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## RESEARCH ARTICLE

### Devolution of health care system in Kenya: A strategic approach and its implementation in Mombasa County, Kenya

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#### Abstract

Decentralization of health system structure and management has been and continues to be a key issue for many countries in the achievement of health for all, and development of primary health care. According to WHO (1990), decentralization can be defined in general terms as the transfer of authority, or dispersal of power, in public planning, management and decision making from national to sub national levels. "Decentralization is therefore, not only an important theme in health management but also a confused one". Discussion about devolving powers to the regional level is a big debate in Kenya today. Indeed, there is a great deal of skepticism about it. Despite this skepticism, most counties will use devolution as the latest panacea for the woes of their health care systems. Following the general elections in March 2013, each county has the task of establishing a "blueprint for change" for its health system. In the new Constitution of Kenya, 2010, fourth schedule in the article 185, 186 and 187, it establishes the distribution of functions between the National and the County governments where the National government handles National referral health facilities and Health policy, while County governments handle County health services, including, in particular, county health facilities and pharmacies; ambulance services; promotion of primary health care; licensing and control of undertakings that sell food to the public. Legal notice no. 137 of 2013 indicates all the health services transferred to the counties after the Counties made formal application..

This paper analyzed the dynamics of health care devolution in Kenya within the context of the new constitution, and in particular Mombasa County. The paper looks into how the present level of health devolution can strategically be implemented within the county, and the factors involved in improving health service delivery in the counties under the devolved set up. A case study approach from various countries was used to recommend a model that Mombasa county government can adopt, to successfully implement devolved health care management and also have an impact on the overall public health system.

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#### Introduction

Achieving integrative care services is a key policy objective of Kenyan devolved governance and is intended to reduce the frustration, delay, the inefficiency, and the gaps that frequently existed in the

previously centralized health system management. Since Kenya got its independence in 1963, centralization has been at the core of Kenyan governance, with power concentrated in the capital. Health system has had long-standing problems. The origin has been in the way policy has been made, in the way different services are funded, planned, and managed; weaknesses in budgetary and information systems; communication failures and organizational and individual behaviors.

In August 2010, Kenyan voters approved a new Constitution in a constitutional referendum, and it was signed into law on 27 August 2010. The new constitution ushered in devolved governance which was a manifestation of the people's desire for change, government accountability, and democracy, the concept of devolution of political and economic power to 47 newly-created counties. Devolution usually transfers responsibilities for services to counties that elect their own governors and, raise their own revenues, and have independent authority to make investment decisions. In a devolved system, local governments have clear and legally recognized geographical boundaries over which they exercise authority and within which they perform public functions. Article 174 of the Kenya Constitution clearly articulates the rationale behind devolution as, among other reasons, self-governance, economic development and equitable sharing of national and local resources.

Discussion about devolving powers to the regional level is a big debate in Kenya today. Indeed, there is a great deal of skepticism about it. Despite this skepticism, most counties will use devolution as the latest panacea for the woes of their health care systems. These changes arguably constitute the most radical restructuring of health system since its inception, with far reaching implications for governments, citizens, physicians, hospitals and other interest groups.

Successive governments in Kenya have sought to address the problems of health system by adopting a variety of ways. As long ago as 1994, the Government of Kenya (GOK) approved the Kenya Health Policy Framework (KHPF) as a blueprint for developing and managing health services. According to (Kpmg, 2013), Central to the creation of a health care system is the devolved authorities' ability to use these governance tools to rationalize, integrate and coordinate previously autonomous and sometimes competing services. Such rationalization can occur vertically (between institutional and community-based services) and horizontally (among institutional service) such as hospital mergers or among community-based services.

### **Organization of healthcare in the devolved system**

The Kenyan constitution 2010, emphasis has been placed on a greater devolution of budgets and decision-making with the aim of a more flexible response to the needs of individuals who are more concerned with the provision of service than with the provider of service. The fourth schedule (article 185 (2), 186 (1) and 187 (2)) establishes the distribution of functions between the national government and the county governments where the government handles National referral health facilities and Health policy, while county government handles County health services, including, county health facilities and pharmacies; ambulance services; promotion of primary health care; licensing and control of undertakings that sell food to the public; However county governments were supposed to apply for the functions. In a special issue 1795 of the Kenya Gazette Supplement No. 116 Legislative Supplement No. 51) legal notice no. 137 health services were transferred to the counties. County health services including, County health facilities and pharmacies and county health facilities including county and sub county hospitals, rural health centers, dispensaries, rural health training and demonstration Centre's. Rehabilitation and maintenance of county health facilities including maintenance of vehicles, medical equipment and machinery. The success of devolution of health care will require strategic approach in order to realize the benefit of new governance dispensation.

Dealing with rapid, complex, and often discontinuous change requires leadership. For Mombasa county to have Successful health care system the leaders must understand the nature and implications of change, have the ability to develop effective strategies that account for change, and the will as well as the ability to actively manage the momentum of the devolution .

These activities are collectively referred to as “strategic management.” Strategic management is fundamental in leading the county in dynamic governance dispensation. Strategic management provides the momentum for change. In effect, strategies help to create new beginnings, new chances for success, new challenges for employees, and new hopes for patients. Therefore, it is imperative that county health care planners understand the changes taking place in their counties and not simply be responsive to them, but strive to create the future. County leaders must see into the future, create new visions for success, and be prepared to make substantial effort to achieve the expected changes

### **Problem statement**

Kenya devolved its healthcare system since the time the county government came in power in March 4th 2013, however, very little has been done to establish the implications it has had in Kenya and more so Mombasa county which is the gateway to Africa from western and Asian Countries. Health staff unrest has been witnessed since the advent of county governance; affecting service delivery thus posing health risks to thousands of Mombasa residents and scaring away potential investors. Both the national and county government together with the various development stakeholders have paid little attention to such a situation despite the fact that if it remains unchecked could jeopardize service delivery. It was against that backdrop that the above study was conceived so as to fill the knowledge gap.

### **Objective of the study**

The main objective of the study was to establish the implications of devolution on healthcare systems in Kenya with a specific emphasis on strategic approaches to be used in Mombasa County.

### **Significance of the study**

The study aimed at establishing the implications devolution has brought about in Kenya with a special emphasis of Mombasa County, so as to be able to compare and recommend best practices for adoption by other counties in Kenya and other countries devolving healthcare. The study also aimed at providing information on areas for further research since devolution is a new concept in Kenya and despite other countries having devolved healthcare, every country has its own unique challenges and opportunities. Both the county governments and national government can make use of the findings to come up with strategic interventions to enhance service delivery to citizens.

### **Methodology**

The study employed a case analysis of the status of healthcare devolution in Mombasa and comparison on healthcare devolution from other countries so as to come up with a strategic intervention model based on comparison. Purposive sampling was employed.

### **Target population**

The study targeted The Transition County Coordinator, The medical personnel from the Coast general Hospital, the office of the executive committee member of health, healthcare personnel from the former municipal clinic and Ministry of health county employees in Mombasa County.

### **Study Findings**

All the targeted respondents were interviewed and open ended discussion questions focusing on their experiences and challenges of devolution were discussed.

### **Implications of devolution in Mombasa County.**

Mombasa County hosted the only former provincial hospital which was relied upon by the former coast province and a lot of support was still required to continue serving the same clientele.

Despite the massive support received in development of coast general hospital, a lot of infrastructure still needs to be developed so as for the efficiency and effectiveness of the services offered to be enhanced. The government provided for a fund to be based at the national level to finance and support such facilities on need basis. However that calls for strategic thinking of the management of the institution and the entire county government. The study observed that such capacity was yet to be built to both the county government leadership and the technical staff of the department of health.

The management of hospitals in Kenya, Mombasa included remained in the hands of Medical Doctors, who, despite having a lot of technical and professional expertise, lacked adequate strategic management skills to access and make proper use of the resources and mitigate against the new devolution challenges. The procurement of goods and services at county level has been centralized at County headquarters and that has led to Confusion and procurement challenges which might affect quality of procured products and service delivery.

The county government had no clear procurement plan in place for the purchase of medical supplies. The county governments being under no obligation to procure from the Kenyan agency on drugs supply (KEMSA) which has been procuring in bulk and thus enhancing economies of scale while also monitoring the efficacy of the drugs for purposes of continuous improvement, therefore confusion in a county procurement process is a bad pointer towards the future of medical services in the county.

Mombasa County being the second city of Kenya and the gate way into other east African countries required prudent management so as to grow and attract investors Healthcare is therefore the only strategic service that needs to be handled with utmost care.

The study observed no clear plans on how to enhance efficient and effective .garbage collection.Mombasa has one wholesale market and four other retail markets where issues of wastes disposal need to be well articulated. The study observed that waste disposal remained a menace in the county.

The county government seemingly had no strategies in place to avert or mitigate against any staff unrest as observed during the Health workers strike which was ongoing during the time of the study.

Mombasa County government had established County Public service board charged with the responsibility of staff development, creation of offices, abolishing of offices, staff promotion and discipline. The establishment of the board has caused a lot of anxiety as several employees interviewed felt unsafe while others especially those from outside the county feared discrimination during promotion and future inability to transfer to other counties. Staff morale had gone down affecting service delivery.

The Director of Medical services in the county was on interim bases and seemingly was reluctant to make some key decisions leading to poor staff supervision. The interim county Director of Medical services was in the process of harmonizing operations in health facilities once under local authorities and those under the national government. However, the staff from both levels had not been fully sensitized. The employees and management seemed less versed with change management and no strategies being put in place.

Challenges in payment of casuals offering services in the hospitals have been experienced since all money collected under cost sharing must be banked in a revenue account before channeled back to the counties. That has started affecting service delivery as the sector heavily depends on casual workers for service delivery.

### **Lessons learnt from other countries**

This part of the paper further looked at other countries which have devolved health care as a means to strengthen their health service delivery. The countries analyzed are Ethiopia, Uganda and Thailand

#### **Ethiopia:**

The concept of devolution was introduced in 1996 and seen as the primary strategy to improve health service delivery in Ethiopia. It formed part of a broader devolution strategy across different sectors of which healthcare was one. Devolution first took place at regional level and was further extended to the district, or woreda, level in 2002.(Sameh et al, 2009) Ethiopia adopted, a four-tiered system of Health care facilities which consisted of national referral hospitals, regional referral hospitals, district hospitals and, lastly, primary healthcare facilities. Through this devolution mechanism, districts received block

grants from regional government and they, in turn, were entitled to set their own priorities and determine further budget allocation to healthcare facilities based on local needs. Consequently the district levels were responsible for human resource management, health facility construction and supply chain processes. Impressive improvement of service delivery was observed despite some challenges in the initial stages.

### **Thailand**

Through the implementation of the Local Administrative Organizations Act in 1999, a target was set for transferring a significant share of national budgets to Local Administrative Organizations (LAO). The minimum share of budget to be transferred was 25 percent, with a target of 35 percent. Before devolution, health centres had little autonomy. Kping (2013) reported that devolution of health centres occurred only when there was good governance, demonstrating that it was capable of managing the health centre. It was also a requirement that, at least half of the health centers' staff involved were willing to transfer to LAO employment. LAO became responsible for primary health service delivery through health centres. The planning made it mandatory for day-to-day operational responsibility of the LAO, including financial and human resource management, The Ministry of Health continued to be responsible for technical policy, supervision, training and regulation of health professionals. The involvement of the majority of the staff in decision making made health devolution workable.

### **Uganda**

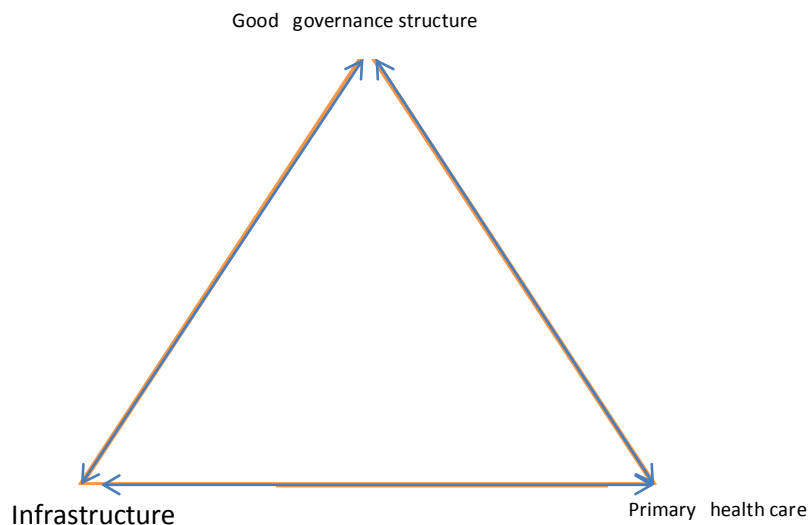
Devolution was introduced in Uganda in 1997 under local government Act. The main focus was on education, health, and agricultural advisory services, as well as the management of natural resources in Uganda. (Bernard Bashaasha, et al, 2011) Studies show that there has been no improvement in health services with many health status indicators either stagnating or worsening. In general, decentralization of education and health services has not resulted in greater participation of the ordinary people and accountability of service providers to the community. Lack of community participation, inadequate financial and human resources, a narrow local tax base, a weak civil society, underscored the need to ameliorate them if devolution was to attain the anticipated results.. The case study from Uganda cautions against the tendency to romanticize devolution as the new-found solution for past and current institutional and socio-economic distortions and argues that devolution itself can make state institutions more responsive to the needs of the communities, but only if it allows local people to hold public servants accountable and ensures their participation in the development process (Patrick, 2013)

### **Lessons from the case studies'**

From the case studies, it is clear that devolution can succeed despite many challenges and complexity that vary from country to country, however, governance and participatory involvement of various players remained crucial.

### **Summary Conclusion and Recommendations**

One of the historical challenges in the healthcare system has been the identification and collection of meaningful data to measure an organization's progress towards the achievement of its strategic goals and the concurrent alignment of operating practices with the strategy, management system and organizing framework that will lead to a metric-based strategic plan. The Strategic Management System (SMS) aligns organizational planning and performance measurement, between organizational priorities and resolving "local" problems, and encourages behaviors that are consistent with the values upon which the organization is built. Individual program/department plans with corresponding measures ensure that the entire organization is moving forward strategically. Each year, all plans are reviewed, with adjustments made to reflect changes in county and with re-calibration of performance targets for the next three years to ensure continued improvement and county progress. This paper describes the strategic management process for Mombasa County and demonstrates the formal integration of the plan into its operating and decision making processes. For Mombasa County to succeed in health care devolution, the cornerstone approach in managing health care is recommended.



### **Adopting Primary health care**

Primary Health Care is defined as essential health care; based on practical, scientifically sound, and socially acceptable method and technology; universally accessible to all in the community through their full participation; at an affordable cost; and geared toward self-reliance and self-determination (WHO & UNICEF, 1978).

The county government needs to shift the emphasis of health care to the people themselves and their needs, reinforcing and strengthening their own capacity to shape their lives. Health care needs to be delivered close to the people; thus, should rely on maximum use of both lay and professional health care practitioners and includes the following eight essential components: education for the identification and prevention, control of prevailing health challenges, proper food supplies and nutrition; adequate supply of safe water and basic sanitation, maternal and child care, including family planning, immunization against the major infectious diseases, prevention and control of locally endemic diseases, appropriate treatment of common diseases using appropriate technology, promotion of mental, emotional and spiritual health, provision of essential drugs (WHO & UNICEF, 1978).

### **Good governance:**

Governance structure should least contain costs and improve service integration. The county government should ensure, accountability mechanisms, clearly defined degree of authority and method of funding, where people will not beg or patronize someone in order to receive funding for the project. The county government expectations, the providers' interests and the local citizens' needs and preferences must all be put into consideration wherever decisions are being made. Citizen input to experts will be crucial in matters that affect them. Health sector governance and participation at local level are important elements for devolution because the influence held by various stakeholders over decision making process could express priorities as a mean of holding higher quality care. Ethiopia had a rather impressive structure of citizen participation from the facility to the district level; however their viability was not clear. Also from the case of Uganda devolution can only succeed only if it allows local people to hold public servants accountable and ensures their participation in the development process (Patrick, 2013)

### **Infrastructure:**

Support educational institutions, including Health Education Centers, and other entities in their efforts to create or update training, providing targeted continuing education opportunities for existing health professionals to support health care delivery efforts. This should include coming up with a revolving

fund to facilitate training of community health workers who supplement the work of health workers for the Mombasa county populations. The county government has to implement its mandate by getting infrastructure and services into the ground and households in order to achieve its goals

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