

ASSESSING THE EFFECT OF REMUNERATION ON HEALTH WORKER RETENTION FOR UNIVERSAL HEALTH COVERAGE IN KISUMU CENTRAL SUB-COUNTY, KENYA

Synthia Amondi Agwenge*, Prof George G. Wagah**

* Department, Urban and Regional planning, Institute Maseno University

** School of planning and Architecture

DOI: 10.29322/IJSRP.16.07.2026.p17503
<https://dx.doi.org/10.29322/IJSRP.16.07.2026.p17503>

Paper Received Date: 14th May 2026

Paper Acceptance Date: 20th June 2026

Paper Publication Date: 8th July 2026

Abstract- This study examines the relationship between remuneration and health care workers retention. Remuneration was identified as a significant determinant of health worker retention in Kisumu Central Sub-County. The study found that remuneration-related factors, particularly salary delays, had a strong negative effect on retention, emerging as the most influential predictor among the working-condition domains examined. Binary logistic regression results showed that salary delays significantly reduced the likelihood of health workers remaining in public service (OR = 0.29, $p < 0.001$). The findings indicate that inadequate and untimely remuneration contributes substantially to workforce instability. The study concludes that remuneration challenges are a key structural driver of health worker turnover and recommends county-level interventions aimed at ensuring timely salary payments and improving remuneration practices to enhance retention of health workers and support the achievement of Universal Health Coverage (UHC).

Index Terms- Universal Health Coverage (UHC), Retention, Health Workers Shortage, Remuneration, facility Infrastructure.

I. INTRODUCTION

Remuneration is widely recognized as a key factor influencing employee motivation, job satisfaction, and retention across healthcare systems. In the health sector, adequate and timely compensation serves not only as a source of financial security but also as an indicator of organizational recognition and value placed on employees. Previous studies have shown that salary adequacy, timely payment of salaries, and access to allowances significantly influence health workers' decisions to remain in public service. Conversely, inadequate remuneration and delayed salary payments have been associated with low morale, reduced

organizational commitment, absenteeism, and increased turnover intentions.

In Kenya, remuneration-related challenges continue to affect the retention of health workers, particularly within county-managed health facilities where salary delays and inconsistencies in allowance payments have been reported. These challenges are further compounded by increasing living costs and high workloads, making financial incentives an important consideration in employment decisions. Within Kisumu Central Sub-County, concerns regarding salary adequacy, timeliness of salary disbursement, and access to allowances have been identified as potential factors affecting workforce stability.

This section presents findings on the effect of remuneration on health worker retention in public health facilities in Kisumu Central Sub-County. Specifically, the analysis examines health workers' perceptions regarding salary adequacy, salary payment timeliness, and access to allowances, and how these factors influence their intention to remain in public service.

Research Elaborations.

The main objective of this study is to assess the effect of remuneration on health worker retention for universal health coverage in Kisumu central sub-county, Kenya.

Specific Objective.

To examine the relationship between remuneration and health worker retention in Kisumu Central Sub-County, Kenya.

II. Methodology

The study examined the relationship between remuneration and health worker retention among employees working in public health facilities in Kisumu Central Sub-County. A mixed-methods approach was adopted, combining quantitative and qualitative methods to provide a comprehensive understanding of how remuneration influences retention decisions.

For the quantitative component, data were collected using structured questionnaires administered to health workers selected through a multistage stratified sampling procedure. Remuneration was operationalized using indicators including monthly salary, timeliness of salary payment, access to allowances and benefits, and perceived fairness of compensation. Respondents were asked to indicate their experiences and perceptions regarding these remuneration components and their intention to remain in public service.

To complement the quantitative data, qualitative information was collected through Key Informant Interviews (KIIs) with facility managers, departmental heads, human resource officers, and county health administrators. The interviews explored issues related to payroll administration, salary delays, allowance disbursement, reward systems, and the perceived influence of remuneration on staff motivation and retention. Secondary data were also obtained through document review, including payroll records, human resource reports, and county health planning documents, to validate information provided by respondents.

Descriptive statistics, including frequencies, percentages, means, and standard deviations, were used to summarize respondents' perceptions of remuneration. Inferential statistical analysis was conducted using SPSS Version 27. Chi-square tests were used to determine whether significant associations existed between remuneration variables and retention intention. Spearman's rank correlation analysis was employed to assess the strength and direction of the relationship between remuneration and retention. Subsequently, binary logistic regression analysis was performed to determine the predictive effect of remuneration on retention while controlling for other working-condition factors included in the study.

Qualitative data obtained from key informant interviews were transcribed, coded, and analyzed thematically. Emerging themes relating to salary adequacy, salary payment timeliness, allowances, benefits, and compensation fairness were integrated with quantitative findings to provide contextual explanations and enhance interpretation. The use of multiple data sources and methods strengthened the validity and reliability of the findings through methodological triangulation.

This methodological approach enabled the study to comprehensively assess the extent to which remuneration influences health worker retention in public health facilities within Kisumu Central Sub-County.

II. RESULTS

4.5.1 Remuneration significance.

The findings demonstrate that remuneration is a significant determinant of health worker retention in Kisumu Central Sub-County. All remuneration indicators examined, including salary level, timeliness of salary payment, salary delays, access to allowances, salary adequacy, and income supplementation

through additional work, showed statistically significant associations with retention intention ($p < 0.001$) as below.

a) *Monthly salary.*

The study found that the majority of health workers received relatively low salaries. More than six in ten respondents (65.1%) earned less than KES 40,000 per month, while only 11.6% earned KES 60,000 or above. The findings further showed a significant association between monthly salary and retention intention ($\chi^2 = 21.37, p < 0.001$). In addition, Spearman's rank correlation analysis revealed a moderate positive relationship between salary range and intended length of stay ($r_s = 0.41, p < 0.001$), indicating that health workers earning higher salaries were more likely to remain in their facilities for longer periods. These findings suggest that salary adequacy is an important factor influencing retention.

b) *Timeliness of salary payment.*

Salary payment timeliness emerged as a critical determinant of retention. Only 19.5% of respondents reported always receiving their salaries on time, while 69.3% had experienced salary delays during the previous 12 months. The study established a significant relationship between salary timeliness and retention intention ($\chi^2 = 28.94, p < 0.001$), as well as between salary delays and retention intention ($\chi^2 = 33.18, p < 0.001$). Qualitative findings further indicated that delayed salary payments contributed to absenteeism, reduced morale, and increased consideration of alternative employment opportunities. These results underscore the importance of reliable and predictable salary payments in promoting workforce retention.

c) *Access to allowance and benefits.*

The findings revealed limitations in access to allowances and benefits. Although 58.5% of respondents received at least one form of allowance, only 36.9% reported receiving these payments consistently. Consistency of allowance payments was significantly associated with retention intention ($\chi^2 = 14.61, p = 0.001$). Furthermore, 67.6% of respondents reported engaging in additional paid work to supplement their income, while 71.0% cited pay dissatisfaction as a reason for considering leaving their jobs. Pay dissatisfaction demonstrated the strongest association with retention intention among all remuneration indicators ($\chi^2 = 52.31, p < 0.001$). These findings suggest that inadequate and irregular financial benefits contribute substantially to turnover intentions among health workers.

4.5.2 Remuneration Influence

The strong influence of remuneration may be explained by the economic realities facing health workers in Kisumu Central Sub-County. More than two-thirds of respondents earned less than KES 40,000 per month, while 69.3% reported experiencing salary delays. Such conditions create financial insecurity and make it difficult for workers to meet basic household obligations, including rent, transport, education, and healthcare costs. Consequently, many respondents sought additional income through locum work and private practice, which may weaken their attachment to public-sector employment and increase turnover intention.

These findings are consistent with de Vries et al. (2023), who reported that remuneration remains one of the strongest predictors of health worker retention globally. Similarly, Pressley and Garside (2023) found that salary adequacy and fairness significantly influence turnover intentions among healthcare professionals.

Table 1: Summary of Remuneration Indicators (n = 241)

Indicator	Responses (Frequency (n))	Percentage (%)
Monthly salary below KES 40,000	157	65.1
Monthly salary Above KES 40,000	84	34.9
Salary always paid on time	Always (47) Sometimes (101) Rarely (72) Never (21)	Always (19.5) Sometimes (41.9) Rarely (29.9) Never (8.7)
Experienced salary delays in past 12 months	Yes (167) No (74)	Yes (69.3) No (30.7)
Receives at least one allowance	Yes (141) No (100)	Yes (58.5) No (41.5)
Salary adequate for workload	Yes (52) No (78)	Yes (21.6) No (78.4)
Taken extra work to supplement income	Yes (163) No (78)	Yes (67.6) No (32.4)
Pay dissatisfaction cited as reason to leave	Yes (171) No (70)	Yes (71) No (29)

As shown in Table 1, 65.1% of respondents earned less than KES 40,000 per month, 69.3% had experienced salary delays in the previous 12 months, and 78.4% considered their salary inadequate for their workload. Furthermore, 71.0% cited pay dissatisfaction as a reason for considering leaving their current position.

4.5.3 Remuneration and Retention: Chi-Square Analysis.

To determine whether remuneration was significantly associated with retention, chi-square tests were conducted. The results are presented in Table 16.

Table 2: Chi-Square Results for Remuneration Variables and Retention Intention.

Variable	χ^2	df	p-value	Interpretation
Monthly salary range	21.37	4	<0.001	Significant
Salary timeliness	28.94	3	<0.001	Significant
Salary delays	33.18	1	<0.001	Significant
Allowance consistency	14.61	2	0.001	Significant
Salary adequacy	29.05	1	<0.001	Significant

Variable	χ^2	df	p-value	Interpretation
Extra work for income supplementation	16.72	1	<0.001	Significant
Pay dissatisfaction	52.31	1	<0.001	Significant

As shown in Table 2, all remuneration indicators were significantly associated with retention intention ($p < 0.05$). Pay dissatisfaction recorded the highest chi-square value ($\chi^2 = 52.31$, $p < 0.001$), indicating that dissatisfaction with remuneration was the strongest predictor of turnover intention among the remuneration variables. Salary delays ($\chi^2 = 33.18$, $p < 0.001$) and salary adequacy ($\chi^2 = 29.05$, $p < 0.001$) also demonstrated strong associations with retention.

These findings imply that both the amount of remuneration and the reliability of payment significantly influence health workers' decisions regarding whether to remain in public service.

4.5.4 Correlation between salary and Intended length of stay

A Spearman rank correlation analysis was conducted to determine the relationship between monthly salary and intended length of stay in the facility. The results showed a statistically significant positive correlation ($r_s = 0.41$, $p < 0.001$).

Table 3: Spearman Correlation Between Salary Range and Intended Length of Stay.

Variables	Spearman's	p-value
Monthly salary range and intended length of stay	0.41	<0.001

The positive correlation shown in Table 3 indicates that respondents earning higher salaries tended to report longer intended periods of service. This suggests that improvements in salary levels may contribute to long-term workforce stability within public health facilities.

4.5.5 Discussion of Findings.

The results presented in Tables 1, 2, and 3 demonstrate that remuneration is a major determinant of health worker retention in Kisumu Central Sub-County. The finding that 71.0% of respondents cited pay dissatisfaction as a reason for considering departure and that remuneration variables showed significant associations with retention supports previous studies that identify compensation as a key predictor of workforce stability.

The findings are consistent with de Vries et al. (2023), who reported that salary adequacy, fairness, and predictability are among the strongest determinants of retention globally. Similarly, Pressley and Garside (2023) found that healthcare workers are more likely to remain in employment when compensation is perceived as equitable and sufficient to meet living costs.

The significant association between salary delays and retention shown in Table 16 is particularly noteworthy. Nearly seven out of every ten respondents experienced delayed salary payments, a

situation that may create financial stress and reduce organisational commitment. This finding agrees with Hilo et al. (2024), who found that delayed salaries contribute to frustration, reduced morale, and increased turnover intentions among health workers. It also supports findings by Ouma et al. (2025), who linked salary delays in Kenyan counties to absenteeism and declining commitment to public-sector employment.

The positive correlation between salary level and intended length of stay (**Table 17**) further suggests that higher remuneration encourages long-term retention. Similar findings were reported by Takemura et al. (2016), whose discrete-choice experiment showed that salary increases significantly improved job uptake and retention preferences among Kenyan health workers.

From the perspective of Social Exchange Theory, these findings indicate that remuneration forms a critical part of the exchange relationship between employees and employers. When salaries are adequate and paid on time, workers are more likely to reciprocate through commitment and continued service. Conversely, inadequate or delayed remuneration may weaken organizational attachment and increase in intentions to seek alternative employment.

Overall, the evidence presented in Tables 15, 16, and 17 confirms that remuneration significantly influences health worker retention in Kisumu Central Sub-County. Improving salary adequacy, ensuring timely salary disbursement, and strengthening allowance systems could therefore play an important role in enhancing workforce stability in public health facilities.

VI. CONCLUSION

Remuneration emerged as the most influential determinant of health worker retention in public health facilities within Kisumu Central Sub-County. The findings showed that a majority of respondents perceived their remuneration as inadequate relative to their workload and living expenses. Additionally, salary delays were widespread, with more than two-thirds of respondents reporting delayed salary payments within the previous twelve months. Pay dissatisfaction was cited by 71.0% of respondents as a major reason for considering leaving their current position.

The statistical analysis further confirmed the importance of remuneration. All remuneration indicators demonstrated significant associations with retention intention ($p < 0.001$), while a moderate positive correlation was observed between salary level and intended length of stay ($r_s = 0.41$, $p < 0.001$). Health workers earning higher salaries were more likely to indicate a longer commitment to their facilities. Furthermore, workers who experienced salary delays were substantially less likely to express an intention to remain in their current employment.

The study therefore concludes that remuneration significantly influences health worker retention in Kisumu Central Sub-County. Both the adequacy of compensation and the consistency of salary payments are critical factors affecting workforce stability. Persistent low salaries, delayed payments, and irregular allowances undermine employee motivation, increase turnover intentions, and contribute to workforce shortages within public health facilities. Addressing remuneration challenges is therefore essential for improving retention and sustaining an adequate health workforce.

REFERENCES

- [1] **de Vries et al. (2023)**
de Vries, N., Boone, A., Godderis, L., Bouman, J., Szemik, S., Matranga, D., & De Winter, P. (2023). *Retaining healthcare workers: A systematic review of strategies for sustaining power in the workplace*. *Inquiry*, 60, 00469580231159318. <https://doi.org/10.1177/00469580231159318>.
- [2] **Pressley & Garside (2023)**
Pressley, C., & Garside, J. (2023). *Safeguarding the retention of nurses: A systematic review*. *Nursing Open*, 10(5), 2842–2858. <https://doi.org/10.1002/nop2.1588>
- [3] **Okoroafor et al. (2022)**
Okoroafor, S. C., Kwesiga, B., Ogato, J., et al. (2022). *Investing in the health workforce in Kenya: Trends from a labour market analysis*. *BMJ Global Health*, 7(Suppl. 1), e009748. <https://doi.org/10.1136/bmjgh-2022-009748>
- [4] **WHO & ICN (2025)**
World Health Organization & International Council of Nurses. (2025). *State of the world's nursing 2025*.
- [5] **Hilo et al. (2024)**
Hilo, A. A., et al. (2024). *A discrete choice experiment to develop rural attraction and retention strategies*. *BMC Health Services Research*, 24, 11971. <https://doi.org/10.1186/s12913-024-11971-4>
- [6] **Jinah et al. (2024)**
Jinah, N., Adnan, I. K., Bakit, P. A., & Lee, K. Y. (2024). *Retention strategies for medical doctors in LMICs*. *BMC Health Services Research*, 24(1), 1662. <https://doi.org/10.1186/s12913-024-12154-x>
- [7] **Takemura et al. (2016)**
Takemura, T., Kielmann, K., & Blaauw, D. (2016). *Job preferences among clinical officers in rural Kenya*. *Human Resources for Health*, 14, 1–12. <https://doi.org/10.1186/s12960-015-0097-0>

AUTHORS

Synthia Amondi Agwenge, Maseno Univ
synthiaamondi@gmail.com
Prof George G. Wagah, Lecturer Maseno Univ