

Kenya Preparing for the Next Pandemic

Findings

1. Based on the analytical data, Mandera has the highest index of vulnerability at 3.22 which is above the average which is 2.86.
2. In Keph Level 2 and 3 the private facilities have more beds than the Governmental counterpart.
3. Counties such as Tana River have no open health facilities that are operational at night.
4. For counties below the country's average hospital bed density of 14.4 i.e. Taita Taveta, Baringo, Bungoma, Bomet, Narok, Garissa, Nandi, Turkana, Nyandarua, Murang'a, Tana River, Trans Nzoia, West Pokot, Wajir, Kilifi, Kwale.

Recommendations

1. Based on the findings, the Govt. of Kenya should consider investing specialized care in Mandera to enhance pediatric care and geriatric care.
2. The Govt. of Kenya should consider adding resources such as security to facilitate night time healthcare and engage community health volunteers
3. Government should establish an emergency fund for poor and vulnerable patients so that they can access costly referral services outside the county.

Group 6

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Demo_Score

Facility Analysis

Beds & Cots Availablility

Bed Density County Comparison

Stress Analysis

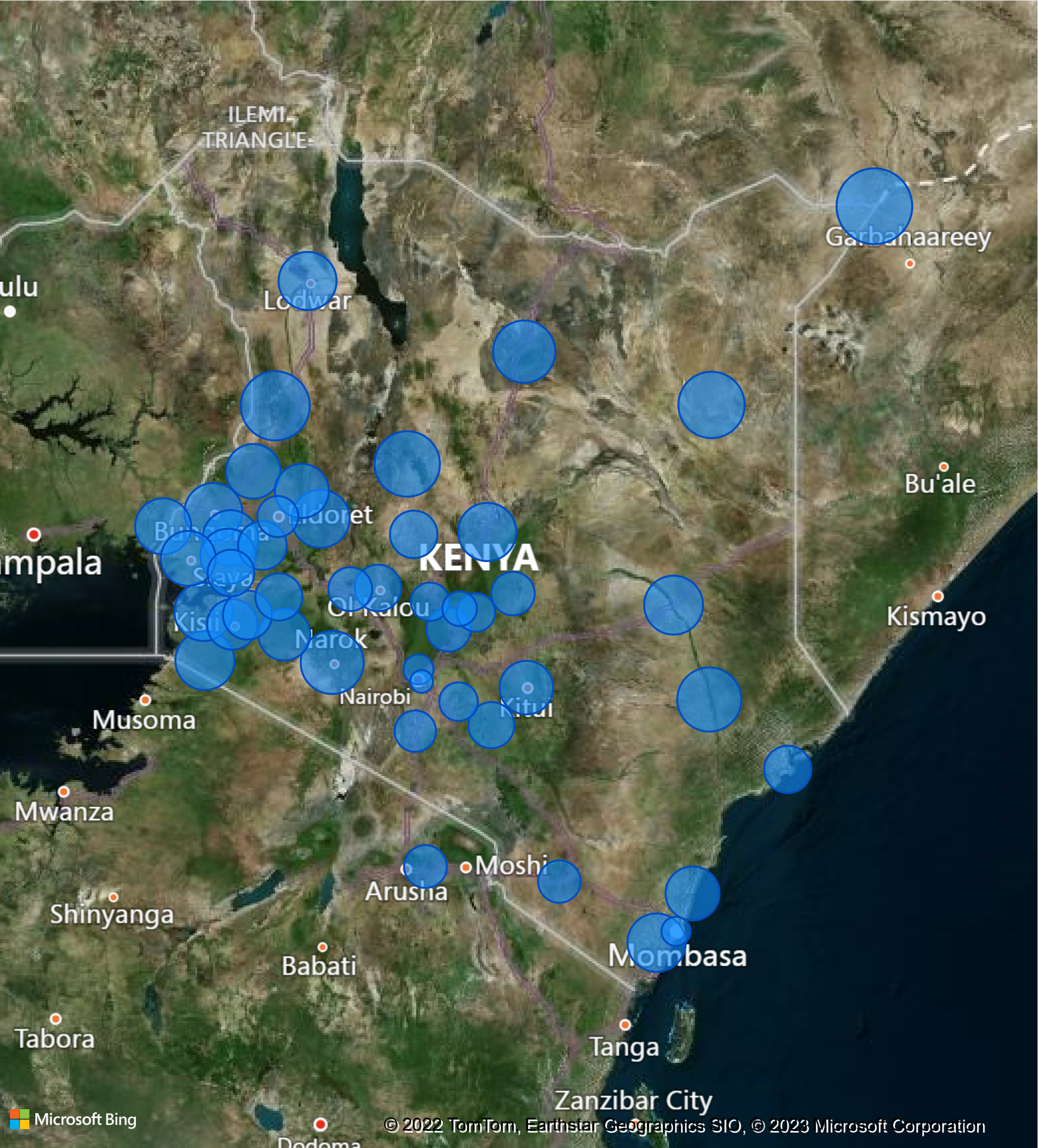


Demo Score Across Counties

Demo Score calculates the vulnerability score based on ages. Ages such as 0-4, 60-80 and 80+ are groups that highly affected in the case of any wide spread disease or pandemic.

The hierarchical presentation below shows Mandera holds the top spot with a demo score of 3.22 making it the most

Demographic Score Per County by county



County	Sum of demographic_score	Sum of Female	Sum of Male
MANDERA	3.22	432444	434973
WEST POKOT	3.13	314212	307011
WAJIR	3.09	365839	415373
SAMBURU	3.07	153545	156773
TANA RIVER	3.05	157390	158545
NAROK	3.04	578801	579035
MARSABIT	3.03	216217	243544
MIGORI	2.98	580202	536182
GARISSA	2.98	382343	458971
KWALE	2.97	441675	425115
HOMA BAY	2.97	592361	539557
BARINGO	2.97	330427	336321
ISIOLO	2.97	128483	139509
TURKANA	2.96	448866	478086
BUNGOMA	2.96	858388	812139
BUSIA	2.94	467397	426247
KAKAMEGA	2.93	970391	897117
VIHIGA	2.92	306320	283672
SIAYA	2.92	521486	471655
TRANS NZOIA	2.92	501203	489106
ELGEYO-MARAKWET	2.91	227150	227317
KILIFI	2.90	749662	704083
KITUI	2.90	587145	548999
BOMET	2.87	441377	434284
KISII	2.85	661031	605769
NYAMIRA	2.83	314653	290906
NANDI	2.83	444428	441259
LAIKIPIA	2.81	259100	259437
LAMU	2.81	67812	76100
Total	134.28	24014419	23547671

Total Patient Population:
48M

Average Demographic Score:
2.86

County

All

Keph level

Multiple selections

Open_late_night

All

Open_weekends

All

Open_whole_day

All

Open_public_holidays

All

The distribution of Keph Levels shows that the number of health facilities reduces as the Keph Levels increase. This is a clear depiction of the scarcity of quality medical services across the counties in Kenya.

Most counties have no more than a Level 4 medical facility which indicates that in the event of a pandemic a significant proportion of the population would not have access to specialized care.

74786

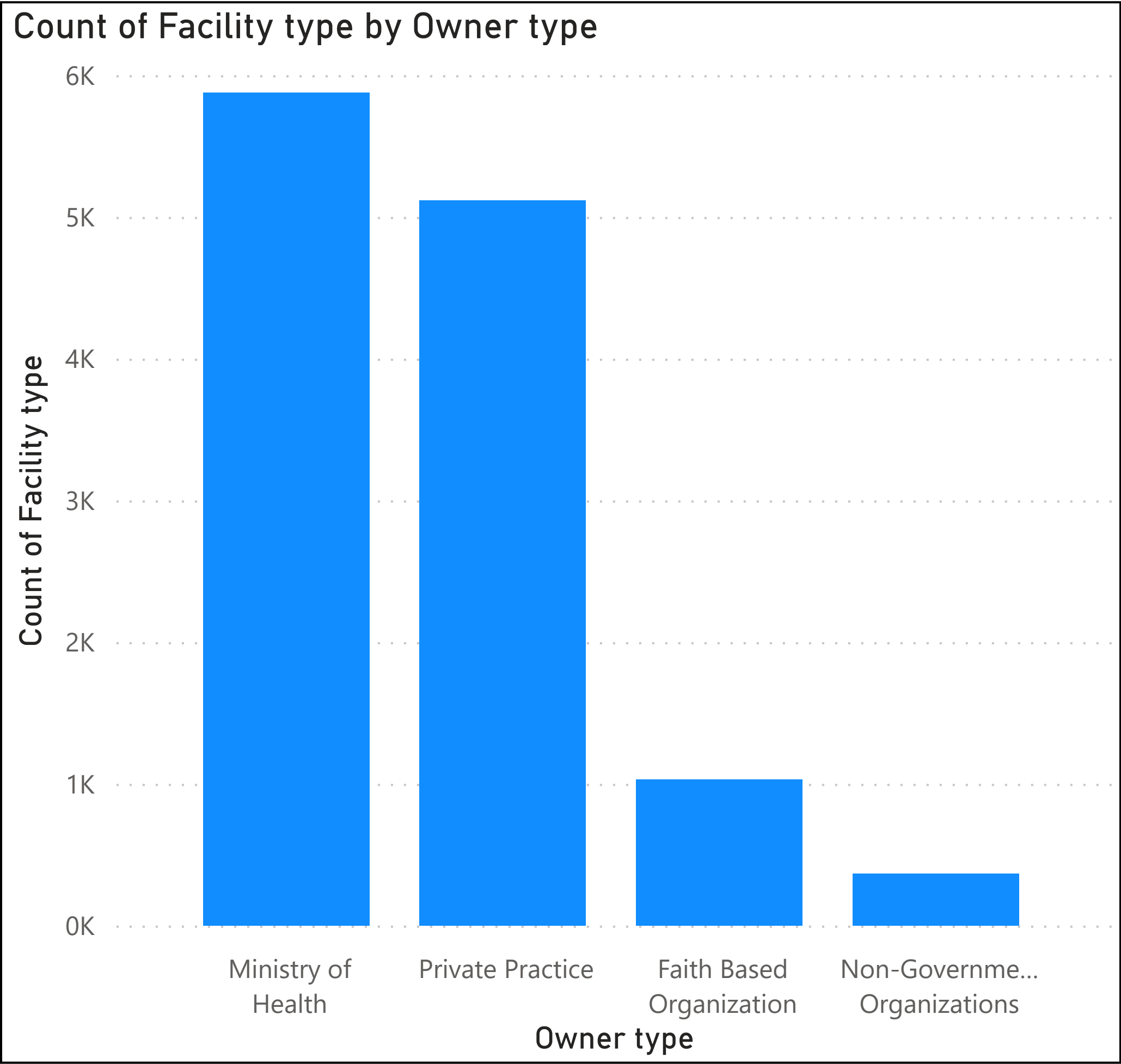
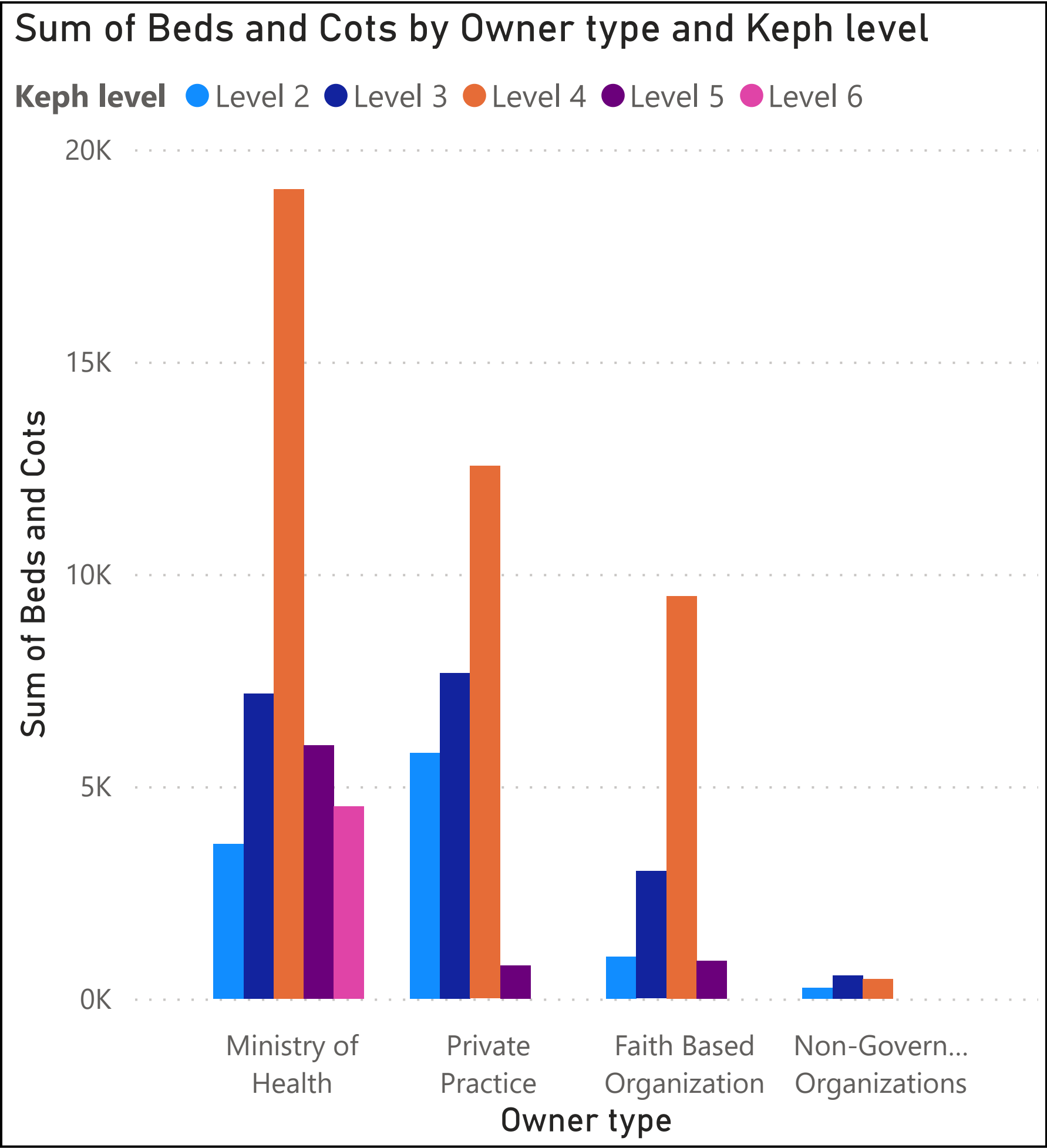
Sum of Beds

8006

Sum of Cots

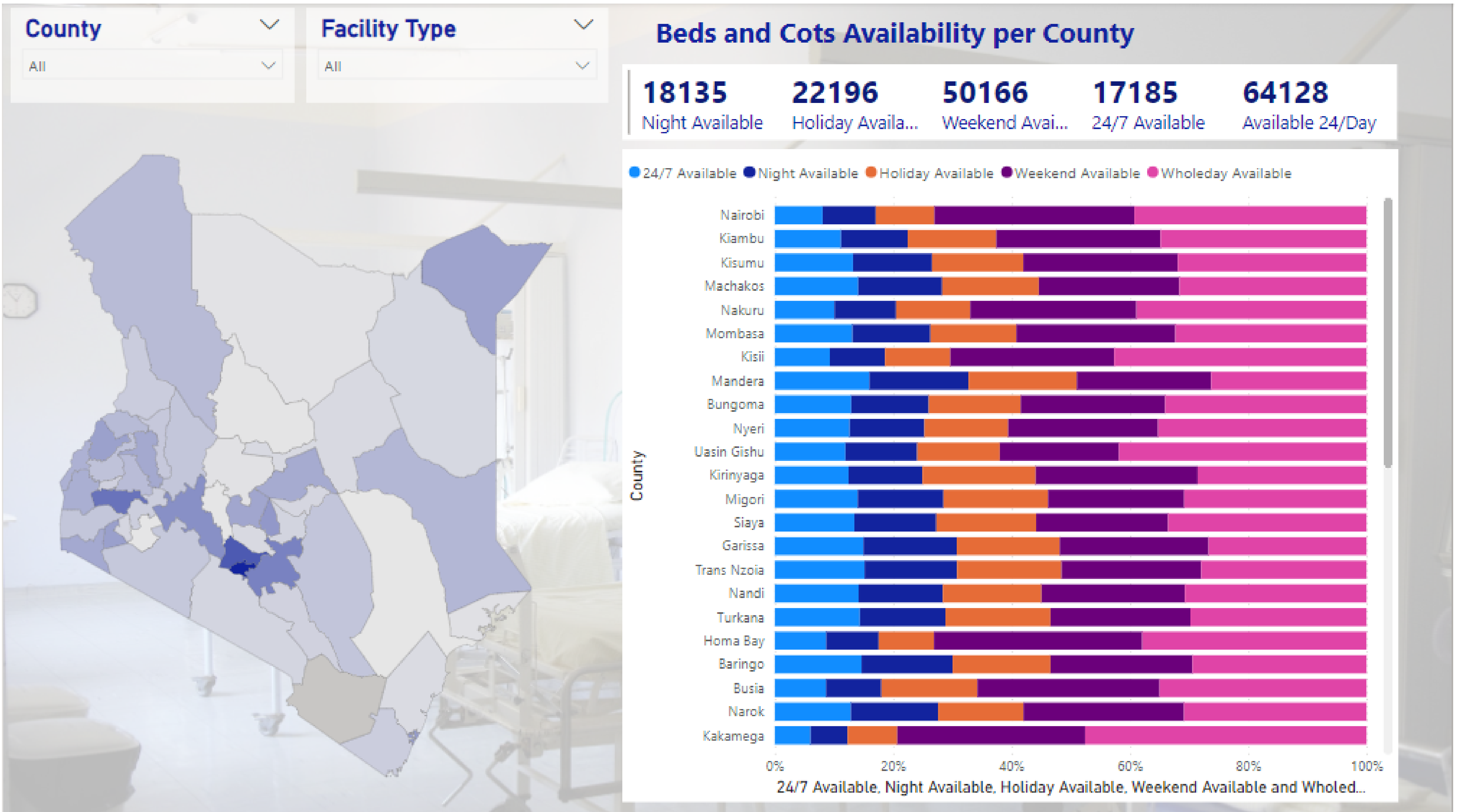
82792

Sum of Beds and Cots



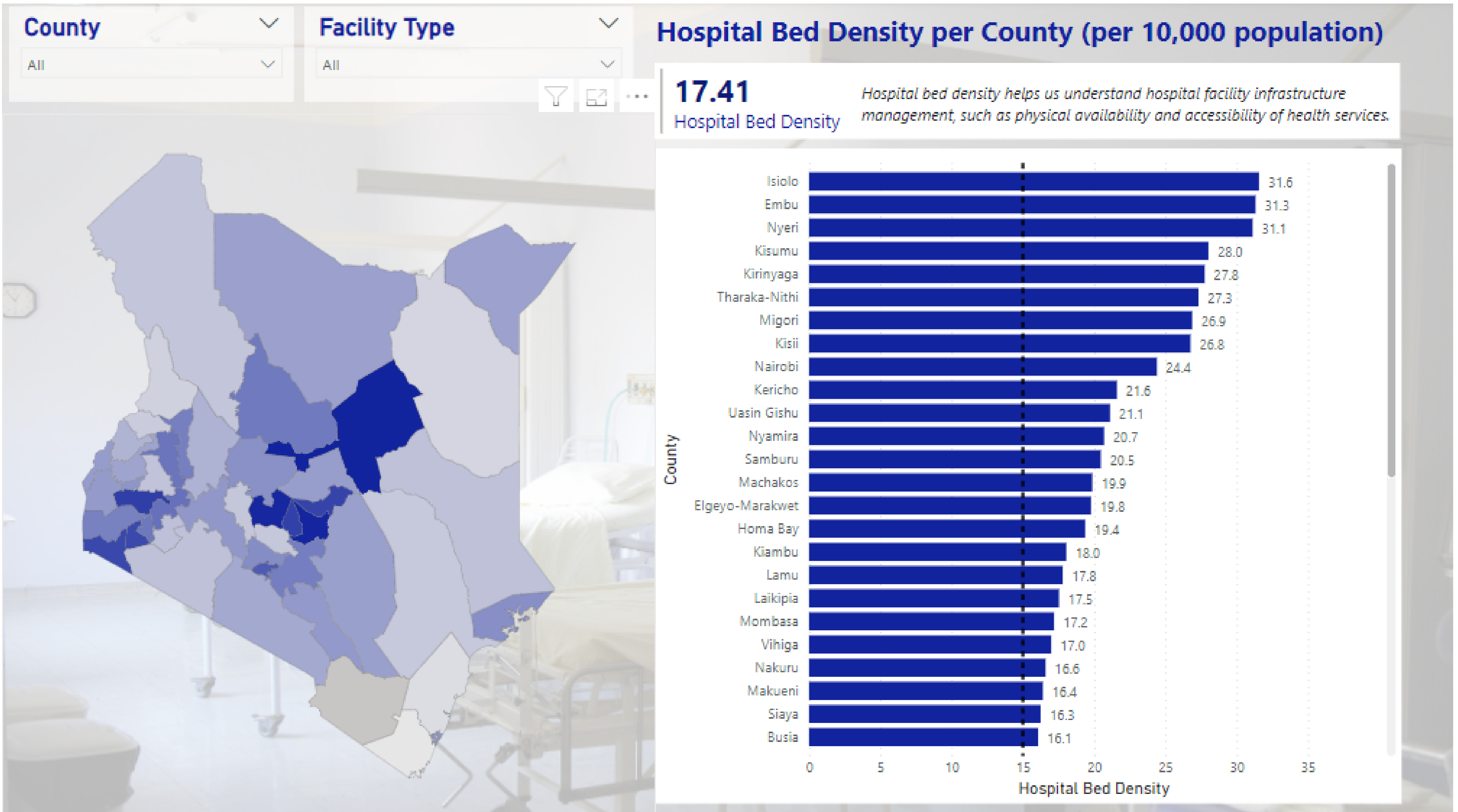


Beds & Cots Availability





Bed Density County Comparison





Stress Analysis

Hospital Coverage Report Stress Analysis

1,902,189

No. of Patients

Patients vs Bed Capacity



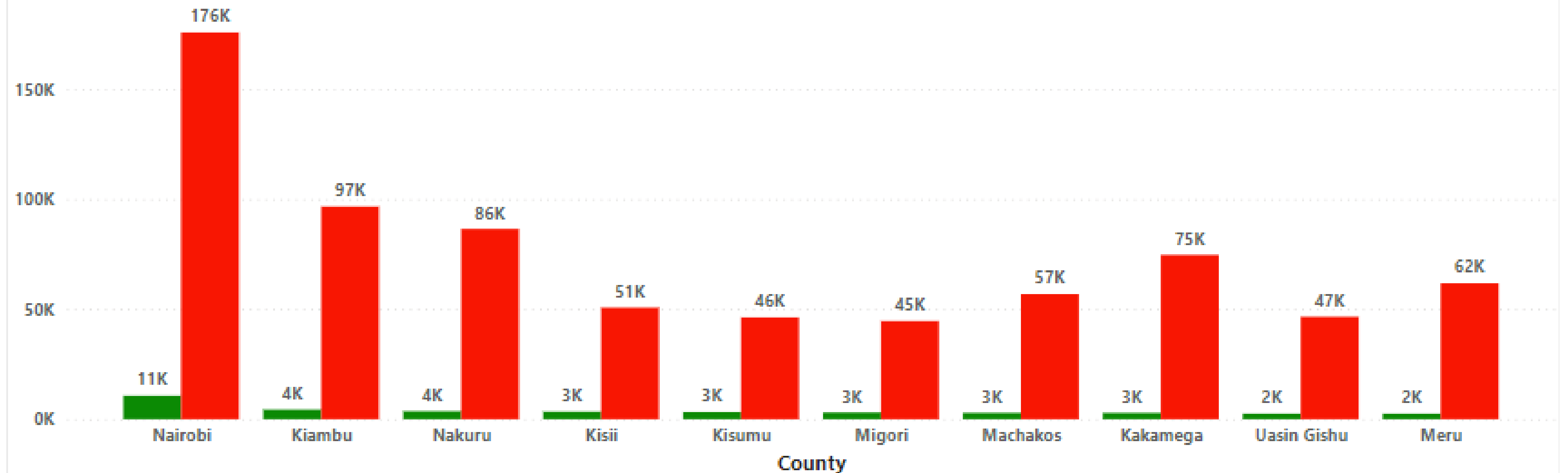
Please Set % Population Affected by Virus

2%



Available Beds and No. of Patients by County

● Available Beds ● No. of Patients





GDP vs Owner Type

County

All

Owner type

All

47562772

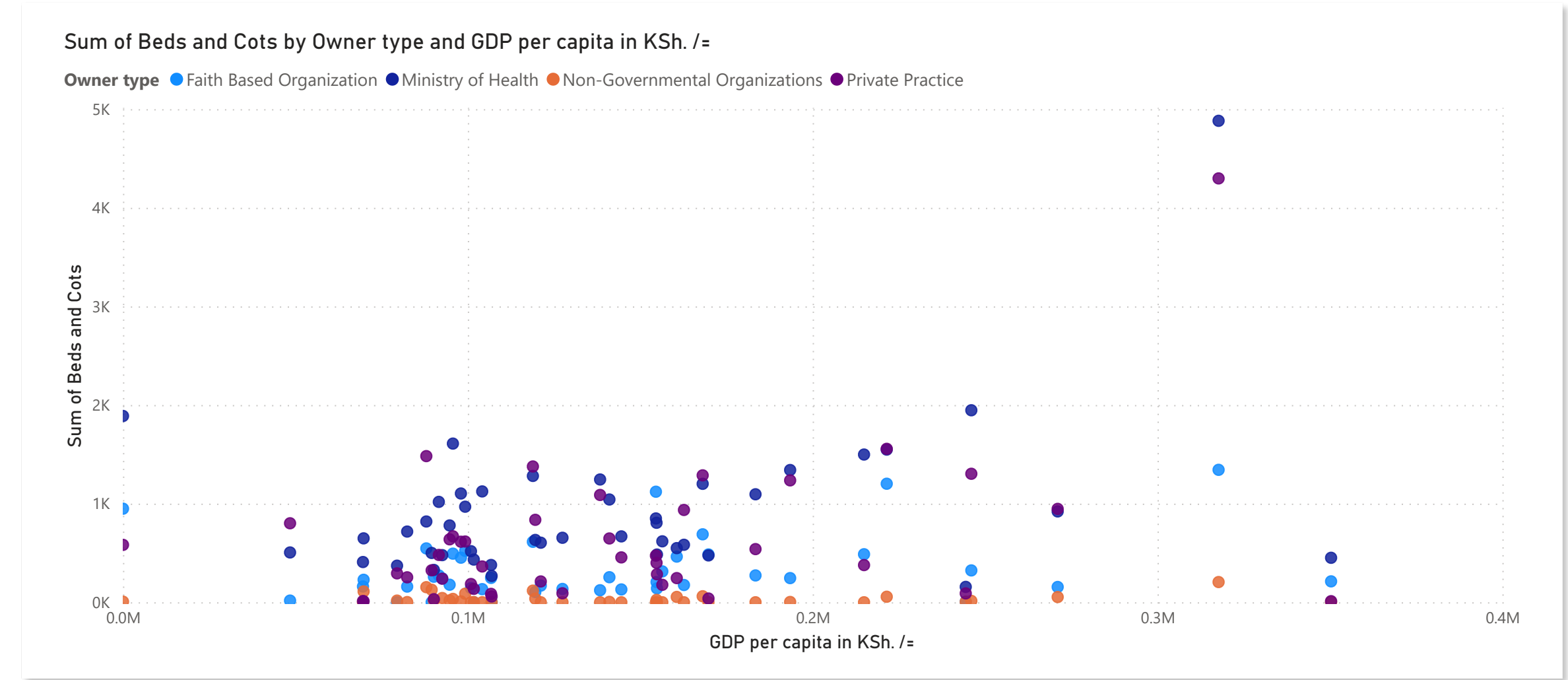
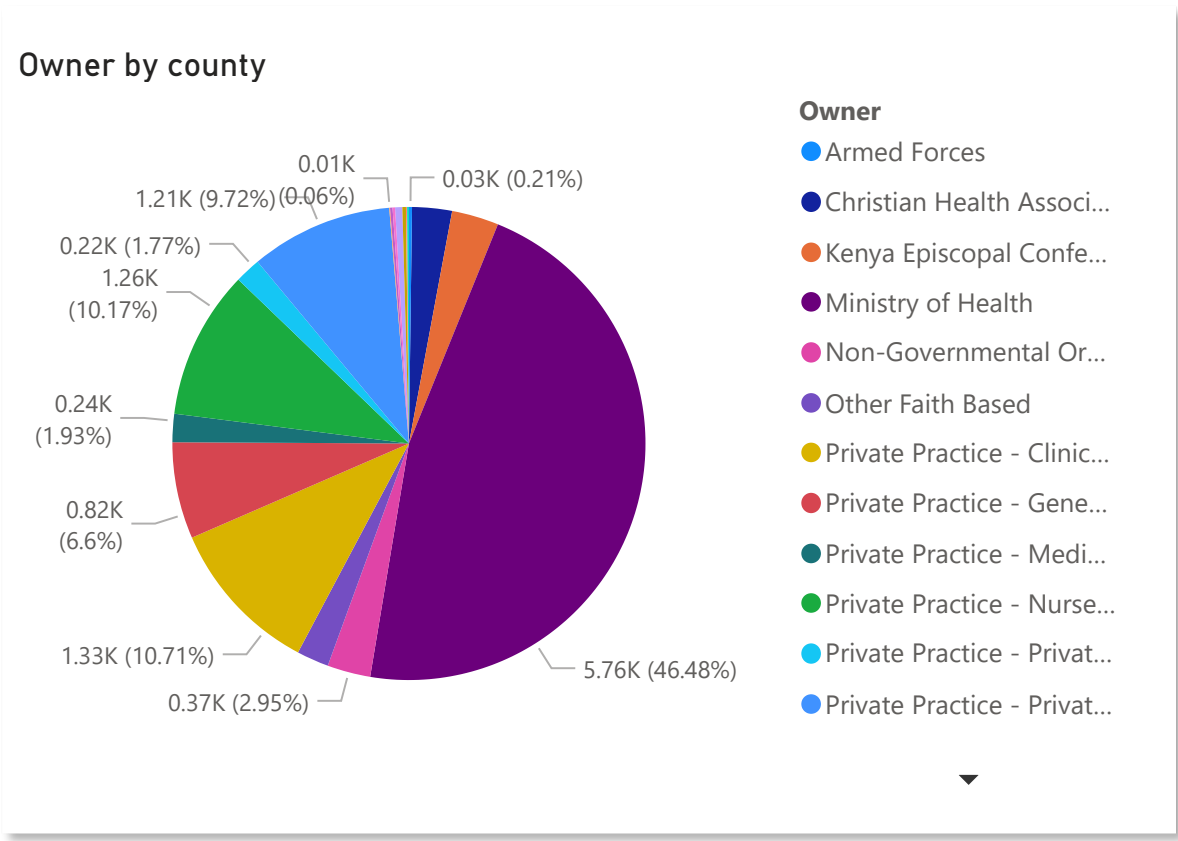
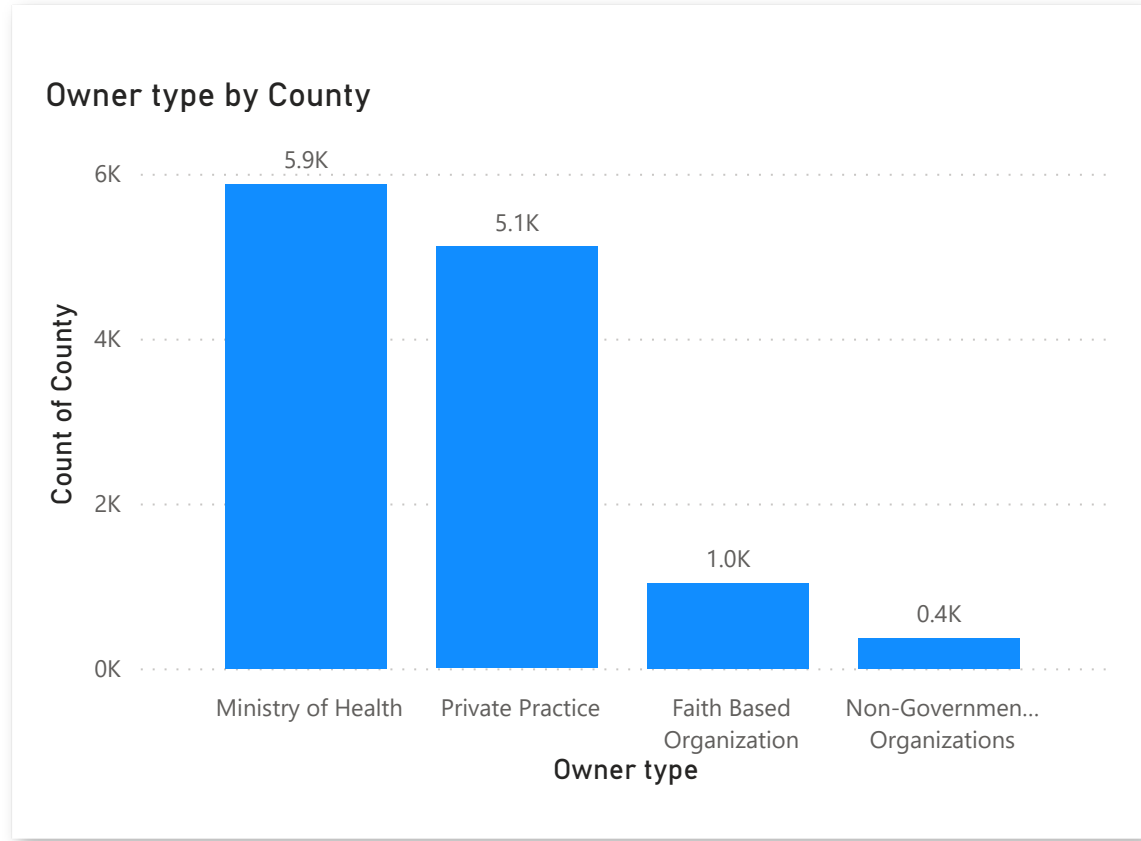
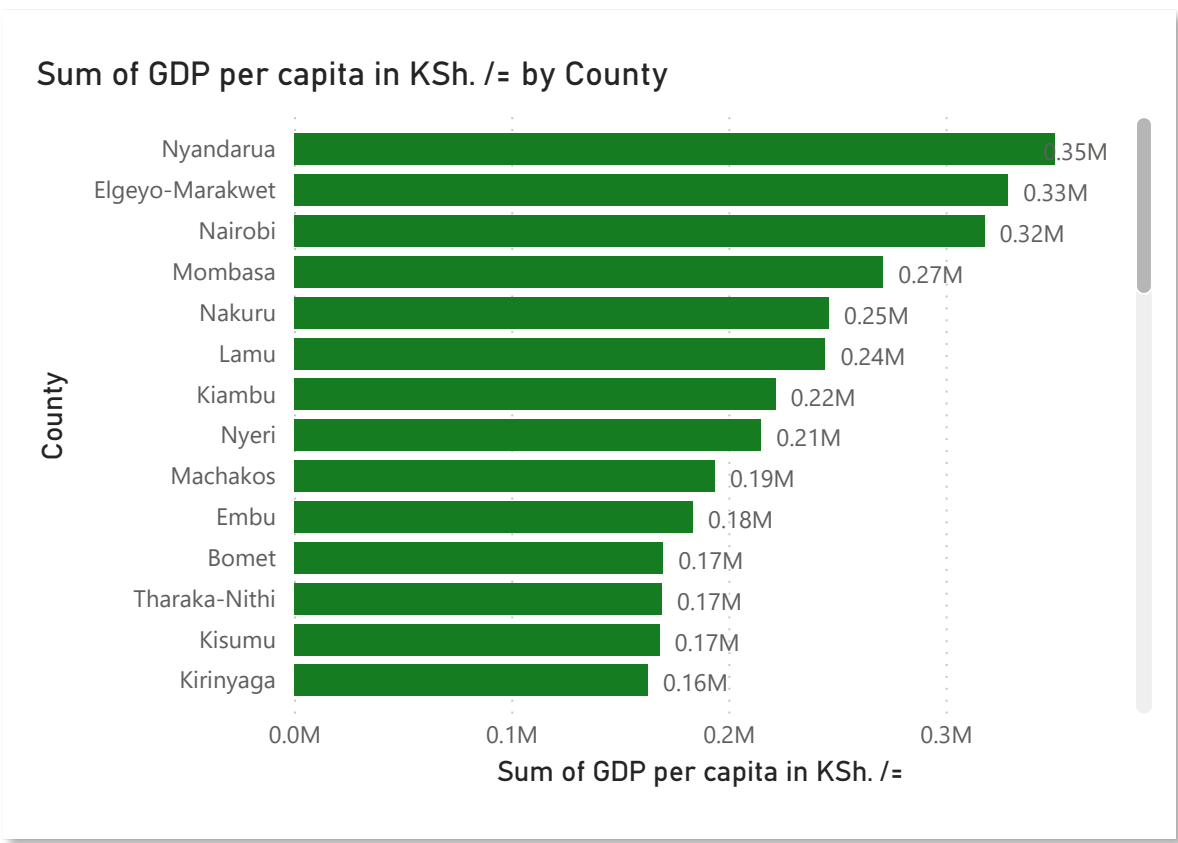
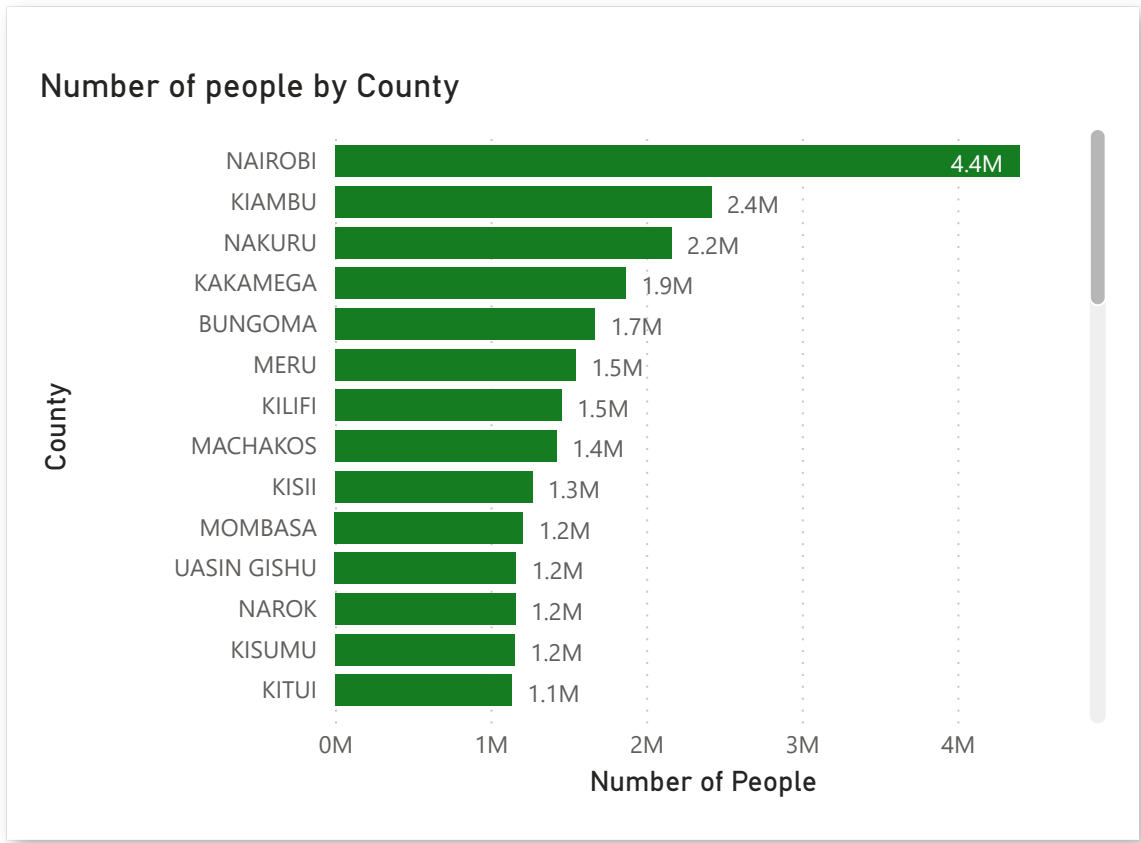
Population per County

6890011

Sum of GDP per capita in KSh. /=

82794

Sum of Beds and Cots



Conclusion:

It is interesting to note that Counties with lower GDP per capita tend to rely on Ministry of Health facilities for care, as the Private Practices and Faith Based Organizations do not want to invest in these counties, out of the fear of the residence in the county not being able to afford it.

It's also interesting to note that Counties with a higher GDP per capita tend to have more beds and cots, actually therefore more capacity to take care of patients in general incase of a pandemic.

It was also interesting to note that within counties with low GDPs, in as much as the county had more MOH facilities, the bed and cots availability was mostly in private hospitals.

As an investor, If you want to make an impact on the lives of people in specific counties, It would be wise to go for counties with a lower GDP per capita as they rarely have other type of hospital owners build hospitals in those areas. From the analysis, Mandera has the lowest GDP per Capita, therefore the most vulnerable incase of a pandemic.