

Advancing localization of service delivery in low- and middle-income countries (LMICS): the reach, inclusiveness, consistency and equity (RICE) imperatives. A Systematic Review

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Introduction

How can we tailor public service delivery to effectively meet the unique needs of diverse local communities,

foster active participation and empowerment within diverse local communities,

and align public service delivery with contextual factors influencing localization?



Introduction Contd.

Importance of localization of service delivery (LoSD). The LoSD Theory of Change demonstrates:

- ❑ Community *empowerment* and *improved* participatory processes.
- ❑ Community members *direct* engagement in decision-making, planning, implementation, monitoring and evaluation processes.
- ❑ *Active* community involvement and ownership.
- ❑ Communities' *ability* to mobilize resources (financial, human, and social capital)
- ❑ Communities' *ability* to advocate for their rights and interests.
- ❑ Communities' *ability* to hold service providers and policymakers accountable and ensure transparency and responsiveness in governance processes.

Local Service Delivery Vs Localization of Service Delivery. •



Introduction Contd.

Challenges of localization of service delivery:

- ❑ Local *capacity* building (grassroots civil society actors)
- ❑ Establishing *robust* community engagement and empowerment mechanisms
- ❑ Policy and institutional *reforms*
- ❑ *Pragmatic* multi-stakeholder partnerships and collaboration

Introduction Contd.

Research Questions (RQ):

RQ 1: What is the comparative effectiveness and contribution of the reach, inclusiveness, consistency, and equity (RICE) imperatives for LoSD?

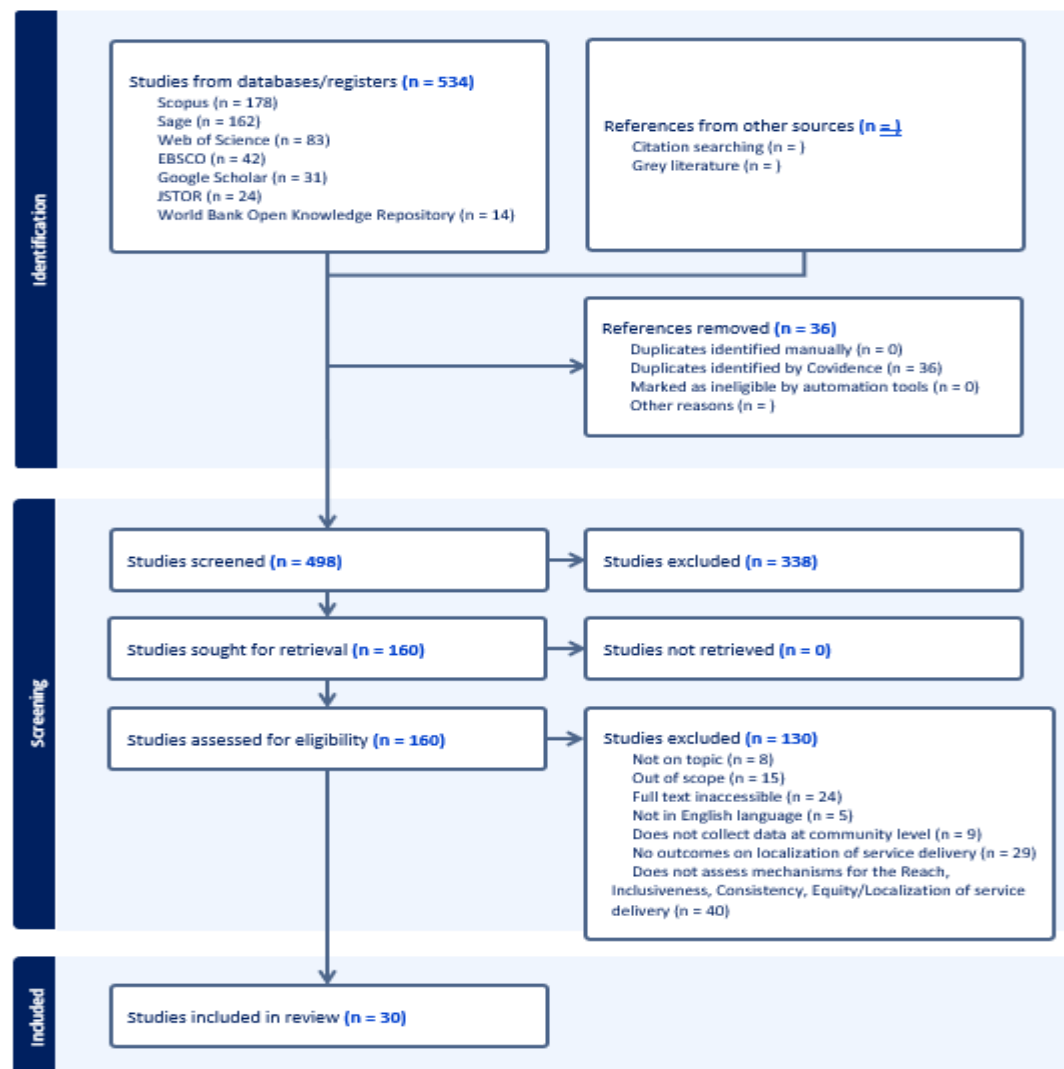
RQ 2: What community-level participatory mechanisms demonstrate effectiveness (or lack thereof) on LoSD?

RQ 3: What contextual factors, including geographic set-up, socioeconomic context, local political structures, and cultural dynamics, significantly influence LoSD?

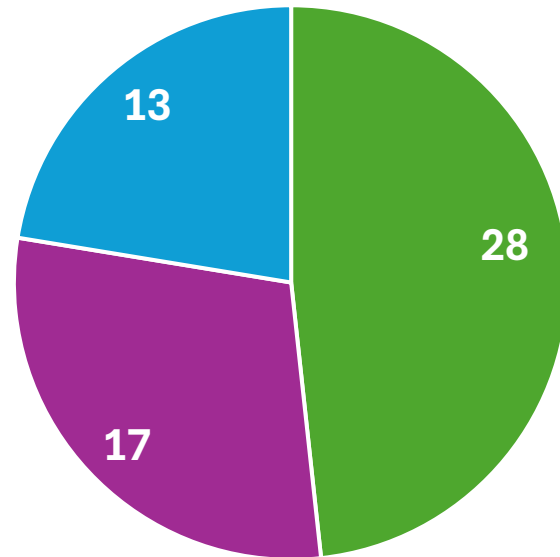
Methodological Approach

The review process consisted of three main phases: planning, conducting, and reporting:

- ❑ Planning phase- designed the review protocol outlining the research context, the RQs, search strategy, and the selection criteria (inclusion/exclusion).
- ❑ Conducting phase- searched studies in google scholar and academic databases (Scopus, Sage, Web of Science, EBSCO, JSTOR, World Bank-OKR).
- ❑ Covidence: Used for title and abstract screening, full text review, and data extraction.
- ❑ NVivo 14: Used for qualitative thematic analysis and synthesis of the selected (30) studies.



Key Findings-RQ1 *(Comparative effectiveness and contribution of the RICE imperatives for LoSD)*

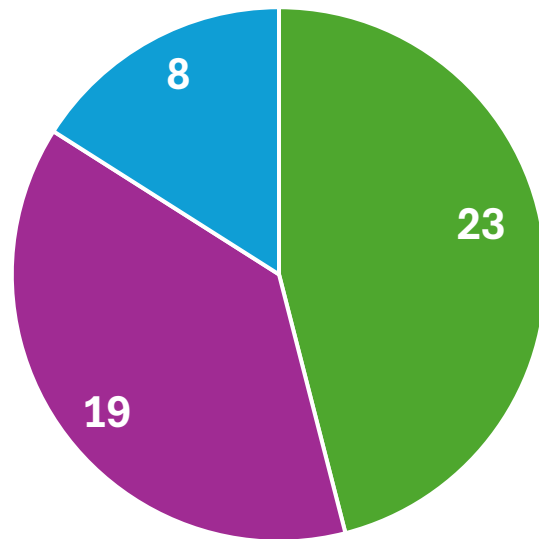


- Governance Attributes
- Sector and Policy Outcomes
- Empowerment and Agency

A thematic analysis of the selected 30 peer reviewed articles revealed improvements in and positive impact on:

- Governance attributes of (transparency, responsiveness, accountability, participation, inclusiveness, equity, effectiveness, quality). Twenty-eight (28) studies.
- Better sector and policy outcomes (Education and Health). Seventeen (17) studies.
- Community empowerment and agency. Thirteen (13) studies

Key Findings-RQ2 (*Community-level participatory mechanisms*)

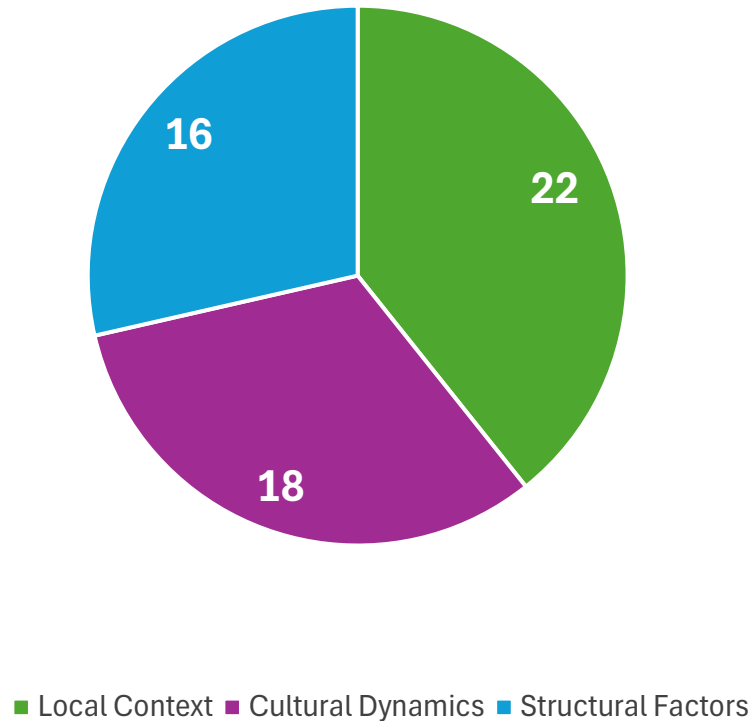


■ Local Service Delivery ■ Participation ■ Accountability

The analysis categorized the following high-ranking themes :

- ❑ Local service delivery mechanisms. Twenty-three (23) studies. Through CBOs, facility level/ health centre and sector volunteers/community health workers.
- ❑ Participation mechanisms. Nineteen (19) studies. Through sector committees, such as school management committees, health management committees and water user associations; community groups/women groups; and local institutions (local political and cultural).
- ❑ Accountability mechanisms. Eight (8) studies. Through highlighted community-based monitoring; participatory budgeting; and participatory expenditure tracking (PETS).

Key Findings-RQ3 *(Contextual factors influencing LoSD)*



The high-ranking contextual factors were categorized as follows:

- ❑ Local context, local politics and local institutions. Twenty-two (22) studies. i.e local and historical factors; local political structures and dynamics; and poor governance and corruption.
- ❑ Cultural dynamics and attitudinal characteristics. Eighteen (18) studies.
- ❑ Structural factors. Sixteen (16) studies. i.e technical and administrative capacity of sector staff at community-level and subnational government officials; financial resources and funding capacity at community and subnational levels; and sector system structures.

Conclusion

- ❑ Empowered local institutions, grassroots civil society actors and community committees, are better positioned to advance localization of service delivery.
- ❑ Partnerships and collaboration of diverse stakeholders, including underserved communities is crucial for LoSD.
- ❑ Policymakers should prioritize the RICE imperatives and local autonomy in LoSD strategies. BUT, a delicate balance between local autonomy and national government oversight and support.
- ❑ More empirical studies to explore cost-effective innovative mechanisms for community engagement and empowerment as a prerequisite for localization of service delivery.

Acknowledgement

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Q & A

