

Kenya Ministry Of Health Health Care Financing Strategic

Private Health Sector Assessment in Kenya is part of the World Bank Working Paper series. These papers are published to communicate the results of the Bank's ongoing research and to stimulate public discussion. This paper broadly examines the health sector in Kenya, by synthesizing an assessment of the health sector with an analysis of the market. After considering the legal and regulatory framework, the policy enforcement, the human resource capacity, and the financing of health systems, the paper makes recommendations for policy makers. World Bank Working Papers are available individually or on standing order. The World Bank Working Paper series is also available by subscription to the World Bank e-Library (www.worldbank.org/newelibrary). "I wish to reiterate the government's commitment to engaging the private sector in improving the health of all Kenyans. The high-level participation and diversity of the stakeholders that took part in the Great Rift Valley Lodge, Naivasha, workshop indicate the broad support we have for a strong public-private partnerships in health." Professor Anyang' Nyong'o Honorable Minister of Health Ministry of Medical Services Kenya

Workshop Summary

Community Financing of Primary Health Care in Kisumu District

A Review of the Regulatory Framework for Private Healthcare Services in Kenya

The Economic Burden of Health in Kenya

An Assessment of the Service Delivery Capacity of the District Health Systems in Kenya

Sectoral Perspectives on Corruption in Kenya

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Appendices to a Proposal for the Improvement of Rural Health Services and the Development of Rural Health Training Centers in Kenya

Private Health Sector Assessment in Kenya

The Shift to a National Social Health Insurance Fund

Assessment Report

Kenya

Annual Report

Mental, neurological, and substance use disorders are common, highly disabling, and associated with significant premature mortality. The impact of these disorders on the social and economic well-being of individuals, families, and societies is large, growing, and underestimated. Despite this burden, these disorders have been systematically neglected, particularly in low- and middle-income countries, with pitifully small contributions to scaling up cost-effective prevention and treatment strategies. Systematically compiling the substantial existing

knowledge to address this inequity is the central goal of this volume. This evidence-base can help policy makers in resource-constrained settings as they prioritize programs and interventions to address these disorders.

A Case Study

... National Pilot Project of Kenya Ministry of Health

A Guide for Health Workers in Kenya

Public Mental Health Care and Public Policy in Kenya

Social Health Insurance for Developing Nations

Twelve12 years of primary health care in Kenya

Kenya's private sector is one of the most developed and dynamic in Sub-Saharan Africa. In the health sector where the leading causes of disease are HIV/AIDS, acute respiratory infection, diarrheal diseases, and malaria the private commercial (for-profit) sector and the not-for-profit sector play important roles in preventing and treating disease. Even among the poor, the private sector is an important source of care. For example, 47 percent of the poorest quintile of Kenyans use a private facility when a child is sick. In recognition of this important role, the Government of Kenya (GOK) has developed strategies to develop the private health sector in its Vision 2030 plan as well as in the strategic plans for 2008-2012 of the Ministry of Health and the Ministry of Public Health and Sanitation. Some of the key features of those plans include social health insurance to increase access to health services, a reduced role for the Ministry of Health in service delivery, more delegation of authority to provincial and district level, and promoting more public-private partnerships (PPPs). In this context, USAID/Kenya requested that the Private Sector Partnerships-One project (PSP-One) conduct an assessment of the private health sector in Kenya. The scope of work involved assessing the role of the private sector in the overall health system, considering ways to encourage the private sector to play a greater role and identifying ways to improve the public-private interface to increase equity, access and efficiency in the health system. The development of the scope of work also coincided with the start-up of the World Bank/International Finance Corporation (IFC) project, Better Health in Africa, which envisions improvement of the government-private sector interface to create new opportunities for investment and the growth of the private health sector in Africa. As a result, the PSP-One team was able to benefit from World Bank/IFC support for both the assessment and the summary report that served as a catalyst for a policy dialogue. The recommendations in this report have been revised in consideration of the feedback received during the policy process.

Health Strategy for Kenya

Sector Plan for Health

Kenya Ministry of Health

Towards Better Health in Kenya

Primary Health Care Programme in Western Province

Kenya National Guidelines for the Comprehensive Management of the Health Risks and Consequences of Drug Use

Mental, neurological, and substance use (MNS) disorders have a substantial impact on global health and well-being. Disorders such as depression, alcohol abuse, and schizophrenia constitute about 13 percent of the total burden of disease. Worldwide, MNS disorders are the leading cause of disability, and the 10th leading cause of death. Despite this high burden, there is a significant shortage of resources available to prevent, diagnose, and treat MNS disorders. Approximately four out of five people with serious MNS disorders living in low- and

middle-income countries do not receive needed health services. This treatment gap is particularly high in Sub-Saharan Africa (SSA). Challenges to MNS care in SSA countries include a lack of trained mental health professionals, few mental health facilities, and low prioritization for MNS disorders in budget allocations. African countries, on average, have one psychiatrist for every 2 million people, whereas European countries have one psychiatrist per 12,000 people. Expanding on previous efforts to address the development and improvement of sustainable mental health systems in SSA, the Institute of Medicine convened this 2015 workshop series, bringing together key stakeholders to examine country-specific opportunities to improve the health care infrastructure in order to better prevent, diagnose, and treat MNS disorders. Providing Sustainable Mental and Neurological Health Care in Ghana and Kenya summarizes the presentations and discussions from these workshops.

Primary Health Care

National Guidelines for the Implementation of Primary Health Care in Kenya

Healthcare Financing Through Health Insurance in Kenya

Kenya's Health Policy Framework

Providing Sustainable Mental and Neurological Health Care in Ghana and Kenya

Towards Attaining the Highest Standard of Mental Health

Specialist groups have often advised health ministers and other decision makers in developing countries on the use of social health insurance (SHI) as a way of mobilizing revenue for health, reforming health sector performance, and providing universal coverage. This book reviews the specific design and implementation challenges facing SHI in low- and middle-income countries and presents case studies on Ghana, Kenya, Philippines, Colombia, and Thailand.

Organization and Management of Community-based Health Care

Mental, Neurological, and Substance Use Disorders

A Case Study of the Bamako Initiative in Kenya

12 Years of Primary Health Care in Kenya

A Review of the Health Sector in Kenya

Pharmaceutical and Medical Supplies System Assessment