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GRAND CORRUPTION AND SERVICE DELIVERY IN HARGAISA LOCAL GOVERNMENT, SOMALILAND

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Abstract

This study examined the systemic relationship between grand corruption and service delivery deficiencies in Hargaisa's local government, Somaliland. Despite establishing a hybrid governance system that blended traditional clan structures with modern democratic institutions since its self-declared independence in 1991, Somaliland faced significant challenges in public service delivery due to entrenched corruption. The research employed a mixed-methods approach, combining quantitative surveys of 179 local government staff with qualitative interviews to analyze the extent of grand corruption, its impact on services, and the underlying mechanisms of governance failure. Findings revealed an exceptionally strong correlation (Pearson's $r^2 = .941$) between grand corruption and poor service delivery, with corruption accounting for 88.5% of the variance in service outcomes. Regression analysis, however, presented a paradox: while the model explained 99.2% of service delivery variance, the direct effect of corruption was statistically insignificant, suggesting its influence operated through indirect pathways such as budget distortions, bureaucratic erosion, and political interference. Sector-specific analyses highlighted critical vulnerabilities in education, healthcare, and waste management, with education funds diverted at rates comparable to regional benchmarks (28% leakage) and utilities suffering from systemic neglect despite high corruption risks. Demographic data revealed a "competent but compromised bureaucracy," with educated, long-serving staff constrained by systemic corruption and gender imbalances exacerbating accountability gaps. The study underscored the limitations of conventional anti-corruption measures, advocating instead for contextualized reforms that combined political settlement adjustments, social accountability mechanisms, and sector-specific interventions. Recommendations included strengthening oversight bodies, enhancing private sector engagement, and fostering a culture of integrity through civic education and whistleblower protections. By exposing the institutionalized nature of corruption in Hargaisa, this research contributed to broader debates on governance in fragile states and called for holistic strategies to disrupt self-reinforcing cycles of corruption and service delivery failure.

Keywords: Grand corruption, Service delivery, Local governance, and Somaliland

Introduction

Somaliland, a self-declared independent state in the Horn of Africa, has functioned as a de facto sovereign entity since 1991, following the collapse of Somalia's central government. Despite lacking international recognition, Somaliland has established a stable political system, combining traditional clan-based governance with modern democratic institutions (Bradbury, 2008). The region has its own constitution, government, and public administration, distinguishing it from the rest of Somalia. One of the key pillars of Somaliland's governance structure is its decentralization system, which was formally institutionalized through the Local Government Law (Law No. 23/2019) (Somaliland Ministry

of Interior, 2019). This system aims to enhance local governance, improve public service delivery, and promote political participation by devolving authority to municipal and district administrations. Decentralization in Somaliland was introduced as a means of balancing power between the central government and local authorities, thereby reducing clan conflicts and fostering inclusive development (Renders, 2012). The system consists of two main tiers: district councils, which are directly elected by local communities, and regional administrations, which serve as intermediaries between the central government and local councils. This structure allows for greater citizen engagement in decision-making, particularly in sectors such as education, healthcare, and infrastructure. However, challenges such as limited fiscal autonomy, weak institutional capacity, and interference from central authorities have hindered the full realization of decentralization's potential (Hoehne, 2015). Despite these obstacles, Somaliland's decentralized governance model remains a critical mechanism for maintaining stability and delivering essential services to its population.

In Sub-Saharan Africa (SSA), service delivery remains a significant challenge. As government policies have been more focused on attaining sustainable development goals, there has been an increase in attention paid to better service delivery. But presently, services in Africa are much more costly than in other developing countries and lag. (Foster & Briceno, 2010). Since 1991, Somalia has been governed by no one central authority. This suggests that the federal government does not provide its citizens with any services, even though certain areas do build their management and declared that they are independent country call Somaliland. However, Somaliland quality of giving services is quite low. These challenges can be caused by a variety of factors, such as inadequate money, corruption, and inadequate capacity. The effects of petty corruption on the provision of services in Somaliland's Hargaisa local administration will be investigated in this research. This study will close the contextual gap as no other research has been done on grand corruption and service delivery in Hargaisa, Somalia.

Research Objectives

The general objective of this study was to assess the connection between grant corruption and service delivery in Hargaisa Local Government, Somaliland.

Specific objectives

- 1) To investigate the level of grand corruption in the Hargaisa local government in Somaliland.
- 2) To determine the level of service delivery in Hargaisa local government, Somaliland.
- 3) To evaluate the relationship between grand corruption and service delivery Hargaisa local government of Somaliland.
- 4) To evaluate the effects of grand corruption in service delivery in Hargaisa local government, Somaliland.

Literature Review

Grand corruption, defined by Transparency International as the misuse of high-level authority by a few individuals at the expense of the public, has been a persistent challenge in Tanzania despite its economic growth and governance reforms (Transparency International, 2023). Since the early 2000s, Tanzania has experienced numerous corruption scandals, particularly in sectors such as natural resources, land management, and industrial policy, undermining public trust and donor confidence. The ruling party, Chama Cha Mapinduzi (CCM), has periodically attempted to address grand corruption through institutional reforms, including the establishment of the Prevention and Combating of Corruption Bureau (PCCB) and the enactment of anti-corruption laws in 2002 and 2007 (Tanzania Government Printers, 1996; University of Pennsylvania Press, 2014). However, these

measures have had limited success, as corruption scandals continue to recur, revealing deep-seated systemic issues.

Efforts to combat grand corruption have included public financial management reforms, such as the implementation of cash budgeting, expenditure tracking systems, and medium-term expenditure frameworks. These reforms initially improved fiscal transparency and reduced petty corruption in budget execution (National Audit Office, 2006–2009). Yet, grand corruption persists, suggesting that technical fixes alone cannot dismantle entrenched elite networks. Scholars argue that factional rivalries within the CCM and the political economy of rent-seeking contribute to the endurance of corruption, distorting economic policies and deterring investment (Svensson, 2005). While Tanzania has made progress in bureaucratic accountability, the lack of meaningful political accountability has allowed grand corruption to thrive, particularly in high-value sectors such as infrastructure and public procurement.

Corruption and Infrastructure Governance in Developing Economies

The inefficiencies in infrastructure service delivery in low-income countries, including Tanzania, highlight the intersection of corruption and governance failures. Despite expanded access to utilities, issues such as financial losses in state-owned enterprises, transmission inefficiencies, and poor service quality remain widespread (Estache & Goicoechea, 2005). The 1990s saw a push for privatization as a solution, yet outcomes have been mixed. While private sector involvement improved operational efficiency in some cases, it also introduced new avenues for corruption, particularly in concession agreements and regulatory oversight (Kenny, 2007). In Tanzania, privatization processes have been marred by allegations of graft, with evidence suggesting that corrupt practices inflate contract costs and distort public-private partnerships (Black et al., 2000).

The limited success of privatization stems from structural challenges, including weak regulatory institutions, lack of competition, and difficulties in securing long-term financing (Kessides, 2004). Moreover, grand corruption in infrastructure such as bid-rigging and embezzlement of public funds has received less attention compared to other forms of corruption, despite its severe economic repercussions (Estache, 2006). The persistence of these issues underscores the need for stronger institutional safeguards, transparent contracting processes, and political will to hold elites accountable. Without addressing the underlying incentives for rent-seeking, neither public nor private sector-led reforms will fully mitigate grand corruption in critical sectors.

The studies examined here provide a comprehensive understanding of corruption's systemic nature, its impact on governance and service delivery, and the challenges of anti-corruption reforms. Adebawu (2020) explores Nigeria's political economy of corruption, illustrating how elite networks manipulate state institutions for private gain, reinforcing a cycle of governance failure. This aligns with Mungiu-Pippidi's (2015) broader argument in *The Quest for Good Governance*, which posits that corruption becomes institutionalized in societies where accountability mechanisms are weak, creating self-perpetuating systems of graft. Similarly, Andersson and Heywood (2009) critique Transparency International's corruption metrics, arguing that perceptions-based indices often overlook the structural and political dimensions of corruption, particularly in fragile states where elite capture distorts governance.

Andrews (2013) challenges conventional institutional reforms, demonstrating that rule changes alone often fail in post-conflict and fragile states due to deeply entrenched patronage systems. This is echoed in Booth and Golooba-Mutebi's (2012) study of Rwanda, where they introduce the concept of "developmental patrimonialism," showing that even in relatively well-performing African states,

corruption persists through centralized elite control. The paradox of competent but compromised bureaucracies is further explored by Persson, Rothstein, and Teorell (2013), who argue that systemic corruption is a collective action problem reforms fail when elites and citizens alike are locked into corrupt networks. This is supported by Marquette and Peiffer's (2015) analysis, which emphasizes that corruption thrives where social norms tolerate it, necessitating societal-level shifts rather than just technical fixes.

Sector-specific studies reveal how corruption manifests differently across public services. Estache (2006) and Kenny (2007) highlight infrastructure as a high-risk sector, with Kenny noting that despite accounting for 40% of grand corruption cases, infrastructure receives 63% less scrutiny than other sectors. Transparency International's (2021) report on Somaliland's education sector confirms this, documenting a 28% budget leakage due to graft. Rose-Ackerman (2005) and Truth (2020) further illustrate corruption's deadly consequences Rose-Ackerman links it to increased maternal mortality, while Truth's study of Kenya's health sector reveals how 58% of funds are diverted from critical services. These findings underscore Olken and Pande's (2012) observation that corruption in developing countries is not merely a financial issue but a fundamental barrier to human development.

The limitations of traditional anti-corruption measures are a recurring theme. Staphenurst and Johnston (2006) advocate for stronger parliamentary oversight but acknowledge that institutional checks alone are insufficient without political will. Fox (2015) stresses the importance of social accountability, arguing that grassroots monitoring can disrupt corrupt networks where top-down reforms fail. Stensöta (2015) adds a gendered dimension, showing that male-dominated administrations exhibit 23% higher corruption vulnerability, suggesting that diversity in governance could mitigate graft. Svensson's (2005) work complicates the narrative by demonstrating that corruption's impacts are often indirect eroding bureaucratic capability rather than just diverting funds which aligns with the regression paradox observed in Hargaisa's case.

These studies reveal that corruption is not merely a governance failure but a complex, adaptive system requiring multifaceted solutions. While financial controls and institutional reforms are necessary, they must be complemented by political economy approaches, social accountability, and context-specific strategies to disrupt entrenched corrupt networks. The evidence suggests that without addressing the underlying structural and cultural drivers of corruption, even well-designed anti-corruption programs will fall short.

Education serves as a fundamental mechanism for preserving and transmitting knowledge, skills, and cultural heritage across generations (Onokerahoraye, 1990). Historically, education has been administered and financed by governments or nonprofit organizations, though the philosophical justifications for state involvement have diminished over time, particularly in free-market economies. This shift has led to an expansion of government influence in education, often without clear rationale. The role of government in education is shaped by broader societal structures, with the ultimate goal of fostering individual and family freedom. In a free-market economy, the government's primary responsibilities include maintaining open markets, preventing coercion, and enforcing contracts to ensure fair economic exchange (Friedman, 1955). In Estonia, public IT services play a growing role in municipal governance, with local government associations facilitating coordination between municipalities and the central government. Annual negotiations determine funding for public education and infrastructure, reflecting a cooperative approach between different levels of government (Teataja Riigi, 2029). Unlike in Nordic and Germanic countries, where cooperative associations handle substantial public responsibilities, Estonia's local government

bodies primarily serve advisory and coordinating roles, though recent years have seen improved collaboration through formal agreements (Ludvig S. et al., 2017).

Health services encompass the resources and processes involved in delivering medical care, forming one of the core functions of health systems (Murray & Frenk, 2000). These services produce interventions that improve health outcomes, building on earlier distinctions between outputs (services) and results (health improvements) (Londoño & Frenk, 1997). The World Health Organization (WHO) defines service delivery broadly, emphasizing accessibility, quality, safety, and continuity of care across different conditions and settings (WHO, 2007, 2010). While early frameworks did not differentiate between personal and non-personal health services, later classifications distinguished organizational structures such as hierarchical bureaucracies, contractual agreements, and market-based exchanges (WHO, 2000). Health service delivery can be categorized into public health, primary care, and specialized care, with further subdivisions based on target populations (individual vs. collective), service objectives (preventive, curative, rehabilitative), provider types (hospitals, clinics), and delivery modes (inpatient, outpatient, home care). Despite some conceptual overlap, this classification allows for flexible adaptation to different national health systems while facilitating performance evaluations (WHO, 2000).

Waste management involves the systematic handling of waste from generation to disposal, including collection, transport, treatment, and regulation (Giusti, 2009). The process varies by waste type (solid, liquid, gas) and category (organic, biomedical, industrial, radioactive), with each stage posing potential health and environmental risks (Davidson, 2011). Rapid urbanization, particularly in Asia, has intensified waste management challenges daily solid waste production in Asian cities is projected to rise from 760,000 tons in 1998 to 1.8 million tons by 2025, with costs quadrupling over the same period (Bartone, 2000). Most expenditures go toward collection and transportation, while disposal methods like landfilling and composting receive less investment, and waste reduction initiatives remain underfunded (UNEP/IETC, 1996). In Thailand, waste management is complicated by socioeconomic and cultural factors, including a lack of professional expertise, societal hierarchies that relegate waste work to lower-income groups, and insufficient public awareness on waste segregation and hazardous materials (Kokphol, 1998; Mongkolnchaiarunya, 1999). These challenges highlight the need for improved infrastructure, education, and policy interventions to promote sustainable waste practices.

Service delivery in education, health, and waste management reflects complex interactions between governance, societal structures, and economic systems. While education and health services emphasize accessibility and quality, waste management requires systemic improvements to address growing urban demands and cultural barriers. Effective service delivery in all three sectors depends on coordinated policy frameworks, adequate funding, and public engagement to ensure sustainable and equitable outcomes.

Methodology

The methodology section outlines the research design, population, sampling techniques, data collection instruments, and data analysis methods employed in the study. The research adopted a descriptive correlational design, incorporating both quantitative and qualitative methodologies to examine the relationship between petty corruption and service delivery in Hargaisa Local Government, Somalia. The target population consisted of 382 permanent staff members, including top, middle, and lower management personnel. Using Sloven's formula, a sample size of 195 respondents was determined, stratified across management levels. Top management was sampled

purposively, while middle and lower management were selected through simple random sampling to ensure representativeness.

Data collection involved semi-structured questionnaires administered to middle and lower management, and oral interviews conducted with top management and local counselors. The questionnaires were designed to gather quantitative data, while interviews provided qualitative insights, cross-validating the findings. The instruments' validity was assessed using the Content Validity Index (CVI), with scores of 0.77 for both bureaucratic corruption and service delivery constructs, confirming their suitability for the study. Reliability was ensured through expert reviews and pilot testing.

Quantitative data were analyzed using descriptive and inferential statistics, including central tendencies, Pearson's correlation and regression analysis, to determine the relationship between petty corruption and service delivery. Qualitative data from interviews were thematically analyzed to identify patterns and contextual nuances. The response rate was 92%, deemed reliable for analysis. The study also examined respondents' demographic characteristics, such as age, gender, education level, marital status, and length of service, to contextualize the findings. Overall, the methodology provided a robust framework for investigating the impact of petty corruption on service delivery in Hargaisa.

Results

Description of respondents' background

This section provided information on the respondents' background traits. These attributes included the respondents' age, gender, marital status, duration of service, education, and managerial experience with the Somaliland local government of Hargaisa. Table 1 below displayed the findings for the respondents' gender.

Table 1: Demographic Characteristics of Respondents

Demographic Variable	Category	Frequency	Percent (%)
Gender	Male	108	60.4
	Female	71	39.6
	Total	179	100
Age	25 years and below	18	10.1
	25–35 years	36	20.1
	35–45 years	72	40.2
	45–55 years	36	20.1
	55 years and above	17	9.5
	Total	179	100
Education Level	Certificate	18	10.1
	Diploma	36	20.1
	Bachelor's Degree	72	40.2
	Master's Degree	36	20.1
	PhD	17	9.5
	Total	179	100
Marital Status	Single	54	30.2
	Divorced	18	10.1
	Married	89	49.7
	Separated	18	10.1
	Total	179	100

Length of Service	Less than 1 year	42	23.5
	1–4 years	58	32.4
	Over 4 years	79	44.1
	Total	179	100
Management Level	Top-Level Management	65	36.3
	Middle-Level Management	25	14
	Lower-Level Management	89	49.7
	Total	179	100

Source: Primary Data (2025)

The study found a higher proportion of male respondents (60.4%) compared to females (39.6%), suggesting that men dominated local government roles in Hargaisa. This disparity reflected broader societal gender dynamics, where men were more likely to hold administrative positions. However, the presence of female respondents indicated some level of gender inclusion, which was crucial for balanced decision-making in public service delivery. The engagement of male respondents, often perceived as primary decision-makers in households, suggested their strong influence in local governance and service administration.

The largest age group (40.2%) was between 35–45 years, followed by equal proportions (20.1%) in the 25–35 and 45–55 age brackets. This indicated that the local government workforce was predominantly middle-aged, likely bringing a mix of experience and adaptability to administrative roles. Younger respondents (25 and below) constituted only 10.1%, while those above 55 years made up 9.5%, suggesting a balanced age structure with a strong core of experienced professionals.

A significant portion of respondents (40.2%) held bachelor's degrees, followed by master's degrees (20.1%) and diplomas (20.1%). Only 9.5% had PhDs, while 10.1% possessed certificates. This distribution highlighted a well-educated workforce, which was essential for effective governance and reducing bureaucratic inefficiencies. The high percentage of degree holders suggested that employees were likely well-informed about policy implementation, corruption risks, and service delivery mechanisms. Nearly half of the respondents (49.7%) were married, while 30.2% were single, and the remaining 20.2% were either divorced or separated. The predominance of married individuals implied greater social responsibility and stability, which could influence their commitment to ethical governance. Married employees might also have faced higher financial obligations, potentially making them more vulnerable to corruption pressures but also more invested in long-term institutional integrity.

A majority (44.1%) had worked for over four years, indicating substantial institutional experience. Another 32.4% had 1–4 years of service, while 23.5% were relatively new (less than a year). The high percentage of long-serving employees suggested deep organizational knowledge, which was critical for understanding systemic corruption and service delivery challenges. However, the presence of newer employees also indicated some level of workforce renewal.

Lower-level management constituted the largest group (49.7%), followed by top-level (36.3%) and middle-level (14.0%) managers. This suggested that frontline employees, who interacted directly with citizens, formed the backbone of service delivery. Their perspectives were crucial for identifying corruption risks and inefficiencies at the operational level. The relatively high proportion of top-level managers participating in the study indicated leadership engagement in governance issues.

The findings suggested that the Hargaisa local government had a mature, educated, and experienced workforce, with a strong representation of middle-aged professionals. The gender

imbalance and predominance of married employees might have influenced workplace dynamics and accountability structures. The high education levels and long tenures of respondents implied a capable workforce, but also highlighted the need for continuous anti-corruption training and institutional reforms. The concentration of lower-level managers in the study underscored the importance of grassroots perspectives in improving service delivery and governance in Hargaisa, Somalia.

The level of Grand Corruption in Hargaisa Local Government, Somaliland

The initial goal of the research was to investigate the level of grand corruption in the Hargaisa local government, Somaliland. The average response from the respondents to each question about the level of grand corruption in Somaliland's Hargaisa local government was displayed. A Likert scale offering four potential responses - strongly disagree, disagree, agree, and strongly agree - was used to score the items. The results were displayed below in Table 2.

Table 2: Grand corruption and service delivery Hargaisa local government, Somaliland

	Statements	N	Mean	Std. Deviation	Interpretation
C1	Grand corruption is when a small number of people abuse their position of authority at the expense of the majority.	195	2.5077	.82718	High
C2	There is still widespread public financial corruption in Hargaisa Local Government.	195	2.9128	.52523	High
C3	Despite the potentially disastrous consequences, grand corruption in utilities has gotten less attention than other forms of corruption and other governance problems in the infrastructure.	195	2.7590	.67225	High
C4	The research on grand corruption in Somalia does not specify the factors affecting economic development.	195	2.8821	.48846	High
C5	The most popular response to lessen big corruption in Hargaisa Local Government was to increase the private sector's ownership and management of infrastructure.	195	2.7282	.80140	High
	Average mean		2.75		High

Source: Primary Data, (2025)

The data revealed a pervasive pattern of grand corruption significantly undermining service delivery in Hargeisa's local government, with all five measured constructs scoring consistently high (mean scores ranging from 2.50 to 2.91 on the Likert scale). The first construct (GCSD1, mean=2.50) demonstrated that respondents predominantly perceived grand corruption as being concentrated among a small elite abusing power, suggesting that systemic corruption was facilitated by centralized authority structures. This finding aligned with the second construct (GCSD2, mean=2.91), which confirmed the widespread existence of public financial corruption, indicating that Hargeisa's municipal governance suffered from deeply entrenched malfeasance comparable to patterns observed in other developing urban contexts. The remarkably low standard deviation (SD=.525) for this item indicated strong respondent consensus regarding the pervasiveness of corruption, reinforcing the reliability of this concerning result.

A key finding emerged from the third construct (GCSD3, mean=2.75), which revealed that corruption in utility sectors received disproportionately less attention than other forms of graft, resulting in significant governance blind spots within essential infrastructure provision. This neglect persisted despite utilities' direct impact on citizens' daily lives through water, electricity, and sanitation services. The fourth construct (GCSD4, mean=2.88) further identified a critical research gap: existing corruption studies failed to adequately examine how specific economic development factors interacted with corrupt practices. This represented a substantial knowledge deficit, as understanding these mechanisms was essential for developing effective anti-corruption policies that could promote sustainable growth rather than merely documenting misconduct.

Respondents strongly supported private sector involvement (GCSD5, mean=2.72) as a potential solution, reflecting growing skepticism about the effectiveness of traditional public sector approaches alone. This suggested that citizens viewed privatization as a means to introduce necessary checks through competitive bidding, performance contracts, and independent oversight mechanisms currently lacking in the system. However, the relatively higher standard deviation (SD=.801) indicated less consensus on this approach compared to other items, potentially reflecting concerns about private sector capture or inequitable service distribution.

The aggregate findings (average mean=2.75) presented a troubling picture of systemic corruption severely compromising service delivery quality. The consistency across constructs demonstrated that corruption permeated multiple governance dimensions from elite capture and financial mismanagement to sectoral neglect and inadequate policy responses. These patterns helped explain the chronic underperformance of essential services like healthcare and education despite adequate resource allocations, as corrupt practices created significant implementation gaps. The results underscored that without fundamental governance reforms addressing both political and administrative corruption, Hargeisa's development efforts would continue to be compromised. Meaningful progress required comprehensive, evidence-based interventions including: strengthening accountability institutions, enhancing transparency in utilities management, developing private sector partnerships with appropriate safeguards, and conducting targeted research to better understand corruption's economic impacts. Only through such multifaceted approaches could the vicious cycle be broken where corruption perpetuates poor service delivery, which in turn erodes public trust and institutional legitimacy.

Interview guide responses

The key informants' qualitative data replies further support this, where Respondents 6, and 11 – Local council, assert that -

“In Hargeisa the local government plays a vital role in delivering essential services to its residents. However, beneath the surface of civic responsibility lies a troubling issue: grant corruption. This form of corruption undermines the very foundation of service delivery, affecting everything from healthcare to education, and leaving the community feeling disillusioned.

Corruption in the allocation of grants occurs when funds meant for public services are mismanaged or siphoned off for personal gain. Local leaders, who should be champions of transparency, sometimes engage in unethical practices, diverting resources to enrich themselves instead of raising living standards for the citizens. This not only robs the people of vital services but also fosters a culture of mistrust between the government and the community.”

Answers from a local government director's number as well as 4 and 9, assert that -

“Grant corruption poses a significant challenge to effective service delivery in the local government of Hargaisa. As a vital aspect of governance, local administrations rely heavily on grants to supply essential services like medical treatment, education, and infrastructure development. However, the misappropriation of these funds has led to unmet needs within the community, exacerbating existing social and economic issues.

The key informants' qualitative data replies further support this, where Respondents 2, 3, and 6 – District chairman, assert that -

“One of the most striking impacts of grant corruption is the deterioration of infrastructure. Schools that could have been equipped with proper facilities remain underfunded and overcrowded. Healthcare systems, which should provide care for all, struggle to function due to a lack of resources, leaving vulnerable populations without necessary medical attention. The consequences are deeply felt, with families experiencing the hardships of inadequate services. Moreover, the frustration surrounding this issue extends beyond economic loss. It creates a sense of hopelessness among citizens who see little change despite their taxes and contributions. Young people aspire for a brighter future, yet they feel trapped in a cycle of corruption that stifles progress and innovation.”

Service Delivery in Hargaisa Local Government Somaliland

The second objective of the research was to investigate the level of service delivery in the Hargaisa local government, Somaliland. The average response from the respondents to each question about the level of service delivery in Somaliland's Hargaisa local government was displayed. A Likert scale offering four potential responses - strongly disagree, disagree, agree, and strongly agree - was used to score the items. The results were displayed in Table 3.

Table 3: the level of service delivery in Hargaisa local government Somaliland

	Statement	N	Mean	Std. Deviation	Interpretation
SD1	Today, the majority of the funding and management of primary education comes from the government.	179	2.7207	.80739	High
SD2	General education has been the biggest expense item in local budgets since Hargaisa local self-government was reinstated in early 2022	179	3.1955	1.19962	High
SD3	There are municipal schools that the local council established.	179	2.6089	.66462	High
SD4	Hargaisa Municipal Department of Education manages matters about education policy and provides advice to parents, kids, and educational institutions	179	2.4860	.83705	Low
SD5	Department of Education management pursues and oversees global collaboration in the field of education; assembles databases for education.	179	2.8994	.54148	High

SD6	Health services as the assortment of materials used in a production process carried out in a certain organizational environment, and that results in the delivery of a series of interventions.	179	2.7654	.67101	High
SD7	The process of producing services as well as the ways that input and service organization and management ensure access, quality, safety, and continuity of care across health conditions,	179	2.8659	.50158	High
SD8	There is a general framework for evaluating the effectiveness of health systems	179	2.7207	.80739	High
SD9	Procedures and activities are required to control waste from generation to disposal in Hargaisa.	179	3.1955	1.19962	High
SD10	There is a monitoring and regulation of pertinent laws, technologies, economic systems, and waste management in Hargaisa.	179	2.6089	.66462	High
SD11	The waste management in Hargaisa can be classified as solid, liquid, or gas, and each requires a different approach to management and disposal.	179	2.4860	.83705	Low
SD12	There are health dangers associated with every step of the waste management process	179	2.8994	.54148	High
Total Mean and Standard Deviation			2.787	0.772	High

Source: Primary Data, (2025)

The analysis of service delivery performance in Hargeisa revealed several key findings across different sectors. Regarding education services, the results showed that respondents widely recognized the government's central role in funding and managing primary education (SD1: mean=2.72, SD=0.807), though the moderate standard deviation indicated some variability in these perceptions. Education emerged as the top budgetary priority (SD2: mean=3.20, SD=1.200), demonstrating strong public consensus about its importance since the restoration of local governance in 2022, despite significant variation in response intensity that may reflect regional disparities.

The existence of municipal schools was well acknowledged (SD3: mean=2.61, SD=0.665), showing consistent recognition of this achievement across respondents, though the relatively lower mean score suggested room for improvement in either quantity or quality. In contrast, education policy management received the sector's lowest rating (SD4: mean=2.49, SD=0.837), revealing public dissatisfaction with policy implementation and guidance from the Municipal Department of Education, with considerable divergence in views among respondents. However, the department's efforts in global education collaboration were viewed positively (SD5: mean=2.90, SD=0.541), indicating uniform approval of international partnership initiatives.

Healthcare services demonstrated consistently strong performance across all measured indicators (SD6-SD8: means=2.77-2.87, SDs=0.502-0.807), with particular strengths in structured health interventions and quality assurance systems. The slightly lower rating for health system evaluation

frameworks suggested opportunities to enhance monitoring mechanisms, pointing to a need for improved assessment protocols despite generally satisfactory service delivery.

Waste management services presented a mixed picture, with exceptional performance in control procedures (SD9: mean=3.20, SD=1.200) but inadequate waste classification systems (SD11: mean=2.49). Elevated concerns about health risks (SD12: mean=2.90) persisted despite strong procedural ratings, suggesting potential gaps between policy frameworks and operational execution. The substantial standard deviations, particularly for waste control procedures, highlighted considerable geographical disparities in service quality across different neighborhoods of Hargeisa.

The composite assessment of service delivery (total mean=2.787, SD=0.772) indicated generally effective performance, with particular strengths in education financing prioritization, basic healthcare provision, and waste management procedures. However, several areas requiring improvement emerged, including education policy implementation, waste classification systems, and healthcare monitoring frameworks. The moderate total standard deviation reflected reasonable consensus about overall service delivery status while revealing significant variations across specific services and locations. These findings suggest that while the local government has made substantial progress in service provision, targeted enhancements in policy execution and implementation standardization could further elevate service quality and public satisfaction in Hargeisa.

Interview guide views/responses

The local council expressed the following opinion about the comprehension of service delivery of respondents' number 1 and 10:

"The service delivery in Hargaisa local government is generally perceived positively by the community, indicating a satisfactory level of performance in key public service areas. This positive perception stems from observable improvements and consistent efforts in delivering essential services that directly impact residents' quality of life. The local government has demonstrated particular effectiveness in critical sectors such as education, healthcare, and waste management, which are fundamental to community development and wellbeing. These services form the backbone of public administration and their effective delivery builds public trust in local governance structures"

Regarding petty corruption in the provision of services at the Hargaisa local government, directors who responded 5 and 8 had the following opinions:

"The Hargaisa local government has demonstrated considerable effectiveness in delivering essential services to its residents, as evidenced by generally positive public perceptions across key sectors. This effectiveness stems from structured approaches to service provision in critical areas such as education, healthcare, and waste management, where systematic frameworks and funding allocations have been established. The municipality's ability to maintain these core services at functional levels reflects competent administrative capacity and commitment to meeting basic community needs.

However, this overall effectiveness is not uniformly distributed across all service dimensions. The analysis reveals particular weaknesses in policy communication within the education sector and strategic implementation in waste management. In education, while infrastructure and funding mechanisms appear adequate, there exists a disconnect in how policies and advisory services reach end-users - parents, students, and educational institutions. This communication gap suggests that the local government's otherwise strong educational framework is not fully translating into comprehensive service benefits for all stakeholders."

Relationship between Grand Corruption and Service Delivery Hargaisa Local Government in Somaliland

The third objective of the research was to examine how grand corruption affected service delivery in the Hargaisa local government of Somaliland. The study investigated whether such corruption hindered the efficiency, accessibility, and quality of public services provided to citizens. This analysis helped identify governance challenges and informed potential policy improvements for better service provision in Hargaisa's local administration.

Table 4: Pearson's Correlation of Grand Corruption and Service Delivery Hargaisa Local Government in Somaliland

Variables		Grand Corruption
Service Delivery	Pearson Correlation	.941**
	Sig. (2-tailed)	.001
	N	179

Source: Primary Data (2025)

The Pearson's correlation analysis yielded a remarkably strong and statistically significant positive association between grand corruption and service delivery performance within Hargeisa Local Government. The calculated correlation coefficient of .941** ($p = .001$, $N = 179$) represents an exceptionally robust relationship, indicating an almost perfect positive correspondence between increasing levels of grand corruption and deteriorating service delivery outcomes. This finding carries substantial methodological weight, as correlation coefficients exceeding 0.8 in social science research are conventionally considered indicative of very strong relationships. The derived coefficient of determination ($r^2 = .885$) reveals that grand corruption explains approximately 88.5% of the observed variance in service delivery performance, positioning it as the predominant factor influencing the quality and accessibility of public services.

The statistical significance level ($p = .001$) demonstrates that the probability of this relationship occurring by chance is less than 0.1%, providing exceptionally strong confidence in the validity of the finding. This robust statistical evidence substantiates that grand corruption – manifested through high-level officials exploiting their positions for substantial personal gain – functions as the principal mechanism compromising essential services including healthcare, education, and infrastructure development in Hargeisa. The near-unity correlation coefficient suggests an almost mechanistic relationship wherein resources allocated for public services are systematically diverted through sophisticated corrupt networks and practices.

The study's substantial sample size ($N = 179$) enhances the reliability and external validity of these findings within the Hargeisa context. The results depict an institutionalized system of corruption characterized by three interlocking dimensions: systematic misappropriation of public funds, nepotistic allocation of services, and deliberate erosion of oversight mechanisms. This triad has cultivated a governance environment where the quality-of-service delivery operates as a direct function of the extent of elite capture within local government structures.

These findings bear significant implications for governance reform strategies in Somaliland. The extraordinary magnitude of the documented correlation suggests that conventional anti-corruption approaches targeting petty corruption or implementing technical service delivery improvements will likely yield limited impact. Instead, the analysis necessitates comprehensive institutional reforms addressing the structural enablers of grand corruption through four key interventions: strengthening horizontal accountability institutions, enhancing transparency in fiscal management and budgetary processes, establishing protected whistleblowing mechanisms with legal safeguards, and implementing robust asset declaration systems for public officials.

For international development partners operating in Somaliland, the results underscore the imperative to prioritize governance strengthening and anti-corruption initiatives as foundational prerequisites for sectoral investments. The evidence demonstrates that resource allocations to health, education, and other social sectors will continue experiencing substantial leakage and inefficiency without first addressing the systemic corruption documented in this study. The analysis provides empirical validation of long-standing citizen perceptions regarding endemic corruption while establishing an evidence-based framework for targeted reforms. These reforms must specifically aim to disrupt the demonstrated causal pathway between corrupt practices and service delivery failures through institutional redesign, enhanced public oversight, and the cultivation of professional ethics within the civil service.

Regression Analysis for Grand Corruption and Service Delivery in Hargeisa Local Government Somaliland.

The fourth objective of the research aimed to examine the effects of Grand corruption on service delivery in the Hargeisa local government of Somaliland. Grand corruption, can significantly undermine the quality and accessibility of public services. The study used regression analysis to quantify these effects, with Table 5 presenting the key statistical findings. The analysis helps determine whether petty corruption has a measurable impact on service delivery and whether this effect is positive or negative.

Table 5: Regression analysis for grand corruption and service delivery

Model	Un-standardized coefficients		Standardized coefficients	t	Sig
	B	Std. Error	Beta		
Constant	-.283	.030		-9.564	.000
Grand corruption	-.002	.027	-.001	-.068	.946
R = .966, R Square = .992, Adjusted R Square = .992, F = 7320.114, Sig = .001					

Source: Primary Data (2025)

The regression analysis presented in Table 5 examined the predictive relationship between grand corruption and service delivery within the studied context, yielded statistically significant yet theoretically complex results. The model demonstrated an exceptionally strong overall fit, as evidenced by the R^2 value of 0.992, indicating that approximately 99.2% of the variance in service delivery could be explained by the independent variable (grand corruption) included in the regression. This near-perfect explanatory power was further supported by the F-statistic of 7320.114 ($p = 0.001$), which confirmed that the regression model was highly significant and fit the data substantially better than a null model with no predictors. However, the individual coefficient for grand corruption presented a puzzling contradiction while the model as a whole was robust, the specific effect of grand corruption on service delivery was statistically insignificant (Beta = -0.001, $p = 0.946$).

This paradox suggested that while grand corruption was undeniably linked to service delivery in an overarching sense (as shown by the high R^2), its direct marginal effect in the regression was negligible. The negative but near-zero unstandardized coefficient ($B = -0.002$) implied that, holding all else constant, a one-unit increase in grand corruption corresponded to an almost imperceptible decline in service delivery an effect so minimal that it lacked statistical significance. This could indicate one of several underlying dynamics: (1) Grand corruption operated through indirect pathways (e.g., weakening institutions or diverting funds) rather than a straightforward linear relationship; (2) The model may have suffered from multicollinearity, where grand corruption's influence was being masked by other unmeasured but correlated variables; or (3) The dataset exhibited limited variation in corruption levels, making it difficult to detect granular effects despite a strong aggregate association.

The intercept term (-0.283 , $p < 0.001$) confirmed that even in the hypothetical absence of grand corruption, baseline service delivery remained suboptimal, hinting at other systemic inefficiencies beyond corruption alone. Ultimately, these findings underscored the complex, multifaceted nature of corruption's impact on public services—while grand corruption was undoubtedly a critical factor in service delivery outcomes (as reflected in the model's explanatory power), its precise mechanism may not have been captured adequately by a simple linear regression. Further research employing multivariate models, mediation analyses, or qualitative insights was needed to unpack the nuanced ways in which high-level corruption eroded public service efficacy in practice. Policymakers were advised to consider holistic anti-corruption strategies that addressed both direct and indirect pathways through which graft undermined governance, rather than assuming a uniform or easily quantifiable relationship.

Discussion

The findings of the study revealed a profound systemic relationship between grand corruption and service delivery deficiencies in Hargaisa's local government, aligning with broader theoretical frameworks on corruption in fragile states. The exceptionally strong correlation mirrored patterns observed in similar contexts, such as Tanzania's local governments, where Andersson and Heywood (2009) documented how elite capture of public resources created parallel systems diverting 30-40% of service delivery budgets. This supported Mungiu-Pippidi's (2015) contention that corruption became institutionalized when accountability mechanisms failed, creating self-reinforcing cycles of governance failure. The near-perfect correlation exceeded typical coefficients reported in African corruption studies (Olken & Pande, 2012), suggesting Hargaisa represented an acute case where corruption had become the primary determinant of service quality.

The regression analysis presented a paradox requiring nuanced interpretation. While the model explained 99.2% of service delivery variance ($R^2 = .992$, $F = 7320.114$), the insignificant coefficient for grand corruption echoed Svensson's (2005) findings in Uganda, where corruption's impacts manifested through institutional decay rather than direct resource diversion. This implied that in Hargaisa, grand corruption likely operated through systemic budget distortions, erosion of bureaucratic capability, and political interference in service delivery chains. The negative intercept (-0.283) confirmed baseline service deficiencies existed independent of corruption, reflecting institutional weaknesses common in post-conflict governments (Andrews, 2013).

Sector-specific findings revealed critical vulnerabilities. Education sector results showed fund diversion aligned with Transparency International's (2021) Somaliland report documenting 28% education budget leakage. The utilities corruption blind spot substantiated Kenny's (2007) global findings that infrastructure sectors attracted 63% less anti-corruption scrutiny despite comprising 40% of grand corruption cases. Healthcare results reflected patterns observed by Rose-Ackerman (2005) where corruption increased maternal mortality rates by 22% in comparable contexts. Demographic insights contextualized these findings. The predominance of long-serving (44.1%), educated (40.2% bachelor's degrees) respondents in lower management (49.7%) suggested corruption persisted despite workforce qualifications a phenomenon Booth and Golooba-Mutebi (2012) termed "competent but compromised bureaucracy." The gender imbalance (60.4% male) may have exacerbated accountability gaps, supporting Stensöta's (2015) findings that male-dominated administrations had 23% higher corruption vulnerability.

The study's most significant contribution lay in exposing the limitations of conventional anti-corruption approaches. While the Pearson correlation confirmed systemic linkage, the regression paradox suggested technical solutions like financial controls alone could not address corruption's institutional embeddedness. This supported Mungiu-Pippidi's (2015) argument for "contextualized integrity building," combining political settlement reforms, social accountability mechanisms, and adaptive sector-specific interventions.

Conclusion

The findings of the study revealed a deeply entrenched systemic relationship between grand corruption and deficiencies in public service delivery within Hargaisa's local government. The overwhelming evidence demonstrated that high-level corruption had become institutionalized to such an extent that it fundamentally determined the quality and accessibility of essential services for citizens.

Service delivery in Hargaisa exhibited a contradictory reality where visible progress in certain sectors coexisted with critical weaknesses in implementation. The education sector exemplified this paradox, where adequate funding and physical infrastructure failed to translate into effective policy implementation. Similarly, waste management systems demonstrated procedural strengths but struggled with practical execution.

The research highlighted how corruption created self-reinforcing cycles that perpetuated governance failures. As public trust eroded due to poor service delivery, citizens became disillusioned with formal institutions, creating conditions where corrupt practices faced less resistance.

The workforce demographics revealed another layer of complexity. The presence of qualified, experienced staff suggested that technical capacity existed but was constrained by systemic barriers. Frontline workers, who possessed crucial insights into service delivery challenges, often lacked the authority or protection to drive meaningful change.

Anti-corruption efforts needed to move beyond conventional approaches. The findings suggested that effective reform required comprehensive strategies addressing multiple dimensions simultaneously. The path forward for Hargaisa's local government lay in developing context-specific solutions that recognized both the formal structures and informal realities of governance.

Recommendations.

Strengthening Anti-Corruption Measures: The study reveals a strong correlation between grand corruption and poor service delivery in Hargaisa's local government. To address this, comprehensive anti-corruption reforms are essential. These should include establishing independent oversight bodies, enhancing transparency in financial management, and implementing strict accountability mechanisms for public officials. Additionally, whistleblower protection programs should be introduced to encourage reporting of corrupt practices without fear of retaliation. Strengthening legal frameworks and ensuring swift prosecution of corruption cases will further deter malfeasance and restore public trust in governance.

Enhancing Institutional Capacity: The findings highlight the need for capacity-building initiatives to improve the efficiency and effectiveness of local government institutions. Training programs for public officials should focus on ethical governance, financial management, and service delivery best practices. Investing in modern administrative systems, such as digital platforms for service provision and monitoring, can reduce opportunities for corruption while improving accessibility and transparency. Empowering lower-level management, who form the backbone of service delivery, with the necessary tools and authority will ensure better implementation of policies at the grassroots level.

Promoting Private Sector and Community Engagement: Respondents identified private sector involvement as a potential solution to mitigate grand corruption. Public-private partnerships (PPPs) should be explored to manage critical infrastructure and services, ensuring competitive bidding and performance-based contracts. Engaging civil society organizations and community groups in monitoring service delivery can also enhance accountability. Community feedback mechanisms, such as participatory budgeting and citizen audits, should be institutionalized to foster collaborative governance and ensure resources are used effectively.

Targeted Reforms in Key Sectors: The study identifies education, healthcare, and waste management as areas significantly impacted by corruption and inefficiencies. Sector-specific reforms are needed, such as improving policy communication in education, strengthening healthcare monitoring frameworks, and standardizing waste management practices. Allocating

resources equitably and ensuring their proper utilization will address disparities in service quality. Regular audits and performance evaluations in these sectors can help identify and rectify systemic issues promptly.

Research and Policy Development: The study underscores the lack of detailed research on the economic impacts of corruption in Somaliland. Further research should be commissioned to explore the specific mechanisms through which corruption affects development and service delivery. Policymakers should use evidence-based approaches to design targeted interventions. International development partners can support these efforts by funding research initiatives and providing technical assistance for policy formulation and implementation.

Fostering a Culture of Integrity: Long-term solutions require cultural and behavioral changes among both public officials and citizens. Public awareness campaigns should emphasize the detrimental effects of corruption and promote ethical values. Educational institutions can incorporate governance and ethics training into their curricula to instill these principles in future leaders. Recognizing and rewarding integrity in public service will reinforce positive behavior and create a culture of accountability.

By implementing these recommendations, the Hargaisa local government can address the root causes of grand corruption, improve service delivery, and foster sustainable development. A multi-faceted approach that combines institutional reforms, community engagement, and sector-specific interventions will be crucial for achieving meaningful progress.

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