**Presentation points**

Introduction: This report provides a comprehensive analysis of the healthcare infrastructure in Kenya. The analysis reveals significant disparities in the distribution of healthcare facilities across counties in Kenya, which can lead to challenges in providing adequate healthcare services to populations in areas with fewer healthcare facilities. The report recommends investment in healthcare infrastructure, improving the distribution of healthcare facilities, and increasing preparedness to deal with pandemics and other health emergencies.

Problem Statement: The healthcare infrastructure in Kenya is unevenly distributed, with some counties having a higher concentration of facilities than others. This can result in a lack of access to quality healthcare services for populations in areas with fewer healthcare facilities, particularly during pandemics or other health crises. There is a need for targeted interventions to improve the healthcare system in marginalized counties with low KEPH Level scores and Facility type category scores.

Business Objectives: The objective of the report is to identify areas that require additional resources and support to ensure that vulnerable populations receive the necessary healthcare services during a pandemic. The report recommends addressing the disparities in healthcare facility distribution and ensuring that all Kenyan citizens have access to quality healthcare services, particularly during a pandemic.

Facility Distribution: The analysis reveals that the distribution of healthcare facilities in Kenya is complex and influenced by various factors such as population density, owner type, and KEPH level. There is a significant disparity in healthcare facility distribution between urban and rural areas in the country, with the majority of healthcare facilities located in urban areas.

KEPH Level Score and Facility Type Category Score: The KEPH level score and facility type category score for the counties in Kenya are generally low, indicating a need for more investment in healthcare infrastructure and preparedness. 22 of the counties had a KEPH level score and facility type category score less than 3, highlighting the need for targeted interventions to improve the healthcare system in these counties.

Score Comparison: Based on the data analysis, there is a correlation between facility count and population density, with counties that have higher population densities generally having more healthcare facilities. However, marginalized counties, particularly those in arid and semi-arid regions of the country, have low KEPH level scores and consequently, a lower number of healthcare facilities compared to their population.

Demographic Vulnerability: The analysis reveals that certain age groups in Kenya are vulnerable to negative health outcomes during a pandemic. This information can be used to identify areas that may require additional resources and support to ensure that vulnerable populations receive the necessary healthcare services during a pandemic.

Scores Distribution: The distribution of healthcare facilities in Kenya is influenced by various factors such as owner type and county. The majority of healthcare facilities in Kenya are below KEPH level 4, with a smaller percentage of level 5 and 6 hospitals and specialized facilities.

Conclusion and Recommendation: The report recommends addressing the disparities in healthcare facility distribution across counties in Kenya, increasing investment in healthcare infrastructure and preparedness, and prioritizing the construction of higher KEPH level facilities in densely populated areas of the country. Additionally, the report recommends increasing the number of healthcare facilities and healthcare workers in rural areas, increasing funding for healthcare services, and implementing policies and programs to address the demographic vulnerability of certain age groups in the population.