INFLUENCE OF DECISION-MAKING PRACTICES ON QUALITY OF SOCIAL SERVICE DELIVERY IN RWANDA

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ABSTRACT
The purpose of this study was to determine the influence of decision-making practices on quality of social service delivery in Rwanda. The questions were identification of reforms that had been affected and an assessment on its impact on service delivery. The study adopted a cross-sectional survey research design. The target population of the study was 7000 respondents. Both qualitative and quantitative data was collected through structured questionnaires. The sample size of 379 respondents was determined using the Yamane’s formula. The questionnaire was pretested before data collection for validation and reliability. The collected data was coded and analyzed using both quantitative and qualitative methods with the help of descriptive and inferential statistics. The Statistical Package for Social Sciences version 24 was used. Testing of hypotheses was done using analysis of variance. Variance Inflation Factor was used to illustrate the significance of the association between governance practices on the quality of social service delivery by local governments in Rwanda. Analyzed data was presented using tables and percentages. The coefficient of determination ($R^2$) of 0.658, which means that this variable alone can explain up to 65.8% of the variations in the dependent variable, quality of social service delivery in Rwanda. The findings further confirmed that the regression model of decision-making practices on quality of social service delivery in Rwanda is significant for the data $F=156.122$, $p<0.01$ since p-values was 0.00 which was less than 0.05. The study at 95% confidence interval solved the third research question by indicating that the variable decision-making practices is statistically significant in the quality of social service delivery in Rwanda. The findings confirmed that there is a statistically significant influence of decision-making practices and on quality of social service delivery in Rwanda. A positive increase in decision-making practices leads to an increase in on quality of social service delivery in Rwanda. It was concluded from this study that decision-making practices is statistically significant in explaining on quality of social service delivery in Rwanda. The study concluded that decision-making practices are effective in determining on quality of social service delivery in Rwanda.

Keywords: Quality of social Service delivery, Decision-Making Practices, Public institutions in Rwanda

INTRODUCTION

Good governance, in this era has drawn public awareness of the operations of public institutions. It has also become an important factor in the consideration of a nation’s ability to adhere to universally acceptable democratic standards (Bratton and Rothchild, 2012). It ensures that political, social and economic priorities are based on broad consensus in society and that the voices of the poorest and the most vulnerable are heard in decision-making over the allocation of development resources (World Bank, 2003).

Good governance in the public sector aims to encourage better service delivery and improved accountability by establishing a standard for good governance in the public sector (IFA, 2013). Effective governance in the public sector encourages better decision making, efficient use of resources and strengthens accountability for the stewardship of resources (Mutahaba, 2012).

According to IFA (2013), good governance is characterized by strong inspection which provides important pressures for enhancing public sector performance and tackling misconduct. It also improves management, leading to more effective implementation of the chosen interventions, better service delivery and better outcomes.

The principles of good governance such as participation, rule of law, transparency, accountability, fairness and efficiency enable employees to be more effective and transparent in providing high quality services. It also protects them from the tendency towards misconduct (Alaaraj, 2014). On the other hand, weak governance compromises service delivery and tends to benefit a selected elite.

Since then, many organizations both private and public throughout the world employ governance practices to maintain their positions as well as increasing their quality due to constant socio-economic and technological changes (Park, 2005). To enhance this, many organizations put emphasis on continuous learning, research, development and strategic planning. This suggests that governance is regarded as a means to ensure that companies or organisations are run properly and at the same time, minimizing the risk of institutional failure (Murya, 2010). Thus, governance practice has been viewed as an assessment system that serves as a "signal indicating" mechanism, not only can provide enterprise with a manoeuvrability basis and instruction for furnishing its governance, and provide governance assessment record to the society, but also at the same time, review timely the changes of strategic policy environment and provide a favourable environment for social mutual governance (Murya, 2010).

This study intends to unearth the quality of social service delivery by local government authorities in Rwanda from the perspective of governance practices. The reason for embedding reference to governance practices in local government setting is that in many developing countries including Rwanda, the realities of implementing policies often deviates sharply from the rhetoric of official framework. Thus, policy documents can only give limited insight of what local government officials experience in the implementation process in their working places. In Rwanda for example, the decentralisation policy is still ‘half dressed’ as finance and budget remain the affair of the central government. This could have been one of the contributing factors towards shrunken social service delivery in the country. Thus, this study will attempt to undress the governance practices from the decision-making perspective, accountability and areas of strategic planning and link them to social service delivery in Rwanda especially in health, education and water and sanitation. The focus of the study will be local governments in Rwanda and in particular reference to five provinces in the country as they play a vital role in the implementation and monitoring of government programs at lower levels.

Statement of the Problem

The socio-economic status of people is very much influenced by their experiences and interactions.
with environment. The experience and interaction with the environment in Rwanda with Principles of Technical Secondary Schools (TSS) since 1995 and Councils in the Sectors since 2004 and Heads of Health Centres clearly show that quality social service delivery remains a great challenge in the country. What is on ground is that many local governments in the country have not been in position to deliver and sustain the required standards or quality of social services to the people they serve (Rwanda Governance Scorecard (RGS, 2010; 2012). This comes amidst the government’s efforts to uplift the quality of social service delivery to all the nationals in Rwanda through various policy approaches including Economic Development and Poverty Reduction Strategy (EDPRS 2) and Vision 2020 Umurenge program (VUP). These policies clearly outline the government’s approaches aimed at improving service delivery as well as enhancing socio-economic status of all Rwandans. Ineffectiveness in service delivery by local government has led to low accessibility to social services in the country. For example, the accessibility to health services especially in the usage of modern contraceptive remains low (25 %); those accessing HIV/AIDS related services remains low (below 50 %); and the ratio of medical doctor per population (per 10,000 habitants) remains high 1:17,240 according to the reports from the Ministry of Health. (Rwanda Governance Scorecard (RGS, 2010; 2012); The same report affirms that the major problem in health services is lack of medical facilities, Laboratory equipment’s, Transport, few numbers of beds and Water and Sanitation. (RGS, 2010; 2012).

Thus, as service delivery in areas of education, health and water have been among the worst performing in Rwanda such as lack of safe drinking Water, Near clean water, proper drinking water source maintenance, Garbage collection and cleaning services this arouses the desire to find out the core reasons behind service downfall in the country in relation to the role of local government officials especially in the areas of decision-making, accountability and strategic planning such that existing policy gaps can be bridged and socio-economic lives of citizens can be improved (RGS, 2010; 2012).

LITERATURE REVIEW

Theoretical Perspective - The Notion of Good Governance

One of the first definitions to the governance appeared in the works of Aristotle, a venerated philosopher of his time (Frederickson and Smith, 2003). Frederickson and Smith (2003) present Aristotle contending that State must ensure the cohesion of its members, the equality of opportunities between the citizens, freedom and the property for all. His view on governance was further developed by the three other philosophers and these included Thomas Hobbes, John Locke and Jean-Jacques Rousseau. These three philosophers perceived social contract as a pact freely made by the community of human beings in order to establish an organized and hierarchical society (Frederickson and Smith, 2003). This was also in line with Schoeman whose view on social contract was in regards to the role of the governing authority in the provision of peace and defence in a civil society. In close reference to good governance, Schoeman noted that government should be accountable to the people, even when the source of authority resides in the people themselves. The general impression here is that government agencies should take up the responsibility to protect the people they govern (Landell-Mills and Sarageldin, 1991).

Since then, different concepts have emerged from the governance and these include corporate governance, international governance, local governance, democratic governance, and good governance (Munshi, 2004). From 1990’s UN agencies, World Bank and donor countries have capitalised on good governance thus putting emphasis on economic cooperation based on the globalisation and the political cooperation. It has also been noted that international institutions such as the UNDP, the IMF and the OECD introduced
good governance to the list of the operational parameters used in financing projects and granting loans (Munshi, 2004).

In 1997, United Nations Development Programme (UNDP) outlined in its policy paper what should be involved in governance. The policy paper defined governance as the exercise of political, economic and administrative authority to manage a nation’s affairs. In this regard, governance has been viewed as a complex mechanism, processes and institutions through which citizens and groups articulate their interests, exercise their legal rights and obligations, and mediate their differences. The same policy paper also views governance as the process of decision-making and the process by which decisions are implemented or not implemented. It would be worthy for me to go by the definition of governance by Munshi (2004) as he conceives good governance in a participative manner of governing that functions in a responsible, accountable and transparent manner based on the principles of efficiency, legitimacy and consensus for the purpose of promoting rights of individual citizens and public interest, thus indicating the exercise of political will for ensuring the material welfare of society and sustainable development with social justice.

Thus, the concept of governance is differently perceived and this depends on the nature of the organisation, country and implementing agencies. Whatever it may be perceived, my definition for governance practices in this study will be participatory action in the activities of decision-making, accountability and strategic planning in local governments in Rwanda within the rule of law.

<table>
<thead>
<tr>
<th>Decision-making practices</th>
<th>Quality of Social service delivery</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consultation of stakeholders</td>
<td>Health related services</td>
</tr>
<tr>
<td>Interest of people</td>
<td>Adequate of classrooms</td>
</tr>
<tr>
<td>Setting priorities</td>
<td>Water and Sanitation Services</td>
</tr>
</tbody>
</table>

Independent Variables

Figure 1: Conceptual Framework

METHODOLOGY
The study adopted a qualitative and quantitative survey research design. According to the information from Rwanda Governance Board (2010), there were approximately 500 officials per rural district and 700 officials per urban district. This suggested that from four rural districts the total number of officials were 2000 while those from the urban districts were 4200, making the total number of district officials 6200. Members of civil society organisations were estimated to 80 per district making the total number of members of CSOs from all the ten districts to 800 people. In this regard, the total target population was 7000 people. Since the population size was quite large, that is 7000, Yamane’s formula was used to determine the sample size. The formula was proposed for this study because there was need to have the 95% confidence interval be less than 0.06 units wide. The determination of sample size by simplified Yamane’s formula was illustrated as below:

\[
    n = \frac{N}{1 + Ne^2}
\]

Where;

- \( n \) is the sample size,
- \( N \) is the population size (7000)
- \( e \) is the desired level of precision (0.05)

\[
    n = \frac{7000}{1 + 7000 \times 0.05^2} = 379
\]

Thus, using Yamane’s formula, the sample size for this study was 379 respondents and these was proportionally selected from both district officials and members of CSOs. The study employed purposive sampling techniques. The study used a cross-sectional survey research design. Cross-sectional surveys involve data
collection from a population, or a representative subset, at one specific point in time and have an advantage over other research designs that only seek individuals with a specific characteristic, with a sample, often a tiny minority, of the rest of the population (Kothari, 2011).

Primary data was collected using structured questionnaires which had both close ended and open-ended questionnaires. Structured questionnaires refer to questions which are accompanied by a list of all possible alternatives from which the respondents selected the answer that best describe their situation (Mugenda & Mugenda, 2009). Structured questions are easier to analyze since they are in the immediate usable form (Orodho, 2008). The questionnaires were self-administered. The researcher informed the respondents that the instruments being administered was for research purpose only and the response from the respondents were kept confidential.

RESULTS

Analysis for Decision Making Practices

Regression analysis was performed in order to determine whether the independent variable, Decision-Making Practices could be reliable for explaining the change in the dependent variable, quality of social service delivery in Rwanda. The coefficients obtained indicate that the correlation coefficient (R) between the independent variable and the quality of social service delivery in Rwanda was 0.811 which is a positive correlation relationship. Table 1 showed a coefficient of determination (R²) of 0.658, which means that this variable alone can explain up to 65.8% of the variations in the dependent variable, quality of social service delivery in Rwanda.

Table 1: Model summary showing Decision-Making Practices

<table>
<thead>
<tr>
<th>Model</th>
<th>R</th>
<th>R Square</th>
<th>Adjusted R Square</th>
<th>Std. Error of the Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>.811a</td>
<td>.658</td>
<td>.656</td>
<td>.420123</td>
</tr>
</tbody>
</table>

The Analysis of Variance (ANOVA) results were shown in Table 2. The findings further confirmed that the regression model of decision-making practices on quality of social service delivery in Rwanda is significant for the data F=156.122, p<0.01) since p-values was 0.00 which is less than 0.05.

Table 2: ANOVA for Decision-Making Practices

<table>
<thead>
<tr>
<th>Model</th>
<th>Sum of Squares</th>
<th>Df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regression</td>
<td>51.431</td>
<td>1</td>
<td>51.431</td>
<td>293.042</td>
<td>.000a</td>
</tr>
<tr>
<td>1 Residual</td>
<td>26.811</td>
<td>82</td>
<td>.617</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>78.242</td>
<td>83</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a. Dependent Variable: Quality of social service delivery
b. Predictors: (Constant), Decision-Making Practices

The coefficients of decision-making practices are presented in Table 3 which indicated that the model has a significant p-value =.000. The study at 95% confidence interval solved the third research question by indicating that the variable Decision-Making Practices is statistically significant in the quality of social service delivery in Rwanda.
Using the summary of Coefficients presented in Table 3, a linear regression model of the form, \( Y = \alpha + \beta X_1 \) can be fitted as follows:

\[
Y = 0.522 + 0.620X_1
\]

This implied that a unit change in Decision-Making Practices would increase quality of social service delivery in Rwanda by the rate of 0.620.

**Hypothesis Testing for Decision Making Practices**

**H\(_0\):** There is no significant influence between decision-making practices and quality of social service delivery in Rwanda

The hypothesis was tested by using multiple linear regression and determined using p-value. The acceptance/rejection criteria were that, if the p value is less than 0.05, we reject the \( H_0 \) but if it is more than 0.05, the \( H_0 \) is not rejected. Therefore, the alternative hypothesis is that there is significant influence between decision making practices on quality of social service delivery in Rwanda. Results showed that the p-value was 0.025. This was supported by a calculated t-statistic of 5.850 that is larger than the critical t-statistic of 1.96. The alternate hypothesis was therefore not rejected. The study therefore adopted the alternative hypothesis that there is significant influence between decision making practices on quality of social service delivery in Rwanda.

**CONCLUSION**

The findings confirmed that there is a statistically significant influence of Decision-Making Practices and on quality of social service delivery in Rwanda. A positive increase in decision-making practices leads to an increase in on quality of social service delivery in Rwanda. It was concluded from this study that Decision-making practices are statistically significant in explaining on quality of social service delivery in Rwanda. The study concluded that decision-making practices are effective in determining on quality of social service delivery in Rwanda.

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