INTERNATIONAL JOURNAL OF INNOVATION, ENTERPRISE, AND SOCIAL SCIENCES

ISSN 2454-6186
Volume 5, Issue 2, Pages 291-301, November, 2025
Journal Website: https://scholarnestpublishers.com/index.php/IJIESS

MULTI-SECTOR PARTNERSHIPS AND PERFORMANCE OF DONOR-FUNDED HEALTH PROJECTS IN MURANG'A COUNTY, KENYA

[1] Kiario Nancy Kinya, [2] Dr. Jane Queen Omwenga, PhD

[1] Msc., Scholar (Project Management), Jomo Kenyatta University of Agriculture and Technology, Kenya

[2] Lecturer, Jomo Kenyatta University of Agriculture and Technology, Kenya

ABSTRACT

Persistent reliance on donor funding continues to undermine the long-term sustainability of health interventions in many developing countries. As external support declines, numerous donor-funded projects fail to maintain service delivery, exposing systemic weaknesses in local health systems. This study examined the influence of multi-sector partnerships on the performance of donor-funded health projects in Murang'a County, Kenya. Grounded in Stakeholder Theory, the study assessed how collaboration among government agencies, non-governmental organizations, private sector actors, and community structures contributes to project continuity, resource coordination, and institutional resilience. A descriptive research design was adopted, and data were collected from 140 respondents drawn from 28 licensed public health facilities. Using SPSS Version 27, the study employed descriptive and inferential statistical analyses, including regression modeling. Findings revealed that multi-sector partnerships significantly and positively influence the performance of donor-funded health projects. Stronger cross-sector collaboration enhanced service delivery, improved resource pooling, minimized duplication of efforts, and strengthened local ownership. The study concludes that effective multi-sector partnerships are critical for sustaining health outcomes beyond donor exit and recommends institutionalizing structured partnership frameworks, improving coordination mechanisms, and integrating joint monitoring and accountability systems.

KEYWORDS: Multi-sector partnerships; donor-funded health projects; project performance; Murang'a County.

Background of the Study

Project sustainability management refers to the systematic process of integrating environmental, social, and economic sustainability principles into project planning, execution, and completion to ensure long-term benefits beyond the project's lifecycle. It is also including strategic processes and practices employed to ensure that a project's outcomes, benefits, and impacts endure beyond its initial funding period or designated completion. This form of management emphasizes the establishment of long-term goals, resource allocation, capacity-building, and stakeholder involvement to facilitate the continuation of project benefits once external support ceases. Project sustainability management is essential in contexts where projects aim to address significant societal needs, such as health and education, as it ensures that the resources invested yield enduring impacts and foster self-sufficiency within the communities or systems served. By embedding sustainability planning into the project life cycle, organizations can better navigate the transitions from donor reliance to local ownership, helping to avoid the over reliance of aid that can render communities vulnerable when funding is withdrawn.

Statement of the Problem

Kenya continues to face major challenges in sustaining donor-funded health projects, particularly as the country shifts from heavy dependence on external funding towards a more self-reliant health system. Despite substantial investments from international donors such as the Global Fund and USAID, many health projects struggle to maintain performance once donor support ends, with an estimated 36% failing at the end of their funding cycles (Gilbert & James, 2021). This undermines the continuity of essential services and threatens health outcomes for vulnerable populations. In Murang'a County, the risk is especially pronounced, as donor contributions historically finance over 60% of health development budgets (ICJ Kenya, 2023). Funding gaps—worsened by shocks such as the COVID-19 pandemic and a 63% shortfall in national immunization financing—have exposed the fragility of donor-dependent health programs (World Bank, 2023). Abrupt reductions in external support, including disruptions to key programs such as PEPFAR-funded HIV services, have raised concerns about treatment interruptions and reversals in hard-won health gains (Kahenda, 2023).

While financial constraints are evident, a critical underlying weakness is the inadequate development and institutionalization of multi-sector partnerships that could anchor these projects within local systems. Weak or poorly coordinated collaboration between national and county governments, development partners, non-governmental organizations, private providers, and community structures limits the pooling of resources, joint planning, and shared accountability needed to sustain services beyond donor exit. Fragmented partnerships contribute to duplication of efforts, misaligned priorities, and gaps in service delivery, particularly in underserved areas. Without strong, structured multi-sector partnerships, donor-funded health projects in Murang'a remain highly vulnerable to funding fluctuations and policy shifts, jeopardizing progress towards Universal Health Coverage (UHC) by 2030. This study therefore seeks to address a critical gap: the extent to which multi-sector partnerships influence the performance of donor-funded health projects in Murang'a County, Kenya, and whether more effective partnership arrangements can enhance the sustainability and impact of these interventions after donor withdrawal.

Research Objective

i. To determine the relationship between multi sector partnerships and performance of donor-funded health projects in Murang'a County, Kenya

Research Question

i. How does multi sector partnerships influence the performance of donor-funded health projects in Murang'a County, Kenya?

LITERATURE REVIEW

Theoretical Framework

Stakeholder Theory was first introduced by Edward Freeman in 1984 as a framework for understanding how organizations should manage relationships with various stakeholders. The theory argues that organizations do not operate in isolation but rather exist within a network of stakeholders, each of whom has an interest in the organization's success or failure. Unlike traditional theories that prioritize shareholders and financial performance, Stakeholder Theory emphasizes the importance of considering the needs, expectations, and influence of multiple stakeholders, including government agencies, healthcare institutions, donors, private sector partners, community-based organizations, and the general public. By engaging and addressing the concerns of all stakeholders, organizations can achieve sustainable success, social responsibility, and long-term value creation.

A shared vision and goals among different multi sector partners ensure alignment with project objectives, while intersectoral collaboration helps leverage diverse resources, expertise, and institutional support. Stakeholders also play a crucial role in impact assessment, ensuring that health projects meet intended goals and continuously improve service delivery. When multiple partners are involved in funding and supporting health projects, the risk of project failure due to donor withdrawal is significantly reduced. The stakeholder theory provides a strategic foundation for managing donor-funded health projects effectively. By identifying, engaging, and addressing the interests of all stakeholders through multi-sector partnerships, these projects can enhance programmatic outcomes, financial sustainability, and operational efficiency. A well-coordinated approach involving diverse funding sources, institutional collaborations, and government support fosters sustainability by ensuring continued financing, local ownership, and policy integration.

Conceptual Framework

A conceptual framework is a structured network that illustrates the interrelationships between independent variables and dependent variables (Tamene, 2016). It integrates theoretical foundations, empirical evidence, and contextual factors to explain how specific practices enhance project outcomes.

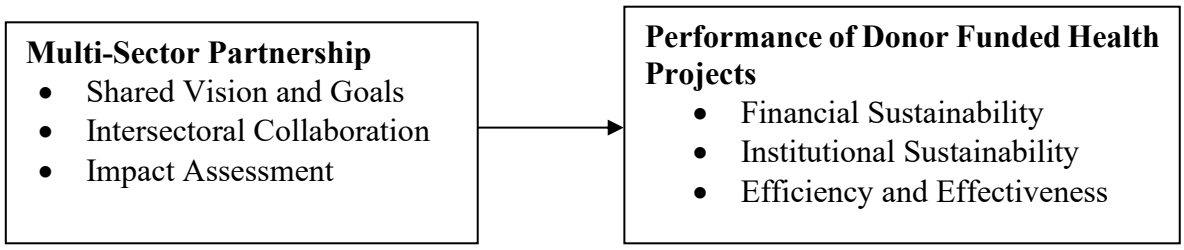

Figure 2. 1 Conceptual Framework

Multi-Sector Partnerships

Multi-sector partnerships involve collaboration between government agencies, NGOs, private sector players, and community organizations to enhance the effectiveness and sustainability of health projects (OECD, 2021). In Murang'a County, such partnerships pool resources, expertise, and networks to address complex health challenges like maternal care, disease prevention, and healthcare access (KPMG, 2023). These alliances improve coordination, reduce duplication of efforts, and foster innovative solutions through shared knowledge (USAID, 2022). Challenges include aligning diverse objectives, managing conflicting

interests, and ensuring equitable participation (World Bank, 2024). Strong governance frameworks and clear communication are essential to sustaining these partnerships (GOK, 2023). By leveraging multi-sector collaboration, donor-funded health projects can achieve broader impact, scalability, and long-term viability in improving community health outcomes (Amref Health Africa, 2024).

Empirical Review

Multi-sector partnerships are increasingly recognized as a cornerstone for the effective implementation and sustainability of donor-funded health projects. These partnerships involve collaboration among various actors including government agencies, non-governmental organizations (NGOs), community-based organizations (CBOs), private sector entities, academic institutions, and international development partners. Their collective contributions, resources, and expertise enhance health project performance and promote long-term sustainability (World Health Organization, 2020).

In Kenya, the health sector has embraced the multi-sectoral approach, especially in programs addressing HIV/AIDS, tuberculosis, maternal health, and emerging issues such as COVID-19. The Kenya Health Policy (2014–2030), although developed earlier, laid a foundational framework that has been built upon in subsequent years, including by the Kenya Community Health Strategy 2020–2025. The Strategy explicitly calls for partnerships between counties and non-state actors to optimize resource use and align interventions with community needs (Ministry of Health, 2020).

A 2021 study by Odhiambo and Were showed that health projects in Kenya that integrated diverse stakeholders into both planning and implementation stages reported higher performance outcomes. These included improved coordination, efficient use of resources, and better alignment with community needs. For example, the partnership between the Ministry of Health and AMREF Health Africa in maternal and child health programs led to significant reductions in maternal mortality in counties like Murang'a, Kisumu, and Kilifi (Odhiambo & Were, 2021).

In Murang'a County specifically, the presence of multiple NGOs and private sector entities working alongside county health departments illustrates the value of partnership in delivering services, particularly in underserved areas. However, there are challenges in aligning these partnerships with county development plans due to fragmented coordination and limited data sharing among partners. A report by the Council of Governors (2022) found that while donor partners often bring critical resources and expertise, lack of structured engagement frameworks can lead to duplication of efforts and gaps in service delivery.

To enhance the effectiveness of multi-sector partnerships, formal frameworks such as memoranda of understanding (MOUs), joint steering committees, and shared monitoring and evaluation systems are necessary. These helps clarify roles, foster accountability, and promote transparency. In Murang'a County, institutionalizing these frameworks could improve coordination and reduce redundancy across donor-supported initiatives.

Performance of Donor Funded Health Projects

The performance of donor-funded health projects is a multi-dimensional concept that encompasses effectiveness, efficiency, sustainability, and impact. In the context of Kenya, performance is often evaluated based on health outcomes achieved, value for money, and the ability of projects to sustain benefits after donor exit. Since 2020, the global health landscape has been significantly influenced by the COVID-19 pandemic, which has both challenged and tested the resilience and adaptability of donor-funded health programs (World Bank, 2022).

Performance measurement is central to improving health project outcomes. According to a 2021 report by the Global Fund, Kenya has made notable progress in improving health

indicators through donor-supported programs targeting HIV, tuberculosis, and malaria. However, performance gaps remain due to systemic issues such as weak health infrastructure, workforce shortages, and poor coordination between national and county health agencies (Global Fund, 2021). Donor-funded projects that incorporate robust monitoring and evaluation (M&E) systems tend to perform better, as these systems help track progress, identify challenges early, and inform decision-making. Sustainability remains a core performance criterion. A study by Kimani et al. (2023) on donor-funded reproductive health programs in Kenya revealed that many initiatives face challenges in sustaining services once donor funding is withdrawn. Key factors influencing sustainability include the level of government integration, availability of recurrent funding, community ownership, and capacity of local health personnel. In Murang'a County, several health projects have seen a decline in performance post-donor exit due to lack of transition planning and insufficient local funding (Murang'a County Health Sector Review Report, 2022).

Moreover, the alignment of donor priorities with local health needs significantly affects performance. Projects designed with local stakeholder input and adapted to the county's specific epidemiological profile tend to show better results. Conversely, top-down interventions that lack contextual understanding often struggle to achieve intended outcomes. Therefore, participatory planning and decentralization of project design are essential for improved performance.

RESERCH METHODOLOGY

This study adopted a descriptive research design to examine how multi-sector partnerships influence the performance of donor-funded health projects in Murang'a County. The design was appropriate because it enabled systematic collection of quantitative data that captured existing partnership structures, stakeholder interactions, and project performance outcomes.

The target population consisted of 140 respondents drawn from 28 licensed public health facilities within Murang'a County, comprising three health workers and two community members from each facility. The county was selected due to its high number of closed or non-sustained health facilities, making it an ideal setting for assessing the effectiveness of partnership-driven sustainability strategies. The sampling frame reflected the same distribution, ensuring representation of both service providers and beneficiaries directly involved in donor-supported health programs. The sample size was determined using Yamane's formula for finite populations, resulting in a sample of 103 respondents. A structured questionnaire served as the primary data collection instrument, capturing information on the nature of multi-sector collaborations and their perceived impact on health project outcomes. Secondary data were sourced from scholarly publications to complement primary responses and strengthen contextual understanding.

Data collection involved administering questionnaires after obtaining the required university authorization and a research permit from the National Council for Science, Technology, and Innovation. A pilot test involving 10% of the sample was conducted to refine the instrument. Reliability was confirmed using Cronbach's Alpha, while face, content, and construct validity were assessed to ensure accurate measurement of the partnership variable. Data were analyzed using SPSS Version 27. Descriptive statistics summarized respondents' perceptions of partnership practices, while inferential statistics—including multiple regression—tested the effect of multi-sector partnerships on project performance. The regression model isolated the contribution of partnerships relative to other sustainability practices, enabling a clear understanding of their statistical significance and practical influence on donor-funded health projects in the county.

RESEARCH FINDINGS AND DISCUSION

Out of the 103 questionnaires distributed by the researcher, 86 were completed and returned, yielding a response rate of 83.49%. According to Saunders (2011), a response rate exceeding 50% is considered sufficient for statistical analysis. Therefore, the achieved response rate is deemed adequate for this study and supports the generalization of the findings to the broader target population.

Multi-Sector Partnerships

Respondents were requested to indicate their level of agreement with various statements concerning the relationship between multi-sector partnerships and the performance of donor funded health projects in Kirinyaga county in Kenya. A five-point Likert scale was employed, where 1 represented "Strongly Disagree," 2 "Disagree," 3 "Neutral," 4 "Agree," and 5 "Strongly Agree." The descriptive statistics derived from the responses are summarized in the table below and are presented in percentage form.

Table 1 Descriptive Statistics for Multi-Sector Partnership

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Descriptive Statistics	
						Mean	SD
A unified vision minimizes conflicts and maximizes synergy in multi-sector health partnerships	0.0%	0.0%	0.0%	19.8%	80.2%	4.80	.40
Objectives of different partner organizations should be aligned within donor-funded health initiatives	0.0%	0.0%	0.0%	19.8%	80.2%	4.80	.40
Intersectoral collaboration leads to more comprehensive and sustainable health interventions	0.0%	0.0%	0.0%	38.4%	61.6%	4.62	.49
Intersectoral collaboration brings diverse expertise and resources to donor-funded health projects	0.0%	0.0%	0.0%	29.1%	70.9%	4.71	.46
A robust impact assessment framework is essential for demonstrating the value of multi-sector health partnerships	0.0%	0.0%	0.0%	37.2%	62.8%	4.63	.49
Impact assessment findings help to learn, adapt, and improve their collaborative health initiatives	0.0%	0.0%	0.0%	37.2%	62.8%	4.63	.49

According to the findings, 80.2% of the respondents strongly agreed that a unified vision minimizes conflicts and maximizes synergy in multi-sector health partnerships, while the remaining 19.8% agreed. There were no neutral or disagreeing responses. This result highlights a strong consensus that a shared and unified vision is essential for fostering effective collaboration and reducing conflicts within multi-sector donor-funded health projects. The high mean score of 4.80 and a low standard deviation of 0.40 reflect both the strength and consistency of this agreement.

Similarly, 80.2% of the respondents strongly agreed and 19.8% agreed that the objectives of different partner organizations should be aligned within donor-funded health initiatives. The absence of any dissent or neutrality underscores the perceived importance of aligning organizational goals to ensure coherence and effectiveness in multi-partner projects. This view

is supported by a mean score of 4.80 and a standard deviation of 0.40, indicating a high level of consensus.

The findings also revealed that 61.6% of respondents strongly agreed and 38.4% agreed that intersectoral collaboration leads to more comprehensive and sustainable health interventions. These responses demonstrate widespread recognition of the value that cross-sector partnerships bring in designing and implementing long-lasting health solutions. The mean score of 4.62 and standard deviation of 0.49 further indicate that the view is broadly held with only slight variation in the intensity of agreement.

In addition, 70.9% of the respondents strongly agreed and 29.1% agreed that intersectoral collaboration brings diverse expertise and resources to donor-funded health projects. These findings suggest that respondents view collaborative approaches as a key driver of innovation, efficiency, and effectiveness. The mean score of 4.71 and standard deviation of 0.46 support the strong and consistent approval of this view.

Moreover, 62.8% of the respondents strongly agreed and 37.2% agreed that a robust impact assessment framework is essential for demonstrating the value of multi-sector health partnerships. This result highlights the widely held belief that impact assessments are critical not only for evaluating project outcomes but also for validating the effectiveness of cross-sector collaborations. The mean score of 4.63 and standard deviation of 0.49 indicate strong agreement among respondents.

Lastly, 62.8% of the respondents strongly agreed and 37.2% agreed that impact assessment findings help organizations to learn, adapt, and improve their collaborative health initiatives. This suggests a shared understanding of the importance of using evaluation data as a basis for continuous improvement and learning in multi-sector project environments. The mean score of 4.63 and standard deviation of 0.49 further reflect this strong and consistent viewpoint.

Regression Analysis

Model Summary

Table 2 Model Summary of Multi-Sector Partnership

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Sig. F Change
1	.984[a]	.969	.969	.05278	.000

a. Predictors: (Constant), Multi-Sector Partnerships

Multi-sector partnership was identified to be significant in the performance of donor-funded health projects in Kenya. The findings indicate that the R Square (0.969), which is also the coefficient of determination, accounts for 96.9% of the variance in the dependent variable. The model summary reveals that multi-sector partnerships is a significant determinant in forecasting the performance of donor-funded health projects in Kenya. The Significance of F Change (0.000) demonstrates that the model is statistically significant, meaning the likelihood that the relationship occurred by chance is zero. These results suggest that multi-sector partnership is a critical indicator in ensuring performance of donor funded health projects.

Analysis of Variance

Table3 ANOVA for Multi-Sector Partnership

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	7.345	1	7.345	2636.753	.000[b]
	Residual	.234	84	.003		
	Total	7.579	85			

a. Dependent Variable: Performance of Donor Funded Health Projects

b. Predictors: (Constant), Multi-Sector Partnerships

From the results above, the F value (2636.753) is greater than the F critical (3.96) which indicates that the model explains a significant portion of the variance in the dependent variable. The p value (0.000) is also less than 0.05 therefore this confirms that there is a strong statistical significance. Therefore, from the findings, multi-sector partnership is a significant predictor of the performance of donor funded health projects.

Regression Coefficient Analysis

Table 3 Regression Coefficient Analysis for Multi-Sector Partnership

		Unstandardized Coefficients		Standardized Coefficients		
	Model	B	Std. Error	Beta	t	Sig.
1	(Constant)	.036	.091		.400	.690
	Multi-Sector Partnerships	.995	.019	.984	51.349	.000

a. Dependent Variable: Performance of Donor Funded Health Projects

The study assessed the beta coefficient of Multi-Sector Partnerships in relation to the performance of donor funded health projects. The regression analysis shows that multi-sector partnership significantly predicts performance of donor funded health projects. The beta coefficient was found to be 0.995, with a p-value of 0.000, which is below 0.05 significance level. Therefore, there is a positive correlation and significant relationship between multi-sector partnerships and performance of donor funded health projects. The regression model is as follows:

$$Y = 0.036 + 0.995X_1$$

Whereby,

Y - Performance of Donor Funded Health Projects

X_1 – Multi-Sector Partnerships.

The coefficients table indicates that multi-sector partnerships has a significant and positive impact on the performance of donor funded health projects. The relationship is both statistically significant and practically meaningful, as evidenced by the significant p-values and the magnitude of the coefficients.

Performance of Donor Funded Health Projects in Kenya

Respondents were requested to indicate their level of agreement with various statements concerning the performance of donor funded health projects in Kirinyaga county in Kenya. A five-point Likert scale was employed, where 1 represented "Strongly Disagree," 2 "Disagree," 3 "Neutral," 4 "Agree," and 5 "Strongly Agree." The descriptive statistics derived from the responses are summarized in the table below and are presented in percentage form.

Table 4 Descriptive Statistics for Performance of Donor Funded Health Projects

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Descriptive Statistics	
						Mean	SD
Donor-funded health projects should develop diversified funding strategies to ensure their long-term financial viability.	0.0%	0.0%	0.0%	18.6%	81.4%	4.81	.39
Donor-funded health projects generate sufficient local resources or income to sustain key activities after donor funding ends	0.0%	0.0%	0.0%	18.6%	81.4%	4.81	.39
Donor-funded health projects should build the capacity of local institutions to manage and implement similar initiatives independently	0.0%	0.0%	0.0%	36.0%	64.0%	4.64	.48
Projects should integrate their activities into existing national or local health systems	0.0%	0.0%	0.0%	27.9%	72.1%	4.72	.45
Projects are delivering high-quality health services and interventions that meet the needs of the target population	0.0%	0.0%	0.0%	36.0%	64.0%	4.64	.48
Projects are implemented in a cost-effective manner, maximizing output with available resources	0.0%	0.0%	0.0%	36.0%	64.0%	4.64	.48

According to the findings, 81.4% of respondents strongly agreed and 18.6% agreed that donor-funded health projects should develop diversified funding strategies to ensure their long-term financial viability. No respondents disagreed or remained neutral, indicating a unanimous recognition of the importance of financial diversification for project sustainability. The high mean score of 4.81 and a low standard deviation of 0.39 reflect strong and consistent agreement among respondents.

Similarly, 81.4% of the respondents strongly agreed and 18.6% agreed that donor-funded health projects generate sufficient local resources or income to sustain key activities after donor funding ends. In terms of institutional sustainability, 64.0% of the respondents strongly agreed and 36.0% agreed that donor-funded health projects should build the capacity of local institutions to manage and implement similar initiatives independently. This suggests a widely held belief that empowering local entities is key to sustaining health programs over the long term. The mean score of 4.64 and standard deviation of 0.48 indicate strong agreement with minimal variation in views.

The findings also showed that 72.1% of the respondents strongly agreed and 27.9% agreed that projects should integrate their activities into existing national or local health systems. The complete absence of disagreement or neutrality highlights a shared understanding of the importance of alignment with broader health infrastructure for sustained impact. This is further supported by a mean of 4.72 and a standard deviation of 0.45, reflecting a consistent viewpoint.

Regarding service delivery, 64.0% of respondents strongly agreed and 36.0% agreed that the projects are delivering high-quality health services and interventions that meet the needs of the target population. These results suggest that respondents generally perceive project outcomes

positively and aligned with community needs. The mean score of 4.64 and standard deviation of 0.48 demonstrate a solid level of agreement.

Lastly, 64.0% of the respondents strongly agreed and 36.0% agreed that projects are implemented in a cost-effective manner, maximizing output with available resources. This indicates a positive assessment of financial efficiency and resource utilization across donor-funded projects. The consistent mean score of 4.64 and standard deviation of 0.48 further reinforce this favorable perception.

Conclusion of the Study

the study highlighted the importance of multi-sector partnerships in enhancing the performance of donor-funded health projects. Strong collaborations between government agencies, non-governmental organizations, private sector actors, and international partners foster innovation, resource sharing, and synergy. Such partnerships ensure that diverse expertise is leveraged, objectives are aligned, and duplication of efforts is minimized. Effective multi-sector collaboration also supports robust monitoring and evaluation, creating opportunities for continuous improvement and sustainable health outcomes.

Recommendations of the Study

For donor-funded health projects to achieve long-term impact, strengthening multi-sector partnerships is critical. Collaboration between government ministries, local authorities, civil society, private sector organizations, and international agencies should be formalized through structured agreements that clearly define roles, responsibilities, and shared objectives. These partnerships should be based on mutual accountability and transparent communication channels to avoid duplication of efforts. Regular joint review forums and policy dialogue sessions are recommended to foster alignment of activities and facilitate problem-solving. Incorporating cross-sectoral expertise—ranging from health and education to technology and infrastructure—can also enhance project outcomes by promoting innovation and resource efficiency. Strong partnerships ensure that donor-funded projects are not isolated interventions but integrated into broader development agendas.

REFERENCES

AfDB. (2023). Capacity development for sustainable health systems in Africa. African Development Bank.

AMREF Health Africa. (2021). *COVID-19 health communication updates*. https://amref.org/news/covid-19-response/

Center for Policy Impact in Global Health. (2021). *Kenya's donor dependency and health financing transition*. https://centerforpolicyimpact.org/

CHW Central. (2021). *Kenya National Community Health Strategy 2020–2025*. https://chwcentral.org/wp-content/uploads/2021/07/Kenya_Nat%27l_Community_Health_Strategy_2020-2025.pdf

Gilbert, D., & James, R. (2021). Critical Success Factors in the Implementation of Donor Funded Projects in Tharaka Nithi County, Kenya. *International Journal of Business and Social Science*, *12*(4). https://doi.org/10.30845/ijbss.v12n4p14

Gitau, R., Kamau, P., & Nyaga, L. (2021). Strengthening health workforce capacity in Kenya. Journal of Public Health in Africa, 12(2), 45-58.

Global Fund. (2021). *Kenya: Results and impact of Global Fund investments*. https://www.theglobalfund.org/en/kenya/

ICJ Kenya. (2023, September). *Why Kenya could miss universal healthcare dream - ICJ Kenya*. ICJ Kenya - International Commission of Jurists. https://icj-kenya.org/news/why-kenya-could-miss-universal-healthcare-dream/

Kahenda, M. (2023, August 29). *Donor extends support for Kenya's HIV commodity supplies and treatment*. Health; The Standard Media Group. https://www.standardmedia.co.ke/health/health-science/article/2001480424/donor-extends-support-for-kenyas-hiv-commodity-supplies-and-treatment

Kenya Healthcare Federation. (2025). *Multi-stakeholder health partnerships in Kenya*. https://khf.co.ke/multi-stakeholder-partnershipmsp-2/

Kinyua, J. W. (2023). Diversified funding and project sustainability: Lessons from donor-funded health initiatives in Kenya. *East African Journal of Health and Development*, 5(1), 88–101.

Kimani, P. N., Maina, J. M., & Wambugu, P. W. (2023). Determinants of sustainability in reproductive health projects: A study of donor-funded programs in Kenya. *African Journal of Public Health*, 8(2), 115–130.

Ministry of Health, Kenya. (2024). Kenya health sector sustainability framework. Government of Kenya.

Ministry of Health (Kenya). (2020). *Kenya Community Health Strategy 2020–2025*. Nairobi: Government of Kenya.

Musau, D. M., Otieno, B. O., & Mwangi, M. W. (2022). Financial sustainability challenges in donor-funded health projects in Kenya. *International Journal of Health Project Management*, 4(3), 53–67.

Ng'ang'a, T. K. (2021). Impact of COVID-19 Measures on Kenya's health System. *African Economic Research Consortium*, https://publication.aercafricalibrary.org/server/api/core/bitstreams/1ea295fb-2c4a-4fac-87c7-d9abc2691cd2/content

Njeru, R., Kiriga, D., & Muraya, K. (2021). Community participation and sustainability of maternal health projects in rural Kenya. *International Journal of Community Health Studies*, 6(4), 219–232.

Omondi, S. & Wanjala, R. (2022). Barriers to effective community health volunteer participation in rural health projects: Evidence from Murang'a County. *Kenya Journal of Public Health*, 9(3), 132–145.

Odhiambo, L. M., & Were, E. (2021). Effectiveness of multi-sectoral partnerships in donor-funded maternal health programs in Kenya. *African Journal of Governance and Development*, 10(1), 76–90.

Tessema, M., Mulu, Y., & Kibret, S. (2020). Enhancing sustainability through community participation in sub-Saharan Africa: Evidence from Kenya, Uganda, and Ethiopia. *Journal of Community Health Development*, 5(3), 144–159.

World Bank. (2023). *Sustainable Financing for Priority Programs in Kenya A Technical Review of Priority Programs in Kenya*. https://documents1.worldbank.org/curated/en/099800203222271790/pdf/P1629690f8099b098098910450c422ad199.pdf

World Bank. (2022). *COVID-19 and health systems resilience in Africa: Kenya case study*. https://www.worldbank.org/

World Health Organization. (2020). *Global action plan for healthy lives and well-being for all: Strengthening collaboration among stakeholders*. https://www.who.int/