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## THE INFLUENCE OF BALANCED PROCESSING CONSTRUCT AMONG HEALTH LEADERS ON THE GOVERNANCE OF COUNTY REFERRAL HOSPITALS IN KENYA

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### ABSTRACT

*Authentic Leadership has received considerable attention because of its potential implications on the governance of an organization. Scholars have outlined authentic leadership as a possible solution for the governance of hospitals today. This study focused on five County referral hospitals. The preparedness of County referral hospitals was a challenge during the implementation of devolution in Kenya. The transfer of national government services to the County governments was occasioned by the promulgation of the Kenyan constitution 2010. Authentic leadership is one of the most effective types of leadership and its influence on the governance of health institutions has rarely been addressed in Kenya. The objective of this study was to determine the influence of balanced processing on the governance of County referral hospitals in Kenya. This mixed methods study was anchored on pragmatism philosophy where both qualitative and quantitative data were collected. Questionnaires and interview schedules were used to collect data. The study population included County health leaders such as director of health, County health management team and health program managers. This included doctors, nurses, nutritionists, clinical officers, public health officers, and health workers in the sampled five County referral hospitals. The study employed both purposive and random sampling techniques. Quantitative data was analyzed using SPSS, while qualitative data was analyzed based on emerging themes in narrative form as guided by the study objectives. It was determined that there exists a relationship between balanced processing, leadership efficacy and governance of County referral hospitals in Kenya. The government and key stakeholders could apply the results in policy making. Effective policy could ensure that all health institutions engage and develop leaders' authentic leadership knowledge and skills. The Ministry of Health should utilize the capacity building recommendations to develop those in service in order to improve the leadership and governance of health institutions in Kenya and beyond.*

**Key Words:** *Authentic Leadership; Leadership Efficacy; Governance; Balanced Processing*

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## INTRODUCTION

Good governance produces accountability of public money, good management, and performance (Sullivan & Skelcher, 2017). It is expected that managers of public services will address the goals and objectives of the government and the public interest (Schmidt et al., 2017). Additionally, globally, the role of leadership in enhancing the health system results, performance, and quality of care is very crucial including healthcare personnel like nurses and doctors in leadership positions significantly improves healthcare (Fjeldstad et al., 2020; Guerrero et al., 2020). Moreover, UNDP's SDGs cover socio-economic development issues such as UHC. The focus of SDG No. 3 is the promotion of health and well-being for all by reducing the factors associated with maternal and child mortality and increasing life expectancy.

The World Health Organisation outlines six building blocks that public health systems need to work on if they are to achieve SDG 3 and realise UHC (Malakoane et al., 2020; Paschen et al., 2020). Of the six, governance is the most important block as argued by several scholars on its significance towards the realization of SDG 3 (Abhayawansa et al., 2021; Alsayegh et al., 2023; Glass & Newig, 2019). They argued that governance is critical for the following reasons, among others: it promotes integrity, accountability, transparency, and stakeholder participation; encourages the voices of consumers of health services to be heard; champions the much-needed partnerships and strengthens research and development. Public sector entities are entitled to use public resources effectively and efficiently. How these resources are managed, and the quality of services provided is important (Abhayawansa et al., 2021). Public administrators who are managers of public services should be prudent because they have a huge task because they are responsible for the governance of these resources (Austin et al., 2020).

Across Africa, among the most affected services by the devolution and decentralization of governments is healthcare across the continent (Cabral, 2011). Scholars have documented that devolution in various African countries depicts both success and challenges for example countries like Mali, Benin, and Guinea experienced success when decentralization of basic healthcare services led to improved affordability and accessibility to health services (Lodenstein & Dao, 2011). This success was partly due to the fact since in all three cases, throughout the 1980s, central governments remained a largely weak authority that devolved units of government could not depend on for effective delivery of healthcare; hence the need for self-reliance.

Inkoom and Gyapong (2016) further concluded that where the central government is still in control of the health services at the local level, lower-level government units have limited influence over the administration and governance of healthcare services that affect the needy population. They further indicate that despite advances in the implementation of more ambitious healthcare decentralization plans in Tanzania, Malawi, and Ghana, in all three countries, most policymaking is still done at the centre and local governments are highly dependent on the central government for financial resources, which are often earmarked (Inkoom & Gyapong, 2016). In all this, one undercurrent persists: central governments' reluctance to truly devolve political and economic power. For instance, even though Uganda has decentralized healthcare, the central government maintains a grip on the healthcare budget, often extending conditional healthcare grants to local governments (Mansour et al., 2022). The deterioration of ethics in the public is linked to governance structures of autocracy and the patron-client model (Mbai et al., 2022).

In Kenya, the national government is mainly responsible for the provision of higher-level healthcare through its network of national referral hospitals; these hospitals represent the apex of the public health system in the country (Ministry of Health, 2020). County governments are responsible for the provision of basic healthcare through their networks of dispensaries, health centres, Sub-County hospitals, and County referral hospitals. County referral hospitals are the former Level 4 and 5 hospitals. Sub-County and County referral hospitals play an intermediary role in the country's healthcare referral system (MoH, 2020). Besides providing healthcare, County health facilities

are responsible for implementing health policies. They are also avenues through which healthcare leadership and governance are exercised.

For a County to have a robust healthcare system, its County referral hospital(s) must be well-led and governed, following the laid down guidelines according to MoH, Kenya's Health Policy (KHP, 2012-2030) which is anchored in the country's 2010 Constitution (Health Policy Project, 2015). Specifically, the policy aims to attain UHC and devolve the bulk of public healthcare provision to County governments. The policy recognizes that critical to its aims is an appropriately skilled workforce that is well-managed and equitably distributed. The onset of devolution following the promulgation of the 2010 Constitution, and more specifically the devolution of healthcare has had the effect of raising citizens' expectations of improved healthcare services. According to the World Bank (2020), currently, there is no systematic method of evaluating the effectiveness of health leadership and governance and how these affect the provision of health services in the Counties.

In Kenya, the governance of healthcare takes place at two levels: national and county. At the national level, MoH is charged with providing leadership and governance. In the counties, county departments of health are charged with managing the delivery of health services (Shawar & Ruger, 2018; WHO, 2018). The Fourth Schedule to the Constitution of Kenya outlines the respective functions of MoH and County departments of health. KHP 2012-2030 outlines governance and management objectives for the sector. KHP also identifies seven areas in which the government should invest to achieve policy objectives: health infrastructure, service delivery systems, health workforce, health information, health products, and technologies, health leadership, and healthcare financing (Mwai et al., 2023; Mwai & Gathecha, 2021).

Overall, Kenyans have limited knowledge of a devolved healthcare system and what it means for them; a detrimental situation to the realization of the highest public health standards possible. A study investigating Kenyans' understanding of a devolved health system found that only 11% of the participants indicated that they had a full understanding of devolved health, 78% had a partial understanding and 9% did not know at all (Centre for Health Solutions, 2014). Using public expenditure tracking surveys, the World Bank assesses and ranks countries in the area of governance. Meanwhile, over the last twenty-five years, the United States Agency for International Development Global (USAID) has invested substantially in health leadership and governance, intending to strengthen healthcare systems and improve health outcomes in low- and middle-income countries (Massoud, 2018; USAID, 2017). Despite all these efforts and the consensus on the importance of good leadership and governance, there is very little empirical literature on the role of leadership efficacy and governance in Kenya's county referral hospitals (WHO, 2018).

Healthcare institutions globally suffer a lack of authentic leadership. Employees get demoralized due to poor leadership although they are expected to give good care to patients. Poor leadership in hospitals can be attributed to the loss of innocent people including mothers and children (Bamford et al., 2013). Maternal and children programmes in health can be positively influenced through authentic leadership. When this kind of leadership is well implemented, trust is built and effective leader-follower leadership can be implemented. Giallonardo et al. (2010) established that health facilities with high levels of authentic leadership caused new graduate nurses to be confident in their responsibilities as they work in such institutions. These findings concur with the findings of Bamford et al. (2013), but without elaboration on maternal and children's health programs and how it is influenced by such leadership.

### **Objectives of the Study**

The main objective of this study was to explore the effect of balanced processing among CHMT and healthcare workers on the governance of the County referral hospitals in Kenya

## **LITERATURE REVIEW**

### **Empirical Literature Review**

#### **Balanced Processing**

The concept of balanced processing refers to a leader's ability to analyse objectively all relevant information before arriving at a decision. That ability includes a willingness to solicit opinions, even if such opinions challenge the leader's deeply held views (Gardner et al., 2005). A Kenyan study conducted by Nzinga, McGivern, and English (2019) revealed that most of the country's surgery departments are headed by senior surgeons and physicians who are highly trained in their respective areas. However, the department heads were found to exhibit very limited leadership abilities. They also portrayed limited familiarity with organisational culture and politics mainly because of limited formal and on-the-job training in leadership. The departmental heads also expressed disbelief in the necessity and effectiveness of formal training in leadership. The same study also found that most clinical managers in the country are ill-equipped for leadership and administrative roles and are, therefore, hesitant to take up such roles.

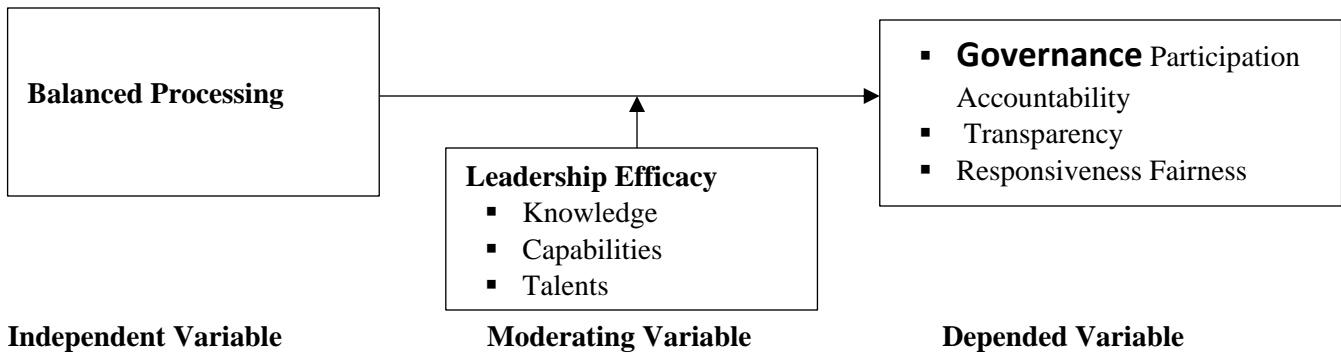
A similar study examined the role of leadership skills in fostering effective departmental leadership. The study was conducted in Mogotio Sub-County in Baringo County, Kenya and involved 126 respondents drawn from 185 managerial staff of 32 hospitals. Data were collected by means of questionnaires and analysed both inferentially and descriptively using SPSS version 4. The study concluded that mentorship was a cost-effective yet effective strategy for improving leadership capacities in public hospitals. Hospitals were therefore advised to step up their leadership mentorship efforts. Meanwhile, many hospitals in the country have realized gaps in leadership and have started implementing various programmes – including training and mentorship – aimed at enhancing the leadership skills of their workforces (Nyikuri, Kumar, English & Jones, 2020).

From the literature reviewed thus far, it is apparent that no systematic study has been undertaken to investigate the effectiveness of the various leadership development programmes that Kenyan healthcare organisations have been implementing. It is thus unclear if these interventions have helped improve the quality of leadership. The study concluded that leadership skills are essential to enhancing effective departmental leadership. The study recommended that hospitals should emphasise mentorship as a strategy for leadership development.

#### **Governance**

Wardhani et al. (2017) studied the effects of good governance on the performance of local government in Indonesia and whether good governance can strengthen the effect of government spending on performance. The study examined the five main aspects of governance, fairness and equality, participation, the culture of law, transparency and accountability. The study indicated that increased local government spending on governance had adverse effects on performance and service delivery; the implication being that, overall, government is inefficient in improving performance. On a positive note, the findings showed that good governance had a positive effect on performance. Good governance was shown to improve all the five aspects of governance listed above. Together, these improvements led to increased efficiency in the allocation and use of public resources. From this study, it can be concluded that even though local government may be inefficient in spending public resources, good governance can solve the inefficiencies and improve performance. In other words, it is not increased government spending that leads to better outcomes; rather, it is good governance, which the current study intends to investigate in the context of Kenya's County governments. Wardhani et al.'s (2017) relied on the quantitative approach only which is not always helpful in uncovering human behaviours and the motives behind them.

## Conceptual Framework



**Figure 1: Conceptual Framework**

## METHODOLOGY

A sample frame, according to Gall, Gall, and Borg (2007), is a subset carefully chosen to represent the whole population with desired traits, and sampling is explained as the method of choosing a few participants in a manner that they provide a representation of the group they are selected from. Burns (2004) defined sampling frame as actual number of persons from whom a sample was then chosen as representation of the population. The sample for this study was drawn from County health managers, health workers with leadership roles who include; doctors, nurses, nutritionist, pharmacist, clinical officers, and health records hospital administrators in selected County referral hospitals. This was drawn from the five selected Counties Kiambu, Narok, Kajiado, Kitui, and Makeni.

Sampling is a method for picking a collection of items from a population for study (Mugenda & Mugenda, 2003). Sampling procedures are methods for extracting samples from a population, often in order to test a hypothesis about the population. Purposive and random sampling techniques were employed to enposed for this study. Random sampling enabled the study to achieve its intended purpose.

**Table 1: Sampled Population by selected institutions**

Strata	Population	Sample size
Kiambu	778	156
Narok	187	37
Kwale	269	54
Makueni	484	97
Kajiado	208	40
Total	1926	384

sure the study captures the desired population for the study. The sample selection took into consideration that the health managers are involved since they have the relevant knowledge.

## RESULTS

### Balanced Processing and Governance Among CHMT and HCW

In order to determine the effect of balanced processing on governance of the County referral hospitals in Kenya, the components were measured using a likert scale include; I seek feedback as a way of understanding who I really am as a person, I listen very carefully to the ideas of others before making decisions Seek others' opinions before making up my own mind and I can list my three greatest strengths. The results in the table below shows that there was 1% of the sample members who strongly disagree that a seek feedback as a way of understanding who I

really am. Those who disagree were about 4% of the total sample members, those who were neutral were about 8% of the total sample members. Those who agree that they seek feedback in order to understand who they really are were about 29%. Finally, the strongly agree were about 58% of the total sample members. Therefore, it means that there were more respondents who were of the opinion that they had to seek feedback as a way of understanding who they really are as a person. Figure 2 showed results on "I seek feedback as a way of understanding who I really am as a person"

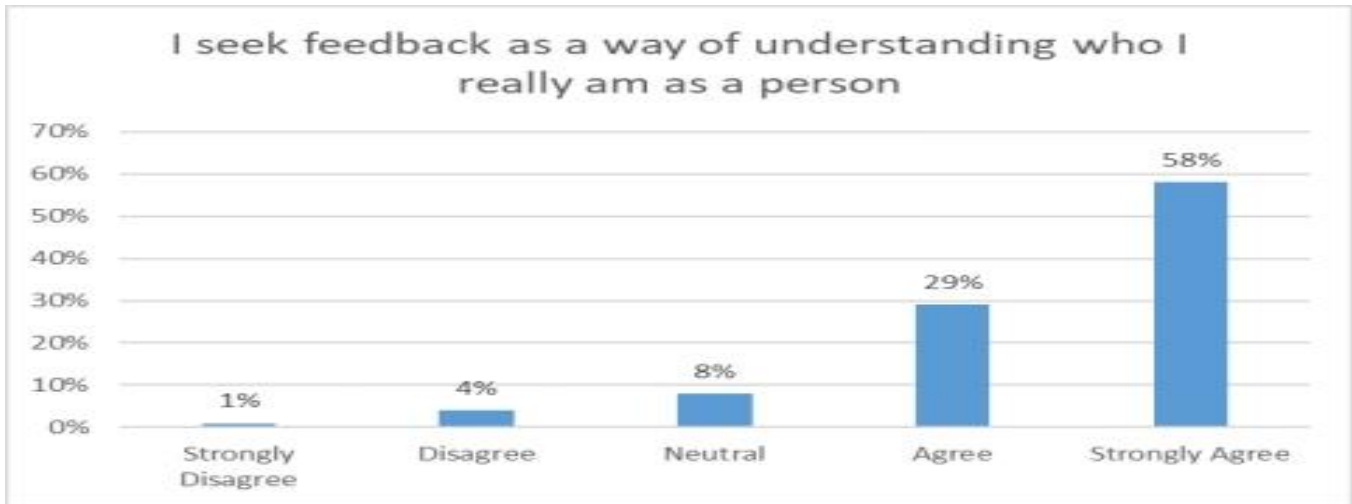


Figure 2: I seek feedback as a way of understanding who I really am as a person-

The results in the figure 2 shows that there are 1% of the respondents who strongly disagree that they seek feedback as a way of understanding who they really are as individuals. The portion of the respondents who disagreed were 4% while those who were neutral were 8%. Further, there were also those who agreed and those who strongly agreed being 29% and 58% respectively. This implied that majority of the respondents seek feedback as a way of understanding who they really are as individuals. This is an essential quality of successful leadership.

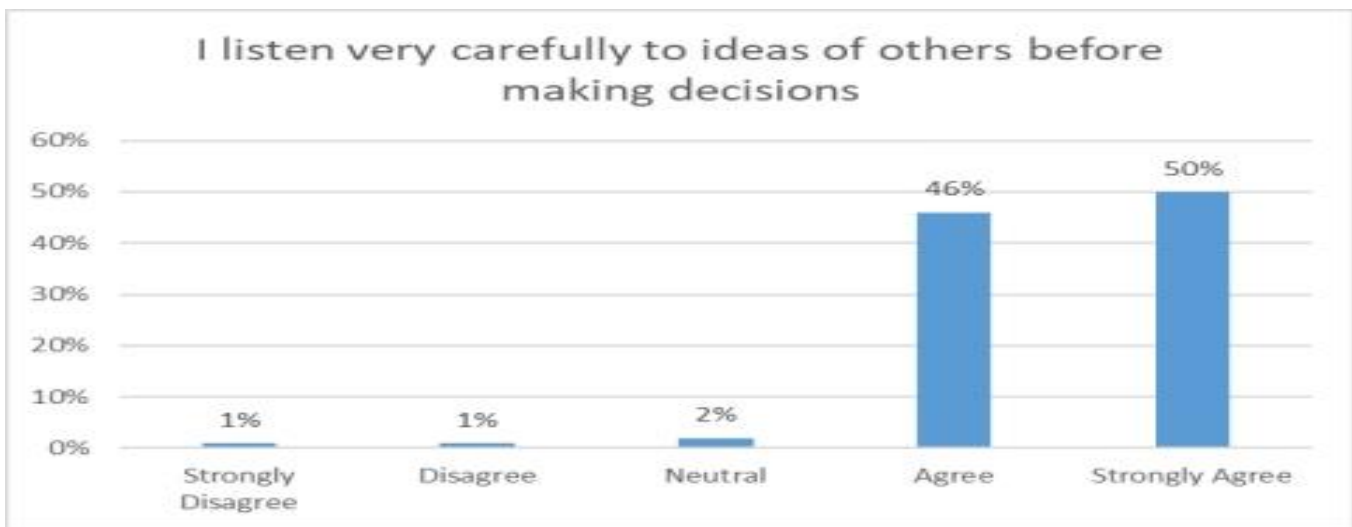


Figure 3: "I listen very carefully to ideas of others before making decisions."

In relation to the outputs on the figure 3 it was found that there was 1% of the respondents who strongly disagree and those who disagree respectively that they listen very carefully to ideas of others before making a decision. There were also about 46% of the respondents who agreed that they listen carefully on the ideas of others before making decisions. Those who strongly agree were 50% of the total respondents while those who were neutral were 2%. This revealed the majority of the study’s respondents listen very carefully to ideas of others before making decisions. This is a crucial attribute of effective leadership.

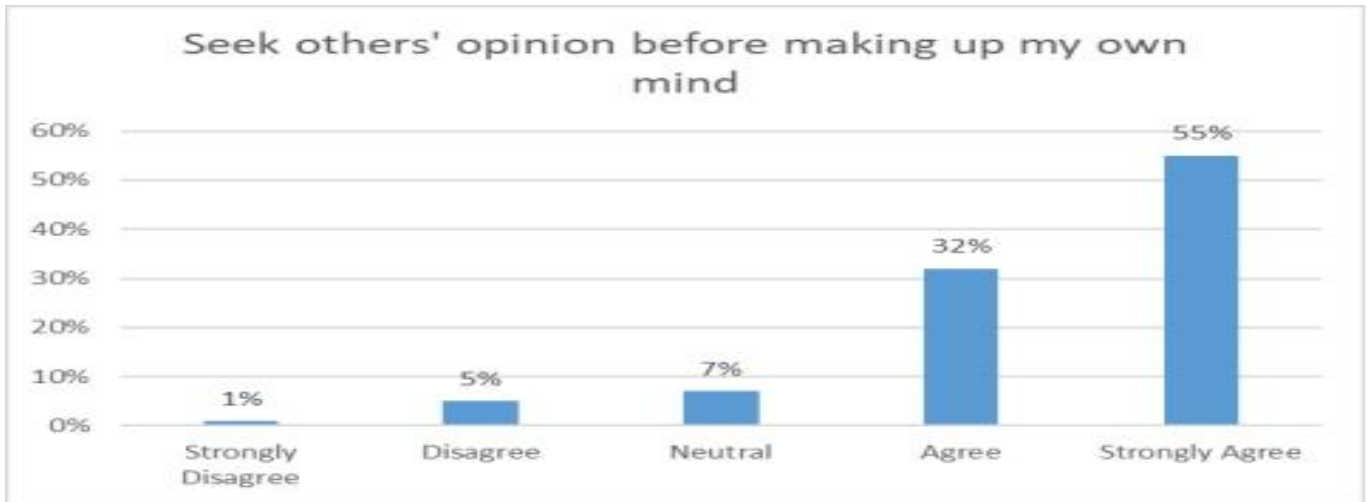


Figure 4:” Seek others opinion before making up my own mind”

The results in figure 4 shows that there are 1% of the sample members who strongly disagree that they seek opinion before making up their mind. The portion of the respondents who disagree that they seek the opinion of others before making up their mind were 5% while those who were neutral were 7%. Further, there were also those who agree and those who strongly agree that they seek opinions from others before making up their mind that is 32% and 55% respectively. This implied that majority of the respondents seek other’s opinion before making up their own minds. This is an essential quality of successful leadership.

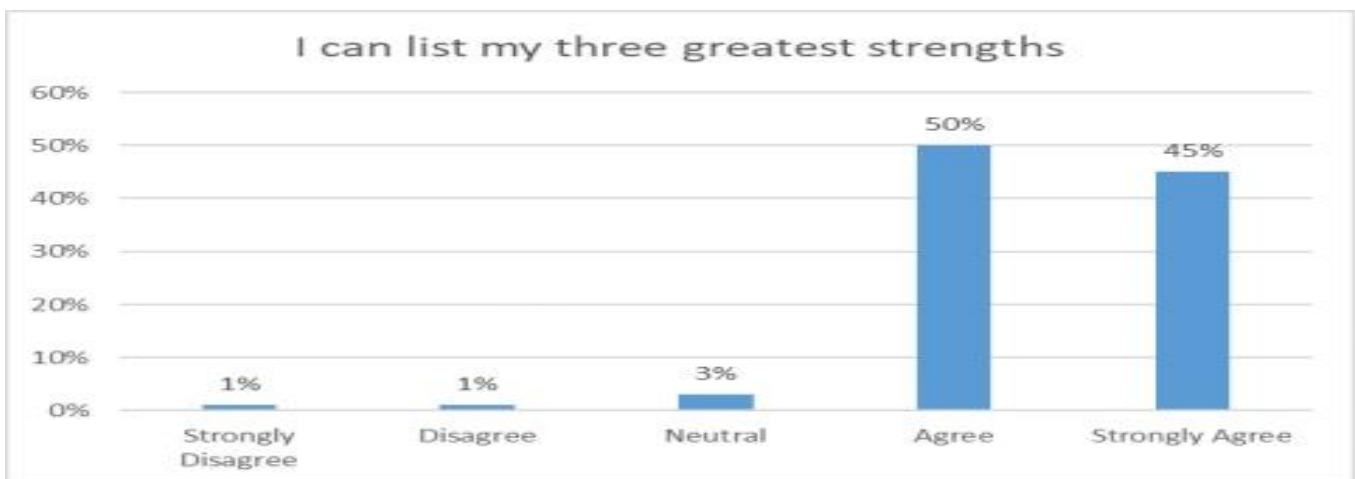


Figure 5: “I can list my three greatest strengths”

In relation to the physical and mental ability it was established that there were about 3% of the study population who said that they would like to remain neutral while those who agree and strongly agree that they can list their three greatest strengths were 50% and 45% respectively out of the total sample members. This implied that majority of the respondents can list their three strengths. This is a crucial attribute of effective leadership. This was presented in the figure 5.

### Regression Models

**Table 2. Model Summary**

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Durbin-Watson
1	.614 <sup>a</sup>	.377	.370	.70704	1.438

a. Predictors: (Constant), balanced\_processing4, balanced\_processing3, balanced\_processing2, balanced\_processing1

b. Dependent Variable: Governance Composite

From the four variables studied on balanced processing they explain 37.7 % of variance in effectiveness of governance of County referral hospitals in Kenya as represented by the  $R^2$ . This means that other factors not studied in this research contribute 62.3 % of variance in the dependent variable. The Durbin - Watson test was conducted to establish autocorrelation among the predictor variables. The Durbin -Watson statistic was 1.438 which was less than 2.0, meaning that data is positively auto-correlated. From the study findings, balanced processing was reported to have a positive correlation to the effectiveness of governance in county referral hospitals since it determines authentic leadership ( $p < 0.05$ ). Balanced processing involves seeking feedback to understand oneself, listening critically, seeking other people’s opinions and getting to know your strengths as a leader. Listening and considering other people’s input was highlighted as the major aspect of determining balanced processing by the respondents. Lee et al. (2019) in a study to determine the association between authentic leadership and intent to leave work among healthcare workers in Taiwan established that balanced processing of information was a key determinant of how workers will view and characterize their working environment and decide whether to leave or not.

**Table 3. ANOVA**

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	114.598	4	28.649	57.309	.000 <sup>b</sup>
	Residual	189.465	379	.500		
	Total	304.062	383			

a. Dependent Variable: Governance\_Composite

b. Predictors: (Constant), balanced\_processing4, balanced\_processing3, balanced\_processing2, balanced\_processing1

The P value was 0.001 which was less than 0.005 thus showing a correlation between the predictor variables of balanced processing and response variable (governance). If the significance value of F was larger than 0.05 then the independent variables would not explain the variation in the dependent variable. From the study findings, balanced processing was reported to have a positive correlation to the effectiveness of governance in county referral hospitals since it determines authentic leadership ( $P < 0.05$ ). Balanced processing involves the leaders in this study CHMT seeking feedback from HCW who they supervise to understand oneself, listening critically, seeking other people’s opinions and getting to know your strengths as a leader. Listening and considering other people’s input was highlighted as the major aspect of determining balanced processing by the respondents. Lee et al. (2019).



From the study findings, balanced processing among CHMT and HCW was reported to have a positive correlation to the effectiveness of governance in county referral hospitals since it determines authentic leadership ( $P < 0.05$ ). Balanced processing involves seeking feedback to understand oneself, listening critically, seeking other people's opinions and getting to know your strengths as a leader.

### **Discussions**

According to UNDP (2017), good governance is one of the major enablers of health service delivery and contributors to overall improvement of population health. Still, according to the same UNDP publication, 40% of the world population are without social protection while 21% live in precarious environments characterized by factors that compromise access to quality healthcare, including poor governance and poor leadership and weak institutional capacity, both of which affect adversely the governance and delivery of basic healthcare services.

From the study findings, balanced processing among CHMT and HCW was reported to have a positive correlation to the effectiveness of governance in county referral hospitals since it determines authentic leadership ( $P < 0.05$ ). Balanced processing involves seeking feedback to understand oneself, listening critically, seeking other people's opinions and getting to know your strengths as a leader. Listening and considering other people's input was highlighted as the major aspect of determining balanced processing by the respondents. Lee et al. (2019) in a study to determine the association between authentic leadership and intent to leave work among healthcare workers in Taiwan established that balanced processing of information was a key determinant of how workers will view and characterise their working environment and decide whether to leave or not. They argued that authentic leaders will often create a working environment where they consider the feeling of others in terms of their moral perspectives, intellect and strength which creates trust and fosters good governance which is also in agreement with the findings of the current study. Getting to know your strengths as a leader impact on how you will deliver and act when faced with compromising situations or when making decisions and it is a positive predictor of authentic leadership as postulated by the respondents. These findings contribute to the body of knowledge and inform the management of county referral hospitals in Kenya to embrace the balanced processing capabilities of the leaders to realise proper governance.

### **CONCLUSIONS AND RECOMMENDATIONS**

From the study findings, balanced processing among CHMT and HCW was reported to have a positive correlation to the effectiveness of governance in county referral hospitals since it determines authentic leadership ( $P < 0.05$ ). Balanced processing involves seeking feedback to understand oneself, listening critically, seeking other people's opinions and getting to know your strengths as a leader.

The study based on study findings recommended that the ministry of health and partners should be able to plan for capacity building of health workers on various leadership and governance trainings with a focus on building authentic leadership competencies to all county health management teams and health workers with leadership roles. Specifically, Leaders governing county referral hospitals in Kenya ought to build on the construct of balanced processing in order to contribute to good governance of the county referral hospitals in Kenya.

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