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Towards Universal Health Care: A review of Kenya's Healthcare system in the era of Big Four Agenda

This paper explores the universal health coverage (UHC) process in Kenya through the lens of its potential to progressively realize the constitutional right to the highest attainable standard of health, which includes the right to healthcare services. The health sector in Kenya has experienced tremendous changes since the introduction of the Big Four Agenda. In 2018, the government piloted a universal health coverage program me in four counties, where there was abolition of all fees, more than 200 community health units were opened, 7700 community health volunteers and over 700 health workers recruited (MOH, 2020). The government in its efforts to achieve the Big Four Agenda is in the process of scaling up universal health coverage and reforming the national hospital insurance fund and establishing a mandatory universal health coverage scheme. The Universal Health Coverage (UHC) will ensure there is access to healthcare without financial burden. This paper sought to analyze the current context of UHC in Kenya; identify the policy frameworks, and describe the challenges faced in implementation and applicability of the Universal Health care (UHC). The researcher utilized documents analysis to collect the relevant data for this paper. 18 documents informed the relevant data collected for this paper. A purposive literature search was undertaken to identify key policy documents and relevant scholarly articles. A desk review of the literature was undertaken to answer the research objectives. The study found out that Kenya is yet to establish an official policy on UHC that provides a clear mandate on the goals, targets and monitoring and evaluation of performance. A significant majority of Kenyans continue to have limited access to health services as well as limited financial risk protection. However, there is very weak health information systems, and inconsistent reporting mechanisms which has an impact in the implementation of the UHC

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