

## **Influence of Constituency Development Fund on Education and Health in Samburu West Constituency, Kenya**

**David Cheruiyot**

**Dr. Jane Wangaruro**

**Dr. Dickson Ombaka**

Sociology Department  
School of Humanities and Social Sciences  
Kenyatta University

### **Abstract**

*CDF aimed at ensuring development in each constituency in Kenya. Despite having CDF, allocation Samburu West Constituency has not registered significant change in education and health services. The study aimed at assessing the extent to which CDF Results of the current study revealed that CDF has helped in improving health and education services at community level through, developing new dispensaries and hospitals, providing quality community health programs and equipping schools with teachers and facilities and bursary fund for the needy students.*

### **A. Introduction**

#### **Background of the study**

With globalization and the call to continuously meet the changing needs of the community and ensure structured, equitable, and continuous development, developing countries have focused on decentralizing development projects to community level (Demery, 2009). Community development is a structured intervention that gives communities greater control over the conditions that affect their lives (Maina, 2005). As a strategy in ensuring that communities have a share of participation in equal development, the Kenyan government has made deliberate efforts to decentralize most of its development projects over the past five years: Key among them, the projects aimed at meeting the MDGs. According to Kenya Institute for Public Policy Research and Analysis (KIPPRA), in the year 2007-2008 budgetary allocations, more than Kshs 58 Billion went to devolved structures (KIPPRA, 2007).

The Constituency Development Fund (CDF) is a community development policy that dedicates public money to benefit specific political subdivisions through allocations and/or spending decisions influenced by their representatives in the national parliament (Baskin, 2010).

The CDF was introduced in Kenya in 2003; the idea sought to compel the state to allocate directly a standardized amount of money to all electoral districts (constituencies) every financial year to cater to local development needs (Davies, 2012). However with the promulgation of the new constitution in 2010 that led to the formation of devolved units of governance, the counties, the constituency development funds have since reduced. The allocated fund is no longer a flat rate, but takes into consideration each constituency's unique development circumstances. Ogolo (2009) however argues that the operations of CDFs have sometimes been controversial because they raise fundamental questions about the efficacy of government service delivery, the extent to which such service delivery can be made accountable, the role of the managers of CDF in selecting development priorities, and how public participation in policy making can be made more meaningful. On the other hand, Maina (2005) argues that the introduction of CDF aimed at ensuring development in each constituency in Kenya. The key objectives of the fund in constituencies, such as Samburu constituency, was to fund projects with immediate social and economic impact with a view to improving lives, alleviate poverty and general development purposes (Davies, 2012). This study aimed at assessing whether CDF has met its objectives, particularly in Samburu constituency.

### ***Statement of the Problem***

Samburu West Constituency has not registered significant change since the introduction of CDF since the social welfare of the people is still low (Ogolo, 2009). The constituency is characterized by high levels of poverty of 73%, and lack of access to basic services such as education (which recorded an enrolment that is 3 times less than the national average) and health (Mboga, 2008). If the present situation continues, it will further deteriorate the lives of Samburu residents (Davies, 2012), yet CDF was meant to improve the social welfare of the constituents (Brown 2011). This study therefore focused on assessing the extent to which CDF has addressed the lack of access to education and health services in Samburu West constituency.

### **Objectives of the study**

1. To assess the extent to which CDF has influenced the provision of health services in Samburu West Constituency
2. To determine the extent to which CDF has contributed to access to education in Samburu West Constituency

### ***Literature Review***

#### **Influence of CDF on provision of education**

Despite the shortcomings, milestones have been marked under the decentralized funds regime. School enrolments rates have increased considerably, social amenities such as schools, health centre's and recreation facilities have been developed, water and sanitation facilities have become more accessible, employment opportunities have been created through enterprise and the roads networks has been improved (Kazmi,2008). According to Maureen (2007) community development programmes empowers disadvantaged people and communities through supporting their involvement in shaping decisions, policies and social economic conditions that affect their lives. It helps them gain the skills and capacity to do this in an effective way. Although the CDF is challenged by management issues, the devolved funds have helped to improve the standard of education (Nganga, 2011). The impact is very clear and consequently it has affected the development of the entire Nation, Gatanga Constituency remains literally and symbolically, a Regional phenomenon in increased effective administration of CDF to foster growth and development. A strategy that encompasses transformation of Katanga Constituency, better education; vibrant health systems; extensive physical infrastructure; robust public service; sustainable peace, security and the rule of law; affirmative action for the marginalized citizens such as youth and women; integrity in the management of public assets; and protection of natural resources (Friedrich, 2004).

The amount of educated citizens is increasing. Schools are being built through funding by the CDF resources. Each of the schools that have been built by the aid of CDF funds is properly equipped in terms of teachers and facilities (Odundo, 2004). This has increased the quality of education and aided free primary education in all constituencies. People who could not join higher institutions of learning because of financial difficulties are now able to get an education through loans that they repay after they can generate an income for themselves (Nganga, 2011).Increased enrolment in secondary schools according to IMF(2010) has been attributed to bursary fund from the CDFs given to secondary students aimed at increasing access to secondary schools, ensuring retention of students in secondary schools, promote transition on completion rates and reduce disparities and inequalities in the provision of secondary school education.

#### **Influence of CDF on provision of health services**

Kimenyi (2005) notes that CDF kitty has improved the life of Kenyans greatly by improving health standards in the constituencies. According to him, good health and growth and development go hand in hand. Healthy children make better Youth, and better Youth become healthy, successful adults who are productive members of our community. Quality Community health programs help members achieve their highest productivity potential. Health Programmes are a continuum of learning experiences that enables our Community as individuals and as members of society, to make informed decisions, modify behaviours, and change social conditions in ways that are health enhancing and increase health literacy (Kaimenyi, 2005). According to a report by Khadiagala, (2009) dispensaries and hospitals are now more developed than ever before.

Stalled dispensary buildings and projects are now being completed in record time as a result of funding from the CDF kitty. In emergency cases like accidents the wounded are first taken to dispensaries for first aid then to hospitals leading to more survivors.

Serious diseases in most cases are discovered in the smaller hospitals then thoroughly evaluated in the larger hospitals (Mwangi, 2009).

## ***Methodology***

### **Research design**

Coopers & Schindler (2006) defines research design as the blue print for the collection, measurement and the analysis of data. Cross-sectional descriptive research design was employed in this study to assess the influence of CDF on health and education in Samburu West Constituency. Descriptive research describes data and characteristics about the population or phenomenon being studied (Lokesh-Koul, 2004). The descriptive research design was appropriate for this study since the study aimed at analyzing and describing the aspects of CDF and their contribution to education and health. The study was however cross-sectional since data was collected at one particular time across the selected respondents (Schurink, 2009).

### **Target population**

The study targeted the households in Samburu West Constituency. Samburu West Constituency had a total population of 10, 907 households. Stratified random sampling was employed to select 384 households. This was necessary so as to ensure that the samples selected from each group are represented in the entire sample, which was selected for the study, in proportion to their numbers in the entire targeted population (Kumar, 2005).

### **Data collection**

The study collected both primary and secondary data. Primary data were collected using survey questionnaires, although interviews and observations were also employed where necessary and possible. Secondary data sources included journals, books, and articles addressing the objectives of this study.

### **Data Analysis and presentation**

Qualitative data obtained from questionnaires was edited/cleaned and classified into classes or groups with common characteristics or themes. The content within the themes was then analyzed guided by the research objectives. Quantitative data was analyzed and interpreted using the Statistical Package for Social Sciences (SPSS). Inferential data analysis techniques such as regression and factor analysis were used to analyze the collected data and assess the inherent relationship between variables.

## ***Results and Discussion***

### **Influence of CDF on Provision of Health Services**

This section intended to evaluate influence of CDF on provision of health services. Respondents were presented with five statements on likert scale and asked to state how much they agreed with each statement. The responses ranged from 1-strongly disagree through 3-neutral to 5-strongly agree. The responses were averaged per statement and the results displayed in the table below. Majority of the respondents (86%) agreed that CDF has improved health standards in the constituency while another 66% agreed that CDF has Quality Community health programs. The view that dispensaries and hospitals are now more developed than ever before due to CDF were as agreed by 79% of the respondents while 66% agreed that stalled dispensary buildings and projects are now being completed in record time from CDF. Further, majority of the respondents (71%) agreed dispensaries by CDF help in first aid during emergencies leading to more survivors.

**Table 4.1: Influence of CDF on Provision of Health Services**

	<b>Strongly disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>strongly agree</b>	<b>Mean</b>	<b>SD</b>
CDF has improved health standards in the constituency	2%	5%	7%	29%	57%	4.35	.94
CDF has Quality Community health programs	4%	4%	27%	50%	16%	3.69	.92
Dispensaries and hospitals are now more developed than ever before due to CDF	2%	4%	16%	34%	45%	4.15	.96
Stalled dispensary buildings and projects are now being completed in record time from CDF	2%	3%	28%	37%	29%	3.88	.95
Dispensaries by CDF help in first aid during emergencies leading to more survivors	5%	6%	19%	33%	38%	3.93	1.12

Results of the current study reveal that CDF has helped in improving health services at community level through, developing new dispensaries and hospitals, completing stalled dispensary buildings and health projects and providing quality community health programs. These results support those of Kimenyi (2005) who noted that CDF kitty has improved the life of Kenyans greatly by improving health standards in the constituencies. Additionally, the results also support those of Khadiagala, (2009) who reported that dispensaries and hospitals are now more developed than ever before and stalled dispensary buildings and projects are now being completed in record time as a result of funding from the CDF kitty.

#### **Influence of CDF on Access to Education**

To measure influence of CDF on access to education, respondents were presented with eleven statements on likert scale and asked to state how much they agreed with each statement. The responses ranged from 1-very small extent through 3-neutral to 5-very large extent. The responses were averaged per statement and the results displayed in the table below. School enrolments rates have increased considerably due to CDF as agreed by 87% of the respondents. The view that social amenities such as schools and recreation facilities have been developed by CDF was agreed by 68% of the respondents while 78% agreed that water and sanitation facilities have become more accessible in schools. Majority of the respondents (66%) agreed that employment opportunities have been created though enterprises and those roads networks has been improved (58%). CDF has enabled disadvantaged people and communities gain skills and capacity to work as agreed by 71% of the respondents. Majority of the respondents (68%) agreed that CDF has helped to improve the standard of education and has properly equipped schools in terms of teachers and facilities (69%). Bursary fund from the CDFs given to secondary students has increased access to secondary schools as agreed by 67% of the respondents. Majority of the respondents (61%) agreed that CDF has promoted transition on completion rates and reduce disparities and inequalities in the provision of education and has helped make sustainable peace conducive for learning (68%).

**Table 4.2: Influence of CDF on Access to Education**

	Strongly disagree	Disagree	Neutral	Agree	strongly agree	Mean	SD
School enrolments rates have increased considerably due to CDF	1%	3%	9%	23%	64%	4.47	.84
Social amenities such as schools and recreation facilities have been developed by CDF	1%	5%	26%	50%	18%	3.80	.82
Water and sanitation facilities have become more accessible in schools	0%	6%	15%	35%	43%	4.15	.91
Employment opportunities have been created though enterprises	2%	5%	27%	35%	31%	3.89	.96
Roads networks has been improved	4%	13%	25%	36%	22%	3.59	1.09
CDF has enabled disadvantaged people and communities gain skills and capacity to work	2%	6%	21%	37%	34%	3.94	.99
CDF has helped to improve the standard of education	1%	7%	24%	33%	35%	3.95	.97
CDF has helped make sustainable peace conducive for learning	1%	8%	23%	43%	25%	3.85	.91
CDF has properly equipped schools in terms of teachers and facilities	1%	8%	23%	35%	34%	3.93	.97
Bursary fund from the CDFs given to secondary students has increased access to secondary schools	1%	7%	26%	32%	35%	3.94	.96
CDF has promoted transition on completion rates and reduce disparities and inequalities in the provision of education	3%	6%	21%	39%	32%	3.91	1.00

In summary, the results revealed that CDF has improved the standards of education through, providing social amenities such as schools and recreation facilities, water and sanitation facilities, roads networks, equipped schools in terms of teachers and facilities and bursary fund for the needy students. This as a result has led to increased school enrolments rates, transition on completion rates, employment opportunities for the local communities and provision of skills and capacity. These results concur with those of Kazmi (2008) who reported that through CDF school enrolments rates have increased considerably, social amenities such as schools, health centers and recreation facilities have been developed, water and sanitation facilities have become more accessible, employment opportunities have been created though enterprise and the roads networks has been improved. The study also supports that of Odundo (2004) who noted that each of the schools that have been built by the aid of CDF funds is properly equipped in terms of teachers and facilities.

### **Conclusions**

Results of the current study revealed that CDF has helped in improving health services at community level through, developing new dispensaries and hospitals, completing stalled dispensary buildings and health projects and providing quality community health programs. The results also revealed that CDF has improved the standards of education through, providing social amenities such as schools and recreation facilities, water and sanitation facilities, roads networks, equipped schools in terms of teachers and facilities and bursary fund for the needy students. This as a result has led to increased school enrolments rates, transition on completion rates, employment opportunities for the local communities and provision of skills and capacity.

### **Recommendations**

**Public Involvement in planning of CDF projects:** Members of the public should be involved in the planning and implementation of CDF projects in order to provide ownership of CDF projects by all and increase morale and positive attitude towards the kitty. This study confined its focus to Samburu West Constituency only. Hence, future research should examine the influence of CDF on community development in the other constituencies in Kenya.

## References

- Brown, K. (2011). *Sustainable Adaptation to Climate Change: Prioritizing Social Equity and Environmental Integrity*. New York: Routledge.
- Davies, J. (2012). *Conservation and Sustainable Development: Linking Practice and Policy in Eastern Africa*. New York: Routledge.
- Francis, K., Nekesa, P., and Ndungu, B. (2009). *Best Practices in Constituency Development Fund (CDF)*. Collaborative Centre for Gender and Development: Nairobi, Kenya.
- Friedrich E. (2004). *Constituency Development Fund*. Nairobi: Youth Agenda.
- Kimenyi, M. S. (2005). Efficiency and Efficacy of Kenya's Constituency Development Fund: Theory and Evidence. *University of Connecticut Department of Economics Working Papers*.
- Mwangi S. (2009). *Devolution and development*. Ashgate Publishers : 59-70.
- Nganga, T. K. (2011). *Institutions and Gender Inequality. A Case Study of the Constituency Development Fund in Kenya*. Addis Ababa: African Books Collective.
- Odundo, E. (2004). *Overview and Evolution of Investment instruments in sub - Saharan Africa with Special reference to Kenya*. Nairobi : Retirement Benefits Authority.
- Ogolo, A. (2009). *Devolved funds Initiatives in Kenya, a blessing or a curse*. Available at In Peace, Conflict and Development Research: <http://www.internationalpeaceandconflict.org/forum/topics/devolved-funds-initiatives-in>
- Orodho, J. (2005). *Essentials of Educational and Social Science Research Methods*. Nairobi: Masola Publishers