EFFECTS OF FINANCIAL RESOURCES ON THE STRATEGIC IMPLEMENTATION OF DEVOLVED MINISTRY OF HEALTH FUNCTIONS IN MAKUENI COUNTY, KENYA

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ABSTRACT

The objective of this study was to assess the effects of financial resources on the strategic implementation of devolved ministry of health functions in Makueni County, Kenya. Descriptive research design was used in this study. The study choose staff working at Makueni County Referral Hospital in Makueni County as the target respondents because they had the highest level of knowledge and experience on the issues related to the devolved Ministry of Health functions in that county. A total of 96 participants were enough to reliably achieve this research targets. Stratified random sampling technique were used to select a sample from the population of the study. Data was collected using structured questionnaires. The questionnaires were taken personally to the respondents and in some instance with the help of the person in charge. The quantitative data was analyzed using descriptive statistical package for social services (SPSS). A correlation analysis was conducted to establish the relationship between the independent and dependent variables. The findings of the study were presented in tables and figures. Based on the findings above the study revealed that financial resources has a positive and significant effect on strategic implementation of devolved ministry of health functions in Makueni County. The study recommended that the county government should increase the financial resources allocated to health services. This could be done by increasing the county’s revenue base, either through taxation or other means. The county should also seek to increase its borrowing capacity so that it can make more investments in health services.

Key Words: Financial Resources, Strategic Management, Ministry of Health

INTRODUCTION

The devolution of health functions has also provided an opportunity for the ministry to be more responsive to the needs of the people, as the county governments are closer to the people and better able to understand their needs (Bourgeois & Brodwin, 2018). This has enabled the ministry to design and implement policies and programs that are more tailored to the needs of the people. In addition, the devolution of health functions has allowed the ministry to be more accountable to the public. By having health functions devolved to the county governments, the ministry is able to be more transparent in its operations, and more responsive to the needs of the people (Dayan, Heisig, & Matos, 2017). Overall, strategic implementation has had a positive effect on the devolved ministry of health functions, as it has enabled the ministry to be more effective, more responsive, and more accountable (Baumgartner & Rauter, 2017).

Various researchers have pointed out that leadership commitment, staff competency, employee empowerment and financial resource as some of factors requisite to strategy implementation. Leadership is very crucial for any successful strategy implementation. According to Paterman (2018), converting a strategy into results usually requires the coordination of people, operations as well as the strategy. However, a lack of leadership, by the top management of the organization, has been identified as one of the major barriers to effective strategy implementation (Hrebinia, 2020). It is the duty of the executive to see how well to manage these three aspects in order to successfully execute the strategies. Successful managers understand the need for a sound business strategy and therefore they invest significant time, as well as money and effort in the development of strategies.

In addition, the devolution of Ministry of Health functions has contributed to improved public health governance and public health accountability. Regional and district health committees have been established to ensure that health services are provided in a transparent and accountable manner. This has allowed for greater public participation in decision-making and has helped to ensure that services are delivered in a timely and equitable manner. The strategic implementation of devolved Ministry of Health functions has been instrumental in transforming the health system in Ghana. It has enabled increased local ownership of the health system, increased resource mobilization, improved public health governance, and improved public health accountability. These changes have been instrumental in improving health outcomes and reducing health disparities in Ghana. The strategic implementation of devolved MoH functions in Uganda has had a positive impact on the health system. It has enabled the MoH to better meet the needs of the population, and has enabled local communities to take greater control over the implementation of health strategies and services. This has led to improved health outcomes and better coordination of efforts between the MoH, district health services, and the private sector.

Strategic implementation has played a key role in influencing devolved ministry of health functions in Kenya. Since the introduction of devolution in Kenya, the Ministry of Health (MoH) has been tasked with the responsibility of coordinating and delivering health services throughout the country (Kihara, 2017). As such, strategic implementation has been essential in enabling the MoH to effectively meet its objectives and deliver health services to the people of Kenya. Strategic implementation has been essential in enabling the MoH to effectively meet its objectives and deliver health services to the people of Kenya. Through strategic implementation, the MoH has been able to develop and implement plans that prioritize the health needs of the population, strengthen the health system, and engage with stakeholders. As a result, the health system in Kenya has become more efficient, effective, and accessible (Bonfrer, & Gustafsson-Wright, 2017).

Research Objectives

The objective of this study was to assess the effects of financial resources on the strategic implementation of devolved ministry of health functions in Makueni County.

The study tested the following hypothesis to facilitate its objective
LITERATURE REVIEW

Theoretical Review

Resource Dependence Theory

The Resource Dependence theory was introduced by Jeffrey Pfeffer and Gerald Salancik in 1978. The theory states that organizations are reliant on resources from their environment in order to survive and thrive. This includes financial resources, which are a critical component of the resource dependence theory.

The theory suggests that organizations that have a greater access to financial resources are more likely to be successful in their strategic implementation of devolved ministry of health functions. This is because financial resources give organizations the ability to purchase resources, hire experienced personnel, and invest in technology and research. Organizations with access to more financial resources are able to implement more comprehensive strategies and utilize advanced technology to better serve their constituents (Zona, Gomez-Mejia & Withers, 2018).

Furthermore, the theory suggests that organizations with access to financial resources are better able to adapt to changing conditions in the environment. This is because they have the ability to respond quickly to new opportunities and threats (Nandi, Sarkis, Hervani & Helms, 2021). Organizations with access to more financial resources are better able to invest in new technologies and research, which can give them an advantage over their competitors. Finally, the theory suggests that organizations with access to more financial resources are more likely to have greater political influence. This is because they can use their resources to influence policy-makers and decision-makers (Nandi, Sarkis, Hervani, & Helms, 2021). This influence can help organizations to ensure their interests are represented in policy-making. The Resource Dependence theory argues that financial resources are a critical component of the strategic implementation of devolved ministry of health functions. Organizations with access to more financial resources are more likely to be successful in their strategies and have greater influence over policy-making (Miller, 2019).

The Resource Dependence theory can be applied to the strategic implementation of devolved ministry of health functions in Makueni County. The county must have access to financial resources in order to fund the implementation of the devolved health functions. This money will be used to pay for the salaries of healthcare workers, purchase necessary medical supplies, and fund the development of health infrastructure. Without the necessary financial resources, the county will not be able to effectively and efficiently implement the devolved health functions. Additionally, the county must have access to skilled healthcare workers in order to effectively implement the health functions. Without the necessary healthcare workers, the county will not be able to provide the necessary healthcare services to its citizens. Thus, the Resource Dependence theory can be used to demonstrate the effects of financial resources on the strategic implementation of the devolved ministry of health functions in Makueni County.

Empirical Literature Review

Financial Resources on the Strategic Implementation

The devolution of health functions from the national government to the counties in Kenya has had a significant effect on the strategic implementation of the health functions. The devolution of the health functions has enabled counties to have more control over their health services, which can help to improve the quality of services and increase access to health care. However, the successful implementation of the devolved health functions requires sufficient financial resources.
The amount of financial resources available to a devolved Ministry of Health will determine the extent to which it can fund its strategic implementation of functions. Budgetary allocations for health should be adequate to cover essential services, such as prevention, promotion, and management of health problems. Devolved ministries of health should have adequate capital expenditure to upgrade medical equipment and facilities. This will ensure that the services provided are up to date and of the highest quality. When allocating financial resources, the devolved ministry of health should consider the cost-effectiveness of each strategy. This will help to ensure that resources are allocated in the most effective manner to achieve the desired outcomes.

Financial resources are essential for the successful implementation of the devolved ministry of health functions in counties in Kenya. Financial resources are needed to purchase necessary medical supplies, pay salaries, and fund research and development. Without the adequate funding, counties may not be able to provide quality health services or ensure access to health care.

Financial resources are also vital for the development of health infrastructure in counties. The construction of health centers and hospitals requires significant capital expenditure. This expenditure must be funded by the county government, and without sufficient funds, these projects cannot be completed. Additionally, financial resources are needed to ensure that the health infrastructure is properly maintained. This involves regular repairs and upgrades to ensure that health facilities are functioning optimally.

Financial resources are also needed for the training and recruitment of health professionals. Without a well-trained and experienced workforce, counties may not be able to provide quality health services or ensure access to health care. Therefore, adequate financial resources must be provided to ensure these personnel are properly trained and recruited. Financial resources play an important role in the successful implementation of the devolved ministry of health functions in counties in Kenya. Without sufficient financial resources, counties may not be able to purchase necessary medical supplies, build and maintain health infrastructure, or recruit and train health professionals. Therefore, it is essential that counties have access to adequate financial resources in order to ensure the successful implementation of the devolved ministry of health functions.

Resources are a key factor in the implementation of devolved ministry of health functions. The availability of financial resources will determine the scope and scale of the initiatives that can be undertaken. It is important to ensure that there are sufficient resources to support the implementation of health strategies. Inadequate financial resources can be a great obstacle in strategy implementation. Inadequate funding and untimely disbursement of resources is a hindrance to the effective implementation of strategies in organizations. Without adequate financial resources even well formulated strategies will never be successfully implemented. Lack of proper financial management is equally considered as a key challenge to strategy implementation. The use of performance-based targets has induced an increased cost consciousness. Organizations have to develop cost-accounting systems and provide yearly financial statements (Slater & Olson, 2016).

The information provided improves the organization’s capacity to control the financial practices. Counties, like any other organization, need money to remain operationally sustainable and to fulfill their mandates of rendering services and facilitating development within their areas of jurisdictions. A critical question in the South African local government remains the extent to which Counties are able to financially sustain themselves, and thereby determine the well-being of their constituencies in an autonomous fashion. In addition to having to generate money on an individual basis, municipalities are, in accordance with the intergovernmental fiscal relations system in South Africa, entitled to various grants from national and provincial government, (Collin, 2016).

According to Whelan (2014), the most important unconditional grant to Counties is the Equitable Share (ES) of nationally raised revenue. These grants are paid directly to all municipalities in the country, and are based on a formula that considers the operating cost required by each individual municipality, to deliver basic services to local communities, specifically those sections that are too poor to pay for these services. In this regard, Whelan
(2016), is of the view that the grant is only partially needs-based. Where it wholly needs-based, it would also have to consider the revenue generated by each municipality across all households, and thus their ability to render these services with their own money.

The four financing sources (three national governments and one county government) are: generation of revenues by the counties from property taxes, business licenses and entertainment taxes; an equitable share with the counties assured of receiving no less than 15 per cent of national revenue; an equalization fund set aside for marginalized communities and representing an additional 0.5 per cent of national revenue; and conditional and unconditional grants from the national government. The revenue allocation formula, as presented by the Commission on Revenue Allocation (CRA), considers the following parameters: county population, poverty level, land area, basic equal share and fiscal responsibility (Commission on Revenue Allocation 2017).

Therefore, primary funding for healthcare comes from three sources: public, private (consumers) and donors. Consumers are the largest contributors, representing approximately 35.9 per cent, followed by the Government of Kenya and donors at around 30 per cent each (KPMG Africa 2018). Over the past few years, government financing as a percentage of GDP has been consistent at slightly above 4 per cent. A regional comparison of the total health budget as a percentage of GDP shows that Kenya ranks last, behind Rwanda, Tanzania and Uganda. While consumers are the largest contributors to the healthcare budget, the paradox is that the majority of those who opt for public health care are the poorest who cannot afford private care. This bracket of the population spends more than 40 per cent of non-food expenditure on healthcare, (Government of Kenya 2018). Healthcare is thus a major source of financial distress for Kenyans. As a devolved function, the major health financing at the county level comes through the county government, and beyond that is provided by consumers through cost-share. In the 2017/18 budget, counties received about 25 per cent of the total budget, (Olugo 2019). However, at the level of individual county allocation, most counties allocated less than 5 per cent of the budget to health. A lot of this allocation went into remuneration of personnel, purchase and improvement of hospital equipment and infrastructure, and purchase of drugs. Because of the low allocation, however, the money is not enough, directly impacting on the quality of care.

Financial management, in service organizations, has been a constraint and an obstacle to other functions that contribute to success of projects (Adams and Colebourne, 2019). They suggest an enlightened approach to finance in service organizations. This consists of more participative and positive approach where far from being an obstacle, it contributes to strategic planning, costing systems, personnel motivation, quality control, continued solvency, and keeping outsider’s confidence in management (Arhin-Tenkorang, 2020). In particular, there is a need to distinguish good costs that improves organizational capabilities and quality service delivery from “bad costs” that increase bureaucracy hence becoming obstacles to service delivery (Sun and Shibo, 2018). Allocated resources for health flow through various layers of national and local government’s institutions on their way to the health facilities (Blas and Limbambala, 2001). Financial accountability using monitoring, auditing and accounting mechanisms defined by the country legal and institutional framework is a prerequisite to ensure that allocated funds are used for the intended purposes (Oliveira-Cruz, Hanson, and Mills. 2018).

In 2006, Congress recognized the uniqueness and importance of these hospitals and passed the Rural Health Care Capital Access Act, which provided an exemption to the acute care provision in the FHA 242 loan program for critical access facilities. The exemption expired on July 31, 2011 The Rural Health Care Capital Access Reauthorization Act (S. 1431), introduced by Sen. Herb Kohl (D-WI) and cosponsored by Sens. John Thune (R-SD), Mike Johanns (R-NE), and Jon Tester (D-MT), would provide a five-year extension of the exemption. Without the exemption, many rural hospitals would not qualify for low-cost loan insurance because the hospital operates a nursing home or has a long average length of stay. As a result, many rural hospitals face higher financing costs on construction and renovation loans.

**Strategic Implementation in the devolved Ministry of health Functions**
Strategic implementation is an important factor in the devolved ministry of health functions. It is the process of translating strategic objectives into operational goals and plans. Strategic implementation includes the development and implementation of a plan that outlines how the ministry of health will achieve its objectives and goals.

The implementation of strategic objectives in the devolved ministry of health functions has a number of positive effects. First, it can help the ministry to better identify and prioritize its objectives. This allows the ministry to focus its resources and efforts on activities that are most likely to yield the desired results. Furthermore, the implementation of strategic objectives can increase the efficiency of resource utilization. By focusing resources on activities that are most likely to yield results, the ministry can better utilize its resources and achieve results faster.

Additionally, strategic implementation can help to improve the quality of services provided by the ministry. By having a clear plan and objectives, the ministry can ensure that the services are delivered in the most efficient and effective manner. This can lead to improved outcomes for patients and better patient satisfaction. Furthermore, it can also lead to better outcomes for the ministry, as improved efficiency and quality of services often lead to increased revenues. Strategic implementation can help to ensure that the ministry is able to respond to changes in the environment quickly. By having a clear plan, the ministry can be prepared for any unexpected changes that may occur. This can help to ensure that the ministry is able to remain competitive in the ever-changing healthcare environment.

Strategic implementation is an important factor in the devolved ministry of health functions. It can help the ministry to better identify and prioritize objectives, increase the efficiency of resource utilization, improve the quality of services, and be prepared for any unexpected changes. All of these factors can lead to better outcomes for the ministry, its patients, and the healthcare environment.

In the devolution of government functions has enabled the Kenyan government to address the needs of its citizens in a more efficient and effective manner. This has been evident in the introduction of new economic and social policies, which have helped to reduce poverty and improve access to basic services. The devolution of government functions has also enabled the Kenyan government to respond more quickly and effectively to crises, such as the COVID-19 pandemic. The strategic implementation of the devolved government functions in Kenya has had a major influence on the country’s development agenda. This has allowed for the decentralisation of resources and power, which has enabled the citizens of Kenya to have a greater say in the processes of decision-making, as well as the formulation and implementation of policies. Moreover, the devolution of government functions has enabled the Kenyan government to provide more targeted and effective services to its citizens, as well as to respond more quickly and effectively to crises.

The devolution of the Ministry of Health functions in counties in Kenya is a strategic implementation that has the potential to improve health outcomes. Devolution has been seen as a key element of Kenya’s national health strategy since 2003. It seeks to improve access to quality health services, as well as to increase the efficiency and effectiveness of health service delivery.

At the county level, devolution has enabled the decentralization of health services, allowing county governments to take responsibility for the implementation and management of health programs. This has resulted in the establishment of a County Health Management Team (CHMT), responsible for the implementation and management of health services in the county. This team includes the County Health Executive, a representative of the Ministry of Health, and other stakeholders such as non-governmental organizations and civil society organizations.

Devolution has also enabled the establishment of a health financing system that is tailored to the needs of the county. This system allows for the pooling of resources from the national and county governments as well as from development partners. Moreover, the county governments have been empowered to make decisions
regarding the allocation of funds for health services, which has resulted in increased accountability and transparency.

Finally, the devolution of health functions in counties has allowed for the strengthening of human resources for health at the county level. This has enabled the county governments to invest in the training and retention of health workers, as well as to develop mechanisms to ensure that the health workers are adequately compensated.

The devolution of the Ministry of Health functions in counties in Kenya is a strategic implementation that has the potential to improve health outcomes. By decentralizing health services, establishing a health financing system tailored to the county's needs, and strengthening human resources for health, the devolution of health functions has allowed for increased access to quality health services and improved efficiency and effectiveness of health service delivery.

**Conceptual Framework**

**Financial Resources**
- Budgetary Allocation
- Capital Expenditure
- Cost-effectiveness

**Strategic Implementation of the devolved Ministry of Health Functions**

**Independent Variables**

**Figure 1: Conceptual Framework**

Source: Author (2023)

**Dependent Variable**

**METHODOLOGY**

Descriptive research design was used in this study. The population for this study was 126 staff working at the Ministry of Health in Makueni County. Staff working at Makueni County Referral Hospital in Makueni County were chosen as the target respondents because they were the ones with the highest level of knowledge and experience on the issues related to the devolved Ministry of Health functions in the county. The sampling frame for this study included all staff from the devolved Ministry of Health in Makueni County. The researcher used Yamane's method to determine what constitutes a statistically significant sample size in light of the study's aims. A total of 96 participants were enough to reliably achieve this research targets. Data was collected using structured questionnaires. A pilot test was conducted to test the reliability and validity of the research instruments. This involved pre-testing the questionnaire with a sample of the target population.

The quantitative data was analyzed using descriptive statistical package for social services (SPSS). Descriptive statistics was used to analyze, explain and summarize properties of the data collected aided by a Statistical Package for the Social Sciences (SPSS) and Excel. Quantitative data was analyzed using descriptive statistics and inferential statistics. The findings of the study were presented in tables and figures. A correlation analysis was conducted to establish the relationship between the independent and dependent variables. A Pearson was used to determine if there was a significant positive association between independent variable and dependent variable. Regression analysis was also used to find out how an independent variable predicts a given dependent variable.

**FINDINGS**

**Descriptive Analysis**

Descriptive analysis is a statistical method used to describe and summarize data. It involves organizing data into meaningful categories, then describing the characteristics of each category. Common techniques used in
descriptive analysis include frequency distributions, cross tabulations, descriptive statistics, and graphical representations of data.

**Financial Resources on Strategic Implementation**

The study sought to assess the effects of financial resources on the strategic implementation of devolved ministry of health functions in Makueni County. The data is summarized in table 1 below.

<table>
<thead>
<tr>
<th>Opinion</th>
<th>SD</th>
<th>D</th>
<th>N</th>
<th>A</th>
<th>SA</th>
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<tbody>
<tr>
<td>The financial resources allocated to the strategic implementation of</td>
<td>7(7.3%)</td>
<td>46(47.9%)</td>
<td>43(44.8%)</td>
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<td>devolved ministry of health functions are inadequate.</td>
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<tr>
<td>The strategic implementation of devolved ministry of health functions</td>
<td>3(3.1%)</td>
<td>53(55.2%)</td>
<td>40(41.7%)</td>
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<td>has been hampered by a lack of financial resources.</td>
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<tr>
<td>The financial resources allocated to the strategic implementation of</td>
<td>1(1.0%)</td>
<td>8(8.3%)</td>
<td>30(31.3%)</td>
<td>57(59.4%)</td>
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<td>devolved ministry of health functions are efficient.</td>
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<tr>
<td>The devolved ministry of health functions is better implemented with</td>
<td>1(1.0%)</td>
<td>74(77.1%)</td>
<td>21(21.9%)</td>
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<td>a greater allocation of financial resources.</td>
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<tr>
<td>The strategic implementation of devolved ministry of health functions</td>
<td>14(14.6%)</td>
<td>36(37.5%)</td>
<td>46(47.9%)</td>
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<td>is ineffective without sufficient financial resources.</td>
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<tr>
<td>The financial resources allocated to the strategic implementation of</td>
<td>6(6.3%)</td>
<td>58(60.4%)</td>
<td>32(33.3%)</td>
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<td>devolved ministry of health functions are well-utilized.</td>
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<tr>
<td>The strategic implementation of devolved ministry of health functions</td>
<td>42(43.8%)</td>
<td>54(56.3%)</td>
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<td>would be improved with increased financial resources.</td>
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</table>

*Source: Survey Data (2023)*
In view of Table 1 findings above, most of the study participants 92.7% agree that the financial resources allocated to the strategic implementation of devolved ministry of health functions are inadequate while 7.3% were neutral to the opinion. The findings also revealed that 96.9% agreed the strategic implementation of devolved ministry of health functions has been hampered by a lack of financial resources while 3.1% of the respondents were neutral to the opinion. The study findings as well revealed that most of the participants 90.7% agreed with the opinion statement that the financial resources allocated to the strategic implementation of devolved ministry of health functions are efficient while 9.3% of the study participants were neutral to the opinion. The study also revealed that most of the participants 99.0% were agreement with statement that the devolved ministry of health functions is better implemented with a greater allocation of financial resources while only 1.0% of the respondents were neutral. Most of the respondents, 85.4% agreed that the strategic implementation of devolved ministry of health functions is ineffective without sufficient financial resources, 14.6% of the respondents were neutral to the statement. The most of the respondents 93.7% also agreed that the financial resources allocated to the strategic implementation of devolved ministry of health functions are well-utilized, 6.3% of the respondents were neutral to the opinion. Finally, most respondents 100.0% agreed with the statement that the strategic implementation of devolved ministry of health functions has improved with increased financial resources.

Strategic Implementation of the devolved Public Health in Makueni County

Strategic implementation of the devolved Ministry of Health functions in Makueni County, Kenya. The outcomes are presented in Table 2 below.

Table 2: Strategic Implementation of the devolved Public Health

<table>
<thead>
<tr>
<th>Opinion</th>
<th>SD</th>
<th>D</th>
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<tbody>
<tr>
<td>There is improved accountability and transparency in the implementation of health policies within the County</td>
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<tr>
<td>Improved healthcare services delivered through devolved Ministry of Health functions.</td>
<td>22(22.9%)</td>
<td>19(19.8%)</td>
<td>55(57.3%)</td>
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<td>Increased public engagement in health policy decisions through devolved Ministry of Health functions.</td>
<td>7(7.3%)</td>
<td>53(55.2%)</td>
<td>36(37.5%)</td>
<td></td>
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</tr>
<tr>
<td>Enhanced collaboration between public and private health providers through devolved Ministry of Health functions.</td>
<td>1(1.0%)</td>
<td>16(16.7%)</td>
<td>56(58.3%)</td>
<td>23(24.0%)</td>
<td></td>
</tr>
<tr>
<td>Increased accountability and transparency in the use of resources through devolved Ministry of Health functions.</td>
<td>21(21.9%)</td>
<td>39(40.6%)</td>
<td>36(37.5%)</td>
<td></td>
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</tr>
<tr>
<td>Increased efficiency in the delivery of health services through devolved Ministry of Health functions.</td>
<td>7(7.3%)</td>
<td>63(65.6%)</td>
<td>26(27.1%)</td>
<td></td>
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</tr>
</tbody>
</table>

Source: Survey Data (2023)
The results of the investigation are displayed in Table 2, most of the participates 77.1% agreed that there is improved accountability and transparency in the implementation of health policies within the County while only 22.9% of the respondents were neutral with the opinion. Most of the respondents 92.7% also agreed that improved healthcare services delivered through devolved Ministry of Health functions, while 7.3% were neutral with the opinion. Most respondents 82.3% as well agreed that increased public engagement in health policy decisions through devolved Ministry of Health functions, 16.7% were neutral while 1.0% disagreed with the opinion. In addition, most respondents 78.1% agreed that enhanced collaboration between public and private health providers through devolved Ministry of Health functions, just 21.9% of them were neutral with the opinion. Further, most of respondents 93.7% agreed that increased accountability and transparency in the use of resources through devolved Ministry of Health functions, 7.3% were neutral. Finally, most respondents 75.3% agreed that increased efficiency in the delivery of health services through devolved Ministry of Health functions, 5.2% were in disagreement with the opinion while 1.0% were neutral with the opinion.

CONCLUSION AND RECOMMENDATION

The objective of the study was to assess the effects of financial resources on the strategic implementation of devolved ministry of health functions in Makueni County. The findings showed that there is significant relationship between the financial resources and strategic implementation of devolved ministry of health functions in Makueni County. The findings were supported by the statements in the questionnaire whereby majority of the respondents agreed they are true. This was also consistent and supported by the regression results which revealed that the financial resources had a positive and significant effect on the strategic implementation of devolved ministry of health functions in Makueni County.

The study findings concluded that, financial resources, has positive and significant effect on strategic implementation of devolved ministry of health functions in Makueni County. The study concluded that the financial resources allocated to the strategic implementation of devolved ministry of health functions are inadequate. The findings also concluded that strategic implementation of devolved ministry of health functions has been hampered by a lack of financial resources. The study findings as well concluded that the financial resources allocated to the strategic implementation of devolved ministry of health functions are efficient. The study concluded that the devolved ministry of health functions is better implemented with a greater allocation of financial resources. The study concluded that the strategic implementation of devolved ministry of health functions is ineffective without sufficient financial resources. Finally, study concluded that the strategic implementation of devolved ministry of health functions has improved with increased financial resources.

The study recommended that the county government should increase the financial resources allocated to health services. This could be done by increasing the county’s revenue base, either through taxation or other means. The county should also seek to increase its borrowing capacity so that it can make more investments in health services. The study recommended that the county should improve its capacity to manage and utilize the financial resources available to health services. This could be done by improving the management of financial resources, increasing accountability and transparency, and strengthening the county’s financial management systems. The study recommended that the county should develop and implement comprehensive strategies to ensure the effective utilization of resources allocated to health services. This could include, for example, increasing the capacity of health workers, providing adequate infrastructure and equipment, and improving access to health services. The study recommended that the county should strengthen the capacity of the health system to deliver quality services. This could be done by improving the training of health workers and ensuring that the health system is well-equipped to provide quality services. The study recommended that the county should engage in stakeholder consultation and collaboration to ensure that the health sector is adequately supported and that the interests of all stakeholders are taken into account. This could include engaging with local communities and civil society organizations, as well as other government agencies.
Implication for Further Study

Further research has to be done due to the limitation in the study. The study was only in apposition to focus on Makueni County while there exist other 47 counties in Kenya. The study was only possible to carry out research on the effects of financial resources on the strategic implementation of devolved ministry of health functions in Makueni County, Kenya hence need to do further studies in this area by focusing on other factors and also increasing the sample size.

REFERENCES


