

Abstract

Worldwide, 57 million people died in 2008 from chronic illness, estimated 40 million persons were in need of HBCP services, 33 million (58%) of deaths were due to chronic diseases and 6.6 million infants deaths adding to the number of children and adolescents dying from chronic and Terminal illness in developing Countries. Chronic and Terminal Illness in children are on the rise, Sub Saharan Africa and Kenya has lagged in implementation of Home Based Care program to mitigate their effects. Literature review shows a significant difference in the level, extent and degree of delivery of effective and quality HBCP services. Effective and quality Child health is envisaged in Universal Health Coverage as captured in Kenya's Agenda four, social pillar in vision 2030. In Meru County, scanty information exist on effectiveness of provision of HBCP services. The purpose of the study was to evaluate effectiveness of HBCP service delivery to Children diagnosed with Chronic and Terminal Illness. The specific objectives were to asses use of minimum essential package, determine the extent to which HBCP supports Hospital Based Care, the hindrances to delivery of HBCP services and the level of Home Based Care services to Children diagnosed with selected Chronic and Terminal Illness aged between 1-14 years in Meru County, Kenya. Descriptive cross-sectional study design was used to yield qualitative and quantitative data. Target population was 611 Health Care Providers and administrators of facilities. Meru county was purposively selected comprising of one Level 5 and 5 Sub County Hospitals. A sample of 245 participants was selected using Multi stage cluster sampling, simple random sampling and proportionate to size method were used to determine the sample size per Health Facility. Data collection instruments using included Key Informants Interviews guide, Focused Group Discussions guide and semi-structured Likert Scale Questionnaire. Instruments reliability was ensured by a pilot study while validity of instruments was measured by Cronbach's coefficient alpha. The alpha for independent and dependent variables was 0.963 and 0.954 respectively. Data analysis involved use of descriptive and inferential statistics using statistical package for social sciences version 25. Major findings of the study indicated hindrance to delivery of HBCP services were shortage of human resource, inadequate infrastructure, and poor policy for implementation of HBCP. The study therefore concluded that utilization of minimum HBCP Essential Package was inadequate to achieve effectiveness of HBCP services. The study recommends that Health Care System integrates HBCP to deliver effective and quality HBCP services for continuum of care for chronically and terminally ill Children. In addition

planning, administration of HBCP should be adopted by Ministry of Health to mainstream and strengthen delivery of effective and quality Home Based Care Programme Services. It further recommends training and reorientation of Health Care Managers Caregivers and Health Care Providers and continuous monitoring and evaluation of the programme. Lastly, further evaluation should be done to covering Children above 14 years.