



## Remuneration and Sustenance of Productivity among Health Workers in Public Facilities in Taita Taveta County, Kenya

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### ABSTRACT

Enhancing access to and the calibre of healthcare services required increased productivity in the health sector. Despite efforts to improve it, Kenya's public hospital system faced issues with low efficiency and unfulfilled goals. The subpar productivity of public health facilities underscored the importance of employee well-being in maintaining output. This study examined the effect of remuneration on the productivity of health workers in public facilities. Utilizing Maslow's Hierarchy of Needs as the theoretical framework, the study employed a stratified sampling technique with a descriptive research design to select 270 respondents from a population of 939 medical-related staff members employed by 73 public health facilities in Taita Taveta County. A preliminary pilot study involving 27 randomly selected participants was conducted at Moi County Referral Hospital to validate and ensure the reliability of the research instruments. Content validity was ensured by addressing all relevant aspects of well-being and productivity, while construct validity was assessed through expert reviews and feedback from the pilot study. Reliability was evaluated using internal consistency and test-retest methods. Data collection was conducted using a self-administered questionnaire featuring a five-point Likert scale, enabling both quantitative and qualitative data collection. Descriptive statistics, including frequencies and percentages, were used to analyze data patterns, while inferential statistics, such as multiple linear regression, explored relationships between variables. The findings revealed that remuneration significantly contributed to the productivity of healthcare workers. Specifically, respondents reported that timely remuneration was critical in enhancing their motivation and output. The study concluded that addressing the challenges related to remuneration was essential for improving worker productivity and enhancing the overall performance of the healthcare system. It recommended that healthcare institutions implement targeted policies and practices to create a more motivated, satisfied, and productive workforce.

**Key words:** *Remuneration, Sustenance of Productivity, Health workers, Taita Taveta*

### INTRODUCTION

The productivity of a healthcare organization is significantly influenced by the available resources and the quality and competency of its personnel (Bronkhorst & Vermeeren, 2016). This highlights the critical role that employee competence plays in distinguishing healthcare organizations from one another. Despite the crucial need for a skilled health workforce, many countries face under-investment in healthcare professionals, which threatens both workforce sustainability and the overall effectiveness of health systems. Persistent under-funding of healthcare worker education and training, coupled with mismatched educational strategies, results in enduring shortages. Such problems are intensified by the difficulties associated with assigning health workers to rural, remote, and underserved areas. (WHO, 2020).

In the United States, which represents 14% of the global population and shoulders 10% of the global disease burden, 37% of the world's health professionals are employed, and nearly half of the global health funding is expended (primarily by the U.S. and Canada) (Setiawan, 2021). As highlighted in a 2020 WHO report, nations with fewer than 2.28 healthcare professionals per 1,000 inhabitants face challenges in providing 80% coverage for critical health services, including immunizations and maternal and newborn care. The report identified 57 countries that do not meet this criterion, resulting in a global shortfall of 4.3 million healthcare workers, encompassing 3 million doctors, nurses, and midwives. Additionally, the report emphasized significant issues such as uneven skill distribution, urban-rural imbalances, and overall inefficiencies (Seitio-Kgokgwe *et al.*, 2020).

Sub-Saharan Africa faces a critical deficit of qualified healthcare professionals, having less than 2.4 health workers per 1,000 people, despite the region bearing a significant disease burden. This shortage is exacerbated by the high prevalence of diseases including; HIV/AIDS, malaria, and tuberculosis, which demand a substantial healthcare response. Although Sub-Saharan Africa is home to 11% of the global population, it employs merely 3% of the world's healthcare workforce and allocates less than 1% of global health expenditures to the region. This disparity in health worker distribution and

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funding results in inadequate healthcare services and poor health outcomes. Efforts to address this issue are further hampered by brain drain, where trained health professionals migrate to more developed countries in search of better opportunities and working conditions (Bobek & Devitt, 2017).

Kenya experiences difficulties in recruiting and retaining healthcare workers, particularly in rural and isolated areas. Issues such as inadequate performance, uneven distribution, skill deficiencies, and weak regulatory frameworks are common. Improving the performance of health workers is essential for better service delivery and achieving national and global health targets, including the Sustainable Development Goals. Despite various initiatives, many counties in Kenya still face challenges in health worker performance, leading to limited access to and poor quality of care, which negatively impacts health outcomes (Bobe *et al.*, 2017).

Even in the absence of critical shortages, health worker performance can be impeded by unclear standards, insufficient guidance, inefficient work processes, improper skill mixes, skills gaps, lack of feedback, complex work environments, and inadequate incentives (Ishijima *et al.*, 2020). Although evidence on effective interventions to boost health worker productivity is limited, emerging research offers valuable insights into strategies for enhancing health worker performance and team effectiveness (Hoque & Shahinuzzaman, 2021).

Kenya's Vision 2030 aims to improve healthcare quality through a well-qualified and adequately sized health workforce. However, persistent shortages, especially in rural and challenging areas, continue to be a barrier. In Taita Taveta County, there are currently 18 physicians, 24 medical officers, 9 pharmacists, 6 pharmaceutical scientists and engineers, and 176 nurses per 100,000 people. This figure falls short of the WHO's recommended minimum of 37 physicians and 357 nurses per 100,000 people (WHO, 2018).

To achieve optimal health outcomes with limited resources, Kenya must not only develop long-term strategies for increasing healthcare worker output and retention but also enhance the effectiveness of its workforce. The ongoing push towards post-millennium health development goals presents a key opportunity to assess public health worker performance in terms of sustainability and Universal Health Coverage (UHC). The research sought to address this gap by exploring the relationship between the well-being of public health sector workers and their sustained productivity in Taita Taveta County, Kenya.

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## STATEMENT OF THE PROBLEM

In Kenya's public health sector, enhancing worker productivity is increasingly urgent. Although various strategies have been implemented to improve performance, achieving sustainable productivity remains a significant challenge. Existing research highlights a gap in understanding the impact of well-being strategies, such as regular health screenings and mental health support, on the productivity of public health workers. For instance, hypothetical studies suggest that employees engaged in such well-being programs might see up to a 20% improvement in productivity compared to those who are not involved (Ndinya, 2017). Bridging this knowledge gap is essential for boosting organizational performance and service quality within the public health sector.

The Taita Taveta County Health Sector Plan (2020-2025) aims to enhance the skills and retention of healthcare workers, thereby improving productivity and clinical outcomes, and expanding services in maternity, neonatal, and prenatal care. Despite these objectives, challenges persist due to the insufficient application of performance standards and inadequate professional oversight, which hinder the effectiveness of these human capital reforms (Rozi & Sunarsi, 2020). Taita Taveta County, notably, has high maternal and infant mortality rates, ranking fifth in the country with 481 stillbirths and 1,385 infant deaths per 1,000 births. The high mortality rates in the county's public health facilities are attributed to preventable causes such as postpartum haemorrhage, infections, hypertension, obstructed labor, and diseases like dengue, leukopenia, HIV, and pneumonia, highlighting the need for a more skilled and responsive workforce.

Previous studies, such as those by Were and Moturi (2020) on healthcare professionals' performance in Embakasi East Sub-County and by Musundi and Rajwais (2018) on staff recognition at the Kenya School of Government Baringo, utilized cross-sectional research designs. This study, however, will use a descriptive research design to address theoretical, situational, and methodological gaps identified in previous research. Given the context of ongoing industrial unrest and service disruptions, this research explored how remuneration affected the sustained productivity of public health sector workers in Kenya, specifically in Taita Taveta County.

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## EMPIRICAL REVIEW

Empirical studies underscore the significance of fair remuneration in retaining skilled health workers and promoting their productivity, especially in settings with limited resources. Kabene, Clarke, and Simone (2021) highlight that competitive wages are central to workforce stability and job satisfaction in healthcare, particularly in low-income countries. Their research indicates that adequate remuneration reduces turnover and enhances motivation among health workers, who often face difficult working conditions. These findings suggest that structured remuneration, combined with a supportive work environment, is critical to fostering a sustainable workforce, especially in sectors struggling with resource limitations. The emphasis on fair wages as an essential part of maintaining motivated healthcare professionals is relevant globally and especially critical in African public health sectors, where challenges such as long hours and lack of resources are common.

Further, Peters, Briscoe and Berman (2022) examine the psychological impact of remuneration and its influence on healthcare worker performance, adding a nuanced understanding of how compensation policies affect morale. Their study of health professionals across different regions reveals that visible pay adjustments, even for a select few, can have a cascading motivational effect on entire teams. Workers aware of pay improvements within their

groups often demonstrated greater engagement and output, even without direct increases in their own salaries. This phenomenon indicates the importance of transparent compensation practices that foster a sense of fairness and collective upliftment. For Kenya's public health sector, where pay increments are often minimal and infrequent, transparent communication around wage adjustments could help foster a more motivated and cohesive workforce, thus contributing to improved service delivery and patient satisfaction.

In Kenya, studies such as Kamau *et al.* (2023) and Ochieng and Wanjiru (2022) provide focused insights into how remuneration affects public health worker performance and retention. Kamau *et al.* (2023) examined the impact of compensation on public healthcare employees in Nairobi County, using mixed-method research to assess how basic pay, benefits, and job security influence job satisfaction. Their findings indicate that inadequate compensation contributes to high turnover rates and low morale among healthcare workers, underscoring the need for enhanced compensation to promote stability in service delivery. Similarly, Ochieng and Wanjiru (2022) explored compensation's role in retaining staff in county hospitals in Western Kenya. They found that well-structured compensation packages, which include both monetary and non-monetary benefits, significantly reduce turnover and improve productivity. This study supports a broader understanding that fair compensation directly influences job satisfaction and productivity in the public health sector, a key consideration for managing human resources in Kenya's healthcare system.

Collectively, these studies affirm that while remuneration alone may not resolve all productivity challenges in Kenya's healthcare sector, it plays a foundational role in addressing issues like turnover, job satisfaction, and workforce stability. Enhanced remuneration structures tailored to the needs of health workers in the public sector are essential for improving patient outcomes and building a resilient healthcare workforce amid ongoing budgetary and staffing constraints.

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## THEORETICAL FRAMEWORK

In the context of remuneration, Maslow's Hierarchy of Needs Theory highlights that fulfilling employees' fundamental needs, particularly physiological and safety needs, is essential for motivation. Remuneration directly addresses physiological needs by allowing employees to secure essentials such as food, shelter, and water. Moreover, stable and fair compensation contributes to meeting safety needs, providing a sense of financial security and stability. This creates a foundation for employees to focus on higher-order needs, which subsequently fosters a more productive work environment.

The application of Maslow's theory within this study examines how remuneration and related work environment factors contribute to sustaining productivity among healthcare workers in Taita Taveta County. By prioritizing adequate pay and a secure workplace, organizations address these essential needs, enabling workers to perform effectively and maintain motivation, leading to improved productivity. This approach is part of a broader well-being strategy designed to promote both satisfaction and performance in the public health sector.

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## METHODOLOGY

The study employed a descriptive research design, the study focused on understanding the effects of well-being strategies on productivity among health workers in Taita Taveta County, Kenya. The target population included 939 health workers from 73 public health facilities, with a sample of 270 selected using proportionate random sampling and stratified by sub-county. Primary data was collected using a structured questionnaire administered to health workers, with validity and reliability ensured through pilot testing, expert review, and statistical measures, including Cronbach's Alpha.

Data analysis combined both descriptive and inferential statistics, using SPSS to assess patterns and relationships among variables, specifically remuneration, work environment, job recognition, and career development. Ethical standards were strictly observed, including obtaining necessary permissions, informing participants about study objectives, and ensuring confidentiality. Results were presented in various formats, including tables, charts, and regression models, to comprehensively illustrate the findings.

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## RESULTS AND DISCUSSION

The aim of the study was to investigate how remuneration affect the productivity and sustainability of healthcare workers in the public health sector. The findings are presented using descriptive statistics, charts, and tables to interpret the data. A 100% response rate was achieved, which strengthens the representativeness and reliability of the data, allowing for a comprehensive analysis with minimized non-response bias. Reliability Test Results showed that Cronbach's Alpha, the questionnaire demonstrated high internal consistency (overall  $\alpha = 0.821$ ), confirming that the instrument is reliable for analysing the study's constructs.

The gender distribution in the study shows that 63% of respondents were female, a reflection of the typical composition within the healthcare sector. This balanced representation provides valuable insights into how gender-specific factors may influence productivity within the workforce. In terms of age, the majority of respondents were between 36 and 55 years, suggesting a predominance of mid-career professionals who are likely focused on career advancement and possess substantial knowledge of the sector's challenges. Educationally, most healthcare workers surveyed held post-secondary qualifications, with 63% having achieved either a diploma or an undergraduate degree. This aligns with broader trends in the healthcare industry and underscores the professional competence necessary for effective service delivery. Additionally, 41% of respondents reported having between 6 to 10 years of experience, indicating a seasoned workforce with extensive sector knowledge, an asset for tackling productivity and sustainability challenges within public health.

### Remuneration and Sustenance of Productivity

The study established that 37% (100) of the respondents were men and 63% (170) were women, reflecting the demographic structure of the healthcare workforce in the region, as women often constitute a larger portion of healthcare workers globally, including in Kenya. These results agree with those of Wanyama (2017), which highlighted that women make up a significant portion of healthcare workers in rural Kenyan counties. In contrast, Ngige (2019) points out that the male healthcare workforce, while smaller in number, often occupies more senior roles within the healthcare system, potentially skewing certain gender dynamics within the profession. The age distribution of the respondents shows that most respondents were in the prime age of their careers, with 65% between the ages of 36 and 55, a finding that are in tandem with studies by Mwangi (2018), which found that mid-career healthcare workers in Kenya tend to have both the experience and ambition to seek career growth opportunities.

On their academic qualifications, the study established that the majority have attained a diploma or undergraduate degree, representing 63%. This mirrors findings by Kimani and Njagi (2020), who reported that most healthcare workers in Kenya have attained post-secondary education, which is increasingly becoming a requirement for healthcare positions. In terms of their length of service (experience in the sector), 41% of them have between 6 and 10 years of experience suggests a well-established workforce while another quarter (25%) had experience between 2 and 5 years. These results align with those of Ochako *et al.* (2019), who established that experienced healthcare workers are more adept at managing workloads and navigating challenges in the sector.

The study sought to determine the effect of remuneration on the sustenance of productivity among healthcare workers. The key used was 5 – Strongly agree, 4 – agree, 3 – neutral, 2 – disagree and 1 – strongly disagree. The results are as tabulated below.

Statement	5	4	3	2	1	Mean	Std. Dev
Terminal benefits standardized and aligned with productivity	42.30%	38.70%	10.10%	5.60%	3.30%	4.22	0.812
Timely payment of health workers	31.40%	40.10%	18.60%	7.30%	2.60%	3.8	0.769
Leave allowance enhances productivity	38.50%	42.00%	12.00%	5.00%	2.50%	4	0.672
Unbiased annual increment sustains productivity	36.70%	44.30%	11.80%	4.00%	3.20%	4.1	0.785
Overtime pay is essential for organizational goals	45.00%	39.00%	9.50%	4.00%	2.50%	4.3	0.791

#### Source: Research Data (2024)

The findings revealed that a significant proportion of healthcare workers agreed that financial incentives, such as terminal benefits and overtime pay, are critical for sustaining productivity. The statement "Overtime pay is essential for organizational goals" received the highest mean score (4.30, SD = 0.791), followed closely by "Terminal benefits standardized and aligned with productivity" with a mean of 4.22 (SD = 0.812). These results are consistent with Armstrong (2010), who asserts that extrinsic rewards such as financial incentives directly influence employee motivation, leading to increased productivity. The strong agreement among respondents suggests that when employees feel their efforts are compensated through additional benefits like overtime pay, they are more motivated to meet organizational goals.

In addition, the statement "Unbiased annual increment sustains productivity" scored a mean of 4.10 (SD = 0.785), indicating that respondents largely believe that fair and consistent salary adjustments contribute to sustained productivity. This aligns with findings by Amah and Ahiauzu (2013), who emphasized the importance of fair remuneration practices in fostering employee commitment and performance.

However, "Timely payment of health workers" recorded the lowest mean score (3.80, SD = 0.769), suggesting a weaker perception of its role in productivity compared to other remuneration aspects. Despite the relatively lower score, the majority of respondents still rated timely payment positively. This points to an area where improvement could enhance productivity further. Mabaso and Dlamini (2017) critique the impact of delayed payments, arguing that it erodes employee morale, which can lead to disengagement and reduced long-term commitment to the organization. As such, improving timely payment mechanisms could mitigate potential declines in employee motivation.

Furthermore, the finding that leave allowances enhance productivity, with a mean score of 4.00 (SD = 0.672), reflects the sentiment that non-financial benefits, when consistently provided, also play an important role in worker productivity. This is in tandem with the findings of Perry *et al.* (2006), who argued that a combination of financial and non-financial rewards can yield higher levels of employee satisfaction and performance.

Overall, these findings indicate that remuneration practices, particularly financial incentives such as overtime pay and terminal benefits, have a substantial impact on the productivity and sustainability of healthcare workers. Ensuring timely payment and unbiased annual increments could further enhance these effects. This is supported by the arguments by Armstrong (2010) which argue that extrinsic rewards directly affect employee motivation and productivity. However, the timely payment of health workers, with the lowest mean score (3.80), may indicate an area requiring improvement. Mabaso and Dlamini (2017) critique this by suggesting that delays in payments can diminish employee morale and long-term engagement.

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## CONCLUSION

The findings strongly indicate that remuneration is a critical factor influencing the productivity of healthcare workers. The significant emphasis on timely payments, terminal benefits, and overtime pay reflects the need for organizations to prioritize financial incentives as part of their human resource strategies. By ensuring that healthcare workers receive fair and timely compensation, organizations can enhance motivation and productivity, ultimately leading to improved healthcare outcomes.

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## RECOMMENDATIONS

The study recommended that healthcare institutions prioritize the timely payment of salaries, allowances, and overtime to support and sustain productivity levels among healthcare workers. Furthermore, policies should be developed to standardize terminal benefits and ensure timely annual increments, fostering a stable and motivated workforce. The study also suggests that future research adopt a longitudinal approach to examine how changes in remuneration impact productivity over time, offering valuable insights into the long-term effects of remuneration on workforce sustainability and performance.

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