ABSTRACT
In 1994, donor funds only accounted for 8% of the health expenditure. This proportion increased to 16% in 2001/2002 and to 31.0% in 2005/2006. It is estimated that donor expenditure on health in 2008/09 amounted to 40.6% of the health expenditure. From 2001/2002 up to date, the total contributions of donor funds to total health expenditure increased from US$ 118.9 million to US$ 298.6 million. A large proportion of these funds (78%) went to funding HIV/AIDS related programmes. KAIS report in 2012 showed that Nyanza region had the highest Human immunodeficiency virus prevalence in Kenya of 15.1% compared to 5.6% nationwide, with Siaya at 23.4% prevalence rate. In Kenya quite a large share of the HIV/AIDS donor funding are directed towards efforts to mitigate the pandemic therefore no agency has been able to find out how these funds impact on the health systems. Funding was program specific with an objective of fighting HIV/AIDS through prevention, care and treatment, with little emphasis on provision for infrastructural investment. The general objective of the study was to determine the effect of HIV/AIDS donor funding on the health system infrastructure (HSI) in Siaya county. The specific objectives were to determine the effect of HIV/AIDS donor funds disbursement on the various components of the HSI and to assess various components of HSI that reported improvement as a result of donor funding. Piloting of the instrument was done in 5 facilities in Kisumu County, which helped in validating internal consistencies of the data collection tool and reliability of the tool was tested by use of test-retest method. The study drew from Resource dependence theory, it was conceptualised that HSI situation is over stretched with effect of HIV/AIDS donor funding as the independent variable and the HSI the dependent variables. It was a descriptive cross-sectional survey with target population of 80 and sample size of 80 health facilities (HF) in Siaya County. Data was collected using questionnaires. Logistic regression and Kendall’s-b analysis was used to assess effect and correlation of donor funding on the HSI in Siaya County. From the study findings, HF that received HIV/AIDS donor funds were about 5 times more likely to have trained their staff, \( \beta =4.8, p=0.002 \) as compared to those HF that did not receive funding. Also, those that received donor funding as compared to those that did not receive funding were about 10 times more likely to have had improvement in Information Technology infrastructure \( \beta =9.9, p<0.001 \). In terms of various components of the health system infrastructure that reported improvement in physical infrastructure was 52 (65%) HF. Of these 16 (31%) did receive donor funds. Of the 80 HF 43 (54%) reported training of staff, of these 26 (60%) did receive donor funds. On IT 47 (59%) reported improvement of IT, of these 30 (64%) received donor funds. The findings of this study show improvement that donor funds have had on the various components of the HSI. In conclusion, HIV/AIDS donor funding had a positive effect on IT infrastructure and staff training. Therefore more donor funds should be vailed to propagate the gains made in the health systems infrastructure in Siaya County. The study recommends further studies with a larger sample size focusing on aggregated funding. Since no other study has been done to look at the effect of HIV/AIDS donor funding on components of the health systems infrastructure in Kenya, more research needs to be done for comparison purposes. In addition further research needs to be carried out to determine the sustainability of the gains made in the health system infrastructure as
a result of donor funds and to also to evaluate the effectiveness of donor funded health system infrastructure in comparison to non-funded health system infrastructure.