REPUBLIC OF KENYA

SPEECH BY HIS EXCELLENCY HON. WILLIAM SAMOEI RUTO, Ph.D., C.G.H., PRESIDENT OF THE REPUBLIC OF KENYA AND COMMANDER-IN-CHIEF OF THE DEFENCE FORCES, DURING A SIDE EVENT ON SOCIAL PARTICIPATION AS A DRIVER OF HEALTH EQUITY AND RESILIENT SOCIETIES CO-HOSTED BY THE REPUBLIC OF SLOVENIA AND THE WORLD HEALTH ORGANISATION AT THE 80TH SESSION OF THE UNITED NATIONS GENERAL ASSEMBLY

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Building
Our Future
Together

Excellencies,
Distinguished Delegates,
Ladies and Gentlemen,

1. On behalf of the people of Kenya, I affirm a simple yet profound truth: Health is not a privilege for a few, but a right for all.

2. Rights, however, matter not when they are proclaimed on paper or in theory, but when they are realised in practice. This is why Kenya places people, communities, and their voices at the very heart of health governance.

3. Distinguished delegates, social participation is the bridge that connects policy to people. It ensures that communities not only benefit from health services but also help shape the decisions that govern them. It is in this spirit that Kenya strongly supports the World Health Assembly Resolutions on Social Participation (2024) and Social Connection (2025), which we view as vital instruments for transformational governance and inclusive development.

4. When communities participate in health decisions, three things happen. First, policies become responsive to real needs rather than remote directives. Second, accountability and transparency flourish, as citizens can follow and track how resources are used. And third, health systems grow stronger and more resilient, trusted by the very people they serve, especially the most vulnerable.

5. In Kenya, this is how we ensure that the expectant mother has access to essential antenatal care; that every child receives life-saving vaccines; and that families are supported in confronting the rising burden of non-communicable diseases.

6. Ladies and gentlemen, Kenya's commitment to social participation is firmly anchored in both law and policy. Our Constitution guarantees the right to the highest attainable standard of health and the right of citizens to participate in governance. The Public Finance Management Act embeds citizen input in budget-making, including in health, while the Health Act outlines mechanisms for community engagement in service delivery. At the county level, legislation empowers health committees and forums to co-shape priorities.

7. We are also aligning policy with action. We recently enacted four transformative laws to drive Universal Health Coverage reforms, including the rollout of social health insurance that guarantees every Kenyan, regardless of background or status, access to essential medical services.

8. Yet legislation alone is not sufficient. Participation must be practical and tangible. To this end, Kenya is pursuing five concrete strategies. First, we have empowered community health promoters with medicines, smart devices, and stipends — cofinanced by national and county governments — to ensure last-mile delivery of essential services. Second, participatory budgeting has been strengthened at both national and county levels, supported by digital platforms, to help communities track health resources transparently. Third, Kenya is reinforcing Primary Health Care networks so that communities can actively shape planning, implementation, and oversight.

9. Fourth, health literacy programmes are being expanded to equip citizens with the knowledge to make informed decisions and engage meaningfully in governance. Finally, we are promoting multisectoral collaboration by linking health with education, agriculture, and social protection, thereby addressing the broader social determinants of health. Together, these strategies are strengthening trust, deepening accountability, and building a health system that truly serves the people.

10. Yet despite this evident progress, challenges remain, chief among them sustainable financing. The recent withdrawal of some external funds not only revealed diverse vulnerabilities but also underscored a profound lesson: ownership matters. When communities set priorities, monitor spending, and contribute through local mobilisation and volunteerism, resilience is strengthened.

11. Social participation is therefore not only a moral obligation, but also a financial strategy that reduces waste, increases efficiency, maximises impact, and builds ownership. In Kenya, we are deliberately building a system that is less dependent on external aid and more firmly grounded in domestic solutions and community leadership.

12. Ladies and gentlemen, as we look to the 2025 World Summit on Social Development, Kenya affirms that health equity is inseparable from social justice and sustainable development. We call on this meeting to embed social participation indicators in global health frameworks and share knowledge and innovations that empower communities to shape their health destinies.

13. Another critical indicator that should be embedded in social participation is the commitment of resources not only to medicines and infrastructure, but also to the democratic right of people to participate in decisions that affect their health.

14. The health of nations depends not only on the strength of their hospitals, but also on the strength of their citizens' voices. Kenya aspires to a future where no child is left behind, no community is unheard, and no citizen is denied their right to health.

15. Together, we must forge a renewed global social contract anchored in solidarity, participation, and equity, where every person, regardless of geography or status, has the right and the power to shape their health, their future, and their society.

I thank you.

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