

Abstract

Despite the growing global recognition of digital health's potential, there remains a lack of comprehensive, context-specific models to guide integrations that support equitable access of health interventions, particularly in resource-limited settings. This chapter draws lessons from Makueni, a resource-limited county in Kenya, where digital health tools and technologies, services, programmes, and information systems influence on equitable access to healthcare was explored to develop and validate a digital health model for equitable access to Universal Health Coverage (UHC). A structured questionnaire with closed-ended questions was employed for data collection, and logistic regression was employed for data analysis. From the study findings, access and availability of digital health interventions, including services, programmes, information systems, and digital health tools and technologies, influence equitable access to healthcare, with demographic factors moderately influencing the relationship between digital health and equitable access to UHC. Generalizable to Kenya and beyond, digital health interventions should align with the target population, for impactful healthcare and acceleration of UHC.