News



Striking Kenya government medical doctors block the main road in the center of Nakuru City March 26. The strike ended May 8, after 56 days of protests. Doctors in government-run hospitals frequently go on strike to force the government to address their concerns. (Raphael Munge)



by Daniel Sitole

View Author Profile

Join the Conversation

Send your thoughts to Letters to the Editor. Learn more

Share on BlueskyShare on FacebookShare on TwitterEmail to a friendPrint

Catholic hospitals in Kenya have long been sources of quality medical care for the poor and disadvantaged as government-run facilities lack medicine, and are mismanaged.

But the mission hospitals, as commonly known in the country, are facing financial distress never seen before. The hospitals are grappling with unpaid bills of Kenya Shilling 2 billion (\$16 million) owed to them by the government through the National Hospital Insurance Fund (NHIF).

NHIF is a government medical plan that citizens contribute to each month. The contributors are eligible for medical care in special designated public, private and mission hospitals. The fund is then expected to make regular payments to the hospitals upon the receipt of the claim documents.

Catholic bishops have voiced their concern on this matter repeatedly. Archbishop Anthony Muheria, of the Archdiocese of Nyeri, told journalists in April that many Catholic <u>hospitals are crippled</u> and unable to operate efficiently as some are no longer able to buy medicine or pay salaries.

"Whenever we enquire to know if our debts will be paid, we are given the usual promises. This is unfair and unjust," Muheria said in April.

The archbishop, who is also the <u>vice chairperson</u> of the Kenya Conference of Catholic Bishops, added "We demand that the government pays all our outstanding NHIF debts in full."

The Catholic facilities offer reliable and efficient services, in addition to being available in remote villages.

Nomadic pastoralists, living in arid and semi-arid lands, also have access to these hospitals through mobile clinics. The facilities handle basic, chronic and terminal illnesses, such as malaria, diabetes, hypertension, tuberculosis, HIV/AIDS and cancer.



Archbishop Philip Anyolo of the Archdiocese of Nairobi addresses the media during the Kenya Conference of Catholic Bishops' meeting in Subukia Nov. 11, 2020. The bishops have repeatedly asked the government to pay Catholic hospitals the \$16 million they are owed. (Raphael Munge)

According to a government doctor, James Langat, Catholic hospitals offer medical care equal to that of government-run facilities. His family, who live in villages in Bomet County, depend on <u>St. Clare's Kaplong Mission Hospital</u>, under the Diocese of Kericho.

"I have been paying NHIF contributions for my aging parents for the past 20 years. They go to Kaplong Hospital, where they get full services and medicine, whenever they fall sick," Langat said.

He added that despite being a government doctor, he does not recommend his relatives go to government-run hospitals, because they will not get medicine. "If you want to live longer, visit your nearest mission hospital," Langat said.

According to public documents, government hospitals face challenges of inefficiency, corruption, underpaid and unmotivated staff, poor working conditions, lack of medicine and protective gear for the health care workers.

The hospitals also have a <u>shortage of beds</u>.

Doctors in government-run hospitals frequently go on strike to force the government to address their concerns. The latest strike ended on <u>May 8 after 56 days</u> of protest. Clinicians or clinical officers also ended a strike on July 8 after 99 days.

Speaking about the doctors' strike, the bishops said in an April 11 <u>statement</u>, "The life of a human person should never be used as a bargaining currency. Every life is worth more than any financial or employment gain."

The mismanagement of the government-run hospitals worsened when President William Ruto <u>replaced</u> the National Hospital Insurance Fund with the Social Health Insurance Fund (SHIF). The new plan, yet to begin operation, is unpopular with many Kenyans, who believe the move is intended to dodge paying debts owed to private hospitals.

'The life of a human person should never be used as a bargaining currency. Every life is worth more than any financial or employment gain.'

—Kenya Conference of Catholic Bishops

Tweet this

Kenya's bishops have visited and pleaded with Ruto to pay the \$16 million owed to Catholic mission hospitals, as many are on the verge of collapsing.

The bishops' April 12 meeting with the president addressed <u>several issues</u> of concern, such as the government's drastic change of system and policies of education, high taxation, rising cost of living and deteriorating health care.

The bishops also requested that the president suspend the increase in missionaries' work permit fee from Kenya Shilling 15,000 to 150,000 (\$125 to \$1,250) per year.

"Missionaries contribute in many ways to our society. They render charitable services and social work to our people, with great sacrifice. We request that their work permit be zero rated," Muheria said on behalf of the Kenya Conference of

Catholic Bishops.

Those in attendance included Archbishops Muheria, Martin Kivuva of Mombasa, Philip Anyolo of Nairobi, Maurice Makumba of Kisumu and Bishop Dominic Kimengich of Eldoret.

According to the <u>Catholic Health Commission</u> of Kenya, the church provides 30% of health care in the country. The Catholic Church runs 69 hospitals, 117 health centers, 14 medical training colleges and 251 dispensaries.

The introduction of the Social Health Insurance Fund is one of the grievances raised by Generation Z protesters.

The Gen Z protests on June 18 led to the rejection of <u>Finance Bill 2024</u>. The bill carried unpopular reforms such as punitive taxes. On June 25, thousands marched in protest and <u>invaded the parliament</u>. The protests have continued weekly.

According to financial expert Julius Wekesa, an overdue debt earning no interest is an economic injustice. "Even if the debt is paid today, the hospitals will not get the true value of their money, prices have gone up," he said.

Advertisement

The government delay or inability to pay Catholic hospitals and the introduction of the SHIF leave the majority of poor Kenyans, who cannot afford the high cost of medication at private health care facilities, dependent on mission hospitals.

Kenyans pay a minimum NHIF monthly contribution of about \$4. Public hospitals do not provide medicine. Instead, patients are required to buy from private chemists, in addition to being expected to purchase <u>supplies</u> such as gloves, injection needles and syringes for use by the doctors or nurses treating them.

Francis Mwangi was diagnosed with cancer in 2021 at a government hospital in Nakuru County, and it is where he began his treatment. However, two years later, his family could no longer afford the cost of buying medicine for him despite paying for the NHIF.

"My family sold everything we had in order to pay for my medication. It was then that they took me to St. Mary Catholic Hospital, here in Nakuru," Mwangi said.

"Sisters welcomed and treated me well, with respect and human dignity. They gave me all the needed medicine at no cost other than using my NHIF card."