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DISPARITIES OF HEALTH CARE: CHALLENGE TO PHYSICIANS

Dr. James Nyikal, MBS
Director of Medical Services
Background

Challenges to the health sector

- Finance and financial flows
- Rapid growth of infrastructure
- Human resource
- Emerging diseases
- Coordination
- Legal framework
- Poverty
Deteriorating indices

- Infant mortality rate
- Under five mortality rate
- Maternal mortality ratio
- Life expectancy
- Immunization coverage
National trends of infant and under five mortality
source: CBS
Trends in IMR by province
Trends in IMR rural vs urban
(per 1,000 live births)
Disparities in health care in Kenya

Trends in under five mortality by province

Year


central
coast
eastern
nyanza
north
eastern
rift
valley
western
nairobi
national

Disparities in health care in Kenya
Trends in under five mortality rural vs urban
(per 1,000 live births)
HIV prevalence rate by region

- Central: 5.6
- Coast: 5.7
- Eastern: 3.7
- Nairobi: 9
- Nyanza: 13.1
- North Eastern: 3
- Rift Valley: 5
- Western: 4.5
- National average: 5.9
National trends of maternal mortality ratio  
(per 100,000)
National trends of fertility rate

Disparities in health care in Kenya
Trends of fertility rates by province
National trends of life expectancy at birth

Year


Life expectancy:

1948: 35
1962: 44
1969: 49
1979: 54
1989: 59
1999: 57
Immunization coverage by province

Disparities in health care in Kenya
Health institutions distribution by province

Disparities in health care in Kenya
Distribution of nurses by province

Nurses/100,000 population

- Nairobi: 31
- Central: 63
- Coast: 49
- Eastern: 59
- Nyanza: 39
- North Eastern: 26
- Rift Valley: 42
- Western: 41
Distribution of medical officer by population (2003)
Trends in MoH actual per capita expenditure in Health

Disparities in health care in Kenya
Regional poverty level

- Nairobi: 14%
- Central: 34%
- Coast: 61%
- Eastern: 58%
- Nyanza: 63%
- North Eastern: 58%
- Rift Valley: 45%
- Western: 62%
Health expenditure by source

Disparities in health care in Kenya
Challenges to the physician

- Health reforms
- Leadership role and head of team
- Role model
- Cost of care and poverty
- Ethics in compromised social environment
- CPD
- Curative care/disease prevention and health promotion
  - Perpetual dilemma
MOH response

Paradigm shift in the NHSSPII
- Emphasis on disease prevention and health promotion
- Defining essential health package (KEPH)
- Focus on equity and access to affordable health care
- Building partnership with community
- Strengthen health care support delivery systems
- enhanced sector coordination and partnerships.
MOH response

Actions taken
- Increased funding
- Employment of staff
- Purchase of equipment
- Rehabilitation of health facilities
- Strengthening of KEMSA to take over procurement functions
- Strengthening Regulatory Rapacity
MOH response

● Health sector reforms
  – Decentralization
  – Enhanced financial flows
  – Procurement processes
  – Human resource management
  – Result based management
  – Partner coordination
Way forward

- Physician leadership in the sector
- Advocacy for more funding of the sector
- Advocacy for reforms in the sector
Way forward

- Advocacy for better human management and development in the sector
- Institutionalization of CPD
- Promotion of accountability
- Promotion of ethics