

## Abstract

**Introduction:** This study sought to determine factors influencing performance of CHI in central Uganda. This was against the background that health is a fundamental human right but Uganda's health sector is facing challenges of financing, and interventions suggested include community health insurance to ensure access to health care by the most vulnerable populations. CHI schemes have been established in some areas in Uganda but there has been little or no growth of the schemes and some have virtually failed and despite its promotion in Uganda, overall membership has remained low which indicate failure to attract the sufficient number of people for their sustainability. This calls for determining factors which influence performance of the intervention. The study examined aspects of CHI schemes and that is the management aspects, the extent of coverage, economic factors and acceptability which made up the specific objectives.

**Methodology:** A cross-sectional survey was the study design adopted. Using a case study of Luwero, Nakaseke and Nakasongola districts in Central Uganda, quantitative and qualitative approaches were engaged to conduct the study. Data was collected through a household survey involving 401 households, in-depth interviews with Key Informants and secondary sources. Quantitative–descriptive and thematic analysis was undertaken.

**Results:** The findings indicate that the self management model, high level of community participation, the inclusive benefits package, household enrolment, awareness and positive perception are the identified key strengths of the schemes. The key weaknesses of CHI identified are, lack of a legal framework, inadequate management capacity, lack of subsidies, high cost of premium associated with wide spread poverty and inadequate knowledge of scheme components. There are also no strategies to include the most vulnerable populations in CHI.

**Conclusion and recommendation:** The study concludes that amidst these obstacles, CHI is an intervention worth pursuing due to its benefits to rural households and recommendations suggested are improved management of the schemes, a policy framework, provision of subsidies and support to CHI to ensure sustainability of the intervention.