

**COMMUNITY PARTICIPATION IN GOVERNANCE OF RURAL HEALTH CENTRES
AND ITS EFFECT ON QUALITY HEALTH CARE SERVICE DELIVERY IN KENYA:
THE CASE OF SELECTED UASIN GISHU COUNTY HEALTH CENTRES**

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ABSTRACT

This study focused on the governance phenomenon of community participation and its influence on the quality of health care services among government health centres in UasinGishu County. The Care of patients is fundamentally based on human interaction and healing requires such relationship and Patients are concerned more about how caring the service provider is rather than knowledge possessed. The purpose of the study was to assess community participation in governance of rural health centres and its effects on the quality health care service delivery in selected health service facilities in UasinGishu County. The specific objectives of the study were to examine the extent of community participation in health care service provision in health facilities, determine the effect of community participation on improving mechanisms of transparency and accountability in health care service provision in health facilities, establish the effect of community participation on clients satisfaction with accessibility of health care services in health facilities, determine the effects of community participation on client's satisfaction with outcomes positively impacting client's health in health facilities and examine the effects community participation on clients' satisfaction with physical facilities in health facilities in UasinGishu County. The study adopted social field theory of interactive community participation developed by Wilkinson (1991) from social field theory of Kaufman (1959). The research was carried out in Langas, Chepkorio and Moiben Health Centres. The study adopted cross-sectional survey research design, where the participants under study described phenomenon in their real-life context in which it occurred, the study target population was 3,868 that consisted patients or clients, community leaders and workers in public health service providing institutions. The sample size under study was 285 respondents. The sampling method used in the study was stratified, simple random, purposive sampling techniques. The research used questionnaires and interview schedule with both closed-ended and open-ended structured questions developed taking into consideration relevant published literature. Data collected from the field was analyzed using both descriptive statistics and inferential statistics. Karl Pearson moment of correlation, showed there exists a high positive correlation between the variables with a 0.753(75.3%) degree, with a 10 %(0.01) confidence level and therefore there was a proof that satisfaction and delivery of health service had a high direct relationship. The recommendations of the study were Family planning, Prevention and treatment of unsafe abortions and post-abortion care, Prevention and treatment of reproductive tract infections, including sexually transmitted diseases and HIV/AIDS, Prevention and treatment of infertility, Management of cancer, including prevention and management of cervical cancers, Discouragement of harmful traditional practices that affect the reproductive health of men and Women, such as female genital mutilation; Information and counseling on human sexuality, responsible sexual behavior, responsible parenthood.