

## Ghana's System of Local Government Administration As a Barrier to Collaborative Public Management

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**Abstract:** In view of the present economic atmosphere of inadequate resources, growing demands on services and numerous multifaceted social problems facing developing countries like Ghana, the need for various sectors to work in collaboration with each other has become more imperative. However, while there has been general acknowledgement of the significance in responding to these challenges through collaboration, evidence has shown that there is lack of collaboration amongst different sectors in Ghana. This paper examines the extent to which this collaborative deficit is attributed to the nature of local system of government in the country from the perspectives of actors in a rural district of Ahafo Ano South (AAS). It is a case study research with in-depth interviews carried out amongst 35 sectoral actors within the local government administration. The result showed that one major source of collaborative public management deficiency has been the system of local government administration in the country. The implication is that for government to succeed in its collaborative efforts in managing public services, the local system of administration must be re-examined.

**Keywords:** Collaboration; Public management; Decentralization; Intersectoral collaboration; Local government system; Ghana

**JEL Classifications:** H83, H11, H70, H79; P41

### 1. Introduction

For some time now, the need for intersectoral collaboration as a means to solve certain national thorny issues has been discussed extensively both at the national and international levels. This has been necessitated by the fact that considering the present economic climate of limited resources and the complexity of the social problems like poverty, high rates of morbidity and mortality associated with malaria, HIV/AIDS etc, in many countries like Ghana, it is almost impossible for various sectors to tackle these problems without the help of other sectors. This is reflected in the argument of Norris-Tirrell and Clay (2010:2) which says:

*“What in the past would have appeared as a straight forward administrative problem now more than not requires working with other programs, agencies, citizens, and multiple stakeholders across policy arenas”*

In effect, society these days has become so complicated that the officially controlled processes by the government are no more sufficient in dealing with most important public policy issues in isolation. Accordingly, collaboration has now been officially recognized as the most widespread element of all social problem-solving efforts with majority of the local agencies being asked to work across sectoral borders. Such collaborative public sector management, it is believed, can provide the guarantee of having the right to use more resources and sharing the risks connected with finding answers to our social miseries (Sandfort and Milward, 2007). In addition, with collaborative public management, experts are of the opinions that individuals would be able to pursue collective and self-interest goals in resolving complex societal problems which otherwise could not have been possible if they were to act alone (Hall, 2002)

In view of these important roles played by collaborative public management in dealing with some of the ‘wicked challenges’ like malaria, pollution, urban sanitation, just to mention a few, the Government of Ghana has undertaken policies and programmes which aim at ensuring intersceteral collaboration (MOH, 2004). Notwithstanding these collaborative efforts, available evidence has shown that there has been a real lack of intersectoral collaboration amongst the various public sector institutions that need to work as a team (Owusu et al. 2013).

Against this background, the aim of this paper is to investigate the extent to which Ghana’s system of local government administration has contributed to this lack of collaborative public management from the perceptions of the local authority actors at the rural district of Ahafo Ano South. In addressing this issue, the concept of collaborative public management including collaboration will, first, be explained. This will be followed by a discussion on the system of local government administration that has been operating in Ghana both the past and the present before the results of the case study is presented.

## **2. Literature Review**

### **2.1 The Concept of Collaborative Public Management**

Agranoff and McGuire (2003) use the term collaborative public management as a method of helping and managing multi-organizational arrangements to find answers to the problems which cannot effortlessly be solved by one organization alone. Collaboration in this context is a process through which actors, who, although consider certain problems differently, are able to explore their variations and look for answers that are productive and equally useful which might not otherwise have been found (Gray, 1989). In terms of policy issue, collaboration may involve the organization of cross-cutting issues in policy-making that go beyond the boundaries of established policy fields, which usually do not demand individual department’s traditional responsibilities (Meijers and Stead, 2004). The idea is that by engaging in collaborative efforts demonstrate that decision-making authority and task delegation are to be managed within the group with the results of these decisions and responsibilities reflecting the blending of participants’ contributions (Keast et al. 2004).

Collaborative public management can take place in various environments namely: vertical contexts through levels of government and horizontal contexts in which an array of public and private actors come together (Danaher, 2011). The significance of horizontal collaboration is that it

helps to bring effectively different resources, skill, and knowledge to work out multifaceted problems jointly whose solutions lay outside the capability of any single sector (Chomik, 2007). This implies that, horizontal collaboration has the possibility to build competence and take full advantage of the use of pooled resources.

On the other hand, Vertical collaboration occurs at different levels. First, it usually includes collaboration between different levels of government which are the central, provincial or municipal. Secondly, collaboration is related to geography that relates to local, regional or provincial. The third one has its association within organizations which is from senior administrative levels to the level of service/programme provision; (Danaher, 2011; 6). Vertical collaboration often becomes necessary when a certain issue involves both governmental and non-governmental actors as well as general stable policy and sustained resources are required (Frankish et al, 2007).

On the basis of these typologies, it is possible to have public managers engaged in the different operations of either managing upward, or downward, and or outward in the direction of the networked setting (O'Toole, Meier, and Nicholson-Crotty 2005). It is therefore usually difficult to know where the border line can be drawn between these different contexts since in certain situations management can take place in highly formalized and lasting arrangements, where either collaboration is supported and or approved by law (Schneider et al. 2003).

However, within the context of this study, horizontal collaboration will be the key research area as the authors interest lies in understanding the actors that are engaged in collaborative efforts at the local level. Besides, it has been suggested that the greatest potential for sectors to come together is at the community level and it is at this level that sectoral barriers can be broken down (Kreisel and von Schirnding, 1998).

## **2.2 The System of Local Government Administration in Ghana**

In Ghana, the history of decentralization can be traced back in the post-independence era with deconcentration as the main feature as the successive governments from President Nkrumah onwards, both civilian and military, sought to strengthen their control through the presence of central government ministries and officials at local level (Nkrumah 2000: 57). However, times were changing and within the last three decades this authoritarian state was found to be in disagreement with the values related to democracy, including equality, participation, and individuality (Vigoda, 2002). Accordingly, since the contemporary period of the Fourth Republic, overseen by the 1992 Constitution, there has been a step towards more democratic decentralization.

Indeed, it is fair to say that the nature of the administration in Ghana is reflected in the three main types of decentralization inherent in an analytical framework developed by Rondinelli (1981). These which include: deconcentration, delegation, and devolution. *Deconcentration* involves the transfer of tasks and/or resources to the regional or local field offices of the central government agency in question. With this kind of decentralization, authority stays inside the same institution, for instance, ministry of health, but power is "spread out" to the territorially decentralized instances of this institution. In respect to *delegation*, the authority, functions, and/or resources are transferred to a self-governing private, semi-public, or public institution that will be charged with the responsibility of undertaking a number of functions or programmes dictated by the national government usually by means of contracting. Finally, in the case of *devolution*, the sectoral functions and resources are often handed over to independent governments at the district level. This local authority then takes over the tasks for providing and delivering service, management and finance (Bossert et al., 2000)

However, although, it is possible to argue that all the three types of decentralization are evident in Ghana today, in reality, ever since its first attempts at decentralization, the country has swung between two diverse typologies of decentralization: delegation and devolution (Bossert et al. 2000) For example, in the case of health sector, the country employs features of delegation of operational authority from Ministry of Health (MOH) to Ghana Health Service (GHS) and the deconcentration of GHS toward district level offices. Even at the local level, the various sectors function in de-concentrated forms in view of the fact that they still receive priority-setting directives from their superiors at the national and regional levels. Also, programmes and projects are still executed according to what is directly planned and dictated to by those at the national offices (Bossert and Beauvais, 2002).

In terms of finance, local governments do not have the capacity to be financially independent to be able to finance the decentralized services through their own resources. The local administrative machineries keep on getting funding from the central government and for that matter, their national agencies. It is stated that the intergovernmental transfers from the central government usually accounts for more than two thirds of local revenues (Crawford, 2004). Thus, in almost all circumstances, actors at the local level are, to a great extent, reliant on central transfers for income creating loss of what Oyugi, (2000:13) calls 'operational autonomy'. Besides, with restricted revenue raising capability by the local authorities the discretion of the local authorities over the use of the district assembly common fund which is given to them for developmental purposes is also limited as they have to use it according to the directives of the central government. This implies that whilst the regional and district bureaucrats have certain amount of freedom in budgeting, they are still supervised by an instrument of performance contracting amongst hierarchically organized budget management centres (Bossert and Beauvais, 2002).

From the above, it can be said that in contemporary Ghana, although the authority are interested in decentralization, there are certain inherent features which may not guarantee any collaborative public management. However, the extent to which such features reveal themselves in reality is what this study seeks to achieve. This paper therefore helps in revealing to us about whether administrative system of decentralization in Ghana has been a barrier to collaborative public management in the service delivery at the local level. Consequently, this study contributes to the debate on the recent state of new managerialism in public administration. It also helps to explain why and how Ghana's system of local administration can be a source of a problem in the country's attempt to have modern public management practices like intersectoral collaboration.

The paper focuses on governance because it is the basis to the proper working of partnership. Also, governance has a huge potential impact on achieving the collaborative advantage since it has the greatest effect on the degree to which partnership accomplish synergy (i.e., the power to combine the perspectives, resource and skills of group of people and organizations) ( Lasker & Committee on Medicine and Public Health, 1997). Thus, in spite of the fact that collaboration can occur in particular settings in which government may not be the most important actor or is not an actor at all (Austin 2000), in the context of Ghana, this paper considers government as the main policy- maker and executioner. As a result, it is the body through which collaborative public management activity can be channeled and thus can be made possible. Secondly, it has been noted that although collaboration often depends on various leaders undertaking a number of tasks at different times, in the typical context of collaborative public management, ultimately it is the government who is held responsible for the provision of public goods and services. Therefore, while public managers cannot always be in charge of all activities, they are nonetheless accountable to the collaborative activities that are carried out within their milieu (McGuire 2002).

### **3. Methods**

The issue that this paper is set out to address was investigated through a qualitative study. With the use of qualitative method, in-depth interviews were conducted amongst key informants on the subject and this helped us to have enough data that could enhance our understanding of the problem. In addition to interviews, there was also a systematic review of documentary materials on the issue.

The study population comprised mainly public sector workers and the elected community members at the district level of Ahafo Ano South (AAS). The selected population size was 35 individuals.

#### **3.1 The Study Area**

The selected remote and rural district was Ahafo Ano South (AAS) which was amongst the 138 districts but one of the newly created districts in Ghana. The study region was the Ashanti, which is one of the ten regions in the Republic of Ghana. It is worth mentioning that the choice of Ashanti region was for practical purpose. In fact, while all the regions in Ghana were malaria endemic regions and therefore any of them could have been chosen, the selection of Ashanti was based on the following reasons. Firstly, it was based on practical considerations, such as availability of background information, familiarity with the local language, an available research network. Secondly, the opportunities for cooperation from the policy actors and the communities were relatively far more certain than the rest of the regions.

#### **3.2 Ethics Approval**

Ethics approval to conduct this research study was granted by the Human Research Ethics Committee of the University of Southampton. The study was explained to all the participants verbally in English language. Consent forms to participate were also given to participants and they were all assured of confidentiality.

#### **3.3 Analysis**

In analysing, all the interviews that were audio-taped were first transcribed from the local language (Ashanti) to English. In doing this care was taken to ensure that the original meaning of the dialogue that took place has been maintained (Yin, 1994). Three main guiding principles were considered in line with other qualitative research enquiries before the originality was kept. In the first place, the whole interviews were read through so that the themes that were common could be identified. Secondly, each sentence was examined with the view of knowing the central idea behind the sentence. Implicitly, were some statements that could be comprehended simply in the Ghanaian local circumstances, and thus require the researcher to deduce the meaning of them. The deduction was done by asking for the local explanations of certain concepts, which also helped in controlling my subjectivity during this creation process. Finally, all those concepts that were similar were put together to form categories which were more precise and can be generalised. On the whole, two major categories were recognised, namely the local public sector officials' perspectives, and the elected community members' perspectives on the extent to which the local system of administration has become a barrier to collaborative public management

### **4. Study Results**

From the results of the interviews corroborated by the documentary materials, it was found that although for the past three decades significant progress has been made in integrating the various sectors, much still needs to be done in the area of collaboration amongst sectors. From the

informants' view, politics and political power inherent in the administrative system in the country play a major part in restricting the collaborative efforts in the public sector management. Our interviewees argued that due to the system of administration in the country the collaboration amongst the various sectors is limited. From the perspectives of our interviewees the structure in the public sector is such that collaborative efforts are often thwarted by their superior leaders at the regional and national levels who are the real policy-makers. The expression of these views have been examined from both public sector management officials' and community leaders' perspectives.

#### **4.1 Public Sector Management Officials' Perspectives**

In simple terms, the officials largely agreed that the major factor that had contributed to this intersectoral deficiency had been the deconcentration and delegation types of decentralization in the country. For a greater number of those interviewed, (86%) had the conviction that although there is a decentralization, the power relationship between the central and the local authorities has undermined any collaborative efforts the local actors could achieve. It was argued that rather than having enough powers to decide on issues affecting the communities, the lower authorities in the various sectors have to work within prescribed guidelines. This has made the local public managers incapable of working outside the framework that has been created by those at the higher authority within the same sector. For example, one senior health official expressed that:

*"... the various districts departments and agencies are both organizationally and financially independent from each other since we are under different powers. So in carrying out certain activities, we cannot plan with others if it is not part of our guidelines".*

One senior administrator also said:

*"In times of crisis we make sure what is needed is done even if it means planning together but the individual heads of the sectors are not under any obligation to adjust their own activities to suit the interests of other sectors"*

The above arguments imply that there is no actual collaboration amongst the sectors since these sectors do not jointly plan and therefore cannot modify delivery of service based on mutual consent which is a prerequisite for real collaboration (Brown et al. 2004). Consequently, there is little or no resource interdependency which minimizes each sector's accessibility to different resources that can make contribution to the sharing of social support, facilities and personnel (Huxham and Vangen, 2000). Thus, instead of having the type and approach of decentralization which should help the local authority sectors to have powers to make decisions on issues that will help them to work as partners and consequently integrate activities, there is a deconcentration approach which gives more powers to the bodies at the national level. Such powers of central bureaucracies more often than not put ceilings on local powers' decisions on many issues which give no room for flexibility in decision making.

In addition, some interviewees (66%) also expressed their views that the existence of deconcentration type of decentralization has made the system of administration too bureaucratic and the central government departments often scrutinises all administrative and financial local government activities. While this may ensure better administrative discipline, according to one administrator, such tight supervision *"negates the whole purpose of having bottom-up approach in dealing with common local challenges"*.

In essence, there is low level of interaction and the commitment to each other in solving local problem is not only weak but also not mandatory. For some of these officers, having such close official relationship with those at the higher levels means having the system as the old politics of centralized system with local authorities still depending on the powers of the national government. The interviewed officers accepted that although they were not proud of this lack of team work at the local level, there was nothing they could do as a senior officer tactfully said:

*“Our hands are tied and we need to obey our superiors”.*

One senior agriculture officer also admitted that:

*“... we always talk about integration of activities but we local officials are only ‘messengers’; and neither we agric officers nor the health sector officers have any power to effectively implement it because we have not the means to do so”*

These arguments can be more appreciating if we consider the fact that in order to work as partners the local authority should have a facilitator, employed by the local authority who has the leadership skills, interpersonal relationships and the vision “to transform individual interests into a dynamic collective force that achieves targeted outcomes” ( Foster-Fishman et al., 2001, 253). However, this is what the local authority lacks and has no power to make an independent decision to have such a facilitator. This is because according to Nkrumah, (2000) any recruitment into the service of the District Assembly has to be done either by the national civil society or decided by the appropriate national government body. This argument reflects what Bossert and Beauvais (2002; 16) call ‘decision space’, which symbolically represented the amount of discretion the local sectors like the health authority has in making a decision. Implicitly, the kind of room provided by the higher powers to the local bodies to operate independently is not large enough for them to decide on what they need to do. This is especially so when it comes to working in collaboration with other sectors on same levels since they have not the resources from above and at the same time they are not constitutionally mandated to do so.

In addition, it was also revealed that lack of collaborative public sector management at the local level could be attributed to the continuous vertical integration of the various sectors at the lower (district) level with those at the higher level. Based on the views expressed by most interviewees, (83%) the continuous vertical integration of some sectors like health has brought about central bureaucratic powers with significant effect on planning, funding, and regulation. According to one education officer, there was no way they could have more integrated activities at the local level since the level of association amongst the sectors at the district level (horizontal) is weaker than that ones they have with those at the regional and national levels (vertical). The officer expressed his conviction by saying *“So I believe the current rhetoric of collaboration of sectors has been made more difficult because of this issue of local-national sectors’ linkage”*

Just like the education officer, one local development planner epitomizes this issue by saying:

*“...The existence of vertical loyalty often seems to create ‘disunity’ amongst we those at the local levels and a sense of disloyalty to our community which do not also augur well for collaborative management of the challenges facing us here in our district”*

The implication is that the myriad of bureaucratic issues associated with deconcentration type of decentralization coupled with continuous existence of vertical integration have made the powers of the local authority to be too weak to ensure collaborated activities amongst the sectors. This has consequently given rise to lack of proper relations amongst them in terms of their functions as public service providers. This revelation corroborates with the findings of Ayee (2000) who sees a

key characteristic of local governance in Ghana as a dual hierarchical structure in which central and local government institutions “operated in parallel” (p. 49), but with infringement usually by the national government on the roles and responsibilities of under-resourced local government due to the abundance of resources it has.

#### **4.2 Elected Community Members’ Perspectives**

From the views of the local elected members like the Assemblymen/women, it was also revealed that there has little or no collaboration amongst public sector management at the district. The argument made by the elected members implied that the system of decentralization adopted by the central government has often led to, in the words of Skidmore et al. (2006:42) “*Self-exclusion*” by the very community members that the local authority has to serve. This was reflected in what one local chief said:

*‘they always make us believe that we are solving the local problems together but in reality it is the case. Often the local officers may seek for our endorsement of their plans but never either involved us or even implement our ideas just because their superiors at the higher levels do not accept our suggestions. This kills our enthusiasm to work in partnership with them’.*

The above quotation suggests that while community members may be willing to cooperate and collaborate in finding solutions to local problems, frequently they find themselves excluded as their ideas do not count in the local management process. Ultimately they have no incentive to work collaboratively with the local officials and consequently may decide to exclude themselves from taking part in any activity that has the potential to enhance their local development. The underlying cause for lack of teamwork between the community and the local public officials, from the point of view of the community, could be attributed to the apparent rejection of the ideas of the community members by the *superiors* of the local officials at the higher levels. This is in contrast with the literature which suggests more people would be motivated to participate in local activities through the implementation of decentralization policy. For instance, Egbenya, (2010:16) argues that “*under appropriate conditions, all of these forms of decentralization can play important roles in broadening participation in political, economic and social activities*”.

However, based on the views expressed here, such an idea cannot be true at all times. Indeed, in terms of collaborative public management, it can be said that whether decentralization would encourage participation or not would depend on the type and approach that would be adopted by the country. The system in Ghana, according to the elected members, actually does not breed any incentive for community participation and neither for collaboration, rather, as argued by one assemblywoman “*it tends to create a distance between ‘us’ and ‘them’*” She further buttressed her points by saying that although the drive of Ghana’s decentralization policy as defined by Act 462 is a devolution,” *the reality is that such a system hardly exist*”. The elected community member gave an example by saying that while powers is said to have been handed over to those at the local level by the central administrative authority, in dealing with local issues, the central government has a bigger role to play. She pointed out that although the local authority has the majority of 70% elected personnel with the central government appointing the rest of 30% yet

*“this one-third appointed ones are more powerful than we the elected majority. Often they are here to serve the authority that appointed them, (the central government). I don’t think I begrudge the local departmental managers when they decide to be loyal to their superiors above them and to work more closely with them instead of those at the local level including the community members”*



Another assemblyman also asserted that the problems at the local level are many and therefore need to be addressed in consultation with each other, not much of collaborative activities are taking place. He accepted that although, periodically, the local sectoral managers would work together, *“this has often been short-lived since there is no conscious efforts by the central government to sustain such collaborative effort”*

The views expressed above on the nature of decentralization in Ghana is in line with what the Manor, (1999) says on deconcentration type of decentralization which is only a dispersal of agents of higher levels of government into lower level arenas. In fact, according to Manor (1999) deconcentration only preserves the hierarchical relationship between field staff and the central government and irrespective of the way it takes place, deconcentration only

*“enables central authority to penetrate more effectively into those arenas without increasing the influence of organized interests at those levels. The central government is not giving up any authority. It is simply relocating its officers at different levels or points in the national territory. In such circumstances, it tends in practice to constitute centralization, since it enhances the leverage of those at the apex of the system”*  
(Manor, 1999, 5:6)

In a nutshell, it can be said that, the various opinions expressed above so far imply that there has been too much governmental interference into local administration and yet not much effort has been made to sustain the little collaborative management at the local level. Consequently, there has been less responsiveness from the community members due to the local public officials putting up the central governmental needs over that of theirs. Thus, while the local administrative management can come together occasionally to make decisions, there are circumstances where this collaborative atmosphere generates difficulties with the involvement of competing or conflicting interests of the public sector officials. Consequently, there has been little or no structural cohesion at the horizontal level thereby reducing the presence of collaboration among the various stakeholders. This indicates that the various ways that can be considered as useful in dealing with many of current needs of the society over and above anything that all the other sectors can ever be able to achieve on their own are effectively missing.

## **5. Discussion**

This study has examined Ghana’s system of local government administration as a source of collaborative public management deficiency. With the qualitative method, the findings so far indicate that majority of the interviewees perceived that the idea of collaborative management at the local level has been lacking. The informants argued that the current system of Ghana’s system of local government administration has been a major contributing factor explaining the deficiency in the intersectoral collaboration in most programme activities. This finding validates what Agyepong (1999) found in his study where health staffs at the district level still tend to see themselves and their tasks by division rather than as a team causing problems of coordination of activities. According to Agyepong (1999), the fundamental problem of lack of horizontal accountability is caused by the influence of the centralised old structural relations and hierarchical culture of the health ministry.

The study’s finding also confirms the typology that Bossert and Beauvais, (2002: 24) describes as *‘decentralized centralism’* which demonstrates that although there has been a decentralization, the sector departments are still organised hierarchically making it more centralized. This makes

each sector to have its own source of power and this has been a barrier to the development of intersectoral collaboration and hence to community participation. According to Bossert and Beauvais, (2002), the local health decision makers' dependence on the central powers, for instance, has prevented them from getting the communities they serve more involved in their activities. In that situation, Barnes et al. (2001: 381) argue that *"the rules of engagement are imported from less inclusive settings and the substance of participation is dominated by bureaucratic rules and procedures."*

Thus, it could be argued that collaboration amongst sectors in Ghana which aims at helping the communities to (re)define and to shape their own destiny from their own development discourse as advocated by Hickey & Mohan, (2004) has been hampered by the presence of a decentralised administrative system of deconcentration and delegation. Implicitly, while the sectoral managers accept the fact that collaborative management is a good way of solving local problems, in practice the level of bureaucracy is too much as local public officials are not groomed to addressing public issues besides bureaucratic means.

Another interesting aspect of this study is that the result of lack of collaborative management at the local level further corroborates a comparative quantitative study by Chilaka (2005) on the programme of the Roll Back Malaria (RBM) initiative which covered study period 1998–2001 in countries such as Ghana, Burkina Faso, Nigeria, Tanzania and Uganda. From this study, it was noted that although community participation was present, there were discrepancies in the extent of participation in these different countries. For example, when it comes to the involvement of local communities, NGOs and civil society organisations, as well as the private sector, Ghana was among the countries with the lowest scores (1.5). Compared with Uganda which was the country with the highest level of community organisation, Ghana was two times lower than Uganda (1.5 and 3 respectively). Furthermore, in terms of needs assessment, Ghana was again found to be lagging behind Uganda (2 and 2.5 respectively). In essence, collaboration between various sectors and communities in Ghana has been weak compared with Uganda that has the structures that are more likely to strengthen the level of collaboration amongst sectors when it comes to malaria control activities.

In general, it can be said that the kind of decentralization that has been adopted reflects the tradition of centralism within Ghana and this has made the local government to be seen as an arm of the central government rather than an autonomous body that can decide on its own plans. This confirms the assertion that politics and political power play a key role in furthering or limiting collaborative success as structure in public sector collaborations is usually decided by policy makers or funders rather than resolving by those in the collaboration (Hall, 2002; Huxham and Vangen, 2000).

The finding of this study is significant in the sense that by examining the system of administration in Ghana in the context of horizontal collaborative management at the local level seems to challenge the spirit of bureaucracy in our administrative practices. It has to be noted that the perfect type of bureaucracy, as set out by Max Weber, has evidently defined the features of organizations that have continued to be significant over many decades now. Although public institutions have gone through a lot of changes in the last century, they are still based on the Weberian legacy of apparent hierarchical order, concentration of power among senior officials, official structures with stringent rules and regulations, restricted means of contact, restrained openness to new ideas and change, and nonconformity (Golembiewski and Vigoda, 2000). These ideas are in contrast with the ideas of collaboration, which demands

*“negotiation, participation, cooperation, free and unlimited flow of information, innovation, agreements based on compromises and mutual understanding, and a more equitable distribution and redistribution of power and resources”* (Vigoda-Gadot, 2004:78).

Thus, it may seem strange to ask for genuine collaboration between those in power and those who delegate power. Nonetheless, in many ways, considering the fact that some public problems, such as pollution, child poverty, HIV/AIDS, just to mention a few, transcend the expertise and capabilities of any one organization, there is the need for public sectors to work collaboratively with one another. In so doing, sectors will be able to pool resources and expertise across organizational boundaries together and they will see themselves as partners rather than as individuals. In effect this paper tries to draw the attention of the policy makers and other interested stake holders in Ghana's administrative systems to one of the limitations of our local administrative reforms.

## **6. Conclusion**

From the perspectives of the district level public management actors, this article has considered how Ghana's local administrative system has become a barrier to collaborative public management at the Ahafo Ano South district in Ghana. The findings showed that despite the fact that intersectoral collaboration which is the key feature of collaborative public management has been seen to be beneficial in solving complex local problems the system of local administration in Ghana has hampered the collaborative efforts of the various local sectoral actors. According to the informants the system of decentralization in Ghana has mostly been characterised by deconcentration and delegation. Consequently, the various local departmental/sectoral heads have been more under the influence of their superiors when it comes to taking decisions. This situation has been worsened by the continuous existence of vertical integration which has also made it difficult for the sectoral managers at the local levels to jointly work with their counterparts in the district.

In the context of the current government's commitment in promoting intersectoral collaboration, the study finding brings to light the weakness of the administrative reforms that have taken place in Ghana over the last two decades. Indeed, the finding also raises concerns over the effectiveness of the intersectoral collaboration policy strategy which the central government intends to use to solve complex problems like malaria by boosting community participation. However, it is worth arguing that the decentralised system of administration like deconcentration and delegation which have been well-established practices in Ghana do not change quickly even if collaboration is perceived as a new and better way of working. Thus, resistance to change should be seen as an evitable well-recognized organizational response and as such those leading collaborative efforts must deal with the fundamental reasons why various actors in the public sector management, for that matter, all agencies are still finding it difficult to give up their powers and allow effective collaborative public management to take place at the local levels in Ghana.

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