

THREE YEAR TREND ANALYSIS (FY 2016/2017, 2017/2018 AND 2018/2019)

RHRN GENERAL COUNCIL

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NETWORK FOR ADOLESCENTS AND YOUTHS OF AFRICA (NAYA-KENYA)



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OUTLINE



- **BACKGROUND**
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- **METHODOLOGY**
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OBJECTIVES OF THE ANALYSIS



1. Provide essential information on resource allocation in the FY 2015/16, FY 2017/18 and FY 2018/19 and the distribution of the resources per sub programme area in Mombasa, Kisumu and Nairobi Counties.
2. Ascertain Mombasa, Kisumu and Nairobi Counties' Three year progress in addressing health issues through budgetary allocation.
3. Identify strengths and gaps in the health program budget.

METHODOLOGY OF THE ANALYSIS



- ❑ This was primarily a desk review and analysis of available public information on budgets and budget making process in Mombasa, Kisumu and Nairobi Counties.

The primary documents of the analysis were;

- ◇ 2016/17, 2017/18 and 2018/19 budgets
- ◇ 2018-2022 County Intergrated Development Plans
- ◇ 2016/17, 2017/18 and 2018/2019 Fiscal Strategy Papers

LIMITATIONS AND CHALLENGES



- Primarily desk review
- Difficulty in getting actual expenditure to calculate absorption rates
- Unable to determine whether the actual amounts budgeted for were remitted
- Timely accessibility of primary documents for the analysis



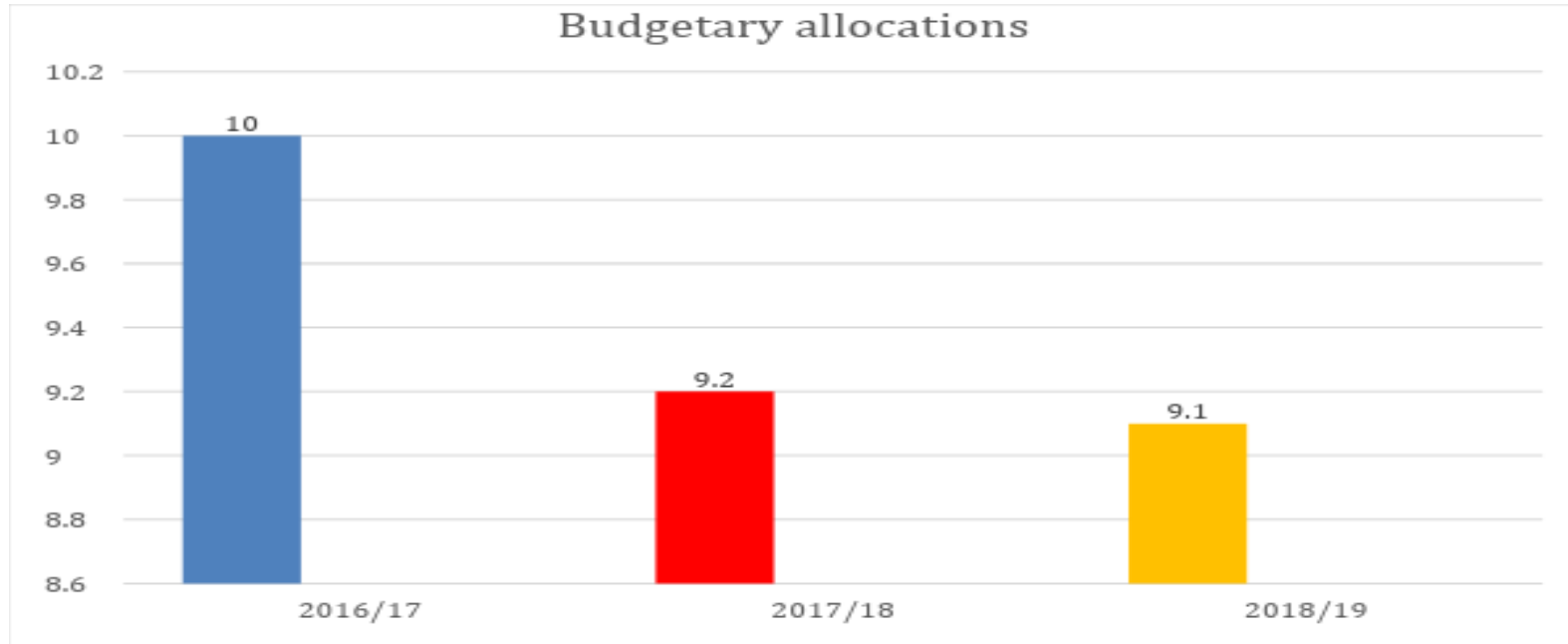


KEY FINDINGS KISUMU

Three Year Trend Analysis



- ❑ Total budget Allocation has decreased over the years has demonstrated below.

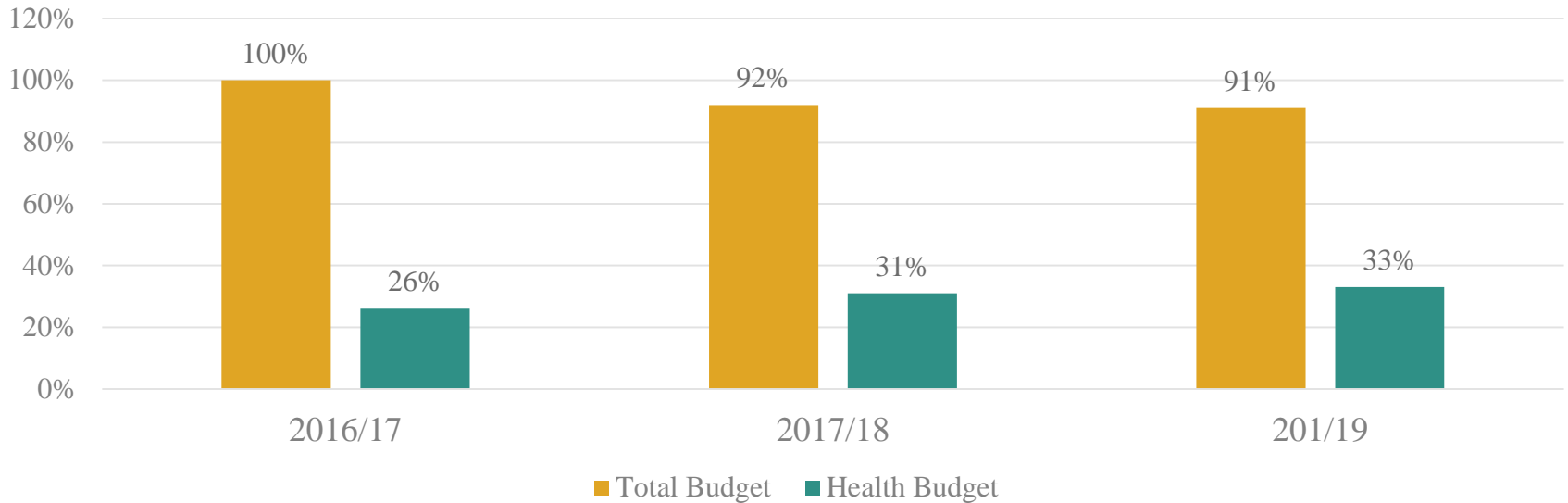


Three Year Trend Analysis

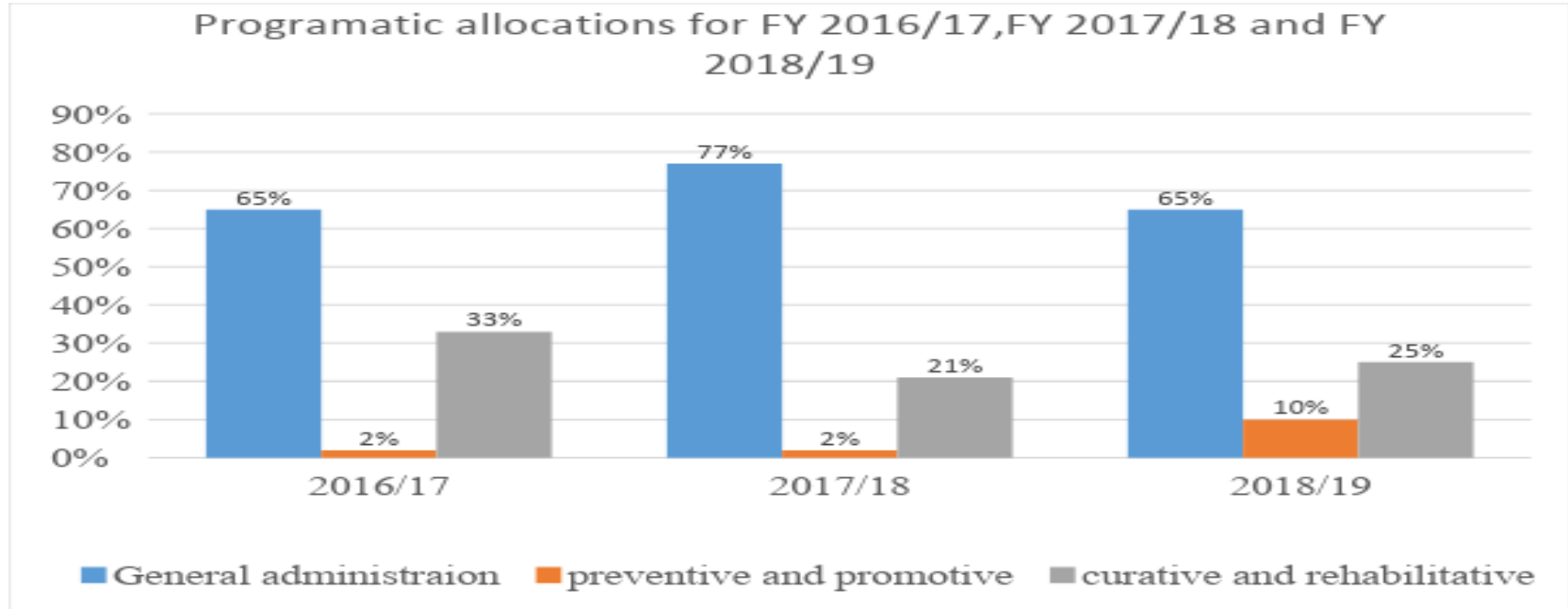


Health Allocation Vis a Vis Total Budget

Health Allocation for fiscal year 2016/17, 2017/18 and 2018/19.



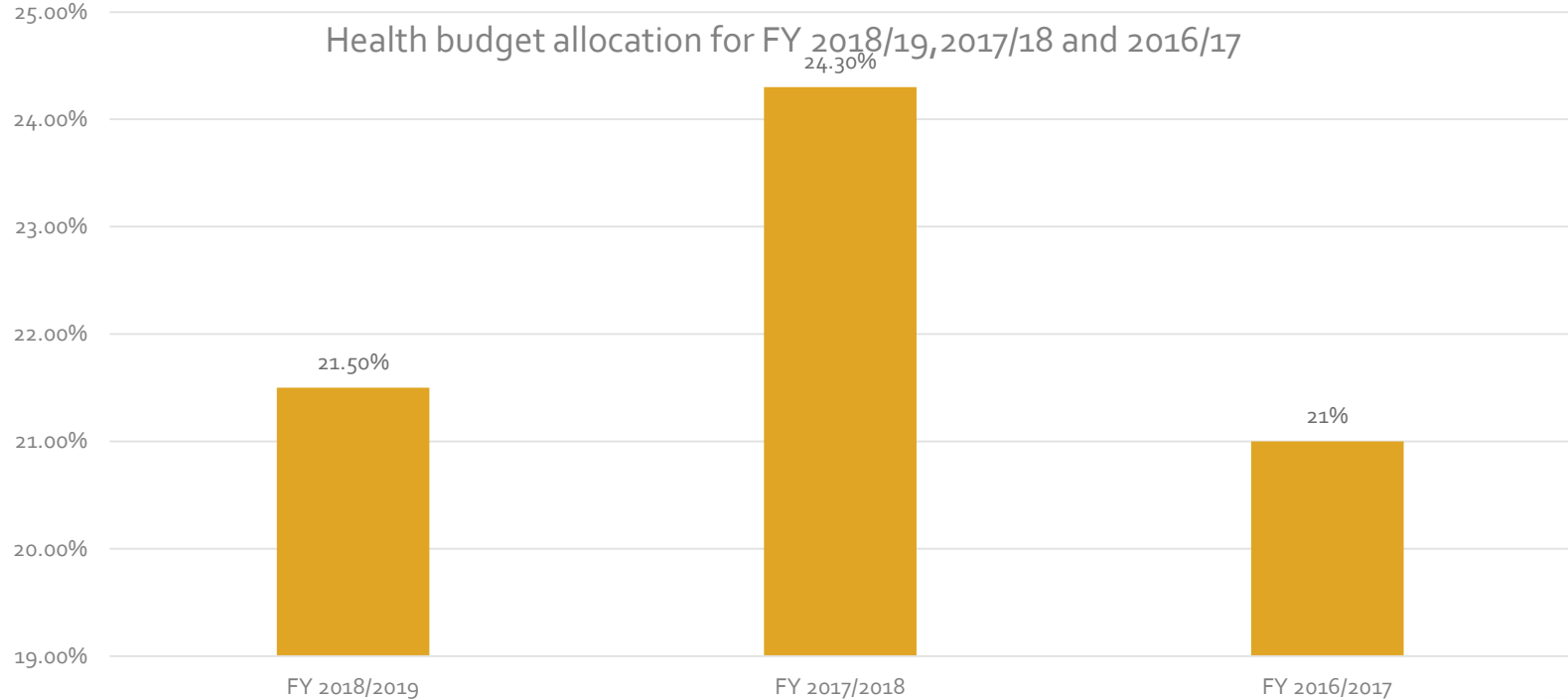
Budgetary Allocations By Sub Programs





KEY FINDINGS MOMBASA

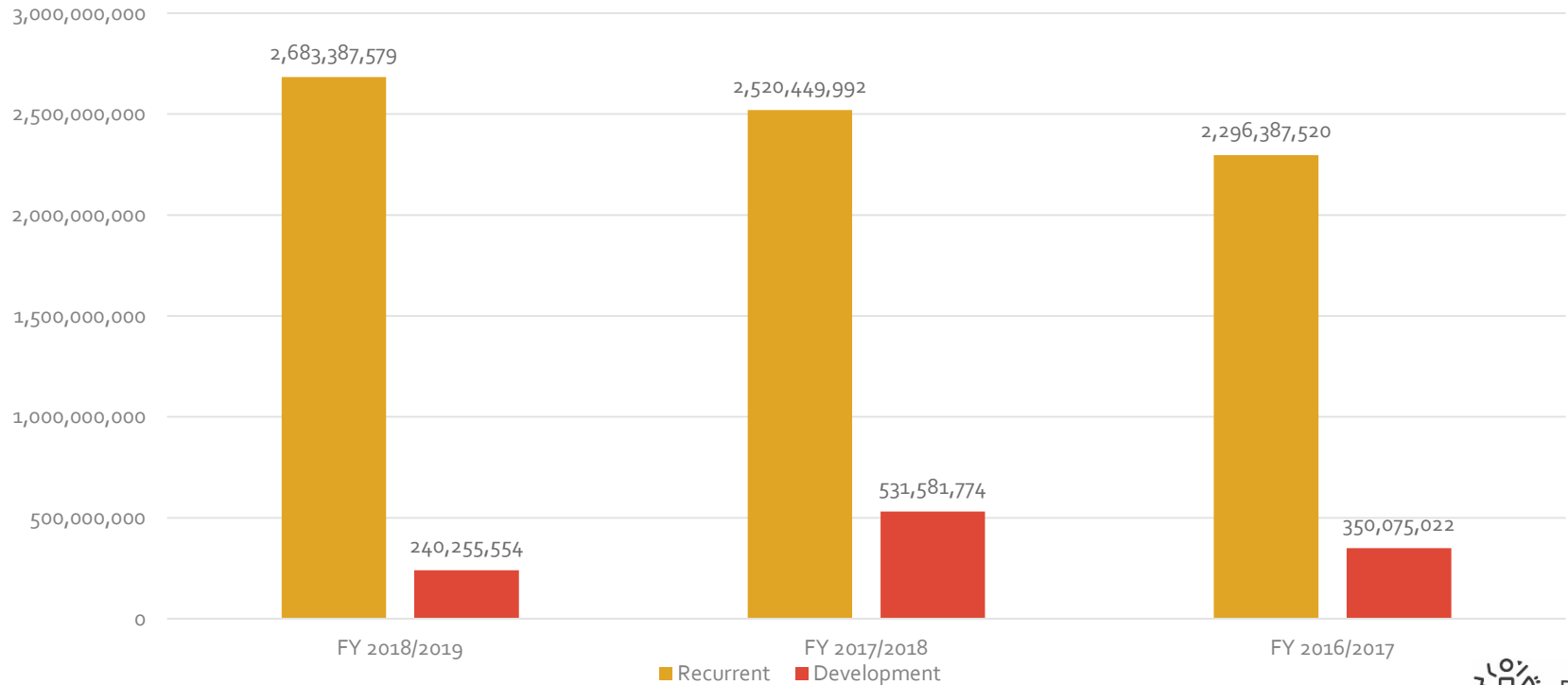
Health sector allocation



Recurrent vs Development Expenditure



Health sector: Recurrent vs Development for FY 2018/2019, 2017/2018 and 2016/2017

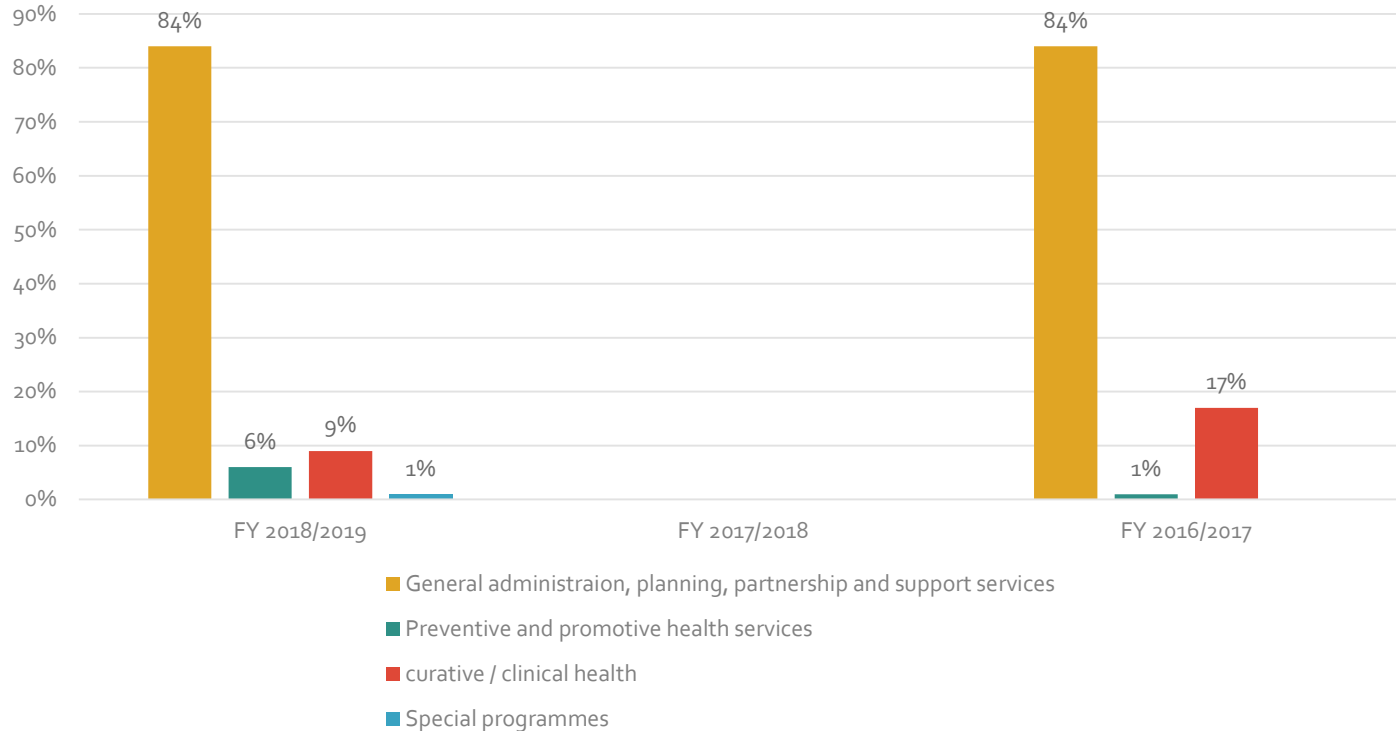


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Programmatic allocation



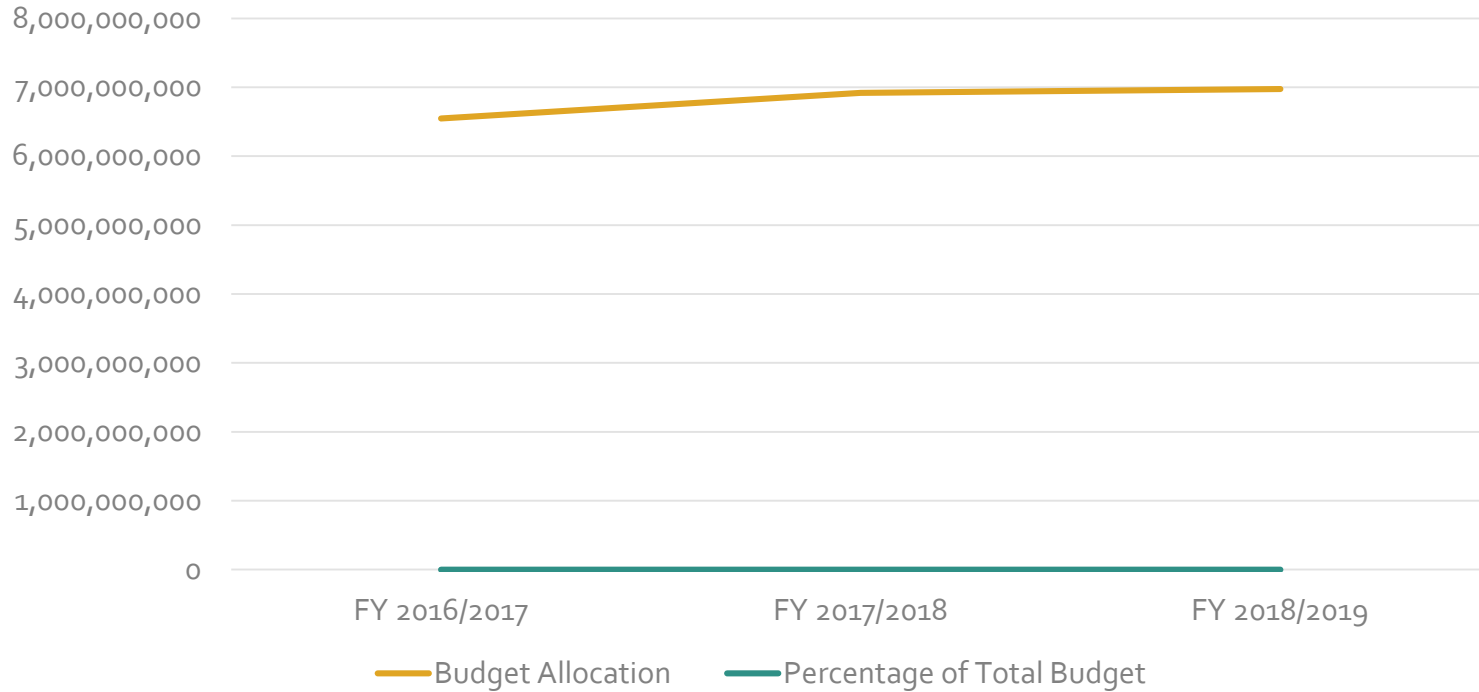
Programmatic allocations for FY 2018/2019, 2017/2018 and 2016/2017



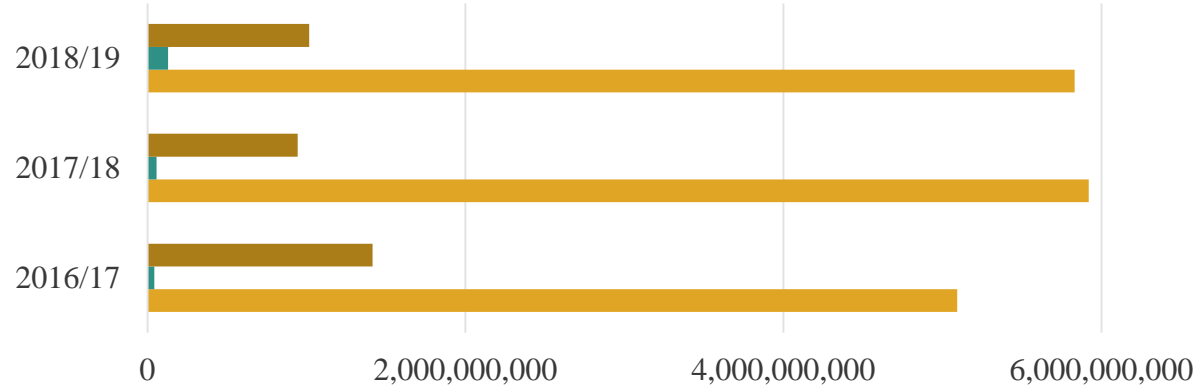


KEY FINDINGS NAIROBI

Allocation Trends



BUDGETARY ALLOCATION BY PROGRAM



	2016/17	2017/18	2018/19
■ Curative Services	1,414,595,991	944,460,877	1,016,276,540
■ Preventive and Promotive Services	43,000,000	57,184,287	129,286,501
■ General administration, planning and support services	5,092,404,009	5,919,357,385	5,831,042,286

BUDGETARY DEVIATION FY 2016/17-2018/19

Year	2016/17	2017/18	2016/17	2018/19
Health Sector Allocation	6,550,000,000	6,921,002,549	6,550,000,000	6,976,605,327
Decrease/ Increase	(371,002,549)		(426,605,327)	
Percentage Change	(5.66%)		(6.51%)	





STRENGTHS AND CONCERNS

STRENGTHS



- ❑ Health is a key priority in all counties
- ❑ Allocation of budget for the preventive and promotive health services
- ❑ Program Based Budgeting and Division Into Sub Programs

CONCERNS



- ❑ Misalignment of budgets with key county documents
- ❑ More allocation towards recurrent expenditure for the health sector neglecting development expenditure.
- ❑ Limited available information on budgets
- ❑ The health programs have not been divided into sub-programs, hence making it difficult to analyze, since the budget is not clear.



ANALYSIS RECOMMENDATIONS



- Include county work plans and implementation reports as primary documents for the analysis.
- Further analysis; on absorption, allocative efficiency, fiscal responsibility.
- A more elaborate analysis including primary data.



KEY POLICY RECOMMENDATIONS

CALL TO ACTION



- Align Budgets with Key county Documents
- Establish and equip at least two youth friendly center per sub county that provide comprehensive AYSRHR services with adequate and inclusive resources
- Develop elaborate, clear and detailed fiscal strategy paper and program based budget
- Allocate resources for sexual and reproductive health and rights
- Strengthen public participation



NAYA Kenya

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