

KUJIPANGA BULLETIN

JULY 2024: IMPROVING ACCESS TO FAMILY PLANNING SERVICES IN KENYA

Edition 17



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Director's Statement



Dr. Charlotte Pahe
Reproductive Health Program Director

Welcome to this quarter's Kujipanga Bulletin.

We are in Quarter 2, Year 5, of DESIP project implementation, having gained several insights and developed various mitigating measures to innovatively address upcoming challenges.

My name is Dr. Charlotte Pahe, the incumbent Director of Reproductive Health and DESIP Project Director. I am excited to be entrusted with the opportunity to steer the leadership of this impactful project and grateful for the support from the Foreign Commonwealth Development Office as well as the executive leadership at Population Services Kenya.

I am a medical doctor and a public health specialist currently finalising an MBA in Healthcare Management from Strathmore Business School. For 15 years, I have been involved, in various capacities, in designing, planning, implementing, monitoring, and evaluating diverse health care programmes, offering technical advice across various health areas, and in clinical practice. I have supported the running and managing of complex health programmes in both the public and private sectors while applying evidence-based practice to improve the quality of healthcare service delivery and inform policy and practice, thus optimising health outcomes for the mwananchi in Kenya. I have done this through technical leadership and strategic direction, as well as engaging and leading stakeholder relationships in the donor, government, and private sectors. Having come from a background that integrates sexual and reproductive health into HIV care and treatment, emTCT, TB care and support, malaria and child health, and sexual gender-based violence (SGBV), I am looking forward to this opportunity.

Leveraging QI models and insights as well as years of expertise in sustainability to ensure that DESIP's work is integrated into the Ministry of Health's Family Planning and Reproductive Health priorities at both national and county levels for a smooth transition of DESIP's work to local ownership.

In the quarter, DESIP was privileged to host the FCDO team during third-party monitor field visits in the Coast, where we received a warm reception from the Mombasa County Health Management Team Leader as well as from facilities in both Mombasa and Kilifi Counties.

In the upcoming quarter, we look forward to hosting the DESIP National Dissemination Conference and sharing our insights and learnings from project implementation, as well as engaging various stakeholders and leaders in discussions that will concretize the transition of Family Planning support from donors to the GoK through the Ministry of Health in Kenya. Critical to this success is the launch of the Primary Health Care Bill that DESIP envisions will be core in resolving barriers to access for FP as services will be available at the community level through Community Health Promoters and Primary Care Networks.

I want to express my heartfelt gratitude to the dedicated DESIP Programme staff and our esteemed partners. Your unwavering commitment and tireless efforts have been instrumental in driving the success of this program. As we move forward, I am excited about the opportunities that lie ahead, and I have every confidence that together we will continue to make a significant impact in the fields of family planning and reproductive health.

A Journey of Acceptance: Asha Lesorogol's Story of Child Spacing and Contraception

Asha Lesorogol lives in Lpopong'i village, just 3 kilometers from Lesirikan Health Center. This village is part of the Lesirikan Community Unit, where Active Community Health Promoters (CHPs) have benefited from DESIP's Family Planning (FP) module training.

Asha shares her journey with child spacing and the acceptance of contraception as a rural Samburu woman. Her life involves constant movement from one Manyatta settlement to another due to changing climate patterns that dictate the movement of livestock. This lifestyle often leaves Asha uncertain about when she will next access a healthcare facility.

Married at the young age of 15, Asha quickly learned to take care of her husband, children, and livestock. She recounts frequent visits from CHPs to her Manyatta hut, where she received education on mother and child health, including pregnancy danger signs, nutrition, and family planning. These visits provided her with a unique opportunity to gain health information without needing to visit the health center.

Having already had three children, Asha was particularly interested in family planning due to the challenges of moving with livestock and children, and sometimes while pregnant. However, she faced resistance from her husband, who viewed family planning as a foreign and culturally unacceptable concept, believing it would render women infertile and cut off their generations.



The DESIP project's Manyatta model approach considered the need for meaningful engagement of men and elders in a culturally sensitive way to overcome barriers like those faced by Asha. In Lpopong'i village, homogenous dialogues on family planning were conducted to uniquely package FP information for each Manyatta group, address myths and misconceptions, and foster acceptance and support for women to access these services.

Enhancing Public Private Facility Partnership

The Constitution of Kenya guarantees universal access to the highest attainable standards of health through the Bill of Rights. This commitment has spurred efforts to establish Public-Private Partnerships (PPPs) in healthcare. PPPs typically involve long-term contracts between private healthcare facilities—comprising organizations and individuals in the health sector not directly controlled by the government—and either the Ministry of Health (MOH) or county health departments. The goal is to provide accessible, affordable, and high-quality health services through collaborative arrangements between the public and private sectors.

An integrated PPP model aims to streamline infrastructure and service delivery, leveraging private sector expertise. This approach allows public entities to concentrate on policy-making, planning, and regulatory functions.

The Delivering Equitable and Sustainable Increases in Family Planning (DESIP) Programme has played a pivotal role in enhancing service delivery within the private sector. Collaborating with the Mombasa County Department of Health, DESIP developed a strategy focused on transparency, accountability, equity, integrity, value for money, and inclusivity among private healthcare workers (HCWs) and the public.

This strategy was shaped through engagement with private healthcare workers during cluster meetings. Key objectives included creating a conducive policy environment for private sector involvement in healthcare, harnessing private sector efficiency and technological resources, guiding collaborative efforts that enhance service delivery, promoting transparency and accountability through information sharing, and building capacity among HCWs in relevant health areas. Additionally, it aimed to ensure the availability of Family Planning (FP) commodities in private sectors.

Through PPP initiatives, private facility representatives actively participate in Technical Working Groups (TWGs) across various thematic areas.

They represent their peers in groups addressing Reproductive Health, HIV, Malaria, and Tuberculosis. A designated private practitioners' cluster representative plays a crucial role in TWGs, particularly in licensing and regulating private facilities, thereby strengthening the link between private healthcare providers and the MOH. As a result of PPP collaborations, 66 private healthcare facilities now receive FP and other essential commodities directly from the Kenya Medical Supplies Authority (KEMSA). There is also evidence of improved reporting to the MOH through the use of recommended tools.



Transforming Care Through Structured Mentorship: Raymond's Impact at Marigat County

Raymond, a dedicated Sexual and Reproductive Health Coordinator (SRHC) at Marigat Sub-County, has always been deeply passionate about improving maternal and child health. His commitment to his community is evident in his relentless efforts to enhance the quality of care provided to mothers and children.

However, despite his dedication, Raymond often felt overwhelmed by the limited expertise available in family planning service provision, especially with the introduction of new methods. This gap in knowledge and skills was a significant barrier to delivering comprehensive reproductive health services to his patients. Recognizing this challenge, Raymond eagerly embraced the opportunity presented by the mentorship program.

This program was designed to equip healthcare workers with the latest knowledge and skills in family planning methods. Raymond received extensive training on new family planning methods, including the Hormonal Intrauterine Device (HIUD) and the Subcutaneous Depot Medroxyprogesterone Acetate (DMPA-SC).

Additionally, he underwent a refresher course on long-acting reversible contraceptives (LARCs), implants, and injectables. The training was comprehensive, covering not only the technical aspects but also the practical application of these methods.

The mentorship program was more than just an educational intervention; it was a transformational experience for Raymond. He received hands-on training, which allowed him to apply the new methods in real-life scenarios under the guidance of experienced mentors. This practical experience was invaluable, helping him build confidence and proficiency.



Moreover, the program provided Raymond with guidance on patient counseling (C4C), equipping him with effective communication strategies to educate and support his patients. One of the most significant aspects of the mentorship program was its focus on empowering healthcare workers to become mentors themselves. Raymond was trained on strategies for mentoring other healthcare workers (HCWs), enabling him to share his knowledge and skills with his colleagues.

This cascading effect ensured that the benefits of the training extended beyond Raymond to the entire healthcare team at Marigat Sub-County. With his newfound expertise,

Raymond introduced the new family planning methods to his sub-county team, significantly enhancing the overall quality of care.

Raymond expressed his heartfelt gratitude to the DESIP Programme for their unwavering support and dedication. "The mentorship gave me the knowledge and courage to mentor others and confidently provide the new family planning methods," he said. "Both private and faith-based facilities are now enhancing their expertise in family planning service provision. The support and guidance from the programme staff have been invaluable, and I am forever grateful for the opportunity to make a meaningful difference in my community."

The impact of the mentorship program on Raymond's professional development and the broader community cannot be overstated. Through this program, Raymond has become a beacon of hope and a source of inspiration for his colleagues and patients.

The enhanced family planning services at Marigat Sub-County are a testament to the power of continuous learning and mentorship in transforming healthcare delivery.

The DESIP Programme's commitment to supporting healthcare workers like Raymond is paving the way for improved maternal and child health outcomes across the region.

Empowering Change: Community Health Promoters Family Planning in Arabia County

Approximately 35 kilometers from Mandera town, in a village within Arabia sub-county, a remarkable story unfolded involving Community Health Promoters (CHPs) attached to the local dispensary. These CHPs visited women of reproductive age to promote family planning (FP) services at the facility.

Historically, CHPs faced challenges advocating for FP messaging, whether supported by reproductive health programs from other partners or the County government.

However, the introduction of outreach activities by the DESIP Programme in hard-to-reach areas, coupled with the support of religious leaders who empowered CHPs through sensitization, brought about significant change.

The CHPs, operating within their respective Community Units (CUs), began conveying FP messages using terms like “child spacing” to encourage the adoption of family planning in Aresa. They also referenced verses from the Holy Quran that advocate for child spacing of at least two years between pregnancies.

As a result of these efforts, a notable number of women of reproductive age opted to seek FP services and started various FP methods at the facility. Due to the high demand, some were referred to the County Referral Hospital when the dispensary ran out of stock of certain FP commodities.

This was confirmed by the dispensary in-charge, who noted that the community was increasingly receptive to different FP methods, with some even requesting the IUCD method—a commodity often scarce in rural facilities.

PS Kenya reached out to the Arabia Sub-County Health Management Team (SCHMT) as well as the County Health Management Team (CHMT) to discuss fully stocking the Aresa health center to better serve the FP needs of the community.



Atieno's Journey of Empowerment

In the heart of rural Homa Bay County, Kenya, where whispers of change are often drowned by the rustling winds and the songs of birds, a quiet revolution has been unfolding. Meet Atieno, a resilient woman in her twenties, living in a remote village surrounded by lush greenery. Her story intertwines with a groundbreaking DESIP programme that seeks to bring about transformative change in the lives of women and girls in Kenya.

Atieno's days were woven with the threads of tradition, where discussions about sexual and reproductive health were muted, and choices were limited. The birth of her first child, though a blessing, brought challenges that echoed through her community. It was against this backdrop that the programme, with the ambitious goal of improving Sexual and Reproductive Health and Rights (SRHR), found its way to Atieno's village.

The programme's objective resonated deeply with Atieno's aspirations – to safely plan her pregnancies and secure a healthier future for herself and her community. With a special focus on young, rural, and marginalized women like Atieno, DESIP aimed to reduce maternal, newborn, and child mortality, while increasing the use of modern contraceptives across Homa Bay County.

For Atieno, the first noticeable change was the availability of Family Planning (FP) commodities in her village. The programme worked tirelessly through targeted outreaches and in-reaches to ensure that women like Atieno had access to a diverse array of contraceptives, empowering them with choices that were once a distant dream. A simple visit to the local health center now meant access to a basket of options tailored to individual needs.



As DESIP unfolded, Atieno found herself caught in the gentle tide of change. Engaging community leaders and health workers, the programme fostered a greater demand for FP services. Through interactive workshops and storytelling sessions, Atieno discovered a newfound awareness, breaking the shackles of silence and stigmas surrounding reproductive health in her community.

Crucially, the programme sowed seeds of sustainability within the private sector. In Atieno's village, local entrepreneurs became champions of reproductive health, ensuring the continued availability of FP services. The once-dormant private sector now played an active role in sustaining DESIP's impact, offering a glimmer of hope for lasting change.

Atieno witnessed the transformation of the public sector, where policies became a beacon of support rather than distant guidelines. The strengthened public sector embraced the programme, turning it into a community-driven initiative. Atieno found herself participating in discussions, her voice echoing through the corridors of decision-making, a powerful testament to improved national ownership.

Today, Atieno stands at the forefront of a flourishing garden of change. Her journey from a place of limited choices to one of empowerment mirrors the transformative impact of the DESIP programme. Maternal, newborn, and child mortality rates have dwindled, and the Modern Contraceptive Prevalence Rate has surged, marking a new era in reproductive health in rural Kenya.

Atieno's story, blended with the threads of a programme striving for equity and sustainability, stands as a testament to the resilience of communities, the power of awareness, and the promise of a brighter, healthier future for women and girls in rural Homa Bay County.

FCDO DEVELOPMENT PARTNER VISIT IN THE RIFT VALLEY REGION

The Rift Valley Region of Kenya hosted the British High Commission for a two-day health facility visit in April 2024, organised by PS Kenya's DESIP Programme. The visit was marked by in-person engagements with the programme's beneficiaries, Community Health Promoters (CHPs) and County Health Management Teams (CHMTs), who shed light on the transformative impact of the UKAID-funded DESIP (Delivering Equitable and Sustainable Increases in Family Planning) programme.

The visit was carried out in five facilities: Iten referral hospital, Kapenguria referral hospital, Tambach health centre, Biretwa health centre, and Keringet health centre, where the programme's initiatives are implemented.

As the development partners traversed through the region, they were met with moments that left vivid imagery of the programme's impact in the communities. A number of conversations were held with beneficiaries, where women shared their journey towards embracing family planning, as well as Community Health Promoters (CHPs), who explained what they do on a day-to-day basis and the challenges they encounter in line with their duties.

Over the past five years of implementation, DESIP has achieved remarkable milestones, with an impressive record of 2.7 million couple years of protection and 1.4 million pregnancies averted. The programme has been instrumental in empowering individuals with access to family planning, resulting in 315,000 additional users. DESIP's efforts have significantly enhanced maternal and child health, with nine out of 12 counties experiencing notable improvements in modern contraceptive prevalence rates.

Speaking during a meeting with the county health management teams from Elgeyo-Marakwet and West-Pokot counties, Dr. Charlotte Pahe, PS Kenya's Programmes Director, assured the county governments of DESIP's support in the region to alleviate the dire situation around reproductive and maternal child health.

"As we continue to work together, DESIP, in its years of implementation, is focused on continuing the exemplary work in reproductive and maternal child health," Dr. Pahe.

The British High Commission's representatives commended the dedication and commitment demonstrated by the DESIP team, making critical recommendations on how to enhance advocacy in the future.



"I can see the way you have owned the programme through the way you have implemented it, despite the notable. There is a great demand to increase capacity to do more.," said Akaco Ekirapa, FCDO Programmes Technical Lead.

The visit was one of a kind as it clearly showcased how strategic partnerships go a long way in promoting health in the various regions, as witnessed through the DESIP programme partners.

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About DESIP

Delivering Equitable and Sustainable Increases in Family Planning programme, abbreviated DESIP, is a 6-year, UK Aid funded programme focusing on improving Reproductive Health in Kenya with focus on Family Planning in low (<45%) modern contraceptive prevalence rate (mCPR) counties in line with Kenya 'Vision 2030'. The goal of the programme is to ensure that women and girls can safely plan their pregnancies and improve their SRHR, particularly the young rural, and marginalized, with programme impact contributing to reduced maternal mortality, newborn, and child mortality, and increased mCPR in Kenya.

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