



**Strategic Leadership and Performance of Health Care
Workers in the Northeastern Counties of Kenya**

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Strategic Leadership and Performance of Health Care Workers in the Northeastern Counties of Kenya

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Abstract

The Kenya Constitution in 2010 devolved health services provision to counties. Under the county governments, the provision of the health services have faced many challenges relating to human resource management, remuneration, service delivery and turnover hence begging the question as to whether counties have the capacity to manage the health function. Hence, the study sought to establish the relationship between strategic leadership and performance of health care workers in North Eastern Kenya counties. The study was anchored on the upper echelons theory. A descriptive cross sectional research design was used. The study target population was 3,000 Health care workers and 10 health managers in the counties. The sample size for the health care workers was 353 obtained using Yamane Formular. Besides, a census approach was undertaken for the health managers in the counties. The number of the health managers are few and manageable. Questionnaire was used to collect the data. Both descriptive and inferential analysis was done on the collected data. The study findings indicated that strategic leadership (idealized influence, vision development, inspirational motivation and contingent reward) is positively and significantly related performance of health care workers in North Eastern Counties of Kenya. The study recommended the management within the counties (health managers) need to exercise strategic leadership and all health professions be registered with a professional regulatory body. The health workers should be encouraged to remain in North Eastern regions despite the circumstances. The authorities mandated with quality health provision to coordinate and harmonize the development of health policies and laws that are effective and applicable to all.

Keywords: *Strategic leadership, performance, health care workers, northeastern counties, kanya*

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1.0 Background of the Study

Citizen's health is paramount to any country. World Health Organization (2011) indicates that Sub-African countries are faced with the challenge of delivering health services in a manner that provides quality and accessibility to the populations against the background of limited resources and economic recession. The challenges have made different governments to respond by implementing reforms in the health sector (WHO, 2011). To address the challenges, the United States used its first-ever comprehensive set of health system reforms in the Affordable Care Act (ACA) in 2010. Execution of the act though politically controversial, has now reached a phase where reversing most elements of the act is not tenable (McDonough, 2014). The performance of health workers is critical, and it is influenced by two critical dimensions: acceptability and quality. According to the Lancet Commission on the Education of Health Professionals for the Twenty-First Century, there is a fundamental mismatch between health worker competencies and population needs across countries. For example, in most countries, health graduates' social competencies may not be aligned with the social, linguistic, and ethnic diversity of patients and populations (Anderson *et al.*, 2021).

It is critical to reorient health worker education toward greater social accountability and reform it through institutional (governance, structure, and financing) and instructional (admission criteria, competencies, curricula, and learning strategies) changes so that they acquire and maintain knowledge, skills, attitudes, and behaviors consistent with changing population needs and expectations and primary health care principles. Cuba, despite being a lower-middle income country has achieved exemplary health status. Stemming from the communist's government desire to achieve health care for all, transforming its primary health (Baum, 2016). The health system building blocks of that addresses service delivery, Human resource, health information, access to essential supplies and drugs, Health financing and leadership and Governance are key to provision effective health services (WHO, 2010). After the launch of MDGs, a lot of effort was put on overcoming the challenge of poor and low-quality service delivery in the health among other sectors.

In Kenya currently the health sector faces big challenges in overcoming health worker shortages in terms of retention and equitable distribution with North Eastern Counties most affected (Ndetei, Khasakhala & Omolo, 2008). While many causes have been attributed to poor performance of health workers, motivation has been noted as one of the major obstacles to effective health service delivery as alluded by Dolea, Stormont and Braichet (2010). There are binding guidelines that govern the rights and responsibilities of governments, health employees, businesses, civil society, and a nation's population in all aspects of health. These regulations, when combined, form the legal framework, or legal design for health (Mendelson, 2018). They come in a variety of forms, including legal laws, governing and management laws, agreements, case law, and traditional laws.

People use law to create various organizations (such as medical facilities) and associations to promote teamwork and achieve health goals (like contracts for offering health services). In turn, businesses (whether health ministries, the private sector, or civil society) have needs, plans, and methods based on legal guidelines that help them do their jobs. Based on this background, the study sought to examine whether strategic leadership can influence the performance of health care workers in North Eastern Counties of Kenya. Strategic

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leadership is the ability to influence others in an institution to make decisions daily voluntarily (Rowe, 2011). It is stated by Awan, Qureshi and Arif (2012) that strategic leadership incorporates the ability to understand and influence others to make decisions that can increase the short-run and long-run viability of the organization. It is indicated by scholars Douglas, Coleman and Oddy (2003) explained that for a firm to apply a strategic choice, goals development is required. Strategic leadership is more of ensuring the organization's resources are used in the most efficient way to maximize the output. The practices of strategic leadership enable the organization to plan for the future on the best alignments that could result in better performance (Schoemaker, Krupp, & Howland, 2013).

Jaleha and Machuki (2018) states that strategic leadership is considered as a major component for the effective efficiency of any organization operating in the ever dynamic and complex atmosphere of the 21st century. Scholars such as Mwendwa, Kitonga, Bichanga, and Kyalo (2016) and Schoemaker *et al.* (2013) indicated that strategic leadership significantly enhances the success of an organization. Strategic leaders are critical to any organization in aligning the goals and objectives that are required to be addressed to maximize the organization's success. The organization cannot achieve its potential without enhancing its strategic leadership (Das & Hammer, 2014). Aw and Ayoko (2017) describe the competencies that leaders display in the line of duty have a profound effect on their performance and leadership is an essential determining aspect of success in the marketplace, it pervades all factors of the corporation and emphasizes the strengths in other sectors of the organization.

Strategic leadership support is an important financial investment at any manufacturing firm striving to integrate supply chain companions with the production procedures so as to accomplish a competitive advantage. Strategic leadership exhibited in high-level management is positively pertaining to inner integration within the production companies. Strategic leadership habits exhibited in top-level management and advanced producing innovation carried out in the shop floor of these business are positively connected to the integration of outside supply chain companions (Birasnav & Bienstock, 2019). Idealized influence can incorporate leaders being admirable, respected, trusted and role models. Vision development can include being vision-oriented, incorporating core values, developing realistic vision and inspiring vision. Inspirational motivation can consist of articulating an appealing vision that inspires to perform beyond expectation, having a clear vision that can be easily articulated and rewarding hardworking employees.

The major objective of strategic leadership is strategic productivity (Hinterhuber & Friedrich, 2018). One more objective of strategic leadership is to produce a conducive environment in which workers anticipate the company's needs in context of their very own task. A strategic leader inspires the workers in a company to follow their own suggestions. Strategic leaders make better use reward and incentive system for motivating productive and quality workers to reveal much better efficiency for their organization (Gilley, Gilley & McMillan, 2019). Functional strategic leadership has to do with inventiveness, assumption, and planning to help an individual in realizing his goals and objectives. Strategic leadership requires the potential to anticipate and understand the work

environment. It requires neutrality and potential to take a look at the more comprehensive picture.

1.1 Statement of the Problem

After 2013 General election in Kenya, several functions initially held by the National Government were transferred to the Counties in line with the 2010 Constitutional amendment. Immediately after health functions were transferred and counties fully operational, scenes of run-down health facilities and patients dying while waiting to be served at hospitals, as well as health workers strikes became the norm all over the Counties (Wakaba *et al.*, 2014). In North eastern counties the situation is made worse by exodus of health workers from other parts of the country who make the bulk of the work force due to insecurity and poor working conditions. Shortages of health personnel and poor health worker performance continue to be among the most pressing issues confronting Kenyan health systems in the North Eastern counties. The performance within some public hospitals in Northeastern counties has been dismal, leading to loss of life. For instance, the infant mortality rate in Garissa County was 54.96 in 2015, 54.59 in 2016, 54.02 in 2017, 54.12 in 2018 and 54.08 in 2019 (United Nations Inter-Agency Group for Child Mortality Estimation, 2020). Moreover, the infant mortality rate in Wajir County was 42 in 2015, 41.18 in 2016, 41.02 in 2017, 41.26 in 2018 and 40.84 in 2019 (United Nations Inter-Agency Group for Child Mortality Estimation, 2020).

Based on the reviewed studies, the influence of strategic leadership on the performance of health care workers in North Eastern Counties of Kenya is under-researched. For instance, Kabetu and Iravo (2018) carried out a study on the influence of critical leadership on the efficiency of worldwide humanitarian companies in Kenya. The study was focused on humanitarian companies while the current focused on healthcare workers, thus a contextual gap. Moreover, Tsofa *et al.* (2017) carried out a study on devolution and how it affects the health workforce and commodities in Kilifi County. The study highlighted the challenges that arose due to government influence. Nonetheless, the study only focused on devolution while the current focused on strategic leadership, employee retention and health care regulation, thus a conceptual gap. Further, Otworu and Muturi (2019) examine the impact of tactical management on the performance of insurance companies in Kenya. The study was done in the insurance companies, thus a contextual gap. Further, Okebiro (2014) studied the influence of leadership and governance in pastoral communities in Kenya, with the objective of coming up with ways of shielding and promoting the rights of pastoralists. Nonetheless, the study was focused on pastoralists while the current focused on health care workers; thus, a contextual gap is depicted.

In addition, Hassan *et al.* (2021) performed a study on the influence of routine promotion on healthcare workers retention in public health centers in Garissa County, Kenya and used a descriptive research design while the current study adopted the correlation research design, thus methodological gap. The limitation of the descriptive design is that the relationship of the variables is not established. Other studies that have presented the methodological gap due to the use of the descriptive research design include Kegeni (2021), Ogechi (2016), Kabetu and Iravo (2018) and Ombese (2020). The scholars have only illustrated the theoretical understanding of the influence of strategic leadership on the

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performance but not its practicality in the context of health care workers in North Eastern Counties of Kenya. Thus, there was a need for further studies. Hence, the knowledge gap was ascertained by examining the influence of strategic leadership on the performance of health care workers in North Eastern Counties of Kenya.

1.2 Research Objective

The study objective was to investigate the relationship between strategic leadership and performance of health care workers in North Eastern Counties of Kenya.

1.3 Hypothesis Testing

The study tested the following null hypothesis.

H₀: There is no significant relationship between strategic leadership and performance of health care workers in North Eastern Counties of Kenya.

2.0 Literature Review

2.1 Theoretical Literature Review

This study was anchored on the Upper echelon's theory. According to Hambrick and Manson (1984), manager's experiences, values, and personalities affect how they perceive and interpret situations presented to them affecting their decision making. Thus, managerial traits may be adopted in part such that they forecast the outcome of the organization and those in it. (Hambrick, Humphrey & Gupta, 2015). Hambrick *et, al* (1984) argue that the direction given, decisions and information provided by the top management will determine current and future organizational and thus employee outcomes. This translates into better employee management, better decisions in dealing with the organizational environment. Leaders need to clarify remunerations upon accomplishing desired goals by the health workers. Upper echelons theory is that top executives see their situations through their very own highly customized lenses (Abatecola & Cristofaro, 2018). These personalized construals of strategic concerns develop due to distinctions amongst executives in their experiences, values, individualities, and other human factors. Using the upper echelons' point of view, researchers have analyzed the impacts of the top management team (TMT) make-up and process on organizational outcomes and the impacts of chief executive officer (CEO) qualities on firm strategy and efficiency

Lots of research studies have confirmed the standard logic of the upper echelons concept, adequately assessed in Finkelstein et al. Strategic leadership, theory, and research on executives, top administration teams, and boards. There is the need to have an appraisal mechanism for evaluating and documenting an employee's performance. The theory indicates there should be rewarding of the hardworking employees and also decision should arrive after consensus. Lots of researchers have dedicated significant interest to discovering exactly how the human side of supervisors, such as their histories and psychological attributes, affect the decisions they make (Nielsen, 2010). Nevertheless, the upper echelons study in the last 30 years has been equivocal in the light of the question, Do top executives matter as much to organization results as the concept appears to presume. These studies are set to assess the literature on upper echelons research and theory. Our testimonial highlights that upper echelons theory is still relevant to strategic management today as it was thirty

<https://doi.org/10.53819/81018102t50128>

years back, and following top executives truly matter to organization outcomes as they choose and engage in behaviors that affect the health, riches, and welfare of organizations, but they do so as problematic humans (Waldman, Javidan & Varella, 2004).

The main problems of our emphasis are the focus of upper echelons study in the United States of America and the near-absence of upper echelons study in Africa. Wang, Holmes, Oh, and Zhu, (2016) posit that personality traits are instrumental in determining firm outcome. They opine those strategic decisions are influenced by management traits which play about with the environment of the organization. It is therefore anticipated that strategic leadership will enhance employee work outputs. Strategic leadership requires leadership to keep on bringing in new tactics for the organization's sustained presence by focusing on organization's operational activities and simultaneously watching out for environmental factors (Caulfield & Senger, 2017). This is in line with this study, whereby the experiences, values, and personalities of top management will shape their strategic intent, thereby adopting appropriate strategies in employee management and dealing with external environmental factors such as government policies.

2.2 Empirical Literature Review

Strategic leadership is the use of well-considered tactics to make the workforce of an organization of its vision. According to Yahaya and Ebrahim (2016), strategic leadership is the technique used by strategic leaders to influence followers in making decisions willingly that determine the future long-lasting success of a company. Strategic leadership is the supervisory ability of an organization to expect, predict, maintain and lead others to create critical choices that offer a viable future of the company (Korir, & Bengat, 2015). The leader should have the capacity to concentrate on the company's monitoring activities and simultaneously watch on the changes that impact the organization, both internally and externally (Mangusho, Murei, & Nelima, 2015). A strategic leader must maximize on the organization's internal resources to actualize set goals (Noe, Hollenbeck, Gerhart & Wright, 2017). It is worth noting that Strategic leadership motivates and persuades staff to share that same vision. This is because the performance of any firm depends on its leaders (Arora, & Sharma, 2016). It is worth noting that organizations collapse if the leadership fails to convince its employees to follow its vision, deal with threats, make poor judgement to manage the business' environment. Strategic leadership in the health sector and especially in the challenging county governments in Kenya will ensure that hospitals have the expected provisions, given the sensitivity of the sector.

Kasera (2017) conducted a study to determine the effects of strategic management on organizational performance in health institutions in Nairobi County. The primary data for this study were gathered using a structured self-administered questionnaire that captured both qualitative and quantitative data and was administered to study prospective participants after they had been recruited and enrolled. The statistical software Stata 12 ® was used to analyze the study's data. Data was presented in the form of graphs and charts. Strategic thinking was used by 23 (96%) of the health institutions surveyed, and 7 (29%) agreed that strategic thinking improves organizational performance. Strategic leadership which consists of theory and study on executives, top administration teams a board by Finkelstein, Hambrick and Canella Jr. (2009) is among the most vital referrals in strategy

<https://doi.org/10.53819/81018102t50128>

studies. This work is a critical review of this publication and tries to respond to why organizations do what they do or play the way they play. In the study, we assess most of the phases that make up the study. It is then suggested that the effects of this theory on approach and organizations. It likewise considers exactly how the study influences the growth of the sector of study. The main contribution of the study is that it summarizes the concepts and ideas of the study in a few pages and recognizes the primary characteristics, antecedents and effects of management in companies.

Suriyankietkaew and Kungwanpongpun (2021) carried out a study on critical management and also monitoring elements driving sustainability in health-care companies in Thailand. The researcher adopted sustainable leadership as its study structure. Utilizing a cross-sectional survey, 543 workers operating in health-care and also pharmaceutical business in Thailand willingly offered feedbacks. Variable evaluations and also structural formula modeling were used. The results disclosed an emergent study design and recognized 20 unidimensional calculated leadership as well as monitoring aspects toward sustainability in healthcare. The study further indicated considerable favorable effects on sustainable performance outcomes in health-care companies. Considerable aspects consist of human resource management/development, principles, high quality, setting as well as social obligation, and also stakeholder considerations.

A study by Ombese (2020) on the impact of strategic leadership on the performance of managed equipment services (MES) projects in level 4 & 5 health centers in the Nairobi metropolitan area in Kenya. The research made use of a descriptive survey research layout. The target population of the research was the 19 Level 4 & 5 Healthcare facilities in degree 4 & 5 health centers in Nairobi city in Kenya. The study consequently had a total of 38 respondents. Questionnaires were used to accumulate primary information. The quantitative data was assessed utilizing SPSS. Numerous regressions were made used to establish the relationship between dependent and independent variables. The study found that a tactical function and vision have been created which boosts the performance of the company. The study further found that to an excellent extent the accomplishment of business objectives boosted performance. The research further showed that the performance of an organization hinges on its ability to successfully handle its human and social capital.

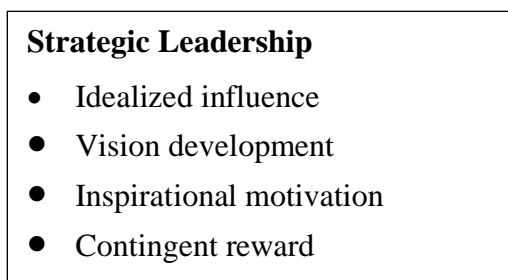
Marangu, Odindo and Egessa, (2015) looked at the relationship between leadership style and the performance of Public Health care Service providers in western region of Kenya covering respondents from public healthcare facilities. Qualitative and quantitative data was gathered using secondary and primary sources and the data was evaluated using both descriptive and inferential statistics. From the regression results, it is evident that leadership style has a positive effect on performance of Health Service Providers. A study that reviewed the influence of Leadership Styles, work related Environment and Employee satisfaction by Chandra (2016) with a population and a census sample of 45 the used the quantitative analysis revealed that leadership style has a strong influence on performance of employees. In an online survey by Hanaysha (2016) on the effects of employee empowerment, teamwork, and employee productivity found that employee productivity is among the most essential aspects in the success of any organization.

A study by Ogechi (2016) on the influence of strategic leadership on performance of small and medium business enterprises in Kenya was conducted. The survey which used descriptive design selected a sample of 301 from 3001 target population registered SMEs in Kenya using stratified sampling technique. Primary data was collected from business owners and managers through a structured questionnaire. To analyze the data a descriptive statistics analysis was used. Pearson correlation analysis was also performed, so as to determine strategic leadership and performance's relationship. This study confirmed that strategic leadership has a positive effect on performance of organizations and particularly on SMEs in Kenya. However, a study on performance management and employees' perceptions among small and medium business enterprises by Asamany & Shaorong (2018) found that apart from strategic leadership, many other factors have a significant role in improving performance and motivation of employees.

2.3 Conceptual Framework

A conceptual framework is a diagrammatical representation which indicates the relationship between independent and dependent variables (Creswell, 2014). Figure 1 shows a conceptual framework that reveals the relationship between the variables. Strategic leadership is employed as the independent variable while performance of health care workers as the dependent variable.

Independent variable



Dependent variable

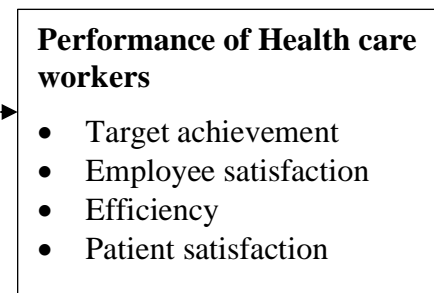


Figure 1: Conceptual frame work

3.0 Research Methodology

The positivism philosophy was adopted. The research study utilized a correlation research design. The choice of the correlation research design was motivated since the study sought to examine the effect of the variables. The target population was 3,000 health care workers and 10 County leadership who included health managers working with County Health Department of Garissa, Wajir and Mandera. The sample size of health care workers was 353 that was determined using the Yamane (1967) formula. A census approach was undertaken for the health managers in the counties. Stratified sampling method was used to select the participants. Questionnaires were used to collect the data. The study utilized quantitative data analysis techniques.

4.0 Data Analysis

4.1 Response Rate

Questionnaires were administered to the health care workers in the counties of Garissa, Mandera and Wajir were 353. Out of the 353 respondents, 316 questionnaires were duly filled and returned as presented in Table 1

Table 1: Response Rate

Response	Response Distribution	Percentage
Administered Questionnaire	353	100%
Returned	316	89.52%
Un-returned	37	10.48%

The response rate was 89.52% as shown in Table 1. Kothari (2004) indicates that 50% and above of response rate is enough for a descriptive study. Moreover, Babbie (2004) noted that return rates of above 50% are adequate to analyze and publish, 60% is good and 70% is very good and 80% is excellent. Based on these assertions from renowned scholars, the response rate of 89.52% is considered good and thus satisfactory for making inferences.

4.2 Descriptive Statistics

4.2.1 Descriptive Statistics for Strategic Leadership

The descriptive statistics for strategic leadership is presented below.

4.2.1.1 Descriptive Statistics for Idealized influence

The descriptive statistics of idealized influence is presented in Table 2

Table 2: Idealized influence

Statements	Mean	Std. Deviation	Coefficient of Variation
Health Care Leaders in the county are admirable	3.78	0.97	0.26
Health care Leaders in the county are highly respected	3.71	1.04	0.28
Health care Leaders in the county are highly trusted	3.82	1.19	0.31
Health care Leaders in the county are role model to many	3.57	1.21	0.34
Average	3.72	1.10	0.30

The average mean score of the survey questions regarding idealized influence was 3.72 with a standard deviation of 1.10 and 0.30 coefficient of variation as shown in Table 2. The coefficient of variation measured the dispersion of data points around the mean. This implied that health manager’s leaders in the county are admirable, highly respected, highly trusted and are role models to many. As stated by Korir and Bengat (2015), strategic leadership is the managerial capability of an organization to expect, predict, keep, and lead others to generate strategic decisions that provide a feasible future for the organization. A strategic leader must maximize the organization’s internal resources to actualize set goals (Noe, Hollenbeck, Gerhart & Wright, 2017).

4.2.1.2 Descriptive Statistics for Vision Development

The descriptive statistics for vision development is depicted in Table 3.

Table 3: Descriptive Statistics for Vision Development

Statements	Mean	Std. Deviation	Coefficient of Variation
The Health care leaders in the county are vision oriented	3.65	1.07	0.29
There high incorporating of county core values	3.66	1.12	0.31
Leaders develop realistic vision	3.45	1.16	0.33
Leaders develop inspiring vision	3.58	1.22	0.34
Average	3.59	1.14	0.32

The study results presented in Table 3 show that the average mean score of the statements of vision development was 3.59 with a standard deviation of 1.14 and 0.32 coefficient of variation. This implied that the majority of the health managers agreed that health care leaders in the county are vision-oriented, there is a high incorporating of county core values, and leaders develop a realistic vision and inspiring vision. The results concur with Mangusho, Murei and Nelima (2015), who indicated that leaders must have the capability to focus on the organization’s management activities. Yahaya and Ebrahim (2016) noted that vision development is used by strategic leaders to influence followers in making decisions voluntarily that determine the future long-term success of an organization. It is worth noting that Strategic leadership motivates and persuades staff to share that same vision. This is because the performance of any firm depends on its leaders (Arora, & Sharma, 2016). It is worth noting that organizations collapse if the leadership fails to convince its employees to follow its vision, deal with threats, make poor judgments to manage the business environment.

4.2.1.3 Descriptive Statistics for Inspirational Motivation

The descriptive statistics for inspirational motivation is depicted in Table 4

Table 4: Descriptive Statistics for Inspirational Motivation

Statements	Mean	Std. Deviation	Coefficient of Variation
County articulates appealing vision that inspires to perform beyond expectation	3.49	1.21	0.35
The vision of the county is clear to be easily articulated by the employees	3.26	1.05	0.32
There is rewarding of the hardworking employees	1.97	1.01	0.51
There is building of consensus by allowing all views	2.71	1.09	0.40
Average	2.86	1.09	0.40

The results presented in Table 4 shows that the average mean score of the survey question relating to inspirational motivation was 2.86 with a standard deviation of 1.09 and a coefficient of variation of 0.40. This implied that the majority of health managers disagreed with the survey questions concerning inspirational motivation. The results concur with the findings of Marangu, Odindo and Egessa, (2015), who noted that motivation in most public institutions is unsatisfactory. Likewise, Chandra (2016) indicated that the employees' motivations are what determines the performance and employees' commitment. In addition, Hanaysha (2016) noted that employee empowerment and teamwork determine employee productivity.

4.2.1.4 Descriptive Statistics for contingent reward

The descriptive statistics for contingent reward is depicted in Table 5

Table 5: Descriptive Statistics for Contingent Reward

Statements	Mean	Std. Deviation	Coefficient of Variation
Leaders give rewards when the set goals are accomplished on-time	2.13	0.93	0.44
Leaders clarify the role and task requirements for subordinates	3.65	1.19	0.33
Reward allocation yield to significant effects on changes in intrinsic motivation and creativity of the employees	3.34	1.24	0.37
Leaders clarify remunerations upon accomplishing desired goals	2.44	1.01	0.41
Average	2.89	1.09	0.39

It is shown from the results in Table 5 that the average mean score of the survey questions concerning contingent reward is 2.89 with a standard deviation of 1.09 and coefficient of variation. This signifies that the majority of the respondents disagreed leaders give rewards when the set goals are accomplished on time and leaders clarify remunerations upon achieving desired goals. The majority of the health managers agreed that leaders clarify the role and task requirements for subordinates. Ogechi (2016) confirmed that strategic leadership has significant effect on performance. However, a study on performance management and employees' perceptions among small and medium business enterprises by Asamany & Shaorong (2018) found that apart from strategic leadership, many other factors have a significant role in improving the performance and motivation of employees.

4.2.2 Descriptive Statistics for Performance of Healthcare workers

The dependent variable in the study is the performance of health care workers. The measures of performance included target achievement, employee satisfaction, efficiency and patient satisfaction. The descriptive statistics for measures of performance of health care workers is presented in subsections below.

4.2.2.1 Descriptive Statistics for Target achievement

The descriptive statistics for target achievement is summarized in Table 6

Table 6: Descriptive Statistics for Target Achievement

Statements	Mean	Std. Deviation	Coefficient of Variation
I have a clear understanding of the performance standards expected of me on my job	4.25	0.80	0.19
I priorities tasks so that I do the most important and urgent first	4.38	0.54	0.12
I am are held accountable for achieving goals and meeting expectations	4.15	0.66	0.16
I am encouraged by my manager to come up with better ways of doing things	3.76	1.20	0.32
Average	4.14	0.80	0.20

The descriptive statistics for target achievement presented in Table 6 indicate that the average mean score of the survey questions regarding target achievement was 4.14 with a standard deviation of 0.80 and 0.20 coefficient of variation. The results imply that majority of the health workers agreed with the statements provided. A study conducted by Ali and Ahmed (2009) showed that performance is claimed to be one factor that accounts for effectiveness and efficiency in the organization and makes them competitive at the market level.

4.2.2.2 Descriptive Statistics for Employee satisfaction

The descriptive statistics for employee satisfaction is presented in Table 7

Table 7: Descriptive Statistics for Employee Satisfaction

Statements	Mean	Std. Deviation	Coefficient of Variation
I can accomplish all the assigned tasks within the set deadlines	4.11	0.59	0.14
My supervisors are satisfied with my work output.	4.09	0.73	0.18
There is formal appraisal to rate my performance	3.28	1.06	0.32
I have been recognized severally for good performance as per organizational policy.	3.14	1.22	0.39
Average	3.66	0.90	0.26

According to the results of the descriptive statistics presented in Table 7, it can be noted that the average mean score was 3.66 with a standard deviation of 0.90 and 0.26 coefficient of variation. The results show that majority of the respondents agreed they can accomplish all the assigned tasks within the set deadlines and their supervisors are satisfied with their work output. However, it was found that some of the health care workers were neutral on the matters that there is a formal appraisal to rate their performance and they have been recognized severally for good performance as per organizational policy.

4.2.2.3 Descriptive Statistics for Efficiency

The descriptive statistics for efficiency is presented in Table 8

Table 8: Descriptive Statistics for Efficiency

Statement	Mean	Std. Deviation	Coefficient of Variation
Employees can deliver under less than perfect conditions	3.59	0.92	0.26
Average	3.59	0.92	0.26

The descriptive statistics presented in Table 8 indicate that majority of the health care workers agreed that employees could deliver under less than perfect conditions, as supported by the mean score of 3.59 with a standard deviation of 0.92 and 0.26 coefficient of variation. Healthcare workers' performance is affected by external and internal forces that influence performance, including competition, technology and working, motivation levels, skills, and knowledge (Acha, Hargiss & Howard, 2013).

4.2.2.4 Descriptive Statistics for Patient satisfaction

The descriptive statistics for patient satisfaction is presented in Table 9

Table 9: Descriptive Statistics for Patient Satisfaction

Statements	Mean	Std. Deviation	Coefficient of Variation
Concerns on service raised by patients usually solved timely	3.38	1.10	0.33
County health department has client feedback mechanism in place	2.79	1.16	0.42
Average	3.09	1.13	0.37

The results presented in Table 9 indicate that the mean score of the survey questions regarding patient satisfaction was 3.09 with a standard deviation of 1.13 and 0.37 coefficient of variation. This implies that the views of health care concerning whether concerns on service raised by patients are usually solved timely and county health department has client feedback mechanism in place has been mixed. The health care who agreed with the statements and those who disagreed were almost the same and thus, we can conclude the health workers remained neutral on the developed questions regarding patient satisfaction. Therefore, there is no guarantee the concerns on service raised by patients are usually solved timely and County health departments have a client feedback mechanism in place.

4.3 Correlation Analysis

The correlation analysis shows the movement of the variables. The correlation coefficient is measured on a scale ranging from + 1 through 0 to - 1. When one variable increases as the other increases, the correlation is positive. On the other side, when one variable decreases as the further variable increases, there is a negative association. There is no association when the coefficient is 0. The correlation results are presented in Table 10

Table 10: Correlation Analysis

Variable		Performance of Health care workers	Strategic Leadership
Performance of Health care workers	Pearson Correlation	1.000	
	Sig. (2-tailed)		
Strategic Leadership	Pearson Correlation	.698**	1.000
	Sig. (2-tailed)	0.000	

The correlation results depicted in Table 10 establish a positive and significant association exists between strategic leadership and the performance of health care workers ($r=.698$,

<https://doi.org/10.53819/81018102t50128>

p=.000). The results concur with Marangu, Odindo and Egezza (2015) who noted that leadership style has a strong positive and significant effect on the performance of Health Service Provision in Kenya.

4.4 Hypotheses Testing

The hypothesis to be tested was;

H₀₁: There is no significant relationship between strategic leadership and performance of health care workers in North Eastern Counties of Kenya.

The regression results tested the hypothesis and was determined by the p-value. The summary of the model fitness results is presented in Table 11

Table 11: Model Fitness for strategic leadership

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.775a	0.601	0.595	0.22488

a Predictors: (Constant), idealized influence, vision development, inspirational motivation, contingent reward

The results presented in Table 11 establish that strategic leadership (idealized influence, vision development, inspirational motivation and contingent reward) was satisfactory and can explain 60.1% of the fluctuations in the performance of health care workers in North Eastern Counties of Kenya. Table 12 presents the results on the analysis of variance (ANOVA).

Table 12: ANOVA

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	23.65	4	5.912	116.914	.000b
	Residual	15.727	311	0.051		
	Total	39.377	315			

a Dependent Variable: Performance

b Predictors: (Constant), idealized influence, vision development, inspirational motivation and contingent reward

Based on the study results presented in Table 12, the p-value is .000 that, is less than 0.05; thus, idealized influence, vision development, inspirational motivation and contingent reward are significant in explaining the performance. Further, the result of regressions of coefficient of sub-variables of strategic leadership are presented in Table 13

Table 13: Regression coefficients of Sub-variables of Strategic Leadership

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	-0.11	0.22		-0.5	0.617
	Idealized influence	0.342	0.043	0.344	8.025	0.000
	Vision development	0.087	0.026	0.124	3.309	0.001
	Inspirational motivation	0.518	0.048	0.463	10.779	0.000
	Contingent reward	0.092	0.037	0.089	2.454	0.015

a Dependent Variable: Performance

The results can be summarized by the following model;

$$HP = -0.11 + 0.342IF + 0.087VD + 0.518IM + 0.092CR$$

Where, P=Performance; IF= Idealized Influence; VD= Vision Development; IM=Inspirational Motivation; CR= Contingent Reward

The results from Table 13 shows that idealized influence is positively and significantly related to performance ($\beta=.342$ $p=0.000$). The results imply that there is a unitary change in idealized influence leading to an increase in performance of health care workers by 0.342 units when other factors are held constant. It was found that vision development is positively and significantly associated to performance ($\beta=.087$ $p=0.001$). This signified a unitary improvement in vision development would lead to an increase in performance of health care workers by 0.087 units when other factors are held constant. In addition, the study found that inspirational motivation is positively and significantly related to performance ($\beta=.518$ $p=0.000$). This meant a unitary increase in inspirational motivation would increase the performance of health care workers by 0.518 units when other factors are held constant. Lastly, it was found that contingent reward is positively and significantly related to performance ($\beta=.092$ $p=0.015$). This implied a unitary increase in contingent reward would increase the performance of health care workers in North Eastern Counties of Kenya by 0.092 units when other factors are held constant. Hence, the p values obtained from the sub-variables of strategic leadership in Table 32 are less than 0.05. Therefore, the null hypothesis is rejected. Hence, there is a positive association between strategic leadership and the performance of health care workers. The results concur with Rigii, Ogutu, Awino and Kitiabi (2019), who showed that strategic leadership had a significant influence on service delivery. Another study by Marangu, Odindo and Egessa (2015) noted that leadership style has a strong positive and significant effect on the performance of

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Health Service Provision in Kenya. Ogechi (2016) confirmed that strategic leadership has a positive impact on the performance of organizations.

5.0 Conclusion

The study concludes that strategic leadership is significant in influencing the performance of the employees. All measures of the strategic leadership employed in the study, idealized influence, vision development, inspirational motivation and contingent reward were reported to be significantly related to performance of health care workers. The idealized influence can incorporate leaders being admirable, respected, trusted and role models. The vision development can include being vision-oriented, incorporating core values, developing realistic vision and inspiring vision. The inspirational motivation can consist of articulating an appealing vision that inspires to perform beyond expectation, having a clear vision that can be easily articulated and rewarding hardworking employees.

6.0 Recommendations

It is recommended that the management within the counties (health managers) need to exercise strategic leadership. The health care leaders in the counties need to be role models to others. The health care leaders to be vision-oriented and be incorporating county core values. Besides, the health leaders need to be realistic and not develop goals that will be difficult to obtain. The Counties need to articulate an appealing vision that inspires health care workers to perform beyond expectation. The health workers should be encouraged to remain in North Eastern regions despite the circumstances. The health professions need to be registered with a professional regulatory body. The authorities mandated with quality health provision to coordinate and harmonize the development of health policies and laws that are effective and applicable to all.

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