The relationship between goal setting, priority identification, and service delivery in Bujumbura City Local Government. A cross-sectional study.

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Abstract

Background
Effective decentralized governance requires clear goals, participatory planning, and accurate prioritization of community needs; however, many local governments continue to experience service delivery gaps due to weak planning processes. This study examines the relationship between goal setting, priority identification, and service delivery within Bujumbura City Local Government.

Methodology
A descriptive cross-sectional design was employed, utilizing both quantitative and qualitative methods. A sample of 119 respondents-including civil servants, political leaders, elders, and citizens-participated. Quantitative data were collected through structured questionnaires and analyzed using descriptive statistics, correlation, and regression analysis. Qualitative data were gathered through guided interviews and analyzed through content categorization and thematic interpretation.

Results
Most respondents were adults in active service (mean age 3.47), predominantly male (68%). Correlation analysis indicated a moderate, significant relationship between goal setting and service delivery (r = .415, p = .000). Regression results confirmed that strengthening goal setting predicts a 41.3% improvement in service delivery. Identification of priorities showed a weaker yet significant positive relationship with service delivery (r = .250, p = .006), predicting a 26.4% improvement. Qualitative findings reinforced these results, revealing limited community participation, infrequent parish planning meetings, and civil servants' influence on priority-setting.

Conclusion
Goal setting and priority identification significantly influence service delivery; however, both processes are inadequately implemented. Strengthening stakeholder involvement, improving communication, and adhering to planning guidelines are essential.

Recommendations
There is a need for regular community planning meetings, clearer communication of mission statements and goals, improved transparency, and reduced political interference.

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Background

Effective planning requires a systematic and well-coordinated process that guides the attainment of set targets. According to the Ministry of Local Government (2004), national planning begins with broad policy directions and an outline of the resources necessary to achieve desired objectives. This aligns with the fundamental purpose of planning, which is to design actionable programs that influence ongoing development processes or initiate new ones, ultimately transforming existing conditions to match the goals envisioned at the time the plan was formulated. Such transformation is only possible when planning follows a participatory and bottom-up approach, as emphasized by MoFPED (2006).

Without effective feedback, organizations struggle to adjust their actions, and the pursuit of more difficult goals demands greater cognitive strategies and advanced skills. From an organizational standpoint, achieving complex goals becomes more challenging as resources become limited. Locke and Latham (2002) demonstrate that specific and challenging goals consistently lead to higher

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performance, with about 90% of empirical studies showing superior outcomes compared to situations with easy or no goals.

In decentralized systems, identifying priorities is a critical component of planning. Local government councils set development visions, goals, and priorities, while technical teams translate these priorities into realistic programs and projects aimed at improving service delivery (MoLG, 2003; PEAP, 2004). In Burundi, the medium-term planning and budgeting framework has been expanded to include Budget Framework Papers (BFPs) prepared by all local governments. This has enhanced revenue forecasting and strengthened alignment between local priorities and national development objectives (World Bank, 1999). Although local planning is increasingly synchronized with national priorities, challenges remain in ensuring that planning systems effectively respond to community needs.

The Poverty Action Fund has played a major role in channeling resources toward priority programs, ensuring that funds are earmarked for poverty-reduction initiatives (Bevan, 2001). While the Fund has strengthened the link between priorities and expenditure, it also represents a "second-best" arrangement given the existence of the Medium-Term Expenditure Framework (Republic of Burundi, 2001). The prioritization framework embedded in the PEAP/PRSP has become central in guiding planning at sub-national levels, helping integrate local and national development processes (DFID, 2003a, 2003b). As Hiroshi (2008) notes, harmonizing central and local government planning and budgeting cycles ensures that local priorities feed into national planning, thereby improving coherence and service delivery.

This study examines the relationship between goal setting, priority identification, and service delivery within Bujumbura City Local Government.

Methodology

Research design

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

Both qualitative and quantitative approaches were used because they complement each other. The qualitative approach is descriptive, uses conceptualization, and helps in explaining variables, and the quantitative approach, which uses statistics to explain numerical values. The qualitative methods used included interviews that were conducted at the parish level and focus group discussions at the village level.

Study population

The study population included civil servants, political leaders in the cities, chairpersons of the Parish Development Committees (PDCs), representatives of the interest groups at parish/sub-county level (youth, women & people with disability), CBO leaders, and the community beneficiaries from the sampled villages. The study population of 440 subjects was sampled to select a sample size of 300 respondents based on different roles played in the planning process and the level of implementation of the decentralized services.

Sample size and selection

Probability sampling was used; this is where elements in the population have some known chance/probability of being selected as sample subjects. (Sekaran, 2000).

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

Table 1: Categories of respondents sampled for the study

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

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

The respondents were sampled according to the categories specified in the above table to get a fair representation of the study. A sample size of 300 respondents as a representative sample was used.

Sampling methods and procedure

Having selected the acceptable sample size of 440 subjects for the study, the study considered the appropriate techniques that depended on the research questions and objectives. Purposive and random sampling were therefore used.

Data collection methods

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

Focus group discussions

The purpose of the study was explained to the participants to enable them to explore their knowledge on the topic of study. Participants were divided into groups of not more than 6 people who discussed the topic of decentralized planning separately. Questions were formulated on the four main thematic areas to guide the discussion. Apart from questions for further information and clarification, participants were encouraged to share other experiences that cross-fertilize the subject under discussion. Key lessons and recommendations were developed under each topic, and feedback was provided to the main grand plenary. The focus group discussion was developed to elicit the participants' impressions of the current service system strengths and recommendations from key stakeholders regarding service delivery by local government. The protocol contained the same questions at each time/point.

Documentation

This method involves delivering information by carefully studying written documents or visual information from sources called documents. These are textbooks, newspapers, journals, articles, speeches, Advertisements, Pictures, etc. Secondary data from city, sub-county plans, Reports, recent studies, books, and journals were reviewed to test and enrich results from other methods, as well as to attain available information on the area of study.

Data collection instruments

A combination of instruments was used as appropriate to make use of their different strengths, because none of the methods, when used exclusively, may collect sufficient data. The following instruments were used: a questionnaire interview Guide with structured questions, a focus group discussion checklist, and a document review.

Questionnaire

These were self-constructed with semi- semi-structured set of questions, open and closed-ended. Semi semi-structured questionnaire was used because large samples can be made of use and thus, the results can be made more dependable, offers the greatest assurance of unanimity, is cheaper than other methods, and is free from bias. A total of 132 questionnaires were distributed to the selected respondents. To find out the views of the respondents on the relationship

between decentralized planning and service delivery, the independent variable was grouped into 4 (four) variables namely; goal setting (10 items), identification of priorities (10 items), stakeholder participation (10 items), implementation (10 items), efficiency (10 items) and effectiveness (5 items). The self-administered questionnaire was used at the Sub-County, town division, and city levels.

Interviewing

Guided interviews were conducted in parishes and wards with parish local council executive committee members who included those responsible for youth, women, and disability, the chairpersons of PDCs, and the parish chiefs. The purpose of the interview was to determine the extent to which those stakeholders participate in decentralized planning. The choice of the method was supported by the fact that it is flexible and an adaptable way of finding things out. A structured interview guide was formulated, where specific questions were asked of all respondents. Participants included 36 interviewees, who by virtue of their experience through direct involvement in parish/sub-county planning activities were purposefully identified and interviewed as key informants. A self-styled interview guide was used (Kojo E. S, 2008).

Pre-testing

The research instruments were pre-tested in one rural sub-county and one urban division to minimize the random error and increase the reliability of the data collected. The results of the pre-testing led to adjustments of the questionnaire to make it more focused and to elicit more data from the respondents. Furthermore, the questionnaire was adjusted by adding more closed-ended questions to make ten items for each independent variable and fifteen items for the dependent variable, so as to make the study more focused and enlist relevant data from the respondents. Validity of the instrument was determined by content validity, which refers to the degree to which the test actually measures or is specifically related to the traits for which it was designed (Amin, 2005). An important

question then was ''how do we establish a Content Validity Index (CVI). Therefore, the coefficient of validity is calculated as: Number of respondents who agreed / Total number of respondents issued with questionnaires.

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

n = Number of respondents who agreed
N = Total number of respondents
20/2 = 10.
17-10 =7
7/10 = 0.7
For the instrument to be accepted as valid, the average index should be 0.7 or above. (Amin, 2005).

Validity

Validity is the ability to produce findings that are in agreement with the theoretical or conceptual values. I.e, to produce accurate results and to measure what is supposed to be measured (Amin, 2005). The study's strategy for enhancing validity includes obtaining data from multiple sources. In this case, 36 interviews were conducted at the parish level with stakeholders and 28 FGDs at the village level, along with document analysis and written observation by the research team.

Reliability

Reliability is a measure of the degree to which a research instrument yields consistent results/ data after repeated trials.

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

Table 2: Reliability results table

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

From the reliability results, it's clear that implementation items were the most reliable, followed by goal setting, and the least reliable was stakeholder participation. Service

delivery as a dependent variable was also reliable up to 71.8%. In a research study, a reliability coefficient can be computed to indicate how reliable the data are. The

Cronbach's Alpha for all the variables was .814, implying that the results are reliable up to 81.4%. Cronbach's Alpha is an index of reliability associated with the variation accounted for by the true score of the ''underlying construct'', (Hatcher, 1994). If an instrument were perfectly reliable, the coefficient would be 1.00, meaning that the respondent's true score is perfectly reflected in her or his true status with respect to the variable being measured. If the coefficient is .00, it indicates no reliability (Amin, 2005). Nunnaly (1978) has indicated 0.7 to be an acceptable reliability coefficient, but lower thresholds like the ones in this study (0.378 and 0.399) of identification of priorities and stakeholder participation, respectively, are sometimes used/ accepted, and since the overall Cronbach alpha is 0.814, I presume that the results collected are reliable.

Data management and analysis

Quantitative data analysis

After data collection and cleaning, the quantitative data were subjected to analysis. The analysis was done using the SPSS version 16.0 due to its comprehensive user user-friendly, and statistically compatible features, among its simplicity. Data was analyzed, taking into account the unit of analysis and five levels of measurement. To apply the correlation and inferential techniques, reliability analysis was first computed, and emerging results were examined. The dependent variable (service delivery) and the independent variable (goal setting, priority identification) were analyzed using a statistical technique of regression, which gives relationships and the magnitude of the relationship between variables. Regression is a technique used to predict the value of a dependent variable using one or more independent variables. It must be noted that in this case, multiple regression was used since service delivery was tested from other independent variables (Efficiency and effectiveness).

Analysis of variance (ANOVA) was also used to determine the sum of squares and the statistics with the rule of significance (0.05) to determine the ideal model to measure variation.

Qualitative data analysis

Content analysis for the qualitative data was done manually. Content analysis consists of reading and re-reading the transcripts, looking for similarities & differences in order to find themes and to develop categories. Qualitative data were analyzed using themes and code categories in the study. A list of the key beliefs, opinions, ideas, and sentiments was coded according to the themes of the study and was used to illustrate the findings in chapter five. Furthermore, relevant reviewed literature was used to discuss and illustrate the study findings.

Measurements of variables

The variables of the study were measured using a five-point Likert scale. A Likert scale consists of several statements that express either favorable or unfavorable attitudes towards the given object to which the respondent is asked to respond. Each response is given a numerical score, indicating its favorableness or unfavorableness, and the scores are totaled to measure the respondents' attitudes. All the variables were measured using a 5 Likert scale ranging from strongly agree. Agree, undecided, disagree, and strongly disagree.

Results

Response rate

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

Table 3: Analysis of the response rate

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

Source: primary data.

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

consequently, the framework in which conclusions can be made.

Social demographic indicators

Age of respondents

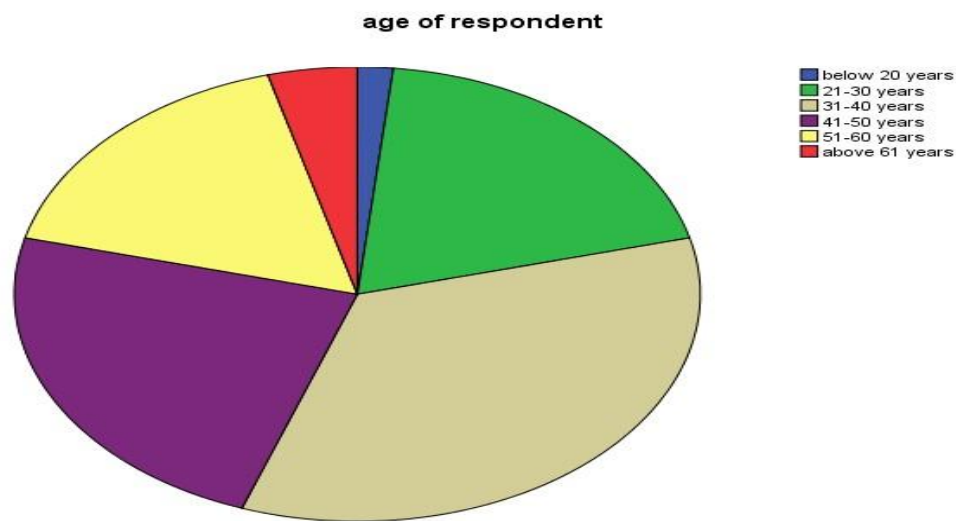**Figure 1: Age distribution of respondents**

age of respondent

Figure 1 shows that a majority of respondents were of the 31-40 age bracket, with an average age of 3.47 and a standard deviation of 1.156. It shows the distributed response age group with those below 20 years and above 61 years contributing to the least responses, which gives a view of the experienced/ knowledgeable age group sampled.

Figure 2: Sex of respondents

Percentage Distribution of Sex of Respondents
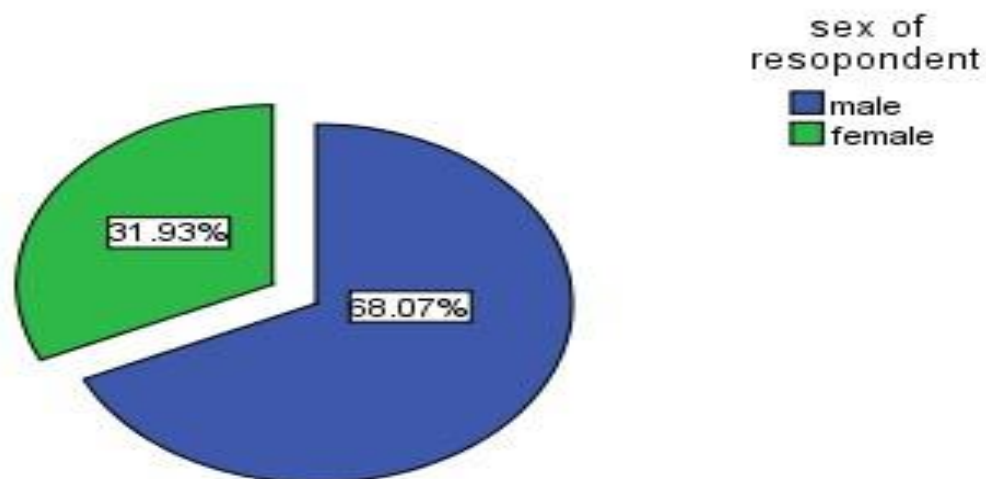
The respondents were a majority male, with more than 68% male compared to females constituting 32%.

Level of education

A majority of respondents interviewed were at post-secondary 46, 40.0%) and post-graduate level of education with 40 (34.8%). Post-secondary level includes certificate and diploma holders and post-graduate includes degree holders. Other levels of education contributed 5 (4.3%), and this includes master's holders. Only 0.8% never went to school, an equivalent of one person.

Figure 3: Level of education
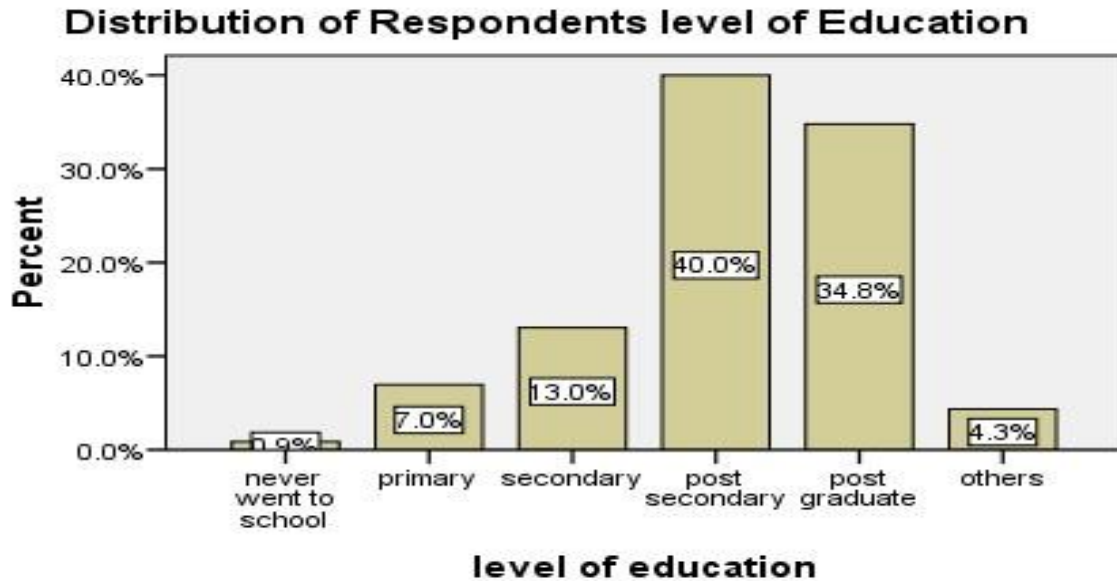
Figure 4: Management position and duration of service
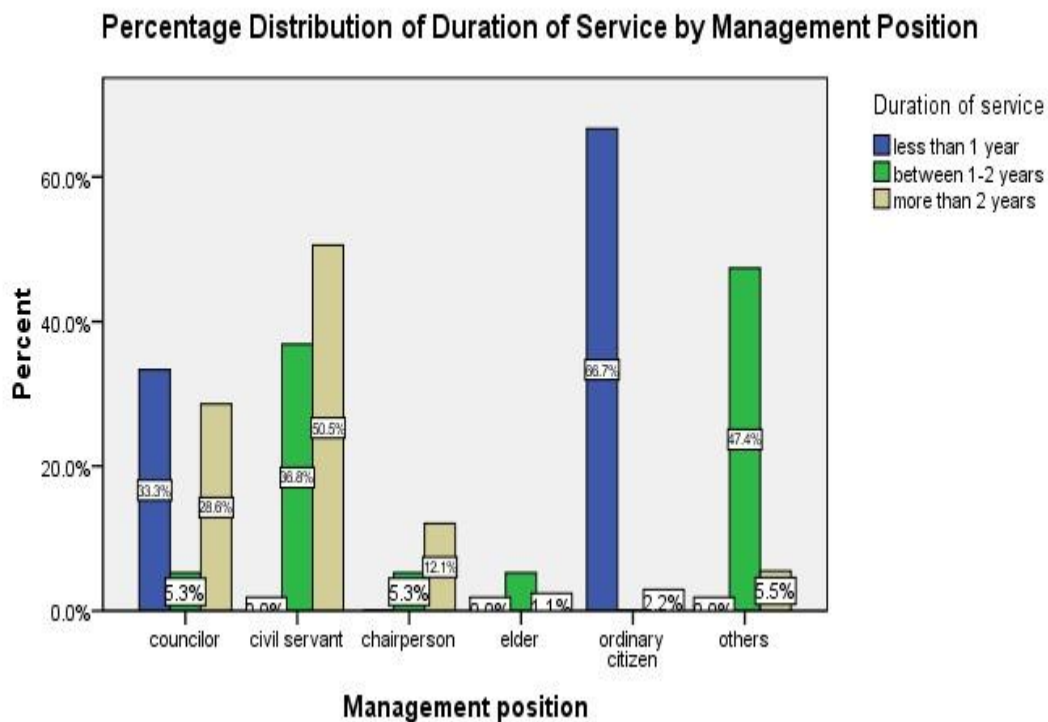
The findings revealed that civil servants 53 (44.5%) were the main respondents, with elders contributing to only 3 (2.5%), the political leadership was also interviewed, with 28 members of sub-county and city councils and 12 chairpersons interviewed, contributing to 23.5 percent and 10.1 percent respectively Majority of civil servants interviewed, more than half served for more than 2 The findings revealed that civil servants 53 (44.5%) were the main respondents with elders contributing to only 3 (2.5%), the political leadership was also interviewed with 28

member of sub county and city council and 12 chairpersons interviewed contributing to 23.5 percent and 10.1 years with very few 3(2.5%) less than 1 year. A majority of ordinary citizens of 66.7 percent, served for less than 1 year, compared to 33.3 percent of councilors seen figure above. In totality, (96) 80.5 percent of respondents served for a duration of more than 2 years, with only 2.7 percent serving for less than 1 year; this gives an experience for an informed opinion on decentralized planning and service delivery in local governments.

Table 4: Descriptive results for service delivery

Item in percentages	SA No. %	A No. %	U No. %	DA No. %	SD No. %
There is political influence in execution	24(20.2%)	60(50.4%)	6(5.0%)	27(22.1%)	2 (1.7%)
Drugs and workers are available	4 (3.4%)	21(17.6%)	1(0.8%)	73(61.3%)	19(16.0%)
Service provision in the education sector has improved	3(2.5%)	28(23.5%)	9(7.6%)	65(54.6%)	14(11.8%)
Roads are well-maintained in the city	5(4.2%)	28(23.5%)	2(1.7%)	68(57.1%)	16(13.4%)
Agricultural services have improved	13(10.9%)	38(31.9%)	(1 0.8%	53(44.5%)	14(11.8%)
Most communities access water	12(10.1%)	49(41.2%)	1(0.8%)	46(38.7%)	11(9.2%)
Official procedures delay approval	19(16.0%)	48(40.3%)	5(4.2%)	41(34.5%)	4 (3.5%)
Payment of council allowances delays approval	28(23.5%)	67(56.3%)	3(2.5%)	20(16.8%)	1 (0.8%)
Intersect oral collaboration is effective	16(13.4%)	47(39.5%)	3(2.5%)	39(32.8%)	13(10.9%)

Source: primary data

From table 4, a majority of the respondents disagreed significantly on health, education, roads, and agriculture, except water, which a majority agrees has improved, as can also be reflected clearly in table 4, which shows the number of responses and their percentages. A few respondents were undecided on the performance. The variations of feelings on performance show that there is a relationship between service delivery and decentralized planning. Politicians were said to actively influence the execution of activities, especially where resources should go, sometimes not where the services are most needed. In decentralization, where 'power' is given back to the people, political influence is considered an important aspect in influencing the implementation of service delivery. It was also agreed that the payment of council allowances delays the approval and, therefore subsequent implementation of the activities. It was observed that councilors would not sit to approve plans if the payment of their allowances was not clear. Intersect oral collaboration with other sectors is said to increase service delivery; 52.9 percent agreed that this

was done; however, the 43.7 percent responses cannot be undermined because assessment of the planning minutes revealed that each sector does its own thing, especially with the introduction of LGDP and PMA grants. Intersect oral collaboration is not favored. Ideally, these grants would encourage different sectors to come together and plan, which would foster intersectoral collaboration for effective service delivery. This is, however, different in Bujumbura city. Respondents were also asked to mention major limitations associated with service provision in the city.

Goal setting affects service delivery.

The concern of this theme was to examine the extent to which goal setting affects service delivery in local governments. Ten variables were used to measure how goal setting affects service delivery, and the findings are described in Table 5.

Table 5: Descriptive results showing responses on goal setting and service delivery

	SA No. %	A No. %	U No. %	D No. %	SD No. %
Bujumbura city is said to be operating on a written and clear mission statement	37(3.1%)	57(47%)	5(4.2%)	16(13.4%)	4(3.4%)
Bujumbura city has its mission statement, known to all its stakeholders	4 (3.4%)	25(21.0)	6(5.0%)	67(56.3%)	17(14.3%)
It's easy to interpret the city's mission statement	4 (3.4%)	22(18.5)	4(3.4%)	66(55.5%)	23(19.5%)
Goals set are said to be responsive to community needs	3 (2.5%)	23(19.3)	1(0.8%)	66(55.5%)	26(21.8%)
Guidelines influence the process of goal setting	28(23.5)	69(58.0)	4(3.4%)	14(11.8%)	4 (3.4%)
Goals and strategy are clearly understood inside and outside my organization	15(12.6)	34(28.6)	6(5.0%)	47(39.5%)	17(14.3%)
Feedback to communities is important for proper goal setting	43(36.1)	56(48.7)	6(5.0%)	9(7.6%)	3 (2.5%)
Resources limit goal setting	39(32.8)	61(51.3)	3(2.5%)	12(10.1%)	4 (3.4%)
Goals are linked to situational constraints	22(18.5)	43(36.1)	2(1.7%)	48(40.3%)	4(3.4%)
The city formulates realistic plans	6(5%)	17(14.3)	4(3.4%)	72(60.5%)	19(16%)

Source: Primary data.

As depicted in Table 5, (94) 78 percent agreed that the city is operating on a written and clear mission statement, (20) 16.8 percent disagreed, and 4.2 percent were undecided. Asked whether the mission statement was known to all her stakeholders, 70.6 percent disagreed, 24.4 percent agreed, and only 5 percent were undecided. On interpretation of the mission statement, 75 percent disagreed, 21.9 percent agreed, and 3.4 percent were undecided. The respondents were asked whether the goals set were responsive to the community needs; 77.3 percent disagreed, 21.8 percent agreed, and 0.8 percent were undecided. Asked whether the guidelines used had any influence on goal setting, 81.5 percent agreed that it had influence, 15.2 percent disagreed, and 3.4 percent were undecided. 53.8 percent disagreed that goals and strategy were not clearly understood inside and outside the organization, 41.2 percent agreed, and only 5 percent were undecided. Asked whether feedback was an important element in goal setting, 84.8 percent agreed, 10.1 percent disagreed, and 5 percent were undecided. Respondents were also asked whether resources were a constraint to goal-setting activity; 84.1 percent agreed, 13.5 percent disagreed, and 2.5 percent were undecided. On whether goals set were linked to situational constraints, 54.6 percent agreed that they were linked, 43.7 percent disagreed, and 1.7 percent were undecided.

Table 6: Correlation Results for goal setting and service delivery

Correlations

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

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

Table 6 shows that there is a significant relationship between service delivery and goal setting, with a correlation coefficient of (Sig. 0.000), implying the relationship is positive and moderate. This explains that strengthening or improving goal setting will, in turn, improve service delivery by 41.5%. As a rule of thumb, correlation coefficients between .00 and .03 are considered weak, those between .03 and .07 are moderate, and coefficients between .07 and 1.00 are considered high (Amin, 2005). 0.415** is moderate and therefore acceptable in determining the magnitude of the relationship

between two variables. It is important to appreciate that correlation is different from cause.

Table 7: Regression results for goal setting and service delivery

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

a. Dependent Variable: service delivery

Using multiple regressions, it was found that the regression coefficient (R) was 0.415. It implies that by strengthening goal setting, service delivery will be improved. From column B, the regression equation can be written as:
Service delivery = 1.624 + 41.3 goal setting
It therefore shows a positive relationship with service delivery and goal setting as a useful predictor since the t- t-statistic of 4.935 is greater than 2.
In the findings above, the Beta reciprocal relationship was 0.415, that is, among all respondents interviewed, at least 41.5% said goal setting is important for service delivery improvement and the same findings shows that goal setting accounts for a small variation in service delivery and other factors account for much of the variation as shown by a high residual sum of squares of 26.362. However, it does a good job in explaining variation in service delivery because of a high significance level of 0.000 and a favorable mean square of 5.488.

Identification of priorities affects delivery.

In establishing the relationship between identification of priorities and service delivery, ten variables were used to measure the respondents' views on how identification of priorities affects service delivery.

Table 8: Descriptive results showing responses on identification of priorities and service delivery

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

Source: Primary data.

From table 8, the strongly agree and agree responses were added together, just like the disagree and strongly disagree, for easy interpretation of the results. The respondents were asked whether identification of priorities was done at the village level, (66) respondents 55.5 percent agreed that it was done at the village level, 48 respondents (40.3) percent disagreed, and only (4) 3.4 percent were undecided. Asked whether the community was aware of the priorities in their area (48) 65.5 percent disagreed, (33) 27.8 percent agreed, and (7) 6 percent were undecided. Respondents were also asked whether cost and time had a bearing on priorities identified, 51.3 percent agreed, 46.2percent disagreed, and

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

undecided. Respondents were also asked whether local governments needed to plan; 31.9 percent agreed that it was necessary, 57.1 percent disagreed, and 4.2 percent were undecided.

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

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

Table 9: Correlation results for identification of priorities and service delivery correlations

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

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

According to Table 9, there is a significant relationship between service delivery and identification of priorities with a correlation significance level of (Sig. 0.006), implying that the relationship is positive. It indicates that strengthening or improving the identification of priorities will, in turn, improve service delivery by 25%.

Table 10: Regression results for identification of priorities and service delivery.

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

a. Dependent Variable: service delivery.

Table 10 shows that identification of priorities accounts for a small variation in service delivery, and other factors account for much of the variation, as shown by a low Beta of 0.250, which does not explain well the variations in service delivery because of a low significance level of 0.006, but shows a positive relationship. This therefore calls for more research on other factors that could explain the variation well.

The model can be summarized as: service delivery =2.054 +26.4 identification of priorities.

However identification of priorities is significant predictor of service delivery because t statistic was 2.787 which are greater than 2 and the analysis of variance yield the F-statistics of 7.768 with (1,117) degrees of freedom which

are significant at .006, hence performance of service delivery is determined by identification of priorities by 95% as a rule of thumb that significant coefficient of 000 accounts for 99%, 00 accounts for 95% and 0 is 90%.

Qualitative findings

Guided interviews were conducted in parishes and wards with parish local council executive committee members who included those responsible for youth, women, and disability, the chairpersons of PDCs, and the parish chiefs. The purpose of the interview was to determine the extent to which those stakeholders participate in decentralized planning and service delivery. Questions were asked for

each of the variables stated, responses gathered, and content analysis was applied. Responses were grouped, categorized, and codes were developed for similarities and differences.

Goal setting affects service delivery.

Table 11: Qualitative results for goal setting

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

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

Identification of priorities affects service delivery.

Table 12: Qualitative results for identification of priorities

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

From Table 12, 50% of the respondents indicated that planning meetings at this level were organized once a year, and 28% said meetings were never organized.

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

Focus Group Discussion (FGD)

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

Data: The focus group data indicated the following: local councils at the village level were operational. They are always involved in settling disputes. Planning meetings are held once a year or not at all. Weak planning process and absence of clear guidelines and consultations affect service provision. Planning for services is done by the parish chiefs, PDCs, and elected councilors/ representatives of the people. Local government and the people themselves should prioritize services. But there is a need to empower people to undertake planning and setting of priorities, and to increase the participation of stakeholders in decision-making. Inadequate information- the flow of information is not the best; lower local council leaders need to travel to the sub-county/division/city for information and directives as to what to do.

Discussion of results

Goal setting affects service delivery.

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

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

In the findings in chapter four, further percentages or frequency of relationships were 0.415; in other words, among all respondents interviewed, at least 41.5% said goal setting is important for service delivery improvement, and therefore local governments must ensure that decentralized planning moves toward meeting this objective if service delivery in cities is to be improved.

Identification of priorities affects service delivery.

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

'Every year our identified priorities are rolled over, not implemented, so identifying more is a waste of time, we are not facilitated to plan, therefore we don't even call for planning meetings. ' This shows that a truly participatory

bottom-up and cross-sector planning system for service delivery left a lot to be desired, primarily because there were not enough resources available, planning meetings were reported to have been organized once a year or never at all, as was reported by 50% and 28.9% of the respondents interviewed.

Conclusion

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

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

Recommendations

- A national goal of improving service delivery outcomes may be achieved by increasing the capacity of the lower local governments while simultaneously putting the onus on all concerned to carry out their constitutional responsibilities for service provision. Therefore, detailed operational plans must be drawn up to achieve these goals, which will subsequently improve service delivery in local governments.

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

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List of abbreviations

BFP – Budget Framework Paper
CAO – Chief Administrative Officer
CSO – Civil Society Organization
DDP – City Development Plan
DTPC – City Technical Planning Committee
HIV/AIDS – Human Immunodeficiency Virus / Acquired Immune Deficiency Syndrome
LGBFP – Local Government Budget Framework Paper
LGDP – Local Government Development Program
L.C. – Local Council
LG – Local Government
LLG – Lower Local Government
MDG – Millennium Development Goals
MOH – Ministry of Health
MOFPED – Ministry of Finance, Planning and Economic Development
MOLG – Ministry of Local Government
NGO – Non-Governmental Organization
PPS – Priority Program Areas
SPSS – Statistical Package for the Social Sciences
UNDP – United Nations Development Program

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Conflict of interest

There is no conflict of interest.

Availability of data

Data used in this study are available upon request from the corresponding author.

Authors contribution

HR designed the study, conducted data collection, cleaned and analyzed data, drafted the manuscript, and SM supervised all stages of the study from conceptualization of the topic to manuscript writing and submission.

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