

**HEALTH INFORMATION UTILIZATION FOR DECISION MAKING IN
HEALTH FACILITIES IN NANDI COUNTY, KENYA**

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DECLARATION

I declare that this research thesis is my own original work and that it has never been submitted for the award of an academic degree in any other university or institution of higher learning.

Signature.....

Date.....25/11/2022

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We confirm that the work reported in this thesis was conducted by the candidate under our supervision as the University Supervisors.


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ABSTRACT

The purpose of health information system is to provide timely, reliable and accessible quality health information for evidence based decision making to promote the health of the nation. Following the new constitution of 2010, health function was devolved to county level where most decisions pertaining to health are carried out by health managers. Studies have shown utilization of health information to make decisions to be very low in developing countries. The main research objective of this study therefore, was to examine health information utilization for decision making in health facilities in Nandi County, Kenya. The study adopted a descriptive research design in which desired data was collected from healthcare providers based on cross section. The sample frame was all health staff that generates health data and the managers of health services at various levels with experience of six months and above. The sample population was 163 health workers at various levels of management in the service delivery. The study sample was selected through stratified, simple random and systematic methods. The data collection methods were questionnaires, interview schedules and focused group discussion guides. The data collection was done using research assistants who were trained by the researcher. Data analysis was done using the relevant software packages including statistical package for social science (SPSS ver 23) as main software and Microsoft Excel among others. The response rate was 92%. The study results revealed that 44.4% always use the data in the day-to-day running of the health facility programs, with 49.6% partially using data and 5% as never using routine health information for decision making. The study findings were presented using tables, charts, graphs and narratives. The major issues identified for partial utilization include inadequate support supervision, inadequate skilled staff, inadequate support supervision, mentorship and on job training. Other areas of concern are inadequate tools, inadequate guidelines and high workload). The study makes the following conclusion; this study revealed the use of routine health information for decision making with majority using it in planning, monitoring and evaluation and supply and drug management. Information culture has not yet been achieved as some of the decisions were based on personal liking, intuition, supervisor directives and not on facts which may lead to inefficiency and poor health outcomes. The staff have received sub optimal continuous professional training on the following areas HMIS, data analysis, data utilization and data management, planning and computer software, a few had received training on Survey. The study recommends that the Ministry of Health should apply appropriate and effective strategies that will promote the consistent health information use for decision making at all levels of management.