



New Service Delivery Data Show that Raising the Quality of Education and Health Services is Critical for Kenya to Build on Recent Gains

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/NAIROBI, July 12, 2013 - While Kenya has made tremendous progress recently by reducing child mortality and getting more children into school, new data published today suggest that raising the quality of public education and health services is essential to build on these gains. Otherwise, far too many children will attend school without learning enough and too many patients leave clinics without the right treatment. Service Delivery Indicators (SDI) based on independent surveys of 5,000 teachers and health providers in 600 primary schools and clinics show that Kenya is doing relatively well on making textbooks, medical equipment, and basic infrastructure available in facilities. But the country is still far from achieving optimal performance by teachers and health providers, the SDI data show. SDI is an Africa-wide initiative led by the World Bank, the African Economic Research Consortium, and the African Development Bank. "While it is true that education and health services are not perfected overnight, I think we will have to make some very deliberate improvements in these areas to bring many of our Vision 2030 goals within reach, said Mwangi Kimenyi, Senior Fellow at the Brookings Institution and Director of the Africa Growth Initiative. "We can only achieve widely shared prosperity in future if all Kenyans have access to high-quality education and healthcare, and can take advantage of the economic opportunities coming their way. A key finding is that public and private school teachers were about as likely to be at work, but public school teachers at work were 50% less likely to be in class teaching. This difference results in public school children receiving up to 20 days less teaching time per term. Also, only 35% of teachers showed mastery of their subjects. There is a clear need to improve both incentives for teachers and their knowledge levels. In public health facilities, over 29% of health providers were absent. Strikingly, 80% of this absence was reported as sanctioned, and within the power of management to influence. Further, only 58% of public health providers could diagnose 4 out of 5 common conditions such as diarrhea with dehydration or malaria with anemia, and fewer than half the correct treatment actions were taken to manage maternal and neonatal complications. Key drug availability for mothers remained a challenge. Service Delivery Indicators surface objective facts about what teachers and health providers know and do on the job, raising red flags on systemic and management issues, said Ritva Reinikka, Director, Human Development, Africa at the World Bank. "The point is that you can manage better if you measure performance regularly. The Kenyan government can now use these findings to track the impact of results-oriented reforms and policies across time and citizens can use them to push for better results. Kenya is the first country to implement SDI, following pilot surveys in Tanzania and Senegal. "It is great to see Kenya taking the lead again on using Open Data to inform improvements in service delivery and to raise citizen awareness about key sectors, said Ory Okolloh, Director, Investments, Omidyar Network Africa. I hope to see other institutions, not just government, digging into the data and building on the research, and am excited about the potential for replication in other African countries. Surveys are also ongoing in Mozambique, Nigeria, Togo, and Uganda this year, with more countries to follow in 2014. Surveys will be repeated every two to three years in each country. In Nairobi Peter Warutere : 254-20 3226444 pwarutere@worldbank.org Kavita Watsa : 254 (0) 707467293 kwatsa@worldbank.org

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