

Service Delivery Indicators for Kenya – Highlights

The Service Delivery Indicators for Kenya are based on surveys of about 600 primary schools and health centers and nearly 5,000 teachers and health providers. They reveal that the country does better on the availability of inputs such as equipment, textbooks, and most types of infrastructure, than it does on provider knowledge and effort, which are relatively weak. Significantly, more investments are needed in “software” than “hardware”.

What service providers have to work with

- Kenya public facilities do relatively well on the availability of inputs: 95% of health facilities have access to sanitation, 86% of schools have sufficient light for reading, and the average number of textbooks exceeds Kenya’s target of 3 per pupil. The availability of important drugs for mothers remains a challenge: only 58% of tracer drugs for mothers was available in public facilities.

What service providers do

- In both education and health, the problem of low provider effort is largely a reflection of suboptimal management of human resources. This is evidenced by the findings that:
 - Over 29% of public health providers were absent, with the highest absence rate in larger urban health centers. Eighty percent of this absence was approved absence, and hence within management’s power to influence.
 - In public and private schools teachers are roughly equally likely to show up at school. The main difference is that public teachers may be at school, but are 50% less likely to be in class teaching.
- A public school child receives 1 hour 9 minutes less teaching than her private school counterpart. The implication is that for every term, a child in a public school receives 20 days less of teaching time.

What service providers know

- While better than in many other countries, significant gaps in provider knowledge exist among both public and private providers in both sectors.
- Only 58% of public health providers could correctly diagnose at least 4 out of 5 very common conditions (like diarrhea with dehydration and malaria with anemia). Public providers followed less than half (44%) of the correct treatment actions needed for management of maternal and neonatal complications. Provider competence was correlated with level of training.
- Just a third (35%) of public school teachers showed mastery of the curriculum they teach. Seniority and years of training among teachers did not correlate with better teacher competence.

(For complete results, see Table 1 on page 4)