THE QUALITY OF GOVERNMENT INSTITUTE

UNIVERSITY OF GOTHENBURG

Who gains access to public services?

Social Bargaining, Corruption and Street-level Service Provision

2023

Working paper series 2023:2

Monika Bauhr
Ruth Carlitz
Lucia Kovacikova

THE QUALITY OF GOVERNMENT INSTITUTE

GÖTEBORGS UNIVERSITET

Who gains access to public services?

Social Bargaining, Corruption and Street-level Service Provision

Monika Bauhr

Ruth Carlitz

Lucia Kovacikova

WORKING PAPER SERIES 2023:2

QoG THE QUALITY OF GOVERNMENT INSTITUTE
Department of Political Science
University of Gothenburg
Box 711, SE 405 30 GÖTEBORG
February 2023
ISSN 1653-8919

Who gains access to public services? Social Bargaining, Corruption and Street-level Service Provision
Monika Bauhr
Ruth Carlitz
Lucia Kovacikova
QoG Working Paper Series 2023:2
February 2023
ISSN 1653-8919

Abstract

Despite massive global investments in public services, sizeable discrepancies remain in terms of people's needs being met once they are in contact with service providers — what we term *effective access*. This study investigates the sources of such discrepancies and highlights the importance of social bargaining — where citizen leverage their connections with street-level service providers. Survey data from 34 African countries shows citizens with greater social bargaining capacity enjoy greater effective access to public services, in contrast to citizens that have to resort to paying bribes. We further demonstrate the importance of social bargaining using unique learning assessment data from 70,000 households in Tanzania. Parents with greater social bargaining capacity are more likely to be given opportunities to interact with school officials and are also more likely to take advantage of those opportunities. Moreover, the children of such parents are significantly more likely to achieve relevant and effective learning outcomes.

Monika Bauhr
The Quality of Government Institute
Department of Political Science
University of Gothenburg
Monika.bauhr@pol.gu.se

Ruth Carlitz
University of Amsterdam
r.d.carlitz@uva.nl

Lucia Kovacikova
Tulane University
lkovacik@tulane.edu

1. Introduction

The Sustainable Development Goals (SDGs) have dramatically increased investments in public service infrastructure throughout the developing world. For instance, the amount of money that OECD donors allocate annually to 'Social Infrastructure & Services' doubled between 2000 and 2008 and has been sustained at levels of over 40 billion USD per year since then. The education and health sectors have seen particularly dramatic increases, especially in sub-Saharan Africa, where aid to social infrastructure and services grew from 6.8 billion USD in 2005 to 13.8 billion USD in 2019.[1] At the same time, however, many countries in sub-Saharan Africa are not on track to meet a number of SDGs by the 2030 deadline. Studies increasingly point to the fact that physical access or proximity to public services far from guarantees that citizens' needs will be met (Cleland, Harbison and Shah, 2014). Even if children are enrolled in school, there is increasing evidence that they are not necessarily attaining the "relevant and effective learning outcomes" set by the education SDG targets (Pritchett and Sandefur, 2020; Spaull and Taylor, 2015). Similarly, being able to reach a public health clinic is no guarantee of quality care (O'Donnell, 2007; Peters et al., 2008).

This study investigates the sources of these discrepancies and argues that effective access to public services is in part a function of citizens' abilities to engage in 'social bargaining' with street-level service providers, such as teachers and doctors. Social bargaining allows citizens to leverage ethnic and partisan ties as well as their access to information about rights and duties to gain effective access to public services. This stands in contrast to economic bargaining, where citizens use short-term economic transactions, informal payments, and bribes to influence service providers. The relative importance of social bargaining can be understood in light of the oftentimes extortive nature of street-level bribe paying, with limited pretense of reciprocity. Social bargaining on the other hand allows for long-term ties and reciprocity between citizens and service providers.

To investigate how social bargaining relates to citizens' effective access to public services, we turn to sub-Saharan Africa, home to some of the greatest disconnects between physical and effective access to basic public services (Pritchett and Sandefur, 2020). The region has also been the site of major decentralization reforms in recent years (Dickovick and Wunsch, 2014). As a result, an increasing number of public services are subject to the discretion of street-level bureaucrats. Using Afrobarometer surveys from 34 countries we first show that physical access does not guarantee effective access. We then show that citizens that are more highly educated, those with better access to information, and those that express support for the ruling party are more likely to report that their needs are being met once in contact with a service provider, while those that pay a bribe are less likely to report effective access. We interpret this as evidence that social bargaining facilitates effective access.

In order to better understand the relationship between social bargaining and effective access, we turn to a learning assessment covering nearly 70,000 households in Tanzania (the *Uwezo* initiative). The Uwezo data includes information on opportunities for parental involvement in school decision-making. Our analysis of the Uwezo data shows that parents with greater social bargaining capacity are more likely to have opportunities to interact with school officials and are also more likely to take advantage of those opportunities. Moreover, the children of such parents are significantly more likely to score higher on Math, English, and Swahili learning assessments. These findings point to the importance of social bargaining for effective access and the ultimate achievement of development goals.

We seek to make several interrelated contributions to the literature on distributive politics, democratic representation, and pro-poor service delivery. Despite increased attention to the politics of public service delivery in the developing world, fewer comparative studies have addressed the constraints that citizens face once in contact with service providers. The distributive politics literature has focused on politicians' incentives to target goods and services to particular groups and communities, based on ethnic or other ties, and the extent to which citizens reward such targeting at election time (Golden and Min, 2013; Lieberman, 2018). Electoral demands for accountability or retrospective voting may however be muddled by citizens' interactions with street-level bureaucrats, who play an important role

[1] Data from https://stats.oecd.org/.

in determining the ultimate quality of services received, i.e., effective access. Hence, it is important to go beyond studying the physical distribution of government goods and services – the focus of the distributive politics literature to date – and directly investigate what determines whether the purported beneficiaries of such goods and services are actually able to take advantage of them.

Second, comparing social bargaining with economic bargaining allows us to gain important insights into the sources of preferential treatment in public service provision. Despite a large literature on the role of clientelist ties and corruption, fewer studies seek to explicitly compare the relative importance of these forms of bargaining for access to public services. Our study points to the precedence of social interactions over economic transactions in securing effective access. In other words, "network insiders" (Bauhr and Charron, 2018; Chang and Kerr, 2016) who are able to both gain access to first-hand interactions with service providers and leverage these connections, tend to be more likely to gain effective access than those that have to resort to bribe paying. We therefore contend that corruption is not only socially inefficient at the aggregate or societal level, but also oftentimes for those individuals that engage in it (Bauhr 2017). Thus, while a key motivation for paying a bribe to a public service provider is to gain access to public services – effectively at the expense of those that cannot afford such bribes – our study suggests that economic bargaining remains inefficient. Paying bribes thereby disproportionately taxes the poor not only since they are less likely to be able to pay them (Mamdani and Bangser, 2004; Chetwynd, Chetwynd and Spector, 2003; Gupta, Davoodi and Alonso-Terme, 2002; Peiffer and Rose, 2018), but also since doing so far from guarantees effective access.

2. Explaining variation in citizens' access to public services

Comparative literature on the politics of service delivery has to date focused primarily on physical access – examining outcomes such as school enrollment, road construction, and access to clean water. A number of studies have also looked at the inputs required to promote physical access – focusing on education or health spending, and to a more limited extent, the allocation of teachers and provision of other inputs such as latrines or desks. In a recent review, Lieberman (2018) suggests that factors such as regime type, decentralization, and ethnic heterogeneity explain much of the variation in (physical) access to services within and between countries.

Lieberman (2018) suggests that democracies spend more on average on public goods provision than their autocratic counterparts. Furthermore, the organization of the state, such as the level of decentralization, may matter for citizens' physical access to public services depending on local officials' capacity to provide such services. Finally, ethnic heterogeneity can undermine public service delivery, which can partly be explained by the tendency of ethnic groups or parties to target public services to their co-ethnics and supporters (Golden and Min, 2013), but also because socially and politically salient ethnic fractionalization may make it more difficult for groups to collaborate around service provision.

Researchers have also demonstrated the importance of geography in explaining variation in physical access to public services. Studies in a number of different countries suggest that transportation costs and long travel distances can explain limited uptake, especially among the poor (Lohela, Campbell and Gabrysch, 2012; Noor et al., 2006; Blanford et al., 2012; Kadobera et al., 2012; Tanser, Gijsbertsen and Herbst, 2006). Furthermore, a growing literature builds on the urban bias thesis (Lipton and Lipton, 1977; Bates, 2014; Eastwood and Lipton, N.d.) to suggest that basic public services are less accessible in rural areas, where many poor people live (Jones and Corbridge, 2010). Using data from 17 African countries, Brinkerhoff, Wetterberg and Wibbels (2018) show that access to services and service satisfaction suffer from a spatial gradient.

Understanding disparities in physical access to services is important but cannot fully explain disparities in *effective* access. This is particularly salient in the education sector, which has seen dramatic increases in enrollment in recent decades.[2] However, scholars and practitioners have increasingly been

[2] Since 1990 the international development has committed itself towards 'Education for All' (EFA) (Torres, 1999). These commitments were subsequently enshrined in goals related to primary school completion and learning at the World Education Forum in Dakar in 2000

sounding the alarm about the growing disconnect between physical access to schools and the actual learning that takes place in these buildings.[3] There are parallels in other key service sectors including health and water provision. As Peters et al. (2008) note, geographic accessibility is only one piece of the puzzle when it comes to benefiting from health services in low- and middle-income countries. Looking at access to contraceptives, Cleland, Harbison and Shah (2014) note that "physical proximity is only one component of access and is probably not the most important one" (p. 116). Similarly, despite massive investments in water supply infrastructure in Africa, a considerable proportion of the continent's population still does not regularly have clean water readily available.[4] Hence, studies focused on the allocation of water infrastructure (physical access) will miss the mark if we want to understand what determines effective access to clean water (Carlitz, 2019).

Studies seeking to explain the large discrepancy between physical and effective access to public services point to the important role of street-level service providers. Following decentralization reforms in nearly every country in the world (Faguet, 2014), the bulk of service delivery in many countries is carried out at the street level. The degree to which citizens can effectively access public services is therefore oftentimes a function of their interaction with street-level bureaucrats (SLBs), the "health professionals, social workers and police officers... responsible for delivering services through daily interactions with citizens" (Lipsky, 2010). Critically, SLBs often work in situations characterized by a lack of resources, considerable workload, unpredictability, and a significant degree of ambiguity (Lipsky, 2010; Brodkin, 2012). Thus, SLBs frequently have considerable discretion when it comes to policy implementation and are often considered to "make policy" at the street level on a daily basis (Hupe and Hill, 2007).

Ultimately, effective access to public services is at least partly contingent upon citizens' opportunities and ability to negotiate or bargain for access to scarce public services with street-level service providers. Thus, while effective access can be restricted due to limited hours, long waiting times, absentee health workers, drug stockouts at public clinics (Peters et al., 2008), or misdiagnosis (O'Donnell, 2007), studies point to the importance of street-level discretion and the difficulty of monitoring and controlling the behavior of public sector employees (Filmer, Hammer and Pritchett, 2002). This speaks to the challenge that street-level discretion can pose for effective access to public services.

Theories on the exercise of public power argue for the importance of both impartiality and professionalism in the delivery of public services (Rothstein and Teorell, 2008). Normatively, street-level bureaucrats are expected to act impartially and professionally, while still "differentiat[ing] their actions according to the specific needs of each and every case" (Rothstein and Varraich, 2017, 121). Hence, street-level discretion can facilitate need-based targeting, and avoid "old-style Weberian rigid rule following, personal detachment and lack of creativity and flexibility" (Rothstein and Teorell, 2008, 178) on the part of public service providers. Discretion can allow service providers to attend to citizens with empathy and concern and adapt to citizens' differing needs for attention and support. However, discretion also gives local officials leeway to "make policy" in ways that contradict formal policy directives or go against their agencies' stated goals (Lipsky, 2010). Street-level discretion is thus frequently blamed for the gaps between policy and implementation that characterize service delivery throughout the Global South (Gofen, 2014; Brinkerhoff, 1996; Ridde, 2008). Also, street-level discretion makes the nature of street-level interactions between service seekers and service providers important for citizens' opportunities to gain effective access to public services, and in particular citizens' capacity and opportunities to bargain for their access to scarce public services.

(Verspoor, 2008) as well as in the Millennium Development Goals launched the same year. As a result, primary enrollments increased dramatically worldwide, particularly in sub-Saharan Africa. Whereas gross enrollment in the region stood at 82.1 percent in 2000, lower than any other world region, it had climbed to over 99 percent just 12 years later and remains at similarly high levels https://databank.worldbank.org/.

[3] Notably, unlike the MDGs, the SDGs are explicit in targeting learning outcomes.However, strategies to achieve these targets have remained focused on increasing access to schooling (Pritchett and Sandefur, 2020), with less attention paid to what actually happens in school buildings.

[4] This is particularly so in rural areas, where people rely on communal "water points" (e.g., hand pumps and boreholes). According to a 2015 water point mapping initiative conducted in Tanzania, nearly one-third of all water points were non- functional, with 20 percent failing in their first year (Joseph et al., 2019). Similar patterns of water point breakdown have been documented in Nigeria, Ghana, Mozambique, Uganda, and Ethiopia, and tend to reflect challenges associated with governance arrangements rather than the mechanics of extraction and distribution.

3. Social bargaining and citizens' access to public services

What, then, constrains or directs the discretion of street-level actors and determines how they respond to different citizens? And what are the consequences of effective access to services? Studies discuss several potential sources of preferential treatment. A large body of work documents the role of economic bargaining, where citizens use short-term economic transactions, informal payments, and bribes to influence service providers. Citizens perpetuate corruption since corruption is expected to lead to access to public services and since opting out of corruption risks inflicting disadvantages on individuals in those contexts where corruption is the expected behavior (Bauhr and Charron, 2018; Bauhr and Grimes 2014; Persson, Rothstein and Teorell, 2013). However, economic bargaining and bribe paying in the context of public service delivery may not necessarily lead to effective access to public services, since bribery is oftentimes extortive in nature with very limited pretense of reciprocity. Similarly, bribes may be initiated by citizens with the hope of gaining access to services, while service providers accepting the bribes may not be in a position to provide such services. Thus, bribe paying can be taxing on the poor, in particular since the poor have more limited exit options (Mamdani and Bangser, 2004; Chetwynd, Chetwynd and Spector, 2003; Gupta, Davoodi and Alonso-Terme, 2002; Peiffer and Rose, 2018).

As opposed to economic bargaining, social bargaining entails more indirect ways to influence service providers, whereby citizens leverage their ethnic and partisan ties or access to information about rights and duties in order to increase their effective access to services. Thus, social bargaining tends to be more indirect, where citizens use clientelist ties, knowledge, and skills to influence service providers. Citizens may, for instance, benefit from partisan ties. Street-level bureaucrats are often appointed based on patronage ties and are thus directly or indirectly incentivized to target services to particular constituents — and to withhold them from others. The distributive politics literature discusses "punishment regimes" as a way for ruling parties to stay in power in dominant party systems. In these systems, parties in power punish opposition supporters by withholding state resources from their constituencies (Magaloni, 2006). While the literature has primarily examined resource allocations by higher level authorities, we investigate the possibility of punishment regimes at the street level. The distributive politics literature is less developed in this regard, though there is some evidence that national-level dynamics play out at the local level in many instances.

For instance, Carlitz (2017) finds that within Tanzanian districts, the distribution of new water infrastructure is skewed to favor localities with higher demonstrated levels of support for the ruling party. In a related vein, Ejdemyr, Kramon and Robinson (2018) find that Malawian members of Parliament target more local public goods to co-ethnics in their electoral districts when ethnic groups are sufficiently segregated to make such targeting (electorally) efficient. Given that political parties serve as vehicles to further the interests of particular ethnic groups in a number of African countries, such targeting has parallels to the punishment regime logic of allocation. Moreover, it gives us reason to believe that such patterns may play out in street-level interactions as well.

Social bargaining also tends to hinge on broader skills and assets that are unequally distributed among citizens. Specifically, education and access to information are potentially important assets that may determine both if citizens gain access to first-hand interactions with service providers, and once in contact with the service provider, if they can also leverage these skills to gain effective access to services. Studies point to the important information asymmetries that characterize interactions between service providers and service users. That is, users oftentimes have rather limited capacity to judge the quality of a given service as a function of government effort. This is because many service outcomes reflect a complex set of processes, including factors other than government effort that affect the outcome (Mani and Mukand, 2007). For example, Das and Hammer (2014) characterize healthcare as a "credence good" since providers have considerably more specialized knowledge than patients. Moreover, users must also be informed about their rights to access given services, or to access them at a reduced fee. For instance, in Kenya, the government enacted a policy in 2004 stating that services at dispensaries and health centers should be free for all citizens, except for a minimum registration fee. However, a study conducted five years after the policy was announced showed that many users were not well-informed of it and thus unable to protest when facilities charged them for services (Chuma et al., 2009).

Moreover, people are unlikely to act on new information unless they know what actions to take and possess the skills for taking these actions. Frequently, such knowledge and skills are more prevalent among more highly educated communities. For instance, in a recent study on teacher allocation and absenteeism in Kenya, Tanzania and Uganda, Jones, Jones and Mojica (2017) find a negative relationship between household wealth and teacher absenteeism – implying that better-off parents may be more empowered to monitor and sanction teachers and therefore compel them not to be absent. In Tanzania, Carlitz (2019) finds that socioeconomic status, access to information, and civic skills all enhance the likelihood that citizens will actively demand improved services, as well as effectively leverage social pressure to ensure reciprocity. Importantly, these citizens are not necessarily the ones with the greatest unmet needs for effective access to basic services. This leads us to expect that social bargaining, including education, access to information, and partisanship ties will enhance citizens' effective access to public services.

4. Empirical Strategy and Data

In order to investigate the role of social bargaining on citizens' effective access to public services, we analyze data from two main sources. First, we query the most recent round of the Afrobarometer (Round 7), which comprises nationally representative surveys for 34 countries.[5] We use this data to examine how individuals' effective access to health and education varies as a function of social bargaining.

Second, we leverage data from a 2015 assessment of learning outcomes carried out by the East African NGO Twaweza. The *Uwezo* ("capability" in Swahili) initiative[6] is a 'citizen movement based' approach to assessing literacy and numeracy levels in East Africa, inspired by the Annual Status of Education (ASER) initiative in India.[7] The 2015 Uwezo survey assessed children in 68,588 households in 4,750 villages and urban enumeration areas across all 159 districts in mainland Tanzania. In each village/EA, the Uwezo team visited one government primary school, capturing information including the number of teachers, number of students, availability of textbooks, etc.[8] The Uwezo data allows us to dig into the mechanics of social bargaining in education, demonstrating implications for both effective access and learning outcomes.

Measuring Effective Access

In order to measure respondents' actual ability to obtain the services they need – what we term *effective access* – we consider responses to the following questions:

1. *How easy or difficult was it to obtain the services you needed from teachers or school officials?*

2. *How easy or difficult was it to obtain the medical care you needed?*

Note that these questions are only asked of those who attempted to access the service in question. Additionally, the questions about access are only asked for *public* services. This means that we do not have measures of effective access for service users who exit the public system by, e.g., sending their children to private schools or seeking care at private clinics. We find that on average, respondents' reported ability to obtain needed services is higher when it comes to education (1.88 on a scale from 0-3), followed by health (1.53). The fact that considerable proportions of respondents reported difficulties obtaining the services they need serves as first-order evidence for the proposition that physical access does not guarantee effective access.

[5] For more information, see https://www.afrobarometer.org/data/merged-data.
[6] https://www.twaweza.org/go/uwezo.
[7] http://www.asercentre.org/##ksd6e.
[8] We also incorporate data from a 2016 poverty mapping exercise, which generated district-level poverty rates for the country. Although the poverty mapping exercise was conducted in 2016, it is based on data from the 2011/12 Tanzania Household Budget Survey and the 2012 Census. Hence we do not run the risk of post-treatment bias in our estimates.

Social Bargaining

Following the theoretical exposition in Section 3, we aim to capture characteristics and actions that are important for citizens' social bargaining. We rely on proxies that can help us capture citizens' capacity and potential opportunities, rather than studying the actual act of bargaining, which is inherently relational. In order to measure access to information, we rely on indicators of how frequently respondents access news from radio, television, and newspapers. For partisanship we rely on an indicator of whether respondents support the opposition or incumbent.

Control Variables

As our data is observational, we include several control variables to account for issues of possible endogeneity. At the individual level, we account for the respondent's bribe paying, gender, poverty, age, and urban-rural residency.

Bribe paying is the most direct indicator of economic bargaining as experienced by citizens and is more suitable than related indicators, such as perceptions of overall societal corruption levels. In order to measure economic bargaining through bribe paying, we rely on the question of how often, if ever, the respondent had to pay a bribe, give a gift, or do a favor for a teacher or school official in order to get the services the respondent needed from the schools. We also rely on an analogous question for medical care.

We also ask about respondents' gender, since gender is expected to affect both social bargaining and effective access to public services. Women may on average be more dependent on public service delivery because of their traditionally greater care-taking obligations.

Furthermore, we include poverty as a control variable in the analysis since we expect poverty to matter for citizens' effective access to public services, as well as their social bargaining capacity. Furthermore, effective access to public services may be affected by age, as older respondents may face different service needs and ability to access services, as well as distinct possibilities to leverage connections. Finally, we account for urban-rural status since access to both street-level service providers and services may be affected by the urban-rural divide, which remains consequential in most countries throughout the African continent.

5. Results

Following the theoretical exposition in Section 3, we examine how effective access to health and education varies as a function of social bargaining (proxied by access to information and partisanship). We expect that social bargaining would improve effective access to public services, in part because such bargaining would more effectively enforce a reciprocal relationship between service seekers and service providers. Models 1 and 2 show our focal relationships for effective access to education, while Models 3 and 4 present the correlates of effective access to health care services.

Models 1 and 2 show that respondents who have greater access to information, i.e., those that more frequently access news from radio, television, and newspapers, also found it easier to obtain the services they needed once in contact with teachers or school officials. We also find that citizens supporting opposition parties found it more difficult to obtain the services they needed once in contact with service providers, providing some evidence for local punishment regimes. These results provide support for the contention that access to information may facilitate effective access.

In addition, these findings can be contrasted with evidence on the effectiveness of economic bargaining in the form of bribe paying. We show that citizens that report having paid a bribe to access educational services also perceived that it was difficult to obtain the services they needed from teachers and school officials. While Model 1 only includes regional fixed effects, Model 2 also includes a range of individual

level control variables, including poverty, gender, age, and urban-rural status. We find that our main relationship holds when including these control variables. Women, older respondents, and those living in rural areas are more likely to perceive that their needs are met once in contact with service providers, while poverty is associated with lower levels of effective access.

TABLE 1: SOCIAL BARGAINING AND EFFECTIVE ACCESS

	(1)	(2)	(3)	(4)
	Education	Education	Health	Health
Access to info (std)	0.03***	0.03***	0.03***	0.02**
	(0.01)	(0.01)	(0.01)	(0.01)
Ruling party supporter (std)	0.04***	0.03**	0.03***	0.03***
	(0.01)	(0.01)	(0.01)	(0.01)
Bribe for education (std)	-0.21***	-0.21***		
	(0.02)	(0.02)		
Bribe for health (std)			-0.17***	-0.17***
			(0.01)	(0.01)
Poor (cash lived poverty)		-0.10***		-0.23***
		(0.03)		(0.02)
Female		0.05***		0.04**
		(0.02)		(0.02)
Age quintile		0.05***		0.01*
		(0.01)		(0.00)
Rural		0.04**		0.03
		(0.02)		(0.02)
Observations	15825	15772	26823	26736
R^2	0.136	0.143	0.130	0.139

Standard errors in parentheses
OLS regression where DV is effective access to indicated service. All models include region fixed effects.
* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Models 3 and 4 show our focal relationships for effective access to health services, i.e., how easy or difficult it is for respondents to obtain the medical care they need once in contact with service providers. Just as with education, citizens who have greater access to information and who support the ruling party are more likely to gain effective access to medical care. In contrast, those that pay a bribe are significantly less likely to gain effective access. This lends additional support for the contention that social bargaining facilitates effective access, while economic bargaining in the form of bribe paying far from guarantees effective access. We also show, much in line with our results on education, that poverty is negatively associated with effective access to medical care, while women, older respondents, and those living in rural areas report better effective access to medical care.

The fact that rural residents report greater levels of effective access stands in contrast to the findings of the urban bias literature discussed earlier. However, we note that this may reflect the fact that the questions we examine consider public services only. In urban areas, there tend to be more private providers, and those who can afford to do so often exit the public system. As a result, public services often suffer more in urban areas, while in rural areas they may be the only game in town.

In sum, we find that social bargaining is associated with greater effective access to public services. This result could be contrasted to economic bargaining (bribe paying) that is consistently associated with lower effective access. In what follows, we investigate the determinants and outcomes associated with social bargaining for education. The Tanzanian data we examine allows us to go beyond citizens' reports of effective access to study the actual results of effective access to a key public service.

6. Social bargaining and learning outcomes in Tanzania

The Afrobarometer is limited in its ability to capture information on the interactions between citizens and service providers through which social and economic bargaining occurs and through which unequal access is allowed to persist. For this reason, we turn to a richer source of data from Tanzania, the Uwezo learning assessment, which allows us to draw inferences regarding these interactions in the education sector. As noted above, this sector is home to some of the greatest disparities between physical and effective access, especially in sub-Saharan Africa.

The disconnect between schooling and learning (i.e., between physical and effective access to education) in Tanzania has been well documented – largely by the data source we exploit. In fact, the Uwezo assessment was initiated largely as a response to concerns that while schooling rates had increased dramatically in Tanzania following global buy-in to the Millennium Development Goals (MDGs), there were serious questions about what children were actually learning. Between 2000 and 2010, Tanzania saw gross primary enrollment[9] increase from 68.8% to 102.8%. In order to determine whether this massive increase in schooling translated into improved learning outcomes, a team of education specialists and activists in East Africa developed the Uwezo initiative. Following a rigorous consultative process involving government and independent experts, a tool was developed to assess children's actual ability to read (in English and Swahili) and to do basic arithmetic at the Standard 2 (2nd grade) level. The tool was first piloted to over 40,000 children between the ages of 5-16 in 2010, and subsequently was implemented annually between 2011-2015. The results to date have been sobering; in 2011, only three in 10 Standard 3 students were able to read a basic Swahili story and just one in 10 could read a basic story in English. Even among Standard 7 students (the last year of primary school), the majority were unable to read a basic English story. Basic numeracy skills were also in short supply; in 2011, only 3 in 10 Standard 3 pupils were able to add, subtract, and multiply (Uwezo, TENMET & Hivos/Twaweza, 2011). In subsequent years, overall learning outcomes have seen limited improvement (Uwezo, 2017).

We understand learning outcomes as a function of effective access to education, and therefore investigate

[9] Gross enrollment ratio for primary school is calculated by dividing the number of students enrolled in primary education regardless of age by the population of the age group which officially corresponds to primary education, and multiplying by
Data from World Bank World Development Indicators: https://databank.worldbank.org/ reports.aspx?source=world- development-indicators.

the role of social bargaining in interactions with education service providers, i.e., teachers. Specifically, we look at the "supply side," namely which parents are given opportunities to interact with their children's teachers, as well as the "demand side," or which parents take advantage of those opportunities. We then see how these interactions relate to the learning outcomes as assessed by the Uwezo initiative. We examine the following three questions asked of each respondent at the household level:

- *Did you discuss your child's progress with the teacher last term?*
- *Were you invited for a parental meeting at your child's school this year?*
- *[If invited], did you attend [the parental meeting]?*

In terms of outcomes, rather than capture citizens' perceptions of effective access as in the Afrobarometer, we consider student performance on the Math, English, and Swahili assessments that constitute the core of the Uwezo initiative. The math (numeracy) tests were scored from 1-9, with 1 indicating innumeracy and 9 indicating advanced math competency (demonstrated ability to do multiplication). The English and Swahili literacy tests were scored from 1-5, reflecting five competency levels: i) non-reader; ii) able to read letters/sounds; iii) able to read words; iv) able to read paragraphs; and v) able to read a short story. For ease of interpretation, we rescaled all scores to range from zero to one. We interpret scores on the learning assessments as a proxy for effective access. That is, if children are receiving quality education, they should demonstrate better learning outcomes.

We operationalize social bargaining capacity with survey questions on mothers' level of education and household access to information. We then look at how social bargaining capacity relates to interactions with service providers, and then link these interactions to learning outcomes. This allows us to illuminate an important determinant of the gap between physical access to education and meaningful attainment of quality education, i.e., effective access.

We begin by examining the demand of and supply for effective access to education, looking at which parents are most likely to take the initiative to advocate for improvements in their children's education, as well as which parents are more likely to be supplied with relevant opportunities.

Table 2 shows that parents who are more educated, and those with more access to information are significantly more likely to demand interactions — by discussing their child's progress and attending parental meetings — and are also more likely to receive invitations to such meetings. In turn, parents from poorer, rural, and less educated households, as well as those with limited access to information are less likely to demand effective access to education and are less likely to be invited to parental meetings. Therefore, while all households examined here have relatively equal physical access to education (since these questions were asked of parents in an enumeration area with a primary school), their effective access varies greatly based on their social bargaining capacity.

TABLE 2: SOCIAL BARGAINING IN EDUCATION: DEMAND AND SUPPLY FACTORS

	(1) Discussed Child's Progress	(2) Invited to Parents Mtg.	(3) Attended Parents Mtg.
Mother's Education Level	1.78***	1.52***	1.44***
	(0.02)	(0.02)	(0.02)
Household owns a radio	1.49***	1.32***	1.27***
	(0.02)	(0.02)	(0.02)
Avg. HH num. meals per day	1.18***	1.12***	1.13***
	(0.01)	(0.01)	(0.02)
Age of mother	1.01***	1.02***	1.02***
	(0.00)	(0.00)	(0.00)
Rural EA	0.63***	0.80***	0.93**
	(0.01)	(0.02)	(0.03)
Observations	142780	139132	98187

Exponentiated coefficients; Standard errors in parentheses Logistic regression where DV is indicated interaction.
All models include district fixed effects.

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

The regressive nature of demand in this context is in keeping with studies looking at community-driven development (CDD) initiatives and participatory water schemes in Tanzania. For instance, Baird, McIntosh and Özler (2013) examine the second phase of Tanzania's social action fund – the country's flagship CDD program– and find that wealth, education, access to media, and political engagement are positively and significantly associated with the likelihood that people apply for the program at the national level and are aware of it at the local level. In the water sector, Carlitz (2017) finds that wealthier and better-connected communities benefit disproportionately from "demand-responsive" schemes since they can better signal their needs to relevant authorities.

We next look at how parent-school interactions relate to learning outcomes, which we argue are likely to be better when students have more effective access to education. Table 3 indicates that learning outcomes do indeed appear to respond to parental advocacy. Parents who discuss their child's progress, those who are invited to parental meetings, and those who attend such meetings are significantly more likely to see higher learning outcomes from their children. Social bargaining — both in terms of demanding and receiving opportunities for interactions with service providers — pays off. However, as seen above, it is limited to those parents who are both educated and have better access to information, creating a visible discrepancy in learning outcomes within districts. Thus, parents who both demand and are invited to interact with service providers in turn see benefits in terms of their children's effective access to education. While our data do not allow us to study the currencies and competencies leveraged in those interactions directly, our analysis suggests that even if direct monetary transactions and bribe paying were part of some of these interactions, they are not accessible for citizens that are not well-equipped in terms of social bargaining capacity, including access to information. Thus, even if there may be links between social and economic bargaining, social bargaining capacity is likely a precondition for all forms of effective bargaining.

TABLE 3: LEARNING OUTCOMES AND ADVOCACY CAPACITY

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Math	Math	Math	Swahili	Swahili	Swahili	English	English	English
Discuss performance with teacher	1.11***			1.12***			1.11***		
	(0.00)			(0.00)			(0.00)		
Invited to attend parents meeting this year		1.13***			1.14***			1.10***	
		(0.00)			(0.00)			(0.00)	
Attended parents meeting this year			1.09***			1.10***			1.08***
			(0.00)			(0.00)			(0.00)
Avg. HH num. meals per day	1.03***	1.03***	1.04***	1.03***	1.03***	1.03***	1.03***	1.03***	1.04***
	(0.00)	(0.00)	(0.00)	(0.00)	(0.00)	(0.00)	(0.00)	(0.00)	(0.00)
Age of mother	1.01***	1.01***	1.01***	1.01***	1.00***	1.00***	1.01***	1.01***	1.01***
	(0.00)	(0.00)	(0.00)	(0.00)	(0.00)	(0.00)	(0.00)	(0.00)	(0.00)
Rural EA	0.88***	0.88***	0.88***	0.88***	0.88***	0.88***	0.85***	0.84***	0.84***
	(0.00)	(0.00)	(0.00)	(0.00)	(0.00)	(0.00)	(0.00)	(0.00)	(0.00)
Observations	87734	84628	62218	88760	85590	62920	86284	83221	61175
R^2	0.126	0.128	0.104	0.128	0.129	0.105	0.160	0.156	0.138

Exponentiated coefficients; Standard errors in parentheses OLS regression where DV is indicated test score. All models include district fixed effects.

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

7. Discussion and conclusions

As a consequence of widespread buy-in to the MDGs and their successors the SDGs, the past two decades have seen massive expansions in physical access to public services. School enrollments have increased dramatically, and it has become considerably easier for people to access health services and safe water sources (United Nations, 2020). The COVID-19 pandemic has halted – and in some cases reversed – progress towards a number of development goals (Sachs et al., 2022). However, even before the pandemic, scholars and practitioners had been drawing attention to the growing disconnect between physical access and what we term *effective* access, or the extent to which people's needs are met once in contact with relevant service providers.

The preceding analysis provides insights into the determinants of effective access. We distinguish between social bargaining — where citizens leverage their access to information and partisanship ties to gain effective access — and economic bargaining, i.e., the use of short-term economic transactions, informal payments, and bribes to influence service providers. Our analysis shows that social bargaining capacity is consistently associated with better effective access to public services. Using survey data from 34 African countries, we show that both access to information and support for the ruling party improves effective access. We also find that these results hold both for education and health care services. On the other hand, effective access to education and health services is lower among citizens that pay a bribe, lending support for our contention that social bargaining is more effective than economic bargaining and direct bribe paying.

In order to more closely investigate the role of street-level interactions with service providers, we turn to a learning assessment of nearly 70,000 households in Tanzania. Here, we show that both the supply of and demand for street-level interactions with service providers are conditioned by parental education and access to information. Parents who in turn take advantage of opportunities to engage with their children's schools are more likely to see their children score higher on Math, English, and Swahili learning assessments. These findings point to the importance of interactions between service providers and service users when it comes to determining effective access.

Effective access to public services has important implications for government legitimacy. When citizens lack opportunities to access and benefit from public services, they may be unlikely to see the state as a source of solutions to their everyday concerns. This can result in undermining citizens' faith in democracy and them withdrawing from the state (Bratton and Chang, 2006, 1063: Bauhr and Grimes 2021). Increasing effective access to public services may therefore not only lead to improved social mobility and poverty reduction, but also more generally to strengthening the social contract between citizens and the state. Despite the centrality of distinguishing between physical and effective access to public services, as well as understanding the street-level drivers of effective access to public services, this has to date been an understudied dimension of the distributive politics literature. Our distinction and comparison of these drivers, and in particular the difference between social and economic bargaining, seeks to contribute towards a closer understanding of why some citizens' needs are met, while others remain at a continuous disadvantage.

References

Baird, Sarah, Craig McIntosh and Berk Özler. 2013. "The regressive demands of demand-driven development." *Journal of Public Economics* 106:27–41.

Bates, Robert H. 2014. *Markets and States in Tropical Africa: The Political Basis of Agricultural Policies, Updated and Expanded with a New Preface*.

Bauhr, Monika and Marcia Grimes. 2021. "Democracy and Quality of Government" in Bauhr, Monika, Andreas Bågenholm, Marcia Grimes and Bo Rothstein (eds). The Oxford Handbook of Quality of Government. Oxford: Oxford University Press. https://www.oxfordhandbooks.com/view/10.1093/oxfordhb/9780198858218.001.0001/oxfordhb- 9780198858218

Bauhr, Monika and Nicholas Charron. 2018. "Insider or Outsider? Grand Corruption and Electoral Accountability." 51(4):415–446. Publisher: SAGE Publications Inc.
URL: https://doi.org/10.1177/0010414017710258

Bauhr, Monika. 2017. "Need or Greed? Conditions for Collective Action against Corruption." Governance 30 (4): 561–81. https://doi.org/10.1111/gove.12232.

Bauhr, Monika, and Marcia Grimes. 2014. "Indignation or Resignation: The Implications of Transparency for Societal Accountability." Governance 27 (2): 291–320. https://doi.org/10.1111/gove.12033.

Blanford, Justine I., Supriya Kumar, Wei Luo and Alan M. MacEachren. 2012. "It's a long, long walk: accessibility to hospitals, maternity and integrated health centers in Niger." 11(1):24.
URL: https://doi.org/10.1186/1476-072X-11-24

Bratton, Michael and Eric CC Chang. 2006. "State building and democratization in sub-Saharan Africa: forwards, backwards, or together?" *Comparative Political Studies* 39(9):1059–1083.

Brinkerhoff, Derick W. 1996. "Process perspectives on policy change: highlighting implementation." *World Development* 24(9):1395–1401.

Brinkerhoff, Derick W, Anna Wetterberg and Erik Wibbels. 2018. "Distance, services, and citizen perceptions of the state in rural Africa." *Governance* 31(1):103–124.

Brodkin, Evelyn Z. 2012. "Reflections on street-level bureaucracy: past, present, and future." *Public Administration Review* 72:940–949.

Carlitz, Ruth D. 2017. "Money flows, water trickles: Understanding patterns of decentralized water provision in Tanzania." *World Development* 93:16–30.

Carlitz, Ruth D. 2019. "Who gets what–and how efficiently? Assessing the spatial allocation of public goods." *Research & Politics* 6(3):2053168019879355.

Chang, Eric C.C. and Nicholas N. Kerr. 2016. "An Insider–Outsider Theory of Popular Tolerance for Corrupt Politicians." pp. n/a–n/a.
URL: http://onlinelibrary.wiley.com/doi/10.1111/gove.12193/abstract

Chetwynd, Eric, Frances Chetwynd and Bertram Spector. 2003. "Corruption and poverty: A review of recent literature." *Management Systems International* 600:5–16.

Chuma, Jane, Janet Musimbi, Vincent Okungu, Catherine Goodman and Catherine Molyneux. 2009. "Reducing user fees for primary health care in Kenya: Policy on paper or policy in practice?" *International journal for equity in health* 8(1):1–10.

Cleland, John, Sarah Harbison and Iqbal H Shah. 2014. "Unmet need for contraception: issues and challenges." *Studies in family planning* 45(2):105–122.

Das, Jishnu and Jeffrey Hammer. 2014. "Quality of primary care in low-income countries: facts and economics." *Annual Review of Economics* 6(1):525–553.

Dickovick, J Tyler and James Stevenson Wunsch. 2014. *Decentralization in Africa: The paradox of state strength*. Lynne Rienner Publishers Boulder, CO.

Eastwood, Robert and Michael Lipton. N.d. "Pro-poor Growth and Pro-growth Poverty Reduction: Meaning, Evidence, and Policy Implications." . Forthcoming.

Ejdemyr, Simon, Eric Kramon and Amanda Lea Robinson. 2018. "Segregation, ethnic favoritism, and the strategic targeting of local public goods." *Comparative Political Studies* 51(9):1111–1143.

Faguet, Jean-Paul. 2014. "Decentralization and governance." *World Development* 53:2–13.

Filmer, Deon, Jeffrey S Hammer and Lant H Pritchett. 2002. "Weak links in the chain II: a prescription for health policy in poor countries." *The World Bank Research Observer* 17(1):47– 66.

Gofen, Anat. 2014. "Mind the gap: Dimensions and influence of street-level divergence." *Journal of Public Administration Research and Theory* 24(2):473–493.

Golden, Miriam and Brian Min. 2013. "Distributive politics around the world." *Annual Review of Political Science* 16.

Gupta, Sanjeev, Hamid Davoodi and Rosa Alonso-Terme. 2002. "Does corruption affect income inequality and poverty?" *Economics of governance* 3(1):23–45.

Hupe, Peter and Michael Hill. 2007. "Street-Level bureaucracy and public accountability." *Public Administration* 85(2):279–299.

Jones, Gareth A and Stuart Corbridge. 2010. "The continuing debate about urban bias: the thesis, its critics, its influence and its implications for poverty-reduction strategies." *Progress in Development Studies* 10(1):1–18.

Jones, Jessica, Rachel Jones and Andres Mojica. 2017. "Teacher Allocation and Absenteeism in Kenya, Tanzania and Uganda: 2015." Masters in International Development Capstone Research Project, April 28th, 2017.

Joseph, George, Luis Alberto Andres, Gnanaraj Chellaraj, Jonathan Grabinsky Zabludovsky, Sophie Charlotte Emi Ayling and Yi Rong Hoo. 2019. "Why Do So Many Water Points Fail in Tanzania? An Empirical Analysis of Contributing Factors." *An Empirical Analysis of Contributing Factors (February 5, 2019). World Bank Policy Research Working Paper* (8729).

Kadobera, Daniel, Benn Sartorius, Honorati Masanja, Alexander Mathew and Peter Waiswa. 2012. "The effect of distance to formal health facility on childhood mortality in rural Tanzania, 2005–2007." 5:10.3402/gha.v5i0.19099.
URL: *https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3495250/*

Lieberman, Evan S. 2018. The comparative politics of service delivery in developing countries. In *Handbook on Politics in Developing Countries*. Oxford University Press.

Lipsky, Michael. 2010. *Street-level bureaucracy: Dilemmas of the individual in public service*. Russell Sage Foundation.

Lipton, M. and R.P.M. Lipton. 1977. *Why Poor People Stay Poor: Urban Bias in World Development*. Harvard University Press.
URL: *https://books.google.se/books?id=kgNHAAAAMAAJ*

Lohela, Terhi J., Oona M. R. Campbell and Sabine Gabrysch. 2012. "Distance to care, facility delivery and early neonatal mortality in Malawi and Zambia." 7(12):e52110.

Magaloni, Beatriz. 2006. *Voting for autocracy: Hegemonic party survival and its demise in Mexico*. Vol. 296 Cambridge University Press Cambridge.

Mamdani, Masuma and Maggie Bangser. 2004. "Poor people's experiences of health services in Tanzania: a literature review." *Reproductive Health Matters* 12(24):138–153.

Mani, Anandi and Sharun Mukand. 2007. "Democracy, visibility and public good provision." *Journal of Development Economics* 83(2):506–529.

Noor, Abdisalan M, Abdinasir A Amin, Peter W Gething, Peter M Atkinson, Simon I Hay and Robert W Snow. 2006. "Modelling distances travelled to government health services in Kenya." 11(2):188–196. eprint: https://onlinelibrary.wiley.com/doi/pdf/10.1111/j.1365-3156.2005.01555.x.
URL: *https://onlinelibrary.wiley.com/doi/abs/10.1111/j.1365-3156.2005.01555.x*

O'Donnell, Owen. 2007. "Access to health care in developing countries: breaking down demand side barriers." *Cadernos de saude publica* 23:2820–2834.

Peiffer, Caryn and Richard Rose. 2018. "Why are the poor more vulnerable to bribery in Africa? The institutional effects of services." *The Journal of Development Studies* 54(1):18–29.

Persson, Anna, Bo Rothstein and Jan Teorell. 2013. "Why Anticorruption Reforms Fail—Systemic Corruption as a Collective Action Problem." 26(3):449–471.
URL: *http://onlinelibrary.wiley.com/doi/10.1111/j.1468-0491.2012.01604.x/abstract*

Peters, David H, Anu Garg, Gerry Bloom, Damian G Walker, William R Brieger and M Hafizur Rahman. 2008. "Poverty and access to health care in developing countries." *Annals of the New York Academy of Sciences* 1136(1):161–171.

Pritchett, Lant and Justin Sandefur. 2020. "Girls' schooling and women's literacy: schooling targets alone won't reach learning goals." *International Journal of Educational Development* 78:102242.

Ridde, Valéry. 2008. ""The problem of the worst-off is dealt with after all other issues": the equity and health policy implementation gap in Burkina Faso." *Social science & medicine* 66(6):1368–1378.

Rothstein, Bo and Aiysha Varraich. 2017. *Making sense of corruption*. Cambridge University Press.

Rothstein, Bo O and Jan AN Teorell. 2008. "What is quality of government? A theory of impartial government institutions." *Governance* 21(2):165–190.

Sachs, Jeffrey, Christian Kroll, Guillame Lafortune, Grayson Fuller and Finn Woelm. 2022. *Sustainable Development Report 2022*. Cambridge University Press.

Spaull, Nicholas and Stephen Taylor. 2015. "Access to what? Creating a composite measure of educational quantity and educational quality for 11 African countries." *Comparative Education Review* 59(1):133–165.

Tanser, Frank, Brice Gijsbertsen and Kobus Herbst. 2006. "Modelling and understanding primary health care accessibility and utilization in rural South Africa: An exploration using a geographical information system." 63(3):691–705.
URL: *https://www.sciencedirect.com/science/article/pii/S0277953606000372*

Torres, Rosa María. 1999. *One decade of Education for All: The challenge ahead*. IIPE.

United Nations. 2020. "The Sustainable Development Goals Report 2020."
https://unstats.un.org/sdgs/report/2020/.

Uwezo. 2017. "Are Our Children Learning? Annual Learning Assessment Report.".

Uwezo, TENMET & Hivos/Twaweza. 2011. "Are Our Children Learning? Annual Learning Assessment Report."

Verspoor, Adriaan M. 2008. The challenge of learning: Improving the quality of basic education in sub-Saharan Africa. In *The changing landscape of education in Africa. Oxford: Symposium*, ed. David Johnson. Oxford Studies in Comparative Education.