Journal of
Public Administration and Policy Research

AJ ACADEMIC
JOURNALS
expand your knowledge

ABOUT JPAPR

The Journal of Public Administration and Policy Research (JPAPR) is published monthly (one volume per year) by Academic Journals.

Journal of Public Administration and Policy Research (JPAPR) Journal of Public Administration and Policy Research (JPAPR) is a peer reviewed open access journal. The journal is published monthly and covers all areas of the subject such as political science, emergency preparedness, investment policy, industrial policy, tariff and trade etc.

Editors

Dr. Anup Shekhar Chakraborty
Department of Political Science
St. Joseph's College
Darjeeling,
India.

Prof. S.K. Kataria
Department of Public Administration
Mohanlal Sukhadia University
Udaipur,
India.

Dr. Rizwan Danish
Department of Business Administration
University of the Punjab
Gujranwala
Pakistan.

Dr. Carolyn M. Macola
School of Legal Studies
Kaplan University
USA.

Prof. Ferdous Jahan
Department of Public Administration
University of Dhaka
Bangladesh.

Dr. Krishnendu Sarkar
NSHM College of Management & Technology
Kolkata,
India.

Dr. Lech Keller
Political Economy, Politics, Economics,
CETRAD, UTAD,
Portugal.

Table of Content

**Journal of
Public Administration and Policy Research**

Full Length Research Paper

HIV and AIDS mainstreaming in Uganda's higher education sector strategic direction: A case of Uganda Management Institute

Christopher Samuel Mayanja* and James L. Nkata

Education Leadership and Management Department, School of Management Science Uganda Management Institute, Kampala, Uganda.

HIV and AIDS mainstreaming in the development arena has been a point of emphasis globally over the years. The higher education sector has also put emphasis on the campaign to have HIV and AIDS issues mainstreamed for in all strategies and operations. The purpose of this study is to investigate how HIV and AIDS mainstreaming has been considered in Uganda Management Institute (UMI) strategic direction. The study deployed a triangulation of cross-sectional and case study research designs where interview, Focus Group Discussions and Document review methods were deployed. The study deployed a two-level narrative analysis in order to identify patterns and plots with in participants' stories and experiences. The study made reference to the model for mainstreaming HIV/AIDS in the education sector. The study found out that HIV and AIDS was scantily mainstreamed in UMI strategic plans and during monitoring. The mainstreaming for HIV and AIDS in the higher education sector was remodeled to capture the core mandate at UMI and to include the structures and systems relevant for the Institute. It was concluded that it is not enough to merely draw strategic plans, policies and other frameworks on HIV and AIDS initiatives, but more aspects like structures and resource allocation, among others have to be considered. The study recommends that a thorough analysis for HIV and AIDS issues, as well as mitigation measures should be properly addressed during strategic and annual planning processes to allow easy planning and budgeting, implementation and follow up of the issues.

Key words: HIV and AIDS, mainstreaming, higher education sector, strategic planning, strategy implementation, monitoring, evaluation.

INTRODUCTION

Nzioka (2014) and Rugalema and Khanye (2001) advance that higher education institutions must acknowledge that HIV and AIDS endemic affects their functioning and operations. UNESCO (2006) emphasized that HIV and AIDS have a significant impact in the pursuance of development. This therefore implies that

there is dire need for the higher education sector to mainstream for HIV and AIDS so that activities are not negatively affected. Rugalema and Khanye (2001) define mainstreaming HIV and AIDS in education as an attempt to systemically integrate HIV and AIDS issues in education policies, programmes, and projects to ensure

*Corresponding author. E-mail: chrismayanja@gmail.com.

that the endemic does not impact on education delivery and quality.

Since 1992 the Uganda AIDS Commission (UAC) has had the remit for promoting a multi-sectoral response to HIV and AIDS. This puts Uganda as the first country to acknowledge the all-pervasive nature of HIV and AIDS; and the need for a far-reaching response from every sector, not just the health sector (Elsey et al., 2003). The National HIV and AIDS Strategic Plan 2015/2016 – 2019/2020 advances that as part of its international commitment, Uganda as a member of the international community is committed to implementing several decisions and resolutions from various conventions. Such decisions include those that were reached at the 2011 United Nations High Level Meeting on AIDS, where Member States adopted a Political Declaration on AIDS, providing a roadmap towards achieving the vision of Zero new HIV infections, Zero discrimination and Zero AIDS-related deaths (UAC, 2015). The National HIV and AIDS Strategic Plan 2015/2016 – 2019/2020 notes that one of the key challenges in implementation of the previous 2010/2011 – 2014/2015 National HIV and AIDS Strategic Plan was lack of a comprehensive national reporting mechanism that captures biomedical and behavioral/structural data (non-biomedical) on HIV and AIDS interventions from all actors. This may also reflect the fact that cascading of these strategic plans to lower levels was not at all sufficient, leading to non-implementation by Ministries, Departments and Agencies (MDAs), where Uganda Management Institute (UMI) is one. However, according to Avert (2018), HIV and AIDS prevalence in Uganda still stood at 5.7% among adults of 15-49 years, implying that the efforts towards curbing the scourge have not yielded sufficient results.

The Uganda National HIV Prevention Strategy 2011-2015 highlights roles of line ministries in the prevention of HIV and AIDS. The Ministry of Education and Sports' role is to support HIV prevention in educational institutions. One of the ministry's strategies in this regard is to support designing curricular and extra-curricular HIV prevention interventions for all levels, provide guidelines for peer education for youth-in-school, and implement HIV workplace programs in the sector (UAC, 2011). Relatedly, the Ministry of Education and Sports, in its HIV and AIDS workplace policy of 2007, highlighted that the purpose of the workplace policy is to ensure a consequent and equitable approach to the prevention of HIV and AIDS amongst the sector employees and to the comprehensive management of the complications of HIV and AIDS, including care and support for employees living with HIV and AIDS (Uganda Ministry of Education and Sports [MoES], 2007).

According to Elsey et al. (2003), a key player within the policy environment for HIV and AIDS mainstreaming is the World Bank; since 2000 the World Bank has funded the Uganda AIDS Control Programme. This programme is managed through the Uganda AIDS Commission in order to work with all the sector ministries to develop sector specific plans. Uganda has been developing sector wide approaches (SWAps) since 1998; these are now becoming well established in the key sectors of health, education and agriculture. World Bank funding through Uganda AIDS Control Program (UACP) was seen by some as a contradiction to the SWAps environment, as UACP funds are not pooled with the main sector budgets but remain earmarked for HIV and AIDS work (Elsey, et al, 2003). This controversial decision not to pool the funds with main sector budgets was justified by the fact that HIV and AIDS and its impacts can be seen as an emergency situation in need of an immediate response and therefore cannot wait for the longer-term improvements promised by sector wide approaches.

Asnakech (2014) in his study on the Status of HIV and AIDS mainstreaming in integrated Functional Adult Education came up with several recommendations on mainstreaming HIV and AIDS. These include: the need to strengthen the monitoring and evaluation system for the proper implementation of the HIV and AIDS; to implement HIV and AIDS mainstreaming into programs; and allocating budget and human power for implementing, and establishing relevant HIV and AIDS interventions. Other recommendations were that the campaigns towards protection from HIV/AIDS and how to solve community problems using systematic knowledge and skill independently and collectively. Asnakech (2014) argues that both government and non-government organizations plan and conduct relevant training and workshops on HIV and AIDS education. Curriculum should be revised and need to consider time, relevance and content of HIV/AIDS educations.

The Ministry of Gender, Labour and Social Development [MoGLSD] of Uganda, in its National Policy on HIV/AIDS and the world of work indicates that Uganda was one of the first African countries to be confronted by the HIV and AIDS epidemic, as early as 1982 when the first case was identified and reported from Koki, Rakai district (Uganda MoGLSD, 2007). In its Guidelines for Mainstreaming HIV/AIDS in Sectorial Development Plans, Programmes and Project of 2005, the MoGLSD highlights that plans, programmes and projects should have to purposefully seek to address the challenge of containing the HIV and AIDS epidemic and preventing new infections through advocacy, information and education campaigns, behavioral change, communication and condom distribution programmes among other interventions (Uganda, 2005).

Uganda Management Institute (UMI), being one of the Ministries, Departments and Agencies (MDAs) of government, are expected to mainstream HIV and AIDS in its Strategic Plans. In its earlier Human Resource Manual of 2011 section 8.8, UMI pronounced itself on management of staff with HIV/AIDS that they shall continue to work under normal conditions in the course of

their employment for as long as they are medically fit. The manual was later in 2016 harmonized to drop the section in favour of developing a fully-fledged HIV and AIDS Work Place Policy. UMI has over the years attempted to mainstream HIV and AIDS in its operations especially focusing on the employees in its attempt to implement the policy under the Human Resource Manual of 2011. Whereas UMI has attempted to mainstream for HIV and AIDS, there were no traces of actualizing the consideration of HIV and AIDS mitigation measures. This also justified undertaking the study so as to capture lived experiences of staff members who are not only beneficiaries under these strategies, but also the implementers of these strategies. The study therefore made conclusions and recommendations which may be paramount towards combating the HIV and AIDS scourge.

Problem statement

Literature indicates that mainstreaming for HIV and AIDS in development is a going concern the world over. This arose from the fact that HIV and AIDS may easily negatively affect pursuance of development initiatives. Most of the studies accessed dwell on the general point of view on mainstreaming for cross-cutting issues including gender and equity, environment, HIV and AIDS, as well as human right in the pursuance of development. Some studies attempt to investigate the phenomenon of mainstreaming for HIV and AIDS at sector level in different countries. However, scanty literature was accessed putting special focus on mainstreaming for HIV and AIDS in Management Development Institutes, Uganda Management Institute inclusive. For instance, several studies have investigated mainstreaming for HIV and AIDS by public, private and Non-governmental Organisations interventions in the health and education sectors. This study therefore attempts to cover the gap in literature where it captures how HIV and AIDS issues are mainstreamed during planning and budgeting processes, specifically at Uganda Management Institute; during implementation of strategic directions of UMI; and during monitoring and evaluation activities undertaking.

Study questions

The research study was guided by the following research questions:

(i) How does UMI mainstream HIV and AIDS during its planning and budgeting process?
(ii) How are HIV and AIDS mitigation measures implemented in UMI 2017-2020Aligned Strategic Plan? and
(iii) How do Monitoring and Evaluation (M&E) activities consider HIV and AIDS mitigation measures at UMI?

METHODOLOGY

A cross-sectional survey design was used in this research study because of its ability to study a given phenomenon at the same point in time. A case study design was also deployed because of its flexibility with an allowance of retaining holistic characters of real life events adopting an in depth investigation. The study employed mainly qualitative approaches in order to capture perceptions and stories on mainstreaming for HIV and AIDS in UMI's development initiatives. The target population under the study was staff members at UMI because they are the ones mainly targeted by the HIV and AIDS workplace policy unlike students who mainly pursue one-year courses. The study deployed face to face interview method and it involved the Directors, the Human Resource Manager, Deans, and Branch Managers. Focus Group Discussions were also held with participants including Cleaners, Askaris, Drivers, Office Assistants, Logistics Assistants, and Consultants. Document review method was also deployed to capture more data from the documents including the UMI strategic plan, the Monitoring and Evaluation System Guide, periodic reports, UMI policies, quality assurance reports and others.Validity of data was ensured by deploying a triangulation of methods, capturing data from different categories of people on the same phenomenon. This also allowed for trustworthiness – conformability, dependability, credibility and transferability of the findings.The study deployed narrative analysis where narratives were presented followed by analysis of narratives in order to identify patterns and plots with in participants' stories and experiences. This allowed deriving meanings and understandings about mainstreaming for HIV and AIDS in UMI's strategic direction.

RESULTS AND DISCUSSION

Results are presented with the following headings;

(i) Mainstreaming HIV and AIDS in UMI's planning and budgeting process,
(ii) Implementation of HIV and AIDS mitigation measures in UMI's 2017-2020Aligned Strategic Plan, and
(iii) Consideration of HIV and AIDS mitigation measures at UMI.

Mainstreaming HIV and AIDS in UMI's planning and budgeting process. From a review of documents including strategic plans, policy compendium and periodic reports at UMI the study found out various gaps regarding mainstreaming for HIV and AIDS during planning and budgeting processes. It was found out that the UMI 2017-2020 aligned strategic plan does not vividly commit the Institute on analyzing for HIV and AIDS issues and actually capturing strategic actions, performance measures and targets on their mitigation (UMI, 2017). The general statement on the Institute's commitment to mainstream for cross-cutting issues including HIV and AIDS is not backed by strategic actions and performance indicators.

From the interview and focus group discussion findings, it is anticipated that due to non-commitment of the strategic plan to mainstream HIV and AIDS in the Institute's strategies and operations, not much effort has been put on mainstreaming for HIV and AIDS in the annual

planning and budgeting processes (UMI, 2016). One of the Directors observed: *"the situation of HIV and AIDS at the Institute is not alarming. That is why there has not been much focus on planning for interventions"*. The response indicates that focus on mainstreaming for HIV and AIDS is presumed to be in instances where there is evidence of people infected and/or affected by the pandemic, unlike also focusing on HIV and AIDS prevention for both employees and clients. This is against Nzioka (2014)'s submission that higher education institutions should mainstream for HIV and AIDS in their activities if the endemic is not to affect their functioning and operation.

Planning and budgeting for HIV and AIDS may also be hampered by the fact that there was non-disclosure on part of people actually infected or those affected by the pandemic. Another Director observed: *"it is very hard to know the people infected by HIV and AIDS due to non-disclosure"*. This implies that without the infected and affected people actually disclosing their predicament, institutions in the higher education sector, like UMI may find it difficult to plan and budget for mitigation measures since on a general observation, it may look not to be a very big problem. One of the five interviewees did not agree with the idea of peer counseling while the four were passionately supportive. One of the drivers in a focus group discussion noted that: *"fear of disclosure may be due to the fact that there is a strong culture of rumor mongering and pin-pointing on less sensitive issues and that it would worsen if it comes to HIV and AIDS"*. Meanings from the engagement of key informants are that without clear data on the extent of the HIV and AIDS problem at UMI, planning and budgeting for mitigation measures becomes very difficult. Yet HIV and AIDS issues have a potential impact on teaching and learning, research, as well as staff recruitment and retention (Nzioka, 2014). At UMI, the nature of participants on Institute programmes also affects HIV and AIDS mainstreaming since the majority are working class and thus, appear mainly when they have running sessions. A consultant noted;

The nature of UMI's clientele is the working class, who only get contact with the institute when their classes are running, mainly during the evenings and over the weekend. This thus allows little time to engage them in the HIV and AIDS programmes.

The particular fact on the nature of UMI's business may make it difficult to plan and budget for mitigation measures that may target the students who study on a part-time basis. Relatedly, another consultant also noted: *"participants are mainly of the working class and as such may be catered for from their respective work places, which may also be having HIV and AIDS workplace policies"*. Participants in the study indicated that there may be no need to plan for sensitization on HIV and AIDS at the Institute since the caliber of staff and clients

are well informed. A member top management noted: *"staff are aware about HIV and AIDS given the widespread government messages and HIV and AIDS is talked about a lot"*. This and more presumptions about HIV and AIDS lead to attaching less importance on planning and budgeting for mainstreaming HIV and AIDS issues at the Institute. However it is also believed that the Institute plays a key role towards the Political Declaration on AIDS; *"providing a roadmap towards achieving the vision of Zero new HIV infections, Zero discrimination and Zero AIDS-related deaths"* (Uganda, 2015b).

The study found out that there is no major focus drawn on ensuring that employees at the Institute were encouraged to disclose their sero-status, making it very hard for the Institute to draw strategies for mitigation of the HIV and AIDS issues. A study participant explained; *"We have not been compelling staff to reveal their HIV status since it is a very sensitive issue"*. This accordingly implies that in the running strategic planning period, mitigation measures for HIV and AIDS issues at the Institute have not effectively been implemented.

Implementation of HIV and AIDS mitigation measures in UMI's 2017-2020 aligned strategic plan

From the study, it was observed that since the strategic plan of UMI never catered for sufficient mainstreaming of HIV and AIDS, implementation of mitigation measures is also very scant, if at all it is being undertaken.

The Institute has over the years not focused on HIV and AIDS sensitization strategies as put across by a top management member who noted: *"there is no deliberate effort to make people aware about HIV and AIDS"*. The participant also indicated that not much mitigation measures were being implemented at the Institute due to insufficient knowledge especially on those that may require support. The top management member said: *"there is limited support towards HIV and AIDS mitigation measures which is usually adhoc and rare due to non-disclosure"*. This further confirms that not much focus has been put at drawing strategies for mainstreaming HIV and AIDS in the Institute's strategies and operations. Relatedly, in a study conducted on HIV and AIDS initiatives in Africa's education sector, strategies were either new or limited while the few undertaken initiatives could not effectively address the impact of the endemic (UNESCO, 2006). Like the case for the University of Eldoret, UMI HIV and AIDS Policy advances that counseling services are key components of the endemic's mainstreaming in University strategies (UMI, 2017; University of Eldoret, 2014). Counseling is one of the leading interventions that would have been implemented at the Institute, however study participants indicated that there were no specialized counseling services at the Institute to support the HIV and AIDS control campaign. Another consultant noted:

"Today no specialized counseling services are available at UMI save for some isolated adhoc intervention by the HRM department and probably individual course managers and facilitators".

Consideration of HIV and AIDS mitigation measures in monitoring and evaluation activities at UMI

Integration of monitoring and evaluation of HIV and AIDS mitigation measures needs to be done earlier in time if objectives are to be met (Republic of Namibia, 2008; UMI, 2017). However on review of the Uganda Management Institute Monitoring and Evaluation System Guide of 2015, the study found out that there is no specific focus on monitoring and evaluating cross-cutting issues like HIV and AIDS at the Institute. This may be due to fact that during its development, the Institute 2013-2018 five-year strategic plan did not mainstream for HIV and AIDS.

However, the 2017-2020 Aligned strategic plan made an attempt to mainstream for HIV and AIDS with strategies that include promotion of student and staff counseling services, wellness programmes for staff living with HIV and AIDS, establishing a structure to manage HIV and AIDS, operationalizing the HIV and AIDS policy, as well as development of a deliberate policy on HIV and AIDS disclosure (UMI, 2017). However during the financial years 2017/18 and 2018/19, there is no evidence on implementation of the suggested HIV and AIDS mitigation measures (UMI, 2018). However, with funding from the African Development Bank – Higher Education Science and Technology project, managed by the Ministry of Education and Sports, UMI secured funding towards mainstreaming for cross-cutting issues, among which HIV and AIDS issues would be mitigated. The Institute allocated funding towards trainings, Information Education and Communication materials, like erecting an HIV and AIDS awareness bill board, as well as procurement of condoms and condom dispensers (UMI – AfDB, 2019). However, activities were expected to be undertaken in the fourth quarter of the financial year 2018/2019. A head of department observed;

Though there is no much evidence towards undertaking HIV and AIDS initiatives at the Institute, the AfDB project funded some activities including creation of awareness.
These are expected to be shared among staff and students with the objective of combating the spread of HIV.

Study participants also confirmed that since monitoring and evaluation focuses indicators drawn by the strategic plan objectives, actions and indicators, it becomes hard to bring out issues to do with HIV and AIDS mainstreaming if they were actually not focused on. Another staff member during focus group discussions noted; The author is not certain whether there is keen interest to follow up HIV and AIDS mainstreaming during monitoring and evaluation activities. He does not remember any one inquiring about them at the Institute.

The statement indicates that focus on mainstreaming for HIV and AIDS during monitoring and evaluation activities is insufficient. Understandings from the argument are that HIV and AIDS issues are at a big risk of being not focussed on during the implementation of UMI strategic direction.

UNESCO (2006) attests to the fact that there is general lack of accurate data on HIV and AIDS in the higher education sector. This is also evident from UMI periodic reports where there is scanty reporting on implementation of HIV and AIDS mitigation measure. From the UMI periodic reports reviewed, there was no deliberate effort to capture data and information on HIV and AIDS. The Institute self-assessment report did not draw any information on HIV and AIDS (UMI, 2019). This further confirms that monitoring and evaluation of the HIV and AIDS mitigation measures is not effectively undertaken.

Remodeling HIV and AIDS mainstreaming in Higher Education Institutes

The study was also underpinned by the model for mainstreaming HIV and AIDS in the education sector as advanced by Rugalema and Khanye (2001). The study findings and interpretation allowed the remodeling of this model to lay focus on the mandate, structures and systems in the higher education sector. Elsey et al. (2003) argue that whereas institutions may put in place a conducive environment for HIV and AIDS mainstreaming, they may still be faced by a challenge of clearly defining what the concept of mainstreaming is all about. Relatedly, Rugalema and Khanye (2001) argue that formulation of strategic plans and programmes are not the only requirement for mainstreaming of HIV and AIDS in the higher education sector. Mainstreaming for HIV and AIDS would require specific focus on the structures and allocation of resources towards the mitigation measures (Rugalema and Khanye, 2001). The argument implies that by just analyzing for HIV and AIDS issues and suggesting mitigation measures, UMI would not have ensured mainstreaming for the issues. It would require setting up HIV and AIDS structures at the Institute, as well as ensuring that mitigation measures are allocated resources that would enable their implementation. Since it is not only about having a conducive environment for HIV and AIDS initiatives, the study made reference to the model for mainstreaming HIV/AIDS in the education sector as advanced by Rugalema and Khanye (2001) to come up with ideas in the context of higher education institutions. However, from analysis of findings, the study came up with a remodeling of this model in order to put arguments into the context of higher education institutions. This allowed getting meanings and understandings on
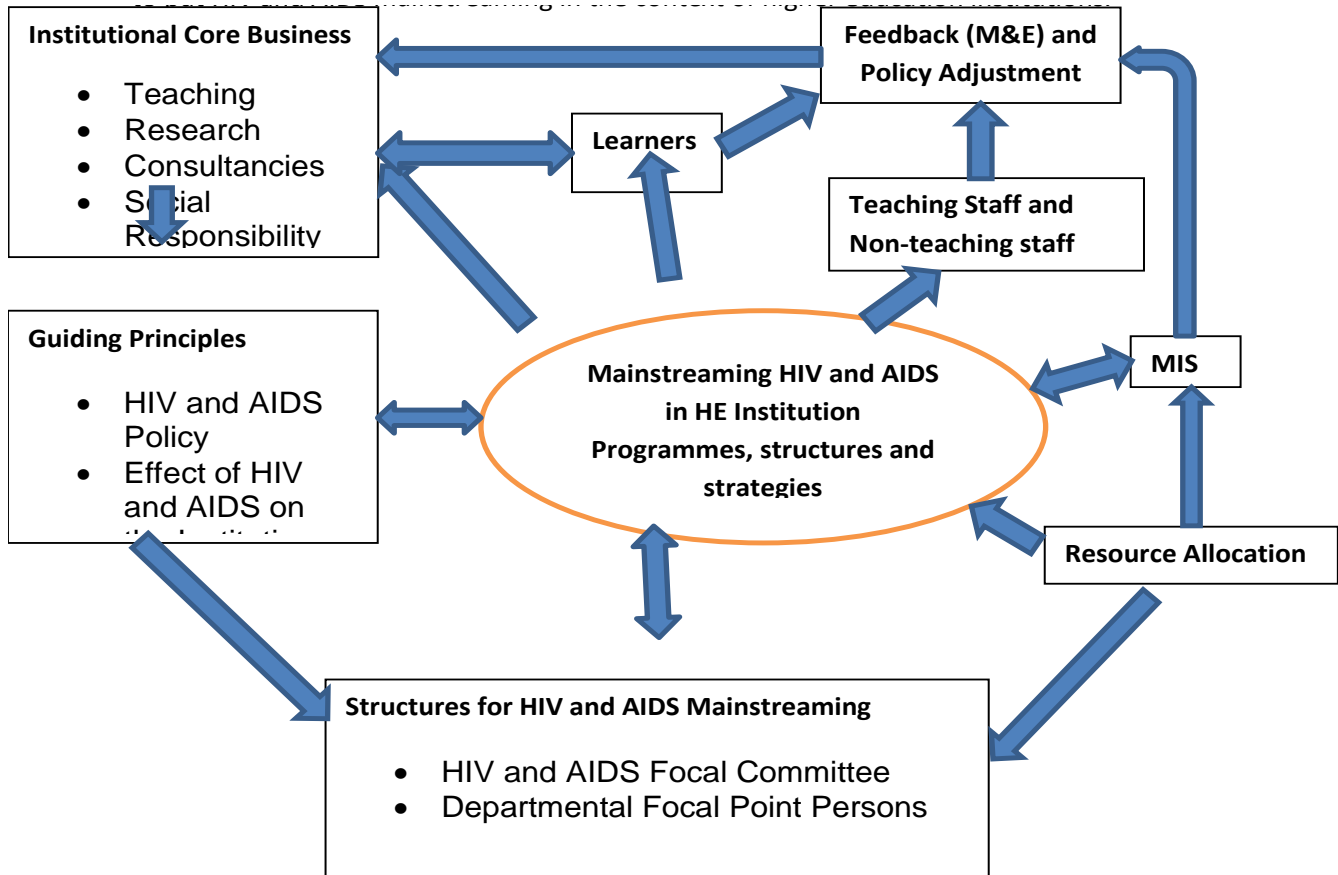
Figure 1. Model for mainstreaming HIV and AIDS in higher education institutions a modification of the model for mainstreaming HIV/AIDS in the education sector.
Source: Adapted from Rugalema and Khanye (2001).

the practice of these institutions when it comes to mainstreaming for HIV and AIDS during planning and budgeting, implementation, as well as monitoring and evaluation. Figure 1 shows a modification of the model in order to put HIV and AIDS mainstreaming in the context of higher education institutions.

Figure 1 presents a model for mainstreaming HIV and AIDS in higher education institutions as modified from the model for mainstreaming HIV/AIDS in the education sector (Rugalema and Khanye, 2001). The model shows that mainstreaming for HIV and AIDS in higher education institutions is rather complex and as such would require a lot of attention. It starts with getting a clear understanding of the institution's core business; and putting in place guiding principles on HIV and AIDS mainstreaming. The model emphasizes need to put in place structures and allocation of resources towards implementing mitigation measures. The institution should then set up a Management Information System to ease data capture, storage and dissemination. This informs mainstreaming for HIV and AIDS among the learners, teaching and non-teaching staff. Data collected and disseminated facilitates feedback sharing among the key stakeholders of the

institute, which further allows effective decision making and policy changes. Such feedback may in the end also inform changes in teaching, research, consultancies and social responsibility mandate for higher education institutions.

Conclusion

Whereas the study found out that UMI has frameworks for HIV and AIDS mainstreaming, it is barely mainstreamed in the planning and budgeting process, implementation and during monitoring and evaluation processes. The study concludes that without the institute mainstreaming for HIV and AIDS during the strategic planning process, no major interventions in form of strategies can subsequently be drawn towards making a contribution in the fight against the HIV and AIDS scourge.

The study further found out that implementation of HIV and AIDS mitigation measures was also scanty at the Institute. In conclusion therefore, the study deduces that it is not enough to merely draw strategic plans, policies

and other frameworks on HIV and AIDS initiatives, but more aspects like structures and resource allocation, among others have to be considered. This is well illustrated by the model for mainstreaming HIV and AIDS in higher education institutions in Figure 1. The monitoring and evaluation activities at the Institute have not catered for HIV and AIDS issues. All reviewed performance reports and other Institute reports have not presented information on HIV and AIDS issues. The study concludes that feedback from the mainstreaming process is very crucial to inform re-focusing of higher education institutions core mandate for more effectiveness. The model for mainstreaming HIV and AIDS in higher education institutions (Figure 1) clearly illustrates that it is from the mainstreaming feedback that their core mandate may be informed through results of the HIV and AIDS mainstreaming processes periodically.

Recommendations

The Institute needs to ensure that a thorough analysis for HIV and AIDS issues, as well as mitigation measures is carried out during strategic and annual planning processes. Secondly, while drawing institutional budgets, suggested mitigation measures need to be allocated funds for implementation. Thirdly, there is need for UMI to ensure that during planning, structures for HIV and AIDS mainstreaming are actually allocated operational funding. The Institute needs to ensure that proposed strategies for mitigation are actually implemented. This can be through ensuring that the drawn and approved annual plans and budgets (which are deemed to include mitigation measures) are actually followed. Capacity of key stakeholders including the implementers of HIV and AIDS mitigation measures should also be built to enable effective implementation, as well as adequate monitoring and evaluation activities.

ACKNOWLEDGEMENT

CONFLICT OF INTERESTS

The authors have not declared any conflict of interests.

REFERENCES

Asnakech Z (2014). The Status Of HIV/AIDS Mainstreaming In Integrated Functional Adult Education: The Case of Ledeta Subcity (Doctoral dissertation, Addis Ababa University).

Avert (2018). HIV and AIDS in Uganda. Retrieved from [Cited 2020 February 7th]. Available from: https://www.avert.org/printpdf/node/407.

Elsey H, Kutengule P, Holden S, Kasangaki D, MacCarthy R, Ofori-Asumadu A, Smart R (2003). HIV/AIDS mainstreaming: a definition, some experiences and strategies. A resource developed by HIV/AIDS focal points from government sectors and those that have been working on HIV/AIDS mainstreaming. Liverpool, Durban. Disponible sur: http://www.sarpn.org.za/documents/d0000271/P263_HIV_Report.

Nzioka C (2014). The higher education response to HIV and /AIDS, (April). URL: https://www.researchgate.net/publication/238105334_The_higher_education_response_to_HIVAIDS

Republic of Namibia (2008). A Guide to HIV and AIDS Mainstreaming. URL: https://www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---ilo_aids/documents /legaldocument/wcms_140595.pdf

Rugalema G, Khanye V (2001). Mainstreaming HIV/AIDS in the education systems in sub-Saharan Africa: Some preliminary insights. URL: https://hivhealthclearinghouse.unesco.org/sites/default/files/resources/Rugalema.pdf

Uganda (2015). National Development Plan II 2015/2016-2019/2020. URL: https://consultations.worldbank.org/Data/hub/files/consultation-template/materials/ndpii-final11.pdf

Uganda (2015b). National HIV and AIDS Strategic Plan 2015/2016-2019/2020. URL: https://hivhealthclearinghouse.unesco.org/sites/default/files/resources/22280.pdf

Uganda Management Institute [UMI]-AfDB (2019). African Development Bank-Higher Education Science and Technology Project Progress Report (May, 2019)

Uganda Management Institute [UMI] (2018). 2017/2018 Annual Performance Report.

Uganda Management Institute [UMI] (2016). Human Resource Manual, as revised.

Uganda MoES (2007). The Education Sector HIV and AIDS Workplace Policy. URL: https://hivhealthclearinghouse.unesco.org/sites/default/files/resources/Uganda%20workplace.pdf

Uganda MoGLSD (2015). National HIV and AIDS Strategic Plan 2015/2016 – 2019/2020. URL: https://hivhealthclearinghouse.unesco.org/sites/default/files/resources/22280.pdf

Uganda Management Institute [UMI] (2017). Human Resource Manual, as revised.

Uganda MoGLSD (2007). National Policy on HIV/AIDS and the World of Work. URL: http://www.mglsd.go.ug/policies/AIDS.pdf

Uganda MoGLSD (2005). Guidelines for Mainstreaming HIV/AIDS in Sectoral Development Plans, Programmes and Projects

UNESCO (2006). Good policy and practice in HIV and AIDS and education: Overview. URL: https://files.eric.ed.gov/fulltext/ED495659.pdf:

University of Eldoret (2014). HIV and AIDS Policy. URL: https://www.uoeld.ac.ke/sites/default/files/uoe_policies/policies_rules_regulations/FC%20HIV%20%26%20AIDS%20Policy.pdf

ACADEMIC JOURNALS
expand your knowledge

**Journal of
Public Administration and Policy Research**

Full Length Research Paper

Why public services matter: Linking citizen quality of life to local government services

Andrew Wesemann

Department of Public Administration and Policy Analysis, College of Arts and Sciences, Southern Illinois University Edwardsville, USA.

As public demand for greater governmental efficiency and accountability continues to grow, it is essential for public policy-makers and administrators to justify the provision of public services through various performance measures. Citizen quality of life is a common indicator of government performance within the emergent literature as the existence of numerous public entities is predicated on their ability to provide valuable services. This study, therefore, builds on the extant literature by testing the impact of local government services on citizens' quality of life. Using survey data collected from individuals residing in a large U.S. city government, the results of econometric analyses provide further confirmation that the quality of local government services significantly impacts the overall quality of life experienced by citizens. Specifically, ethical administrative practices, waste services, cultural services, economic development services, and transportation services were found to be statistically significant predictors of citizen quality of life.

Key words: Local government administration, public services, public policy, quality of life.

INTRODUCTION

Scholarship investigating a multitude of factors thought to influence quality of life has emerged over the past several decades. While the importance of this topic is certainly multidimensional and spans across disciples, it is of particular concern for the field of public policy and administration, given that a focal objective of most governments is to improve the well-being of their respective citizenry. Yet while the postulated positive relationship between citizen quality of life and governmental services is supported by a growing body of literature from a variety of disciplines, greater empirical research supporting this theoretical framework is warranted (Leyden et al., 2011).

Given that numerous governments across the globe have formed policies geared toward creating or refining public services in order to improve the quality of life among their citizens, it is crucial that these decisions are backed by sound empirical evidence (Leyden et al., 2011). Further, as the demand for greater governmental accountability rises, public administrators must demonstrate that tax dollars are being used effectively to produce positive social and economic outcomes (Brown, 2003). Clearly, good governance hinges on the investment of taxpayer dollars in effective public services and it is incumbent upon policy-makers and administrators to ensure that public expenditures are used in the best interest of their

E-mail: awesema@siue.edu.

constituents (Lane, 1994; Porter and Kramer, 2011).

Importantly, then, governments must assess the degree to which public services achieve such an objective by the value that services are assigned through citizen evaluations and not solely on efficiency metrics. Put differently, while government services may reach high levels of efficiency, they may fail to obtain sufficient support from citizens because they are not perceived as valuable. Research, therefore, must rely on measures of the value assigned to governmental services by citizens, rather than efficiency constructs, to adequately assess their impacts (Bovaird and Loeffler, 2012).

Cross-national research, notwithstanding a fair amount of controversy, generally suggests that public services and government interventions are positively associated with a variety of quality of life indicators (Jakubow, 2014). There is also empirical evidence for this relationship at the local government level; however, it is less expansive and largely limited to case-by-case investigations. Therefore, additional research exploring the degree to which this relationship holds at the local level of government is needed, in addition to an investigation of the effectiveness of specific public services (Kim and Kim, 2012). This study, therefore, builds upon the extant literature by exploring the degree to which local government services influence citizens' quality of life, particularly focusing on the City of Austin, Texas. Using data collected through the City's Annual Community Survey, econometric techniques were employed to test the aforementioned relationship.

CONCEPTUAL FRAMEWORK

Evaluating governmental performance is a vexing task that is rife with limitations. Unlike their private sector counterparts, public administration scholars must rely on subjective measures of performance, rather than financial indicators, such as profitability. Nevertheless, one particular indicator of governmental performance commonly used among scholars is citizen quality of life, since a fundamental characteristic of government involves market intervention explicitly or implicitly intended to improve the lives of people (Jakubow, 2014; Leyden et al., 2011). As such, this study is particularly interested in local government performance measured on this dimension.

Throughout the literature, however, scholars generally use the concepts of happiness, well-being, life satisfaction, and quality of life analogously. Though some scholars suggest that happiness is a function of quality of life and well-being (Helliwell, 2006; Lane, 1994), most research follows the former argument, since a large majority of the dependent variables of interest intuitively tend to be subjective measures of quality of life or a modest variation thereof (Diener et al., 1999; Helliwell, 2006). As such, the following sections do not distinguish between the aforementioned concepts, with the understanding that slight variances may exists in their respective interpretations. Regardless of the language used, however, scholarship, as implied above, is largely limited to subjective measures of quality, both in terms of government services and citizen well-being. For this reason, Hogan et al. (2015) argue that it is important to involve citizens in the design of well-being measures and policies. Yet doing so is, indeed, a challenging task and, consequently, current research is limited on this scope.

Nevertheless, research indicates that local government services are generally viewed auspiciously by citizens, especially when compared to state and federal government services (Miller and Miller, 1991). There is, however, substantial variation in the favorability of particular services between citizens in a given municipality (Bovaird and Loeffler, 2012; Miller and Miller, 1991; Michalos and Zumbo, 1999). More specifically, satisfaction with local government services is found to be contingent on the degree to which citizens are involved with and attached to their local community. For instance, Scott and Vitartas (2008) find that while citizen's attachment to their local community is positively associated with satisfaction with governmental services, the inverse relationship exists for citizen's community involvement.

Notwithstanding such variability, the values assigned to public services, through satisfaction ratings, for example, by citizens are arguably the preferred metrics on which to assess specific public service provisions. That is, research suggests the value assigned to particular public services by a citizenry, rather than more traditional efficiency standards, are more indicative measures of the actual benefits received by a given community (Bovaird and Loeffler, 2012; Scott and Vitartas, 2008).

Here, Bovaird and Loeffler (2012) explicate this theoretical framework by advocating for the use of a Best Value Approach (BVA), which evaluates public services based on both outcomes and results. The authors suggest that, through the BVA, outcomes should largely be measures of the value that citizens assigned to particular services, instead of politicians' and bureaucrats' valuation of services. In contrast, results serve essentially as efficiency measures that are used by public administrators and elected officials to achieve desired ends in the public interest (Bovaird and Loeffler, 2012: 1121). On the whole, the BVA considers the value that services add to the public sector specifically in terms of direct user value, indirect user value, social value, environmental value, and political value. However, the crux of the BVA involves citizen involvement (inputs) in the public service provision process, whether it is through co-production or more simplistic forms of citizen engagement. But regardless of form, it is through the BVA that the overall interest of the general public is recognized, not only the interests of those that consume the service; and in turn, public sector outcomes are enhanced (Bovaird and Loeffler, 2012).

However, the extent to which citizens find a specific public service valuable largely depends upon its perceived and actual quality. Importantly, research suggests that the quality of services provided to citizens can vary, to a significant degree, at different governmental levels, particularly on an individual and/or geographical basis (Miller and Miller, 1991; Michalos and Zumbo, 1999; Scott and Vitartas, 2008). A substantial body of empirical research on school quality, for example, suggests that the quality of public education delivered to students can vary significantly by school district within a particular city (Uline and Tschannen-Moran, 2007). As a consequence, citizen satisfaction with government services depends upon of the quality of the services provided. That is, positive citizen evaluations of government services will increase concurrently with the actual quality of governmental services. Thus, while individual perceptions of government services will vary, such variation will in large part be due to the relative quality of their personal interaction with government employees, departments, and elected officials (Bovaird and Loeffler, 2012; Flavin et al., 2011). But despite research suggesting that citizens, by and large, value quality local government services, market intervention remains a contentious political issue in advanced democracies, albeit more so at different governmental levels (Flavin et al., 2011). Still, a growing body of literature continues to illuminate a positive relationship between governmental services and quality of life at two particular constituency levels. That is, research evaluating the degree to which government services impact citizen quality of life can be delineated in two particular streams.

First, a significant body of literature has developed which investigates this relationship from a cross-national framework. Here, cross-national studies, typically concerned with advanced democracies, have generally found that as government services increase, citizens experience a pronounced positive impact on their overall quality of life (Flavin et al., 2011; Helliwell and Huang, 2008; Hogan et al., 2014; Jakubow, 2014; Kim and Kim, 2012; Liu et al., 2020; Pacek and Radcliff, 2008; Pacek et al., 2019). For example, Pacek et al. (2019) examine how the size and scope of government, measured in terms of the share of the publicly employed workforce, influence well-being by comparing cross-national democracies (Flavin et al., 2014). Expectedly, their findings suggest that a positive relationship exists between well-being and a large public sector.

However, research also suggests the volume of governmental services alone is not an adequate predictor of subjective well-being, and thus the overall quality of such services must be taken in to consideration, as well (Jakubow, 2014). Importantly, Kim and Kim (2012) demonstrate that while government size is relatively important, the general quality of government plays a significant role in determining a population's life satisfaction ratings. Similarly, in terms of investigating the impact of specific government services, Brown (2003) identifies three important types of service interactions: customer service interactions, client service interactions, and captive service interactions. Regardless of type, however, the impact is determined by the level of quality associated with these service variables. In addition, Helliwell and Huang (2008) findings suggest that, on a global scale, good governance in terms of its relationship with life satisfaction can be divided into two groups; specifically, the efficiency and trustworthiness of the design and delivery of government, and the quality of the electoral process. It is important to note, however, there were substantial differences when comparing countries based on economic standing and these variables were more distinct in countries with lower income levels.

Moreover, the second steam of empirical research focuses on the impact of government services on citizen quality of life at the local level (Brown, 2003; Goldberg et al., 2012; Hogan et al., 2016; Leyden et al., 2011; Miller and Miller, 1991; Scott and Vitartas, 2008; Sirgy et al., 2008, 2000; Whiteley et al., 2010). In an early contribution to the literature, Michalos and Zumbo (1999) examined the impact of a multitude of municipal services on perceived life satisfaction, happiness, and quality of life, using survey data obtained from citizens of Prince George, British Columbia. The findings demonstrated that government services explained a substantial degree of variation in each of the dependent variables. Following the contribution by Michalos and Zumbo (1999) literature concerned with the impacts of local government services and citizen quality of life has continued to emerge. However, such research has been limited in scope and generalizability.

This research suggests that this is a necessary condition, given the sheer volume of local governments and the substantial variability that exists between them (Miller and Miller, 1991; Michalos and Zumbo, 1999). Scholarship, therefore, has necessarily limited its sample size to individual governments or to a small group of municipalities in a variety of areas. For example, Hogan et al. (2016) investigated the impacts of government services, conceptualized as performance, at the local level, on individuals' well-being by sampling five major cities across the globe. Findings demonstrated that there was a positive and statistically significant relationship between government services and happiness and health; though, the relationship between happiness and government services was stronger as age increased.

In short, the literature reviewed here provides a strong theoretical foundation, linking government services to citizen quality of life, for scholars to build upon. While cross-national research in this area is more robust and generalizable, the literature concerned with local governments has also laid a solid path for future scholarship, emphasizing the importance of individualized analyses of municipalities.

Contribution

On the whole, the current literature investigating local and cross-national governments has significantly contributed to the understanding of the effects that public service provisions have on a given population's quality of life. However, because research has demonstrated that this relationship varies substantially between local governments, it is argued that it is essential for scholarship to continue to investigate the particularities of this relationship on an individual basis (Miller and Miller, 1991). In addition, this research is grounded in the BVA literature, which argues that the value assigned to particular public services by citizens, rather than traditional efficiency standards prescribed by public administrators and elected officials are more indicative of the actual benefits received in a given community (Bovaird and Loeffler, 2012). As such, this study investigates the impact of public services on this dimension.

The study argues that while the general consensus that public services, taken together, do have a meaningful impact on communities is ample, it is inefficient and misleading to draw generalizations across local governments. Thus, following the underscored theoretical framework, this study contributes to the extant literature by investigating the degree to which specific public services impact citizens' quality of life in a large U.S. city government.

METHODOLOGY

Data

To empirically test the relationship between local government services and citizen quality of life, publicly available data provided by the Office of Personnel Management at the City of Austin, Texas obtained through its Annual Community Survey was utilized. The survey has been administered through phone, mail, and Internet instruments from 2015 to 2019 to randomly selected samples of its citizenry, and is primarily designed to measure their satisfaction with major city services. It is important to note that while the survey provides time series data, longitudinal analysis is not feasible or sound at either the individual level or the city council district level. In particular, the survey was not administered to the same individuals each year and the number of observations aggregated at the city council district level is insufficient. As such, cross-sectional data obtained through the 2019 Annual Community Survey was examined, since it is the most current and germane data available. The Annual Community Survey is markedly comprehensive and, as a result, over 220 variables for citizen satisfaction levels with the City of Austin and citizen demographics are available for examination. Therefore, in order to conduct econometric analyses that allow for substantive interpretation, data reduction techniques were employed. Specifically, only variables for the overall quality of specific city services and respondent demographics were included in the analytical sample. Then, factor analysis was employed for further data reduction of the services variables, given that the variables intuitively appeared to be correlated and measure similar constructs. The results of exploratory factor analysis, discussed in greater detail below, confirmed this proposition and thus supported

the aggregation of services variables. Descriptive statistics for the analytical sample extracted from the 2019 Annual Community Survey are presented in Table 1.

Dependent variable

This study's dependent variable is a measure of citizen satisfaction with their overall quality of life in the City of Austin. Here, respondents were asked to rate their level of satisfaction as "very satisfied", "satisfied", "dissatisfied", "very dissatisfied", or "neutral". Thus, data were coded on a 5-point scale with 1 being "very dissatisfied" and 5 being "very satisfied". In addition, responses of "don't know" were assigned a 0 value.

Independent variables

In an initial model, an existing variable from the Annual Community Survey measuring the overall quality of services provided by the City of Austin was used. Here again, respondents were asked to evaluate their overall satisfaction and a 5-point scale was developed for the analysis. In particular, respondents rated their level of satisfaction with governmental services as either "very satisfied", "satisfied", "dissatisfied", "very dissatisfied", or "neutral". Thus, again, data were coded on a 5-point scale with 1 being "very dissatisfied" and 5 being "very satisfied". In addition, responses of "don't know" were assigned a 0 value.

However, in order to add further depth to this investigation, the effects of particular governmental services on citizen quality of life were examined. The Annual Community Survey included at least 32 variables that measured citizen satisfaction with specific city government services and other characteristics, and as such, they were included in a second analytical model. It is important to note that once again each of these service variables were rated by respondents as either very "very satisfied", "satisfied", "dissatisfied", "very dissatisfied", or "neutral". Accordingly, data were coded on a 5-point scale with 1 being "very dissatisfied" and 5 being "very satisfied". In addition, responses of "don't know" were assigned a 0 value. In short, all of the independent variables of interest in this investigation are measures of citizen satisfaction with governmental services in the City of Austin and are coded on a 5-point scale.

As noted, however, exploratory factor analysis results allowed for the aggregation of variables that were correlated and intuitively measured the same constructs. In particular, the 32 variables that were analyzed loaded onto 6 factors and were consequently aggregated into 6 independent variables of interest measuring citizen satisfaction with ethical administrative practices, waste services, health and safety services, cultural services, economic development services, and transportation services.

Controls

To control for additional factors potentially influencing citizens' overall quality of life, several relevant socioeconomic and demographic covariates were included in the analyses. Controls for socioeconomic characteristics of citizens include household income, employment status, and homeownership. As shown in Table 1, the control for household income is ordinal, whereas the controls for employment status and homeownership are dichotomous (coded 1, if the respondent is employed or owns a home; 0, if otherwise). These are expected to be positively related to overall quality of life. Not surprisingly, research shows that as one's socioeconomic status grows, their perceived quality of life

Table 1. Descriptive statistics.

Variable	N	M	SD	Min	Max
Overall quality of life	2.049	3.551	1.184	0	5
Overall quality of services provided	2.049	3.273	1.283	0	5
Ethical administration practices	2.049	2.561	1.180	0	5
Waste Services	2.049	3.432	1.067	0	5
Health and safety services	2.049	2.852	1.106	0	5
Cultural services	2.049	2.501	0.979	0	4
Economic development services	2.049	1.918	1.132	0	5
Transportation services	2.049	2.116	0.907	0	5
Age group	1.984	3.960	1.654	1	8
Number of children	2.049	0.483	0.949	0	11
White	2.049	0.710	0.454	0	1
Household income group	1.786	3.793	1.564	1	6
Employed	1.968	0.751	0.433	0	1
Female	2.011	0.500	0.500	0	1
Home owner	2.034	0.685	0.465	0	1

simultaneously increases (Diener et al., 1999; Leyden et al., 2011). Consider, for example, household income. As one's income increases, they have greater ability to invest their finances in resources that will improve their overall all quality of life (such as, education, healthcare, etc.) and in more personal luxuries (such as, vacations, goods, etc.).

The demographic characteristics controlled for include the citizen age group, number of children, race (whether or not they are white), and gender (whether or not they are female). Table 1 also shows that the controls for age group and number of children are ordinal, whereas controls for race and gender are dichotomous (coded 1 if white or female; 0 if otherwise). It is expected that being white and/or in an older age group will be positively associated with the dependent variables, whereas being female and/or having a larger number of children will produce a negative relationship. This is because white individuals have historically experience numerous advantages over their minority counterparts, and older individuals have had more time to acquire wealth (Chebotareva, 2015). In contrast, females have historically experienced several disadvantages with respect to their male counterparts (Chandra and Satyanarayana, 2010), and individuals with more children incur greater household expenses (Krishnaji, 1980). For example, a substantial body of empirical and theoretical literature suggests that females and minorities are more likely to experiences numerous workplace challenges, such as lower pay and fewer opportunities to advance in their career (Daly, 2012; Drobnic et al., 2010).

In all, the aforementioned socioeconomic and demographic covariates were included in this study to control for their likely effects on individuals' quality of life. Given that a substantial body of theoretical and empirical research indicates that these covariates will hold a significant relationship with one's quality of life. It is likely that the results of this study will complement prior research in this area.

Methods

This study employs quantitative methodologies in order to explore the degree to which public services impact citizen quality of life in the City of Austin. As noted, the 2019 Annual Community Survey was expansive and includes a large sample of survey respondents that could not have been feasibly analyzed with the use of qualitative methods. That is, because of the secondary nature of the data, quantitative analysis was deemed to be the most applicable technique. Since the Annual Community Survey data possesses a hierarchical structure, with citizens nested within City Council Districts, an intraclass correlation coefficient (ICC) was calculated to determine whether multilevel modeling was the appropriate method for analyzing the data. The ICC provided an estimation of the proportion of variance in the outcome between districts due to clustering effects. Surprisingly, however, the ICC value of 0.34% was very low and represented an extremely small proportion of the explained variance. Thus, a multilevel approach was not justifiable (Raudenbush and Bryk, 2002).

Consequently, multivariate regression was determined to be the most suitable method to examine the relationship between overall quality of life and quality of government services in the City of Austin. As indicated, two models were run, using different independent variables, to test this study's theoretical expectations. The first model included only one independent variable as a measure of overall quality of city government services.

The second model, however, contains 6 separate independent variables of interest that measure specific types of government services. As noted, principal components factor analysis was employed in order to create aggregate constructs for specific government services. Importantly, the Bartlett test of sphericity revealed that the variables tested in the factor analysis were intercorrelated at a statistically significant level ($p<0.01$), thus supporting the use of this technique. Further, the analysis produced 6 factors with Eigen values of 1 or greater and, as a result, these factors were retained.

As shown in Table 2, after applying the varimax rotation method, the factors loaded in a relatively clear pattern. Specifically, items loading on to Factor 1 intuitively appear to be related to ethical administrative city practices, items loading on to Factor 2 appear to be concerned with city waste services, items loading on to Factor 3 appear to be related to health and safety services, and so forth. Cronbach's alpha was calculated for the item loadings for each of the six factors and the results showed significant levels of internal consistency and reliability, thus supporting the decision to aggregate the 32 variables into 6 separate services constructs.

In sum, two models were run, using multivariate regression, to test this study's theoretical expectations. The first model utilized a single measure of overall quality of city services and tests its

Table 2. Principal components factor analysis of city services.

Principal components	Factor					
	1	2	3	4	5	6
Efforts to be fair	0.817					
Efforts to be transparent	0.800					
Efforts to support dialogue between residents and government	0.777					
Civic engagement experience	0.733					
Overall effectiveness of communication	0.706					
Efforts to support diversity by serving people equally regardless of their race, religion, ethnicity, age, or abilities	0.692					
Overall value received for tax dollars and fees	0.632					
Employees of the City of Austin are ethical in the way they conduct City business	0.536					
Quality of residential yard waste collection		0.836				
Quality of residential garbage collection		0.822				
Bulky item pick-up/removal services		0.814				
Quality of residential curbside recycling services		0.811				
Household hazardous waste disposal service		0.530				
Overall quality of wastewater services provided by Austin Water		0.470				
Overall quality of the Austin-Bergstrom International Airport		0.330				
Overall quality of fire services			0.761			
Medical assistance provided by EMS (overall quality of ambulance services)			0.671			
Overall quality of police services			0.669			
Overall quality of municipal court services (traffic and parking ticket processing, misdemeanor court cases, fine collection)			0.531			
Overall quality of health and human services provided by the City (social services, public health services, and restaurant inspections)			0.498			
Animal services (such as, shelter, adoptions, animal control, etc.)			0.445			
Overall quality of libraries				0.793		
Quality of cultural and learning services and programs in the City (such as, libraries, museums, cultural centers and events)				0.772		
City honors and preserves my personal heritage				0.471		
Overall quality of city parks and recreation				0.399		
Traffic flow on major city streets					0.789	
Traffic flow on major highways					0.788	
Transportation options (aside from personal vehicle) in the City (such as, ride share, bus/train, bike, walk)					0.567	
Cost of transportation to get around					0.454	
Overall quality of development review, permitting, and inspection services						0.808
Overall quality of planning and zoning services (Imagine Austin comprehensive plan, neighborhood/small area plans, zoning)						0.773
City's effort to promote and assist small, minority and/or women-owned businesses						0.569
Proportion of explained variance (%)	15.67	11.99	8.42	7.62	7.12	6.71
Cronbach's alpha	0.902	0.851	0.767	0.733	0.707	0.699

relationship with citizen quality of life. The second model then dissects the overall quality of services into particular types of services to examine their individual effects. The individual service variables developed and examined include: 1) ethical administrative practices, 2) waste services, 3) health and safety services, 4) cultural services, 5) economic development services, and 6) transportation services.

RESULTS

The results of econometric methods are provided in Table 3. It is important to note that all analyses report robust standard errors in order to correct for diagnosed heteroskedasticity. In addition, the Durbin-Watson test

Table 3. Robust multivariate regression results on overall quality of life.

Variable	Model 1	Model 2
Overall quality of services provided	0.319*** (0.027)	
Ethical administrative practices		0.185*** (0.032)
Waste services		0.143*** (0.032)
Health and safety services		-0.106*** (0.029)
Cultural services		0.082** (0.036)
Economic development services		0.086*** (0.025)
Transportation services		0.198*** (0.035)
Age group	-0.065*** (0.020)	-0.061*** (0.020)
Number of children	-0.066** (0.028)	-0.091*** (0.027)
White	-0.083 (0.059)	-0.033 (0.059)
Household income group	0.062*** (0.018)	0.061*** (0.017)
Employed	0.003 (0.075)	-0.016 (0.073)
Female	-0.051 (0.052)	0.005 (0.052)
Home owner	0.142** (0.059)	0.149** (0.058)
Constant	2.586*** (0.179)	2.120*** (0.186)
N	1,754	1,754
R^2	0.142	0.186

Robust standard errors reported in parenthesis. *indicates $p<0.10$; **indicates $p<0.05$; ***indicates $p<0.01$.

was employed to determine whether autocorrelation was present in each model. Tests for both models produced Durbin-Watson values of 1.68 and 1.66 in Model 1 and Model 2, respectively. Thus, it is reasonable to assert that autocorrelation was not an issue in this study. Both models also produced F-values that were statistically significant, therefore indicating that both models were useful in predicting one's perceptions of their overall quality of life.

Nonetheless, the first column of Table 3 presents the results of a model testing the impact of overall quality of city services provided on citizens' perceptions of their overall quality of life. The measure of government services is statistically significant and positively associated with overall quality of life. As such, this finding suggests that citizen satisfaction with city services in general increases citizen perceptions of their quality of life.

Furthermore, the controls for the number of children, household income, and home ownership were statistically significant and in the expected direction. Specifically, the coefficient for the variable for number of children in a respondent's home was statistically significant and negative, suggesting that a one unit increase in the number of children in a household leads to a decrease in a respondent's perception of their overall quality of life. In contrast, while the coefficient for household income was statistically significant, it was positively signed. This finding suggests that an increase one's household income also results in an increase in their perception of their overall quality of life. Similarly, the coefficient for home ownership was statistically significant and

positively signed, meaning that, on average, individual perceptions of their quality of life is greater when they own a home, relative to those that do not own a home.

Importantly, however, not all of the control variables in this model performed as expected. Age group was among the control variables that did not align with this study's theoretical expectations. In particular, age group was statistically significant, but, surprisingly, the coefficient was negative. Thus, this finding indicates that as one's age increases, their perception of their quality of life decreases. As noted, it was postulated that age would be positively associated with one's quality of life because older individuals have had more time to acquire wealth (Chebotareva, 2015). However upon further deliberation, it is possible that there are several factors that could contribute to this finding, such as more acute health conditions that tend to be correlated to age.

In addition, the dichotomous controls for being female and employed produced expectedly negative coefficients, but failed to reach traditional levels of statistical significance. Though the dichotomous control variable for being white produced an unexpected negatively signed coefficient, it too did not reach traditional levels of statistical significance. These results, therefore, suggests that such socioeconomic characteristics do not have a significant impact on one's perception of their quality of life. Nevertheless, while these findings are indeed interesting, further research is needed in order to determine if these results hold in similar contexts.

The model presented in the second column of Table 3, examines the effects of specific types of government services on the overall quality of life for citizens. With the

exception of health and safety services, each of the independent variables of interest was statistically significant and positively associated with the dependent variable. In particular, ethical administrative practices, waste services, cultural services, economic development services, and transportation services produced positively signed coefficients that reached traditional levels of statistical significance. Similar to the first model, then, these findings indicate that citizen satisfaction with these particular city services increases their perceptions of their quality of life.

In contrast and counter to this study's theoretical expectations, the covariate for health and safety services was statistically significant, but it was negatively signed. This finding implies that as one's satisfaction with these public services increases, their perception of their quality of life declines. At first blush, this finding is indeed surprising, yet it is plausible that this relationship is due to the unique nature of this set of services. Here, individuals typically associate these types of services with problematic circumstances, and as such, their use and quality level may signal a decline in community conditions. For example, as police presence increases in an area, this may suggest to residents that the crime rate in their community is also growing, regardless of whether they are actually correlated. As a consequence, they may feel that their quality of life is negatively affected due to safety concerns (Brown, 2003).

Furthermore, the controls in the second model that reached traditional levels of statistical significance performed exactly the same in directional terms as the controls in the first model. That is, the controls for age group and number of children were statistically significant and negatively signed, indicating that they predict a decrease in one's perception of their overall quality of life. Conversely, the positive coefficients for household income and homeownership reached traditional levels of statistical significance and show that these variables were positively associated with one's perception of their overall quality of life.

In the second model, however, the coefficients for the dichotomous controls for being white and employed were negatively signed, whereas the female control variable was positively signed. Although, once again, these variables failed to reach traditional levels of statistical significance, thus providing further evidence that these socioeconomic characteristics do not have a significant impact on one's perception of their quality of life.

Finally, the R^2 value in the first model indicates that 14.2% of the variability in citizen quality of life is explained by the covariates, after controlling for sample size and number of parameters. In the second model, however, the R^2 value shows that the explained variability increased by 4.4%, after controlling for sample size and number of parameters. While the explained variability in both models is arguably substantial, it is certainly likely that the unexplained variability is due to the large number of unobserved factors and omitted variables that might influence quality of life, such as job satisfaction and access to healthcare (Diener and Chan, 2011; Drobnic et al., 2010; Okulicz-Kozaryn and Golden, 2018).

DISCUSSION

The findings of this study demonstrate that public services matter, particularly in the local government context. In both models, all of the independent services variables of interest, with the exception of health and safety services, were statistically significant and possessed a positive relationship with citizen quality of life. However, as previously noted, the reason for the negatively signed health and safety services covariate may be due to a "consumption effect" in which individuals that have direct interaction with these types of services may be have had to utilized them out of necessity and in problematic circumstances, relative to the other services examined in this analysis (Brown, 2003). Still, further research especially focusing on this particular relationship is warranted before drawing definitive conclusions.

Nonetheless, these findings are especially important as public officials must justify government expenditures in an increasingly contentious and skeptical public sector. Citizens expect that their tax dollars will produce beneficial results in their communities. However, the benefits resulting from public expenditures are not always directly visible, and therefore it is important that these decisions are supported by empirical research.

Thus, this investigation of public services provided by the City of Austin provide further confirmation that certain public services are indeed positively associated with citizen quality of life. More specially, the results of this study show that while the overall quality of government services, taken together, have a positive impact on citizens' quality of life, an individual examination of each services explains a larger degree of variation in the dependent variable. This result holds substantial implications for policy-makers and public managers considering the implementation or improvement of public services, given the fiscal costs associated with doing so.

Although this study makes a substantial contribution to the current literature, it is, of course, not without limitations. Throughout this article, the research suggests an individualized investigation of local governments is necessary, given the variability that exists between jurisdictions. As such, the results of this study may not be generalizable to other municipalities. In addition, because the data utilized is cross-sectional, longitudinal analysis was not plausible, and therefore the potential for reverse causality exists. Finally, the potential for omitted variable bias exists given the vast number of socioeconomic factors that influence individuals' quality of life. Nevertheless, while it is important to acknowledge that

this study is not without limitations, it represents a further step in justifying public expenditures for public service provisions while simultaneously highlighting the need for individualized analyses of local governments and their respective services.

CONFLICT OF INTERESTS

The author has not declared any conflict of interests.

REFERENCES

Bovaird T, Loeffler (2012). From Engagement to Co-production: The Contribution of Users and Communities to Outcomes and Public Value. Voluntas: International Journal of Voluntary and Nonprofit Organizations 23(4):1119-1138.

Brown T (2003). Coercion versus Choice: Citizen Evaluations of Public Service Quality across Methods of Consumption. Public Administration Review 67(3):559-572.

Chandra PS, Satyanarayana VA (2010). Gender Disadvantage and Common Mental Disorders in Women. International Review of Psychiatry 22(5):513-524.

Chebotareva E (2015). Life Satisfaction and Intercultural Tolerance Interrelations in Different Cultures. European Journal of Social Sciences Education and Research 5(1):167–178.

Daly JL (2012). Human Resource Management in the Public Sector: Policies and Practices. M.E. Sharpe.

Diener E, Chan M (2011). Happy People Live Longer: Subjective Well-being Contributes to Health and Longevity. Applied Psychology: Health and Well-Being 3(1):1–43.

Diener E, Suh EM, Lucas RE, Smith HL (1999). Subjective Well-Being: Three Decades of Progress. Psychological Bulletin 125(2):276-302.

Drobnic S, Beham B, Prag P (2010). Good Job, Good Life? Working Conditions and Quality of Life in Europe. Social Indicators Research 99:205–225.

Flavin P, Pacek AC, Radcliff B (2011). State Intervention and Subjective Well-Being in Advanced Industrial Democracies. Politics and Policy 39(2):251-269.

Flavin P, Pacek AC, Radcliff B (2014). Assessing the Impact of the Size and Scope of Government on Human Well-Being. Social Forces 92(4):1241-1258.

Goldberg A, Leyden KM, Scotto TJ (2012). Untangling What Makes Cities Livable: Happiness in Five Cities. Urban Design and Planning 165(3):127-136.

Helliwell JF, Huang H (2008). How's Your Government? International Evidence Linking Good Government and Well-Being. British Journal of Political Science 38(4):595-619.

Helliwell JF (2006). Well-Being, Social Capital and Public Policy: What's New? The Economic Journal 116 (510):C34-C45.

Hogan MJ, Johnston H, Broome B, McMoreland C, Walsh J, Smale B, Duggan J, Andriessen J, Leyden KM, Domegan C, McHugh P (2015). Consulting with Citizens in the Design of Wellbeing Measures and Polices: Lessons from a Systems Science Application. Social Indicators Research 123:857-877.

Hogan MJ, Leyden KM, Conway R, Goldberg A, Walsh D, McKenna-Plumley PE (2016). Happiness and Health Across the Lifespan of Five Major Cities: The Impact of Place and Government Performance. Social Science and Medicine 162:168-176.

Jakubow A (2014). State Intervention and Life Satisfaction Reconsidered: The Role of Governance Quality and Resource Misallocation. Politics and Policy 42(1):3-36.

Kim S, Kim D (2012). Does Government Make People Happy?: Exploring New Research Directions for Government's Role in Happiness. Journal of Happiness Studies 13(5):875-899.

Krishnaji N (1980). Poverty and Family Size. Social Scientist 9(4):22-35.

Lane RE (1994). Quality of Life and Quality of Persons: A New Role for Government? Political Theory 22(2):219-252.

Leyden KM, Goldberg A, Michelbach P (2011). Understanding the Pursuit of Happiness in Ten Major Cities. Urban Affairs Review 47(6):861-888.

Liu H, Gao, H, Huang Q (2020). Better Government, Happier Residents? Quality of Government and Life Satisfaction in China. Social Indicators Research 147:971-990.

Michalos AC, Zumbo BD (1999). Public Services and the Quality of Life. Social Indicators Research 48(2)125-156.

Miller TI, Miller MA (1991). Standards of Excellence: U.S. Residents' Evaluations of Local Government Services. Public Administration Review 51(6):503-514.

Okulicz-Kozaryn A, Golden L (2018). Happiness is Flextime. Applied Research in Quality of Life 13(2):355–369.

Pacek A, Radcliff B (2008). Assessing the Welfare State: The Politics of Happiness. Perspectives on Politics 6(2):267-277.

Pacek A, Radcliff B, Brockway M (2019). Well-Being and the Democratic State: How the Public Sector Promotes Human Happiness. Social Indicators Research 143(3):1147-1159.

Porter M, Kramer M (2011). Creating Shared Value: How to Reinvent Capitalism and Unleash a Wave of Innovation and Growth. Harvard Business Review 89(2):2–17.

Raudenbush SW, Bryk AS (2002). Hierarchical Linear Models: Applications and Data Analysis Methods. California: Sage.

Scott D, Vitartas P (2008). The Role of Involvement and Attachment in Satisfaction with Local Government Services. International Journal of Public Sector Management 21(1):45-57.

Sirgy MJ, Rahtz DR, Cicic M, Underwood R (2000). A Method for Assessing Residents' Satisfaction with Community-Based Services: A Quality of Life Perspective. Social Indicators Research 49:279-316.

Sirgy MJ, Gao T, Young RF (2008). How Does Residents' Satisfaction with Community Services Influence Quality of Life (QOL) Outcomes? Applied Research in Quality of Life 3:81-105.

Uline C, Tschannen-Moran M (2007). The Walls Speak: The Interplay of Quality Facilities, School Climate, and Student Achievement. Journal of Educational Administration 46(1):55-73.

Whiteley P, Clarke HD, Sanders D, Stewart MC (2010). Government Performance and Life Satisfaction in Contemporary Britain. The Journal of Politics 72(3):733-746.

Related Journals:

International Journal of
Educational Administration and Policy Studies

International Journal of
English and Literature

Journal of Languages and Culture

Journal of
Fine and Studio Art

International Journal of
Library and Information Science

Journal of Media and Communication Studies

Philosophical Papers and Review

Journal of
African Studies and Development

Journal of
Music and Dance