

# ENHANCING HEALTHCARE ACCESS IN NAIROBI: A DATA-DRIVEN APPROACH

Actionable recommendations for SDG3 Alignment

**WHERE SHOULD NAIROBI  
PRIORITIZE HEALTHCARE  
INVESTMENTS TO IMPROVE  
EQUITABLE ACCESS TO ALL?**



# INITIAL HYPOTHESIS:

## Evidence:

1. Geographic disparities
2. Service gaps
3. SDG Target Shortfalls

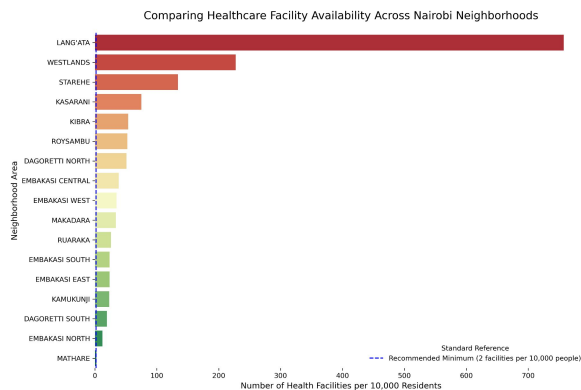
Nairobi's high-density, low-income constituencies have significantly worse access to primary healthcare services compared to wealthier areas, creating preventable disparities in maternal health (SDG 3.1), disease management (SDG 3.3), and universal coverage (SDG 3.8). Targeted investments in public facilities and community health programs in these underserved areas would yield the greatest improvement in equitable health outcomes.

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# Approach: Using Data to Pinpoint Needs

## Understanding the Gap

Identifying where healthcare access is a challenge and service gap across constituencies in Nairobi



## Detailed Data Check

Ensuring the information on health facilities is relevant to solving our problem statement

## Asking Relevant Guiding Questions

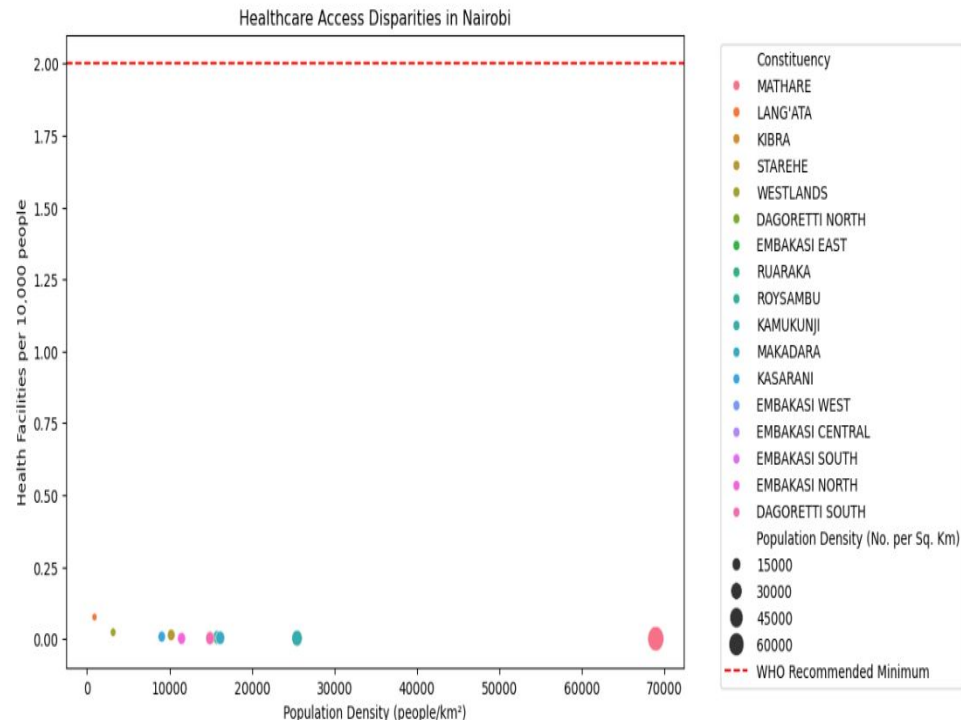
Using SDG3 targets, to guide the analysis:

1. Are healthcare facilities evenly distributed?
2. Are crucial services missing?

# UNEVEN ACCESS: HIGH-NEED AREAS, FEWER FACILITIES

The analysis clearly shows that some of Nairobi's most populated areas have the fewest health facilities.

This creates significant barriers to care for many residents, falling short of global standards.

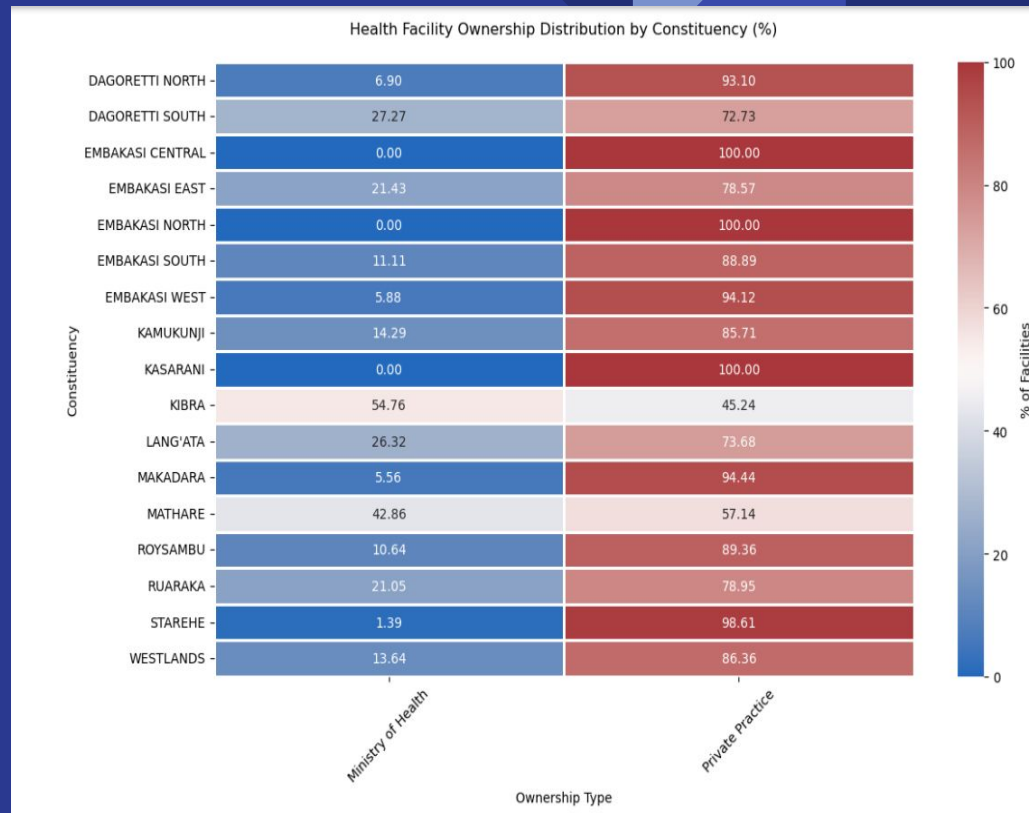


# Ownership

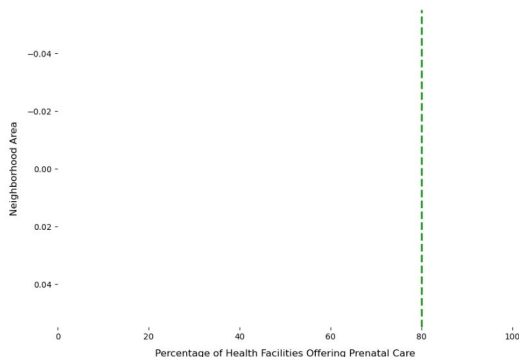
The analysis showed that most facilities in Nairobi are privately owned.

## Recommendation

1. Emergency stabilization - subsidizing private facilities to allow citizens to access and also deploying mobile clinics in high densely populated constituencies
2. Pay private providers per service offered - a performance-based contract to allow taking in of patients not able to afford the private fees



## Areas Needing Most Improvement in Maternal Care Access



## Maternal Health Crisis SDG3.1

The facilities in the neighborhoods are not enough to meet the population density for parental and maternal care

### Recommendation:

Build new maternity clinics in areas with high population densities

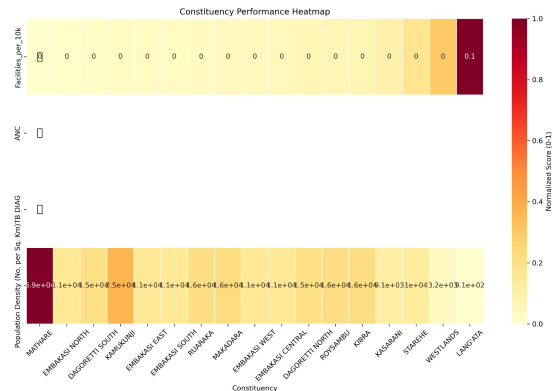
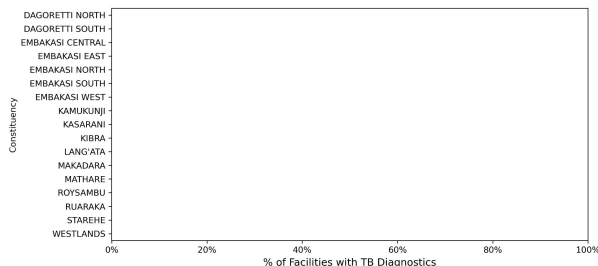
constituencies lack public TB diagnostic labs

### Recommendation:

Equip all public hospitals with TB tests

## Disease Detection Gaps SDG3.3

TB Diagnosis Availability by Constituency



## Facility shortages SDG3.8

Unequal healthcare access persists, with some constituencies severely lacking essential facilities and services

### Recommendation:

Implement targeted resource allocation and infrastructure development in underperforming regions, focusing on increasing healthcare facilities per capita and improving key health service delivery

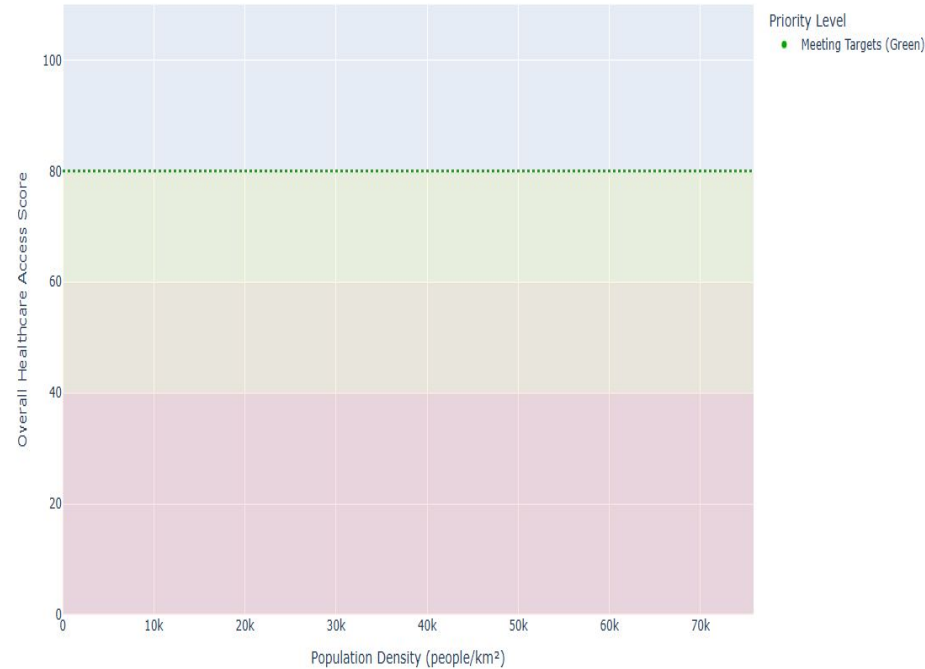
# Priority Areas

The critical priority areas are many in Nairobi county-cutting across all constituencies

## Recommendations:

1. Deploy mobile clinics to provide emergency services
2. Prioritize funding for new health facilities in these areas

Nairobi Healthcare Access: Priority Areas Analysis



Priority Classification: <40=Critical, 40-60=High, 60-80=Moderate, 80+=Meeting Targets