer to the community.

4.7.2.1. Health Sector Status of Woredas

In Abobo woreda, there are 7 health stations, 3 health posts and 1 health center. Among these, three health stations and one health post do not provide services because of lack of manpower and other facilities. During the interviews, woredas health officials noted that all health stations in the

woreda except one will be degraded into health post because they are found below the standard of the Ministry Of Health. Additionally, in focus group discussions and interviews with woreda officials, health professionals and community representative members, it was found that those four health stations and two health posts functioning have been providing very low quality health services. One new health post was under construction during the field research.

By the same token, Gog woreda has only one health center (which is found in the woreda town) and 5 health posts. Among these one health post was not functional because of lack of manpower.

Table 22. Distribution of Health facilities in the study woredas

Abobo woreda		Gog Woreda
Facilities	Number	Number
Hospital	-	-
Health center	1	1
Health stations	7	-
Health posts	3	5
Total	11	6

Source: woredas Health Office in 2007/2008

As it is observed in the table 20, in both woredas there was only one health center. This health center administered by the woreda Health office and one NGO which is called the Ethiopian Catholic Church Social Development Coordinating Office of Gambella (ECCSDCOG). It is coordinated in bilateral way. In the interview, Woreda health officials and NGO heads reported that being it is supported by this NGO; the health center is equipped with basic medical supplies. With relatively it is fulfilled the standard of MOH. The center has also provided services even for neighbor woredas.

4.7.2.2. Human Resource

According to the MOH (2005) a health station is defined as it is the smallest health units in the conventional Health Service structure and is staffed with 1-3 health assistants where as health posts is one of the satellite facility focused services provision of a primary care unit. It is lead by health extension worker. One health post should have 2 health extension workers. Health center is

also defined as a center which provides both preventive and curative out patient care. It is also responsible for training CHAs and TBAs.

According the data from the field study, in both woredas each health posts has one extension worker. But the policy put the presence of two health extension workers as compulsory for one health post and one is supposed to be a leader of the health post and he/she have to be the member of the Keble cabinet. During the discussions with community members and health professionals, they pointed out that the health a service in both woredas is adversely affected by the scarcity of manpower.

However, the Gog woreda's health center suffered with shortage of manpower and medical supplies. With regard to health posts their number is too insignificant when compared with the existing national health policy. As it was mentioned in above there are 25 rural Kebles and two town kebele in both woredas. Thus, based on the HSDP III (2005), 25 health posts (i.e. one health post for each kebele) and 50 (health extension workers (two per health posts) were required. Unfortunately, as it indicated in table 18, Abobo has 3 health posts and additionally one was under construction and five health extension workers. Similarly, Gog has 10 kebeles but there were only 5 health posts (one is not functional) and 4 health extension workers. This shows that even the existing health institutions were also found far from the standard of MOH.

Table 23. Number of Health Professionals in Woredas

Educational Status	Abobo			Gog Woreda		
	Sex		Total	Sex		Total
	M	F		M	F	
MD	-	-	-	-	-	-
HO	2	0	2	1	-	1
Sanitarian	1	0	1	1	-	1
Nurse (Diploma)	4	2	6	1	1	2
Lab technician	1	1	2	1	-	1
Health extension workers (Certificate)	3	1	4	3	1	4
Total			15			9

Source: Woreda Health Offices in 2007/ 2008

As it could be observed from the data presented in table 23, the numbers of health professionals were inadequate in both woredas. There was no medical doctor in both cases. Consequently, the community will be forced to go the capital of the region town to see a medical doctor. During the interviews Woreda health officials revealed that in the region there are only 3 medical doctors. Then, expecting a medical doctor at the woreda level is impossible. As observed in the above table the number of health professionals was better in Abobo than Gog woreda. But Key informants in both woredas disclosed that the health institutions suffered from the shortage of manpower.

The shortage of health professional is a national problem but in Gambella region especially in the study woredas the problem becomes intolerable. Even they do not have the lower level health extension workers sufficiently. Health posts and centers have been constructed but getting minimum number of health professionals was a key problem in both woredas. In the region there were only 30 health extension workers. Among these, 8 of them were found in Abobo and Gog woredas.

The inadequacy of professionals greatly affects the quality of the services and prohibits mobilization of the community to participate in health development programe. The National Ministry of Health stated that health extension workers will provide key technical services such as immunization, personal and environmental hygiene (i.e. the main cause for health problem in our country and family planning to each kebele. Two per kebele should be assigned to provide primary health care community based health intervention at a grass root level

In addition to the health professional shortage, the existing health institutions were under equipped and have acute shortage of medical supplies. There was also shortage of medical equipment. In interviews and focus group discussions with woreda health officials and health experts, it was found that the newly built health posts and centers would share equipment from the old ones which have been already suffering from shortages. Moreover, there was delay in procurement of medication and supplies and inability to undertake proper follow up and supervision. All the above factors have a negative impact on the quality of the services.

4.7.2.3. Woredas Health Performance

The major areas of the woredas responsibility in primary health service are: maternal and health care delivery mainly through immunization, vaccination, antenatal care, and postnatal care, family planning, MCH, HIV/AIDS prevention and control as well as hygiene and environmental sanitation.

The data from the woredas health office indicated that the health performances of the two woredas were low especially in treating the top diseases (see the details at annex VIII). Discussions with and community members repeatedly indicated acute health problems like increasing malaria; diarrhea and meningitis. There were acute shortage of drugs in the health clinic and the private pharmacy is very expensive.

The average of the two woredas is below 25%. Though, MCH services seem better, the performance is still below 50%. In the case of Gog woreda this figure is reduced to below 40%. Woreda officials and health experts revealed that the performance was low due to various reasons like shortage and high turnover health professionals, shortage of health institutions, budget constraint, low level of community participation, inadequate medical equipment and supplies. According to them this scenario had been even worst when health services were totally coordinated and implemented by zone health office. Since the area size of woreda is large, no transport accessibility, people are sparsely settled; these health institutions alone can by no means provide adequate services to all communities. Moreover, people have to travel on foot at least 17 km on average to get to these health institutions. The problem gets severer in seasons of malaria epidemic.

4.7.2.4. Financial Capacity of the Woredas in health sector

Table 24. Health Budget Allocation of Abobo Woredas

Year	Sector	Total Budget	Administration and operational expenditure	%	Capital budget	%
1997	Health	617,534.00	600,037	97.5	17500	2.5
1998	„	670,736.00	660,484	98	10,252	2
1999	„	907,574.00	857,574	94	50,000 (1.5%)	6
2000	„	830,460.00	788,460.00	95	42,000 (6.9%)	5

Source: woreda Economic and Finance office

Table 25. Health Budget Allocation of Gog Woreda

Year	Sector	Total Budget	Operational and operational expenditure	%	Capital budget	%
1997	Health	400,516.00	370,034.00	92.34	30,482	7.6
1998	„	410,216.00	410,216.00	100	-	0
1999	„	527,799.00	482,609.00	91	45,190	9
2000	„	472,745. 00	434,922.00	92	37,823	8

Source: woreda Economic and Finance office

Table 24 and 25 reveals the budget status of the health sector in both wordas. Statistical data obtained from the offices and interviews showed that the budget of the sector was too weak to implement multi sector heath services in the woredas. As it is observed from the tables, the capital budget is insignificant. The large proportion of the budget is allocated for recurrent expenses such as salaries, administrative and operational costs. This implies that if the capital budget is too low, woredas cannot construct new health institutions nor expand and equip the existing ones. Thus, this has a profound effect on the health services in the woredas as availability of financial resources is one of the important factors for the better performance of decentralized public services.

In addition to the above problems, the field data also showed that in both woredas the HIV/AIDS prevention and Control unit lead by one person only. The woreda unit is coordinator and the woreda health officials raised that the problem is multi dimensional but basically manpower and capacity problems have highly affected the implementing of many activities. Most HIV/AIDS prevention and control activities were done with campaign. Thus, they did not bring the desirable change. For instance, in Gog woreda there is no VCT centers. The community is not aware about VCT and ART services. The service is better in Abobo woreda. In Abobo at least there is VCT, although the communities do not visit the center as well because of awareness problem.

4.7.2.5. Community Participation in Health Sector

Like education sector the community participation is inadequate or almost none. According to the information obtained from woreda officials, woreda health officials, health committee and health professionals through the group discussions and interviews, in both woredas there was no even single health project that was implemented by involving the community. All health posts were constructed by the government. All construction projects were implemented and supervised by the regional health bureau like education sector. As participants reported during the discussions, the community did not participate even in site selection for health posts. Sites were selected by woredas and regional health officials.

According to the field study findings indicated that the health community committee has been established in 1999 E.C. It was expected that in each kebele there will be health committee that coordinated by health extension workers. 9 kebeles (5 in Abobo woreda and 4 in Gog woreda) do not have health committee due to various reasons.

The committee was expected to mobilize the community in collaboration with health extension workers. However, the information obtained from the woreda health officials, health committee and health experts through interviews and discussions revealed that the health community committee has no a capacity and well established system to discharge their duties and responsibilities. In addition to this, there was no capacity building program for the committee to fill their capacity gap.

Woredas health professionals also explained that the community participation in health services was not yet implemented practically. There were some attempts by using the peace building

committee like teaching the community about HIV/AIDS; but it was insignificant and was not sustainable.

During the focus group discussions, health professionals and community representatives raised that usually the community called for discussions and meetings for political and security agendas not for development. Thus, the community has very low awareness in participating in different development and service activities. As woredas officials and health experts frequently cited, inadequate budget and absence of skilled and experienced personnel were the major problems for them to mobilize the community and create enabling environment for participation in different health development activities.

In general, woredas health officials, professionals and community representatives (community health committees) mentioned the following major problems in the health sector services in both woredas development. These are:

- Severe shortage of adequate and experienced health professionals
- Woredas health offices and health units have no adequate capacity and power to make decisions based on the needs and priorities of the community. Additionally, there were big interferences from regional state and zonal administration in identifying the problems of the local community and in implementing different health projects. This indicates still power is not devolved to sector offices and health units.
- Weak procurement and management drugs
- Inadequate of medical equipment and supplies
- Lack of transportation facilities to supervise, monitor and coordinate rural health services and also to mobilize the community.
- Severe budget constraints
- Inadequate health facilities
- high staff turnover and lack of commitment of the health workers
- Lack of pharmacies
- Lack of community participation
- Lack of strong and well established systems to mobilize the community
- Lack of in-service training/upgrading
- Weak coordination and network with the sector offices like education, water and rural development offices

CHAPTER FIVE

5. Findings and Discussions

This section discusses preliminary findings and observations drawn from field investigation, interviews and focus group discussions with different key informants, civil servants and community members at the study woredas.

5.1. Severe Capacity Constraints

Genuine decentralization has to be institutionalized and integrated with capacity of that agency to determine the outcome of decentralization policy. Decentralization policies require technical skill and organizational capacity. These skills and capacities are at lower level units (woreda and kebele level in this country particularly in emerging regions like Gambella. Meheret (2007) confirmed that sever shortage of competent and trained personnel is the key constraint for effective woreda decentralization in this country. In the study areas also capacity problem was found to be the main challenge for the implementation of decentralization policy in general and decentralized services delivery in particular. Human resources in both local governments were found a chronic problem for providing the quality services for the community. Human resources were too weak in both quality and quantity in woredas. Generally, regarding human resource both woredas were highly suffered from the acute shortage of man power.

Findings of this study also indicate that the management capacity of both woredas is also was also weak. Inappropriate utilization and misplacement of experts and officials was also another problem observed in the study woredas. Lack of qualified human resources has been responsible for the absence of realistic strategic planning, monitoring and evaluation as well as weak financial management. This has been particularly the case for emerging woredas with poor infrastructures. Such woredas could not have power to recruit and retain skilled personnel. These includes shortage of competent professionals, improved working systems and procedures, physical facilities furniture, vehicle, equipments, inadequate budget to finance development project and manage the delivery of quality and efficient public services.

According to the field findings, the woreda administration and public sector offices such as education and health offices in both local governments were understaffed. This is also a problem

for other sectors in the woredas. Moreover, all of the cabinet members of the study woredas were below diploma and certificate in their academic level. Many of them were below grade 12. This may also make their capacity weak to shoulder different managerial responsibilities in the areas of public service delivery, coordinate and mobilize the local community to participate, promoting good local governance and socio-economic development. This implies that the responsibilities and duties have been given to the local governments without commensurate capacity. Women are also under represented in the civil service in general and in the cabinet members of the study areas. Their representation in local political and administrative structure was very low. For instance, among the 11 cabinet members, only one female was represented in each woreda.

All in all, Lack of capacity associated with administrative and skilled personnel problems as well as meager revenue base together with lack of well-functioning organizational structure have prohibited woredas effectively discharging their constitutional responsibilities.

5.2. Inadequate Implementation of DLDP

As it was indicated in the literature the basic objective of DLDP is to improve decentralized public services, promote good governance enhance organizational effectiveness, institutionalize decision making processes and improve the working systems of woredas. But in Gambella, at Abobo and Gog woredas; the DLDP was not operationalized and practiced as expected due to mainly the problems of manpower capacity, finance and authority (decision making power). Then, this has an impact on services delivery in the woredas to the users in the region.

As information obtained from Woreda and kebele officials illustrated that the DLDP was not institutionalized in both woredas. It was also found that in the field study; DLDP at the woreda level were not accomplished properly yet. While regional capacity building bureaus was assumed to be responsible for the program, the task has not been given enough attention. For instance, in both study woredas, only one person was assigned for each to coordinate DLDP. Thus, it is very challenging to one person coordinate DLDP in wordas effectively.

During the interview the regional coordinator of DLDP disclosed that the implantation of the policy was not materialized adequately in the region. As the coordinator pointed out, there was less awareness about DLDP in including regional and worda officials. Due to this, the Bureau has prepared guidelines and planned to provide awareness training for woreda and regional officials.

There were no also well established systems and procedures that help to meaningfully implement DLDP at woreda level particularly to participate the community and kebele administration. Frequent changes in organizational arrangements have also created instability of the system and personnel. Thus, it was noted that woreda decentralization has not been fully translated in to action due to different reason, though it was launched since 2004 in the region. Thus, this was also another challenge for offering the quality and efficient services and empowering the community.

5.3. Budget Constraint

Many scholars argue that decentralization without adequate manpower and financial resources is meaningless and if local officials are to be held accountable for the efficiency and effectiveness of service they deliver; they must have a budgetary discretion. In this regard, researchers pointed out that fiscal independence is highly correlated with political decentralization, and later defines the essence and the means of realizing the autonomy of sub-national government.

Financial autonomy is also too important to ensure local development and for the provision of adequate services. But according to the field study findings indicated that the council of the local governments is responsible for allocating the grant to different developmental and sector programmes such as education and health, mostly by depending on the directives given from the regional government. There was a heavy financial dependence of the local governments on the regional government.

Therefore, one can infer that the financial capacity of the woredas is too weak and local administrations were given many responsibilities without the corresponding budget. This has an adverse impact on the provision of adequate and quality services in particular and on the implementation of proper decentralization. In general, when the budget is lower than what is planned, the budget of construction of offices, allowances and training programs are cut and transferred to salaries and running costs.

As was discussed in analysis part, findings indicated that the lion's share of the budget is spend for was the recurrent cost rather than the capital. Additionally, the major portion of the woreda budget has been financed by the regional block grant. The woreda remained dependent on regionally transferred grants. The share of block grant to the woreda budget has more than 96%

from 1996-1999 E.C in both woredas. This indicates that the amount of contribution of locally generated revenue to the woredas budget was extremely insignificant.

According to the field findings, the budget devolved to the woredas was inadequate to meet the increasing service demands of the community or perform the tasks expected from them. The budget was not sufficient even to cover the recurrent expenses; especially recruitment of new staff. Regarding this, Meheret (2007) further stated that financial constraint faced by sub-national governments in a decentralized system may come due to limited options to generate revenue. This situation may be push sub-national governments to seek more subsidy and grants from central government.

Moreover, even though the regional block grant is said to be transferred unconditionally, its allocation is determined by the regional authorities through the checklist which is a sort of guideline for budget allocation but without adequate consultation with local officials, civil servants and the community. Moreover, the budget allocation is determined with less flexibility to local conditions.

There is a great mismatch between its expenditure obligation and the financial resources it actually receives in the form of block grant and from own revenue. Woredas own revenue and regional block grant is still lagging behind the woredas expenditure requirement for provision of adequate health services in particular and public services in general.

One of the objectives of decentralization is the need to reduce the dependence of local government on regional or national government. However, the woreda is still heavily dependent on resources from region (the regional block grant for its expenditure) which has its own problems in prioritizing local needs.

5.4. Inadequate Devolution of Power to Woredas.

The central government has made significant progress in transferring major functions and decisions-making power to regional state governments. Woredas are the lowest government in the state structure which is very close to the people. As such, they should be provided with sufficient decision-making autonomy, administrative competencies and adequate resources to address the demands and concerns of the community. It was observed that sufficient decision-making

authority, responsibilities and resources were not given woreda levels administration to empower them to live up to the expectations of the people for more and improved services.

In reality, kebeles most often operate as recipients and implementers of decisions and orders from woreda governments rather than semi-independent institutions of self-government and empowerment at the grass roots level. This had meant that activities to be undertaken kebele administrators were restricted by close control and monitoring by woreda governments. Beside this incomplete devolvement of power to the local government, they could not even practice the level of power already devolved because of capacity limitation which discussed in the analysis section.

This consideration is important because adequate labor force and administrative capability are crucial factors in region's ability to implement socio-economic development plans and policies. Responsibilities of the woredas could easily be hijacked by the zones and regions which adversely affected the process of woreda and kebele level to implement programs.

Decision-making power in many cases in personnel and finance is made at regional level justified by lack of capacity by woredas. The study shows that many important decisions are directly or indirectly made by regional offices. While regional constitutions provide power to woredas to plan and approve their own budget in the study woredas, it was found that the budget is determined and allocated by the regional governments. Woreda officials complained that they are not even consulted and the formula used was not appropriate.

Hence, decision making powers on human resources also highly centralized to regional office. During the discussions in woredas, officials disclosed that the existing civil service system was strictly guided by regional civil service office. There is a limit of salary scale/positions that could be decided by the woreda. Woredas have a power to employ only supporting staffs those whose salary ceils is 445 ETB and below. So, higher positions recruitment is decided at regional level.

Additionally, even regarding those positions decided at woreda level, it was found that all recruitment decisions have to be approved by regional civil service Bureaus. This is also indirectly controlled through the planning process. In the recurrent budget, woredas usually include salaries of existing positions and not new ones. Then, approved salary expenses in the

woreda budget match the already existing positions limiting woreda discretions in terms of recruitment and making their powers normal.

Although the revised regional state constitution provides powers to woredas, the practice was not materialized. Article 50 (4) states that the state governments will be established at state and other administrative levels that they find necessary. It then puts that “Adequate power shall be granted to the lowest units of government to enable the people to participate directly in the administration of such units”. Lower governments units were established by regional constitutions in regional states and were granted necessary powers and duties.

Although, such constitutional provisions, it was found from the field study that there is no enough decisions-making power transferred to local governments.

Findings showed that inspire of the existence of a system which aspires to decentralize power to democratically elected political executives at the district level, woredas were found acting as deconcentrated administrative units of regional and zonal sector Bureaus. Woreda enjoyed little fiscal or administrative autonomy to respond to the local needs of their constituencies. Hence, the undue concentrations of power at the regional levels need to be broken to take democratic participation to the grass roots.

Even if, the existence of a positive political and legal pronouncements; decentralization in the form of devolution of power to local accountable governments and people is yet to be realized in the study areas. Therefore, there is a mismatch between legal and political pronouncement and actual practice in study areas.

5.5. Low Quality Service Delivery and Limited Devolution of Power to Woreda

Health and Education Sectors

Various study findings stated that one of the problems of public sector service delivery in most developing countries is the excessive concentration of decision making power and resources in the hands of central governments.

Based on the field findings, Service delivery expected to be enhanced as a result of the decentralization process was not satisfactory. Despite legal powers assigned to administer services

such as education and health services, resources and capacity constraints have undermined that power and to reach the objectives set.

The regional constitution provides powers to woredas to approve woreda social service delivery, economic development and administrative plans and programs. Additionally it gave responsibility for supervision, coordination and implementation of education and health services including primary school construction, health posts and stations. But all the above activities are currently carried out by the regional offices. Woreda administrators; education office and health office are not actively involved. Regional Bureau Heads justified the practice stating that they interfere because of the limited capacity of woredas to run projects. But woreda officials did not accept the reason of the regional bureaus. From this one can understand that woredas are denied of the power to play their roles they are given by the constitution.

As was discussed in the literature decentralized service delivery advocates the for the participation of community and lower tries of administration at the levels from planning to monitoring and evaluating; but in the study woredas this is not put in practical. This crippled the authority of the woreda sector office in particular and the genuine participation of the community in general.

It is further argued that the quality of service provision can be enhanced by decentralization since local governments will be more sensitive provision to variations in local requirements and open to feedback from direct beneficiaries of services (Robinson, 2004). Thus, decentralization is assumed to increase the efficiency and responsiveness of governments. Because locally elected leaders know their constituents better than authorities at the national or even regional and zonal levels. It argues that physical proximity of local authorities like woredas and kebele administration makes it easier for citizens' to hold local officials accountable for their preferences.

WB (2001) stated in many Africa and Asian countries the nature of decentralization to local governments and communities often takes the form of delegation of service delivery systems without an accompanying devolution of financing authority.

Capacity problem in terms of the availability of human resources was also found to be severe challenge in education and health offices of the two woredas. Additionally, the problem of educational qualification was another critical challenge in the woredas.

According to the national standard of MOE, the first cycle (1-4) primary education requires teachers with minimum qualification of teachers training institute (TTI) certificate, similarly a teacher training college diploma is required the 2nd cycle primary (5-8). But, in the study areas, it was found that that many of the teachers were under qualified (below the standard) and less quantity (refer table 14 and 15). Majority of the 2nd cycle teachers; qualification is certificate (10+1). This has an adverse effect on the quality of education which is currently far below the standard. In both woredas there are severe shortage of text books, shortage of classrooms and chairs.

During field study it was found that student text book ration was 7:1 and at rural schools the ratio is even worse (8:1 in average). There were many schools their class-student ratio was 90-120. The problem is more serious in remote and inaccessible woredas which were far from the attention of the regions and woredas. Schools did not have adequate facilities and many students sit on floor or stone. Thus, these are challenging to provide quality education services.

In the study woredas, enrollment rate seems increasing but there were high drop outs. Particularly, the dropout number was very high in the case of females. Low attendance and high dropout rates means that fewer children complete the primary cycle than enrolled in primary school. This implies that the quality and efficiency of education were in question in the study woredas.

During our discussion, the woreda education officials and woreda administrators noted that education service is expanding. But, the community representatives and teachers reported that there were serious problems in terms of quality of services. Education quality indicators include teacher-students, class-room student and book-student ratios which in practice showed that the quality is far below the standard. Woredas education office officials and experts also revealed that almost all schools including high schools in the woreda are poorly equipped; many of the teachers are under qualified consequently, these factors have been affected the quality of education.

By the sametoken, the problem of manpower at both higher and lower professional levels was also an acute problem for health sector in both woredas. For example, if a patient is referred to see

a doctor, he/she must go to regional town. In the region also there are only 3 doctors. Among them only one was specialist.

The inadequacy of professionals (both in terms of quality and quantity), drugs, medical equipments, potable water and poor infrastructure have greatly affected the decentralized service delivery in the study woredas.

Therefore, public sector institutions are not providing adequate services, since they do not have the necessary capacity particularly in terms of human resources and budget. In addition these woredas do not have full decision making power on issues of concern which paralyze the efficiency of the service delivery in the study areas.

Generally, from school and health units and woreda perspective, devolution policy has not brought and significant difference from centralized system. Much of the essential nature of decentralized system remained unspecified. Moreover, the capacity required for effective decentralization is not yet built. The decentralization of education and health attempts on reorganization of the institutional framework than improving their internal problems. Little is known about the school and health units level intervention programs, and the necessary inputs are not in place for schools.

5.6. Low Level Community Participation

The basic aim of woreda level decentralization is to serve as a means of empowering local communities, developing democratization and improve delivery of basic services. This process requires participation of self actors who directly or indirectly affected by the quantity and quality of services. One of the mechanisms for the involvement of self actors in public service delivery is through coordination and involvement of self actors at the stages of problem identification, prioritization of need, planning, implementation, evaluation and reporting processes.

But, in both woredas, it was found that the community participation was weak at all stages of education and health projects. The community was involved in some activities such as construction of teachers' house and caring school materials from town to rural schools. Hence, the community involvement is only limited in contribution of labor and local materials insignificantly in a very rear times. Local communities were not involved in the management of schools to

ensure that schools provide appropriate education to children then, the community participation in both woredas is found at rudimentary stage.

Similarly, there is weak coordination and involvement of the community in identifying problems and prioritizing services as stated by woreda officials and experts. In the study areas also we see that very little effort is made from the local authority, to mobilize and coordinate the community to enhance their role in different development activities. The establishment of the system (like establishing each Keble community health committee, PTAs) to address and mobilize was also realized last year. Particularly, the health community committee was established in 2007/08 in both woredas. There are also some Kebeles that did not have committee. In the focus group discussion and interviews with officials and community health committee and peace building committee it was suggested that the community participation was low due the inadequate capacity of the woredas and Kebeles administrations and professionals to mobilize and coordinate the resources of the community in different public services like health and education sectors.

Community members also stated that they forwarded their opinion but their opinions may or may not be considered. This is also reflected whenever questions were asked as to what major functions kebele leaders carry out, it was found that mobilizing people and keeping security were the most noticed functions. No mechanisms were mentioned as to how local officials were held accountable or checked by community members.

There was no well established system and clear guidelines to enhance the community participation in both woredas. We can conclude that community participation in both woredas was extremely insignificant.

5.7. Limited Network and Collaboration with Other Public Sectors and NGOs

It was observed in the field that the health sector did not establish a good network with other public sectors like education, water and rural development, etc. The network could have a contribution to ease the manpower problem in the sector to some extent. For instance, in schools teachers and students, and in rural developments office development agents and other rural committees can assist the health sector in different ways like mobilizing the community for different development activities. In the study woredas, there are international refugees campuses but there is no meaningful relationship with the woredas.

CHAPTER SIX

6. Conclusion and Recommendations

6.1. Conclusion

It is important to note here that generalizing about the nation from specific findings of two woredas, small proportion of kebeles and two public sectors is difficult.

Constitutions and other political pronouncements at federal and regional levels focus on decentralization as government poverty reduction strategy; reflecting need to improve the delivery of basic services and strengthening local participation. Strengthening of the capacity of woredas and kebeles to perform their service delivery functions effectively and also improving accountability and transparency at the local level. Many countries have resorted to decentralization as a way of realizing effective public service delivery and local self-rule. It enhances resource mobilization and utilization, accountability, participation, efficiency and responsiveness in service delivery.

Decentralization enhances effective performance and realization of local preferences. It has been used as a mechanism to disperse power to ensure political stability; to bring representative government closer to citizens; to improve accountability and representativeness of local leaders and to provide effective services.

As seen in the literature review, the benefits of decentralization have been supported by many theoretical and practical justifications in the study. The benefits of decentralization in relation to service delivery is also to offer the chance to match public services more closer to local demands and preferences. It contends that power over the production and delivery of goods and services should be rendered to the lowest unit capable of capturing the associated cost and benefits.

Decentralization in this respect is thus pertinent to create an enabling environment for all citizens to decide on their fate and involve actively in development efforts exerted at grass root level.

As noted by several authors promotion of basic service delivery like primary health care and education were seen as incompatible with centralized system. Countries like Ethiopia where managerial resources are scarce, communication is difficult, transportation is slow and many

people are not in the service system should be considered as one possible way to improve efficiency. The proximity between stakeholders brought by decentralization can ease the flow of information for decision making and hold officials and health workers accountable to their communities.

Recognizing of the above stated the advantage of decentralization has been the corner stone of Ethiopia's state transformation process and democratic governance since the early 1990s.

There was no enough decision-making power transferred to lower level local government. Findings of this study showed that woredas were acting as deconcentrated administrative units of regional and zonal sector Bureau. Woredas enjoyed little administrative autonomy to respond to the local needs of their constituencies. There is a need of responsive, effective, efficient, transparent-accountable and dynamic service delivery system in a decentralized framework. DLDP is assumed to enhance the institutions, working systems and human capital in an integrated and coordinated manner at woreda and kebele levels to ensure democratization, empowerment and good governance, improving service delivery. Woredas still continue to depend mainly on Zonal and regional governments.

Despite the power assigned to woredas to administer services, woreda decentralization has not been fully translated in to action due to lack of capacity, associated with administrative and personnel as well as scanty revenue base.

The intension of decentralization was to increase citizen participation, transfer of resources to peripheral, enhancement of transparency and accountability to local people and promotion balances socio economic growth. Democratic participation and consultation was not put in place and systems and procedures for decentralized services delivery had not been developed. Consequently, Service delivery improved expected as a result of decentralization process did not happen in the study areas.

With the intention of devolving power to a woreda has been structured in to different offices in accordance with the provision the revised/regional/ state constitution which laid down the legal basis for decentralized service delivery. Even though, the positive political legal pronouncements, decentralization in the form of devolution of power to local accountable governments and the

people is yet to be realized in the study areas. There is a disparity between legal and political pronouncement and actual practices.

In sufficient administrative and institutional capacity such as lack of well trained local government personnel, top-down decision and authority structures, interference of regional Bureaus trouble the state system, limited political space for non-state actors and non-ruling party organizations to participate and development and public service, acute budget shortage and financial resources are frequently faced by woreda governments are often cited as major limitations for promoting effective decentralization.

At woreda level and even at regional level, capacity has been a serious problem with shortage of qualified staff, high staff turnover, and staff posts left unfilled. Resources available to woreda education offices and health are largely used up for payment of salaries for staffs in the study areas.

Although woreda councils have the formal legal authority to allocate block grants amongst different sectoral programs, the actual disbursement of the resources and important decisions on allocations are greatly influenced by directives that originate from the regional and federal governments.

A decentralized system is also more sympathetic and quicker to respond to local needs as compared to centralized governments. However, having enough capacity to get the work done at local level is one of the biggest challenges local governments are confronting in the study areas.

The problems of acute skilled personnel, limited authority or devolution power to woredas and public sectors, severe budget constraint, heavy financial dependency on the regional and federal government, low level of community participation and limited networks within different public sectors and other stakeholders are the main constraints to materialize DLDP in general and service delivery in particular as expected in the study areas.

In general, Decentralization is good for the fact that it makes decisions close to woreda level which is near to the community and provides power. However decentralization without skilled and enough manpower, adequate financial capacity, good working environment and facilities will not be efficient and effective as happening in the study areas.

6.2 Recommendations

Based on the above discussions and the findings of the study, the following recommendations are forwarded.

- Weak capacity of human resources in terms of both quantity and quality is one of the critical problems identified in the study. This implies the need for short-term and long term capacity building programs for local officials and civil servants so that they can shoulder the challenges of decentralization in general the state of decentralized service delivery in particular and also other duties and responsibilities of delegated to them. Moreover, it is important that executive committee members be given diversified trainings including planning and public services delivery, basic management skills, finance, administration of local budgets, community empowerment strategies and effective implementation of social and economic programmes at the local level.
- Poor coordination and lack of a well-functioning organizational structure and communication system are also the problems identified in the local governments to avoid this different policy documents, manuals, plans, guidelines, directives, rules, proclamations and other review documents should be made available for communication barriers among different actors in the localities by creating awareness.
- Both local governments should give emphasis the representation of females in woreda councils and executive committee
- The practice of involving the community identifying problems and prioritizing their needs, planning and monitoring almost does not exist. This situation is incompatible with decentralization principles: involving the community in identifying problems to implementing is crucial for true empowerment. So, the local governments should make an effort to practically involve the community at all levels. Actions should be taken for community participation beyond mobilization of resources to actually engage in all levels of decision making process over spending.
- Woredas are confused with the costs and benefits of decentralization as they faced too many responsibilities suddenly and without matching resources and capacities. This has undermined both the real capacities of local governments and the potential gains from

decentralization. Hence, woreda decentralization needs to be institutionalized with finance and manpower.

- Capacity limitation in terms of human resources is very serious, especially for the remote woredas. Incentives to encourage professionals to deploy in such woredas must be established. In this connection, the regions must first undertake a study and then introduce incentive mechanisms to attract and retain staff in such woredas. The regional government and training institutions need to work closely to address the demand and supply gap of human resource at woreda level.
- The mismatch between fiscal authority and service provision responsibility should be minimized.
- The role of PTA in improving the quality of education and overall school governance need to be strengthened.
- Success in decentralization of decision making powers and functions to local level requires strong political commitment and leadership.
- As observed from the findings of this study one of the challenges of efficient service delivery is the absence of clear distinction between party politics and services delivery. Most of the officials are political appointees and are loyal to their party politics than their constituencies. Therefore, it needs a strategic document and commitment to make clear distinction between politics/party politics and service delivery.
- Both woredas have are many gaps to materialize the decentralized service delivery and the problems may not be solve in very short time with government alone. Hence, the regional government and woredas should mobilize other stakeholders (NGOs and Civil Organizations) to participate in filling; the gaps of the woredas and to implement DLDP adequately.
- Lastly, this study touches only some aspect of the state of decentralized service delivery in two woredas by focusing two public sectors only. Then, further, research could be done in other woredas and sectors.

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Annexes

Annex I. Questionnaire (Interview Guide and For Focus Group Discussion)

Interview Guide for key Informants (Woreda Administrators /Cabinet Members/Office Heads)

1. Is there any regional policy on decentralization that defines the roles and responsibility of local government?
2. What are the powers and functions actually devolved to the local Woreda authorities as to legal framework?
3. What are the powers and functions actually devolved to woreda level from regional level?
4. Is there any orientation/discussion in respect to devolving powers, functions and responsibilities? Is there any clear rules and regulations that delineate the powers functions and responsibilities between tiers of government?
5. IS DLDP implemented in the woreda adequately? What the success? What are the problems/challenges?
6. How do you see the decentralized service delivery approach?
7. How zonal and regional council do interfere in your activities?
8. Do you participate at Woreda and Kebele level development planning?
9. In what way the needs and priorities of community are reflected in the plan?
10. Do you participate at Zonal and regional planning process? In what way?
11. How are priorities set at Woreda level? How often these priorities changed at zonal and regional level? Why?
12. What are the main sources of finance for the Woreda to deliver public services and Finance projects?
13. What are the criteria for Woreda level fiscal grant or transfer? What are the taxes (revenue) sources for the Woreda?
14. Is the Woreda mandated to collect revenue and revenue and retain it?
15. Is the Woreda entitled to solicit counterpart for matching fund from various sources to supplement budget shortfalls?
16. What is the role of the Woreda canbinee members in resource mobilization for local development activities?
17. How is the money transferred to the Woreda and mobilized by it accounted for? What are the sanctions for poor performance?

18. Is there adequate transparency in administrative system to monitor how resources are used?
19. Is there Woreda level strategy to empower local governments and communities to identify their needs and priorities?
20. Does the Council has authority to flexibly a. redefine priorities b. Reallocate budgetary resources both across activities between investment and recurrent spending c. set condition of employment
21. Are there Woreda level programs or projects targeted to enhance the capacity and participation of community and civic associations?
22. How are community involved in the whole process planning, implementation, operation and management of services like in education and health?
23. What is the role of Woreda Council/cabine members in empowering the grass roots?
24. To what extent local capacity inhibits participation? Verify if steps are taken to alleviate this.
25. Is there NGO that are working in health and education sector?
26. In which sectors CBOs /NGOs recognized as playing a role in the management operation and maintenance of basic services? What are their major roles?
27. How often evaluation of services delivery performance is conducted?
28. How looks like the education and health services in woreda (access and coverage /in relation with decentralization)?
29. What are the major problems in to provide quality service in the woreda?
30. How do you perceive decentralization at Woreda/local level? What its significance in general and in particular on service delivery?
31. How are priorities set at Woreda level and how often are priorities are charged and why?
32. Is there any guide line to prepare plans/project at Woreda/Keble level?
33. What are the bottlenecks to undertake a decentralized service delivery at Woreda level?
34. What are the solutions to ease problems?

Annex II. Summary of points for focus group Interview guide for key informants at Regional Bureaus

1. Is there Regional health and education policy on decentralization that defines the roles and responsibility of Woreda level health offices?
2. What are the powers and functions actually devolved to the Woreda health and education offices as per the legal framework?
3. How are the planning process undertaken at Woreda level and what institutional arrangements are used?
4. Does the Woreda health and education office know the resource envelop while preparing health and education sector plans?

5. How are priorities set at Woreda level and how often they are changed at the higher level why?
6. What are the critical problems for implementing DLDP? What are the achievements? Prospects?
7. Is there any strategy to enhance Woreda s' capacity?
8. Is there any possibility the regional bureau interface woredas? Why? To what extent?

Annex III. Summary of points for focus group discussion for health professionals/workers

1. What looks like the health service your woreda?
2. In what way participate to plan the health services in the woreda?
3. How the communities participate in the development of heath services?
4. Is there capacity building/in service training?
5. Has decentralization significant contribution in health service delivery? How?
6. How do you see the health service delivery in your woreda?
7. How do you get capacity building trainings?
8. Is the existing health service delivery adequate? If not why?
9. How do you see the health service delivery in the woreda?(Coverage, quality and accessibility)?
10. What are the major problems to provide health services?
11. Would you comment on the status of service delivery in terms of coverage, quality and cost?

Annex IV. Summary of Points for Focus Group Discussion for Community Representatives

1. How do the communities participate in different development activities in the woredas?
2. How do you participate in health and education services? At what stage the communities participate (planning, implementing, monitoring, evaluating)? How
3. What is your role in mobilizing the community? How can you influence the woreda administrators and officials to consider the need and priorities of the community?
4. What are the major problems related health/education services in the woredas? What are the solutions?
5. What are the contributions of the community in service delivery expansion in the woreda?
6. In what way the communities exchange information with woreda officials, kebeles administrators and civil servants?
7. Is the existing health and education service delivery adequate? How? Why?
8. On which issues/activities have the community powers to decide?
9. Who are the roles of the community during the construction of school or health posts?
10. What are the obstacles for community participation in different development activites in the woredas? What are solutions?
11. In what way you facilitate the community to participate in development activities?

5. How are priorities set at Woreda level and how often they are changed at the higher level why?
6. What are the critical problems for implementing DLDP? What are the achievements? Prospects?
7. Is there any strategy to enhance Woreda s' capacity?
8. Is there any possibility the regional bureau interface woredas? Why? To what extent?

Annex III. Summary of points for focus group discussion for health professionals/workers

1. What looks like the health service your woreda?
2. In what way participate to plan the health services in the woreda?
3. How the communities participate in the development of heath services?
4. Is there capacity building/in service training?
5. Has decentralization significant contribution in health service delivery? How?
6. How do you see the health service delivery in your woreda?
7. How do you get capacity building trainings?
8. Is the existing health service delivery adequate? If not why?
9. How do you see the health service delivery in the woreda?(Coverage, quality and accessibility)?
10. What are the major problems to provide health services?
11. Would you comment on the status of service delivery in terms of coverage, quality and cost?

Annex IV. Summary of Points for Focus Group Discussion for Community Representatives

1. How do the communities participate in different development activities in the woredas?
2. How do you participate in health and education services? At what stage the communities participate (planning, implementing, monitoring, evaluating)? How
3. What is your role in mobilizing the community? How can you influence the woreda administrators and officials to consider the need and priorities of the community?
4. What are the major problems related health/education services in the woredas? What are the solutions?
5. What are the contributions of the community in service delivery expansion in the woreda?
6. In what way the communities exchange information with woreda officials, kebeles administrators and civil servants?
7. Is the existing health and education service delivery adequate? How? Why?
8. On which issues/activities have the community powers to decide?
9. Who are the roles of the community during the construction of school or health posts?
10. What are the obstacles for community participation in different development activites in the woredas? What are solutions?
11. In what way you facilitate the community to participate in development activities?

Annex V. Summary Interview guide for Woreda Education and Health Officials

1. What looks like the service of health/education in the woreda? (In relation with quality, access and coverage, equity)?
2. How do you involve the community in education and health services? Is there any system?
3. Who is responsible to establish schools? Health units?
4. What criteria do you use to establish schools/health posts? Please list them in order of their importance?
5. Who sets these criteria?
6. In what aspects do the education /health office work closely with the concerned regional, zonal and Keble level administration?
7. What authorities and responsibilities do the education offices have to establish new schools and other education institutions?
8. What are authorities and responsibilities of the office to recruit, employ, assign, transfer, promote and demotion and etc. employees' ad on other administrative issues?
9. What are the advantages of decentralized system for education/health service? Is it effective? What are the problems?
10. How are the planning, implementing, monitoring and evaluations activities of the education /health service being carried out in the woreda? Who are the main stakeholders?
11. How does the distribution of primary schools in the woreda look like? Who decide it? Who are the participants? What are the challenges?
12. Is there any measure that has been taken to improve the inequitable distribution of qualified teachers /health worker?
13. Is there any special program that has been designed and implemented the participation of girl's schooling both in urban and rural areas at regional, zonal woreda, or school levels? If so what is the measure and outcome? How is the budget allocation for the office?
14. Do have a right to use the budget in a flexible way?
15. How do you see the decision power and budget adequacy of the office after the implementation of the woreda implementation of DLDP?
16. What are the major problems in implementing decentralized service delivery system in the woredas? What are the solutions?

Annex VI. Summary of Points for Focus Group Discussion for Teachers

1. How is the teaching learning process looks like?
2. How is the dropout of students in school?
3. How is the enrollment of girls?
4. Comment on accessibility and coverage of education service?
5. How is the community participation in education development
6. Do you have a strategic plan for your school?
7. How prepared it? What was the contribution of teachers during preparation?
8. Has decentralized education policy play a great role for education development and provide effective services?
9. How stake holders and beneficiaries in teaching learning process participate? What are their contributions?
10. How do you see the decentralized education system in this woreda?
11. What are the challenges and problems in your school?

Annex VII. Summary of Points for Focus Group Discussion for Kebele

Adminstrators

1. What are the major roles of the kebele administration for the socio-economic development?
2. Have the kebele a power to pass decision in different issues?
3. Do you have your own budget?
4. What does the participation of the community look like in your kebele?
5. Do you have any development plan? How plan that? Who participate in plan?
6. What looks like the relationship between you and the worda administrative?
7. How the kebele administrative participate in education and health services development?
8. What looks like education and health services in the kebele? Coverage, access, quality, enrolment?
9. What are the constraints in the kebele?
10. What do know you think are the best solutions for the constraints?

Annex VIII. Summary of Points that used as to collect Seconadry Data (Soocio economic and Demogrphic profile of the woreda)

1. Organizational structure of woreda and Sector offices (Education and Health)
2. Buget of the woreda, education office and health office (consecutive years)

3. Manpower of the woreda administration, education and health office with their education level
4. Guidelines and policies of the woreda and region
5. Distribution and coverage of the health and education services
6. Number Population and kebeles of the woreda
7. Number of schools and health units in the woredas.
8. Performance reports.
9. Coverage of education and health services in the woredas.

IX. Summary of Points that used during observation

1. Facilities of the woreda administration, health and education office
2. Distance of schools and health units from the road and the town
3. Schools and health units facilities (educational materials and medical equipment)
4. Distance of the services area from the village
5. Number of students in one class room
6. Accessibly and facility of service office like kebele office for users.
7. Capacity in planning and monitor different activities.
8. Plans, reports, documentations and archives situation

X. List of Focus Group Discussants and Interviewees

I. List of key informants (interviewees in both woredas)

Regional Bureaus

4. Head, Plan and Programme Gambella Education Bureau
5. Deputy Head, Gambella Health bureau
6. Regional government DLDP coordinator

XI. Abobo and Gog woredas

No	Persons to be interviewed	Number
1	Woreda Chief administrators	2(one in each woreda)
2	Woredas deputy administrator	2
3	Woreda education and capacity building office heads	2
4	Woredas capacity building coordinator	2
5	Woreda education plan and programme senior expert	2
6	Primary education expert	2
7	Woreda health office head	2
8	Woreda health office disease prevention and control team leader	2
9	Woreda health center/higer clinic head	2
10	Woredas finance and economic development office head	2
11	ANFEAF coordinator(at Gog woreda)	1
12	Eduation supervisors	2
13	Woreda education office head	2
14	Kebele Administrators	8(4 in each woreda)
15	School directors	10
16	Total	42

XII. List of Focus group Discussants

No	Groups	No
1	Health professionals	10(5 in each woreda)
2	No of teachers	20(10 in each woreda)
3	PTA members	10(five each woreda)
4	Health Community Committee members	9
5	Peace building committee members	10(five each woreda)
6	Total	59

XIII. List of Samples of Schools, Health units and Kebeles

List Sample schools

Gog woreda

1. Gog Janjor (1-8)
2. Tedo (1-4)
3. Abodo (1-4)
4. Puchala(1-6)

Abobo woreda

1. Abobo(1-8)
2. Pepengo unaha(1-7)
3. Chemo(village 5 & 6)(1-4)
4. Chebo kir(1-6)
5. Aberti meti(1-4)
6. Furedi Abobo(1-6)

List of Sample Kebeles List of sample health units

Gog woreda

1. Gog janor
2. Tedo
3. Pignawudo

Abobo worda

1. Abobo
2. Chembo
3. Aberti
4. Ukuna
5. Furedi

Gog woreda

1. Pignwaudu health center
2. Tedo health post
3. Abodo health post

Abobo woreda

1. Abobo health station
2. Chemo health post
3. Furedi health station

XIV: School Distribution of the Woreda in 2007/2008

No	Kebele	No of school	Grades				
			9-10	1-8	1-7	1-6	1-4
1	Abobo	2	X	X			
2	Ukuna Kijang	1		X			
3	Chembo (village 8 &9)	1				X	
4	Chembo (village 11 & 12)	1					X
5	Chembo (village 14)	1		X			
6	Chembo (village 5 &6)	1					X
7	Dumbong	1				X	
8	Tegni	1					X
9	Perpengo unaha	1			X		
10	Furedi Abobo	1				X	
11	Chebo kir	1				X	
12	Palutelam	1					X
13	Chebo (village 13)	1					X
14	Aberi meti	1					X
15	Chebo (village 7)	1					X
16	Terchiru	1					X
17	Lumtake	1					X
	Total	18	1	3	1	4	9

Source: Woreda Education and Capacity Building Office (2007/2008)

IV Trends of School Enrollment in Abobo Wereda

Year(E.C)	Grade	Enrollment			Dropouts	
		Boys	Girls	Total	Boys	Girls
1997	1-4	1,000	742	1,742	290	282
	5-8	796	511	1,307	162	139
	9-10	273	94	367	61	24
1998	1-4	1,215	1,162	2,377	310	427
	5-8	788	568	1,356	134	154
	9-10	311	104	415	64	26
1999	1-4	1,614	1,489	3,103	158	210
	5-8	1,070	789	1,859	98	113
	9-10	298	93	391	47	27
2000 (1st semester only)	1-4	1,699	1,530	3,229	75	103
	5-8	906	790	1,696	65	70
	9-10	293	147	430	34	19

Source: Woreda Education and Capacity Building Office (2007/2008)

XV: School Distribution of the Woreda

No	Kebele	No of Schools	Grades				
			9-10	1-8		1-6	1-4
1	Gog Janjor	1				X	
2	Gog Dipach	1		X			
3	Pignawudo	3	X	X			X
4	Thatha					X	
5	Puchalla	1				X	
6	Utiel	1					X
7	Ajeringa	1					X
8	Cham	1					X
9	Abodo	1					X
10	Tedo	1					X
	Total	12	1	2		3	6

Source: Woreda Education and Capacity Building Office

XVI. Trends of School Enrollment in Gog Woreda

Year(E.C)	Grade	Enrollment			Dropouts	
		Boys	Girls	Total	Boys	Girls
1997	1-4	800	397	1,197	290	104
	5-8	511	213	724	90	97
	9-10	215	64	279	59	31
1998	1-4	1,030	410	1440	105	98
	5-8	648	342	990	86	97
	9-10	244	80	324	45	30
1999	1-4	1,214	798	2012	86	82
	5-8	821	520	1,341	58	48
	9-10	217	60	277	27	22
2000(first semester only)	1-4	1,387	901	2288	75	103
	5-8	773	597	1370	18	26
	9-10	263	90	353	10	11

Source: Woreda Education and Capacity Building Office

XVII. Abobo Woreda Health Sector Performance of the ten top diseases 1996 E.C. -1999 E.C.

Year	Activity/disease	Target	Achievement	Percentage
1996	Malaria	12,384	6,876	55
	RIT	12,384	2,384	19
	Helmintasis	12,384	643	5
	Anima	12,384	366	3
	Gastrics	12,384	364	3
	Diharea	12,384	315	4
	Wound	12,384	299	3
	Common cold	12,384	280	3
	F.U.O.	12,384	139	2
	Other diseases	12,384	718	6

1997	Malaria	12,638	5,677	45
	RIT	12,638	2,483	20
	Helmintasis	12,638	988	8
	Diharea	12,638	736	6
	Gastrics	12,638	624	5
	Eye infection	12,638	547	4
	Others/ GIT	12,638	454	4
	Wound	12,638	433	3
	Skin infection	12,638	379	3
	Common cold	12,638	307	2
1998	Family planning	4,344	2,765	63
	ARI	3,778	620	16
	CDD	3,778	839	22
	G/M/Growth Monitoring	3,778	2,121	56
	ANC	944	743	79
	D/S/Delivery Services	944	181	19
	PNC	944	159	12
1999	Malaria	12,303	6151	50
	RIT	12,303	2,120	17
	Helimitentasis	12,303	712	7.8
	Diaharra	12,303	707	5.7
	Common Cold	12,303	600	4.9
	Gastrics	12,303	515	4.2
	Rheumatism	12,303	465	3.7
	Anemia	12,303	410	3.3
	Skin infection	12,303	407	3.3
	Other GIT/disease	12,303	655	5.3

Source: Abobo Woreda Health Office

XVIII. Abobo woreda Annual Achievement of MCH 1997 E.C. -1999 E.C.

Activity	Target population	Average Annual coverage	Average percentage
Family planning	3,022	1,361	45
ARI	3,022	371	12
CDD	3,022	397	13
GM	3,022	2,128	70
ANC	755	378	50
D.S.	453	169	37
BCG	604	372	62
DPT3	604	272	45
MEASLES	604	217	36
TT2+ P.W.	755	331	44
TT2+N.P.W.	3,022	244	8
DPT1	604	386	64

Source: Woreda Health Education Office in 2008

XIX. Gog Woreda Health Sector Performance of the ten top diseases 1996 E.C. -1999 E.C.

Year	Activity/disease	Target	Achievement	Percentage
1996	Malaria	11,200	3,876	34.6
	RIT	11,200	1,184	10.6
	Helmintasis	11,200	333	2.9
	Anima	11,200	236	2.1
	Gastrics	11,200	364	3.3
	Diharea	11,200	315	2.8
	Wound	11,200	300	2.7
	Common cold	11,200	290	2.6
	F.U.O.	11,200	142	1.5

	RIT	10,090	1,120	11
	Helimitentasis	10,090	512	5.1
	Diaharra	10,090	312	3.1
	Common Cold	10,090	500	4.9
	Gastrics	10,090	413	4.1
	Rheumatism	10,090	301	2.9
	Anemia	10,090	310	3
	Skin infection	10,090	207	2.1
	Other GIT/disease	10,090	255	2.5
	Other diseases	11,200	628	5.6
1997	Malaria	8,100	3080	38.4
	RIT	8,100	1,200	14.8
	elmintasis	8,100	514	6.3
	Diharea	8,100	636	7.8
	Gastrics	8,100	534	7
	Eye infection	8,100	215	2.6
	Others/ GIT	8,100	213	2.6
	Wound	8,100	522	6.4
	Skin infection	8,100	379	3
	Common cold	8,100	276	3.4
1998	Family planning	2,122	1040	49
	ARI	2,122	220	10.4
	CDD	2,122	337	15.8
	G/M/Growth Monitoring	2,122	1460	68.8
	ANC	742	371	50
	D/S/Delivery Services	742	151	20
	PNC	742	142	19
1999	Malaria	10,090	5,412	53.6

XX. Gog Woreda Annual Achievement of MCH 1997 E.C. -1999 E.C.

Activity	Target population	Average Annual coverage	Average percentage
Family planning	2,122	760	35.8
ARI	2,122	150	7.1
CDD	2,122	135	6.4
GM	2,122	1,003	47
ANC	455	156	34
D.S.	324	98	30
BCG	404	187	46
DPT3	496	197	39.7
MEASLES	424	150	35
TT2+ P.W.	535	231	43
TT2+N.P.W.	2,141	112	5
DPT1	503	200	39.7

Source: Woreda Health Education in 2008

XXI. Map 1. Gambella Regional State

Map 1: Gambell Regional State

