



# **Vision**

To be the leader in delivering sustainable health impact and private health sector engagement.



# **Mission**

To accelerate the achievement of positive health outcomes for Kenyans by leveraging partnerships, technology, and health expertise.

# Disclaimer

The 2024 Annual Report covers the period from 1<sup>st</sup> January 2024 to 31<sup>st</sup> December 2024. Measures have been taken to ensure that the information contained in this publication is accurate. However, the possibility of errors or unintentional omissions cannot be excluded. Use of information contained in this report should be credited to Population Services Kenya (PS Kenya).



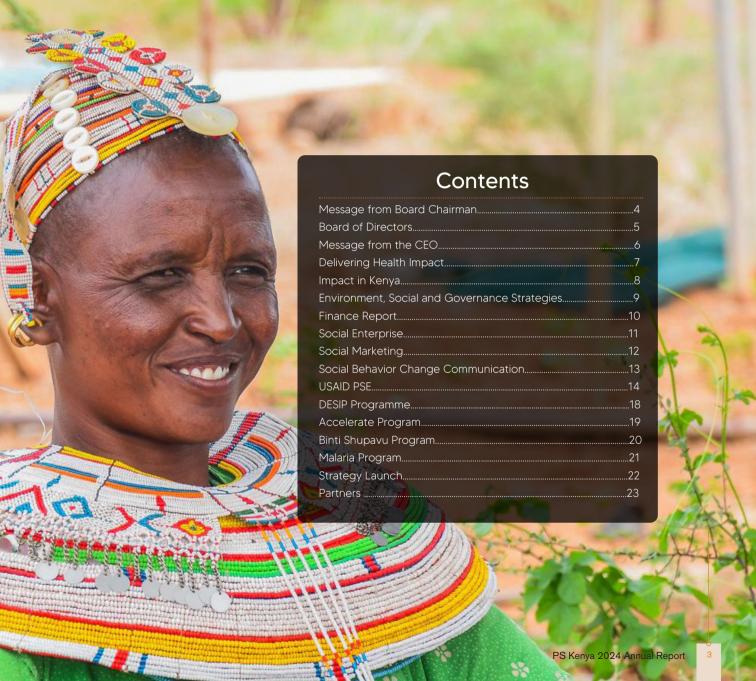












# Message from the Board Chairman

# Dr. Festus Ilako

**Population Services Kenya** 

It is with great pleasure that I present to you the 2024 Annual Report.

This year marked the beginning of a new chapter for PS Kenya as we embarked on the 2024-2028 Strategic Plan. We take immense pride in the progress we made so far, especially in the impact of our programs and interventions in Kenya, on the target populations we serve.

Achieving the ambitious goals that we set for ourselves will require continued collaboration and unity of purpose across all levels of the organization. As we move forward, it is essential that we remain a dedicated, cohesive team committed to delivering Better Health and Wellbeing for all.

The management and staff of PS Kenya have made steady progress in executing the Boards governance, strategic guidance and oversight.

The notable programmatic achievements included reaching 1,487,981 Disability-Adjusted Life Years (DALYs), achieving 1,238,594 Couple Years of Protection (CYP), and impacting 1,594,351 individuals through our various interventions.

Our collective achievements reflect the power of working together, and as stakeholder

expectations remain high, it is this focus that will propel us to continued success.

Finally, I would like to express our deepest gratitude to Ms. Veronica Musembi for her exemplary leadership and commitment as Chair of the Board Strategy and Finance Committee, Secretary of the Board, and member of the Board Nomination, Governance, and Human Resource Committee We also thank her for successfully completing her six-year term and for the invaluable contributions she has made during her tenure. I am delighted to welcome Dr Josephine Kibaru - Mbae, our new Chair of the Board Strategy and Finance committee, Secretary to the Board and a member of Board Nomination, Governance and Human Resource Committee. I am also pleased to warmly welcome Ms. Kathure Githinji-Nyamu, whose diverse expertise and wealth of knowledge will undoubtedly be invaluable to PS Kenya.

As we look to the year ahead, I am confident that the foundation we have built together is strong and resilient and the paths we are paving will lead to even greater achievements.

Thank you to each one of you for your dedication to PS Kenya.



# **Board of Directors**























# Message from the CEO



# **Dr. Margaret Njenga**

**Population Services Kenya** 

Thank you to each one of you for your continued support and dedication to PS Kenya. Indeed, we have had an exciting year that culminated in a series of groundbreaking achievements, driving significant transformation in health outcomes in Kenya. These initiatives reflect PS Kenya's steadfast dedication to improving healthcare delivery, fostering sustainable partnerships and creating positive change nationwide.

Some notable highlights include:

- The launch of PS Kenya's bold 2024-2028 Strategic Plan, laying the foundation for the next phase of advancing the health and well-being of local communities.
- Through the Accelerate Program, funded by the Embassy of Denmark in Kenya, PS Kenya partnered with the Gender Violence Recovery Centre in launching the Accelerate National Shelter Program. This transformative initiative is one step closer in supporting survivors of genderbased violence.
- The USAID Private Sector Engagement program unveiled the "State of the Healthcare Market in Kenya 2024" report. This report provides insights into the current healthcare landscape and identifies opportunities to build a sustainable, mixed health market in Kenya, further strengthening the private sector's role in healthcare delivery.

- As part of our emergency response efforts, PS Kenya donated water safety products worth 2 Million Kenya Shillings to the Ministry of Health for national distribution, aiding in urgent public health intervention in May 7<sup>th</sup>.
- We launched a new 500ml WaterGuard product, offering an affordable and convenient solution to ensure safe drinking water across Kenya. This reaffirms our ongoing commitment to improving access to safe water for all.
- The publication of the Family Planning Compendium further emphasized our dedication to inclusive, communitydriven approaches to family planning.

In this report, we highlight our environmental, social, and governance strategies, in alignment with PS Kenya's new strategic plan.

We are excited for the journey that lies ahead and remain committed to achieving continued progress toward our strategic goals for 2028 and beyond.

On behalf of the PS Kenya network, we are grateful to all our stakeholders for their generous support.

Here is to a future where we can achieve better health and wellbeing.

# •

# **Delivering Health Impact**





# **Impact in Kenya**



**1,594,351**Beneficiaries



1,041
Maternal Deaths
Averted



**5,140**Child Deaths Averted



366,235 Unintended Pregnancies Averted



**1,238,594** CYPs Provided



**1,487,981** DALYs Averted



26,487,864 Condoms Distributed



# **Environment, Social and Governance Strategies**

PS Kenya is committed to creating better workplaces, Healthier communities, and a sustainable planet through our Environmental, Social, and Governance (ESG) strategies. Guided by our 2024-2028 strategic plan, we continuously assess and prioritize areas where we can make a meaningful impact. Our goals align with the United Nations Sustainable Development Goals (UN SDGs) and are underpinned by a strong ESG governance structure.

### **Our ESG Governance Structure**

- Board of Directors: Responsible for high-level ESG engagement.
- ESG Steering Committee: Provides oversight and strategic direction.
- Management Team: Supports data collection, reporting, and progress.

# **Material Topics & 2024 Highlights**

- 1. Environmental: Climate Change & Health
- Commitment: The primary focus is on Water, Sanitation, and Hygiene (WASH), essential for reducing waterborne diseases and improving public health, ultimately supporting sustainable development.
- Progress: Distributed water purifacation products that enabled access to safe drinking water. Supported flood victims with KES 2 million worth of water purification products, complementing government efforts.

### 2. Social: Employee Wellbeing & Societal Impact

• Commitment: We are committed to enhancing employee well-being by investing in professional growth, fostering a culture of engagement, and making a positive impact on the communities we serve.

### · Highlights:

- 1. Gender parity of 55%/45% (M/F)
- Women represent 45% of mid-senior and 62% of senior management roles.
- 3. 31 hours/employee of training per annum.
- 4. Achieved 83% employee engagement score in 2024.
- 1.49 million DALYs averted, 1.24 million CYPs achieved and 366,235 unintended pregnancies prevented.

### 3. Governance: Ethical Leadership & Diversity

- Commitment: Maintain a diverse board for effective governance and succession planning.
- · Highlights:
  - Gender parity of 50/50% in non-executive directors
  - 2. Optimum board demographics by age: 35-45 (1), 46-55 (4), 56-65 (2), >65 (3)
  - 3. Effective tenure distribution for succession planning.1-3 Yrs. (9),4-6 Years (1)
  - 4. Regional diversity: Kenyan (9), Zimbabwean (1)





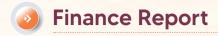












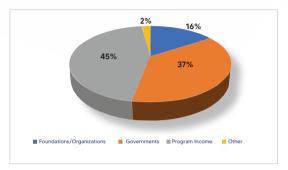
# Period Ending 31st December, 2024

The financial statements presented reflect PS Kenya robust fiscal health, reflecting prudent financial management, strategic investments, and our efforts to drive operational excellence. We remain confident in our ability to navigate challenges and capitalize on new opportunities, and we are excited about the year ahead.

# FINANCIAL REPORT

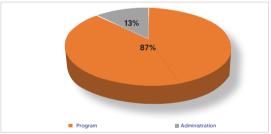
# Revenues for the 12 months ended December 31, 2024

	USD	%
Foundations/Organizations	1,959,393	16%
Governments	4,594,310	37%
Program Income	5,564,112	45%
Other	246,452	2%
Total Revenues	12,364,267	100%



## Expenses for the 12 months ended December 31, 2024

	USD	%
Program	10,167,423	87%
Administration	1,509,724	13%
Total Expenses	11,677,147	100%









# **Social Marketing**

The social marketing arm is tasked with identifying and commercializing healthcare products and services that complement Ministry of Health efforts in achieving provision of commodities and services that enhance the well-being of Kenyans. The key social marketing brands in PS Kenya's basket include; Trust Condoms, Femiplan Oral Contraceptives (OC) Pills, Femiject Family Planning Injection, Waterguard Safe Water Solution, Aquatab Chlorine Tablets and P&G Water Purifiers.

PS Kenya has an established distribution structure that has 24 regional distributors who distribute products to over 700 wholesalers. These in turn break bulk to directly reach 23 community-based organizations, over 66,000 retail outlets, 3,500 pharmacies and 1,586 clinics that represent 46%, 49% and 32% universal outlet data of total private sector outlets that social marketing leverages.

PS Kenya through its' social marketing arm distributed 26.4 million condoms, 4.32 million oral contraceptive pills and 23 thousand 3-month injections. PS Kenya also achieved over 100% cost recoverability on all brands ensuring that the social marketing arm is self-sustaining.

PS Kenya achieved the provision of 1.28 billion litres of treated safe water through the distribution of Waterguard water sterilizer, P&G Water Purifiers and Aquatab Chlorine Tablets. To enhance product awareness among target audiences, PS Kenya relied mainly on digital marketing to drive relevant content across various social media platforms.

PS Kenya also participated in the relevant Technical Working Groups (TWGs) under the guidance of the MOH departments of Reproductive health, Condom TWG and Emergency flood response. Through our safe-water partners, we donated water sterilization products to treat 5 million litres of water under the flood mitigation measures of Q1 of 2024.



# **Social Behavior Change Communication**



PS Kenya utilizes evidence-based and theory-informed Social Behavior Change Communication (SBCC) interventions to drive positive health outcomes. These interventions enhance the ability, opportunity, and motivation of individuals, service providers, community, partners and government to adopt, sustain, and advocate for priority healthy behaviors. PS Kenya employs diverse social behavior change design and implementation approaches, including

- Design thinking and human-centered design to create impactful social behavior change interventions.
- Behavioral economic EAST framework to iterate active campaigns.
- Motivational interview approach for effective interpersonal engagements.
- Social marketing 7P model to optimize health products market.
- Smart advocacy to address structural and policy barriers
- Digital solution to map, prompt, engage, co-create, inform, link and data synthesis.

In 2024, PS Kenya implemented two major SBC campaigns:

 Fuatilia Ujue: Focused on girl economic empowerment and contraception.  Ahadi Yangu: Highlighted women's sexual and reproductive health rights and addressed genderbased violence.

These campaigns were delivered through digital platforms, popular local radio stations, and community networks, including community health promoters, faith leaders, youth champions, cultural leaders, satisfied clients, and traditional birth attendant champions.

Impact in 2024:

- 1. Engaged 6 million listeners through local radio.
- Reached 1.5 million people via community resource persons.
- Engaged over 1.2 million individuals through social media platforms.
- Influenced thousands more through healthcare providers.

Additionally, PS Kenya partnered with the National Council for Population and Development, UNFPA, Options, and other stakeholders to develop a family planning commodity financing advocacy concept. This initiative aimed to engage the Ministry of Health, the Treasury, and other authorities to secure sustainable funding for family planning commodities as a national priority.



# **USAID Private Sector Engagement Program**

USAID Private Sector Engagement Program

The USAID Private Sector Engagement Program, a 5-year initiative (2023-2028) funded by USAID and implemented by PS Kenya, Halcyon Consulting, and the Kenya Healthcare Federation aims to enhance health outcomes in Kenya by supporting the Private Health Sector. Efforts were centered on collaborating with the National and County Governments, Health Service Delivery partners, and other Health Systems Strengthening partners to support health initiatives to enhance health outcomes in the private sector.

### **Area of Focus**



- Organizing the Private Sector
- Whole Health Market Coordination Units (Dialogue between Public and Private, strategic PPCs, management of mixed health systems)
- Targeted Policy work
- Supporting product expansion in the private sector
- UHC support Dissemination of UHC Acts, support PCN implementation
- e-KQMH roll out in private sector
- Self-regulation for private sector organizations
- Capacity building of healthcare providers in the private sector
- Health market design and intelligence working with the Directorate of Health Products and Technologies (DHPT)
- Conducive Environment
- Increasing visibility of local manufacturing/locally manufactured goods.



3 Counties Organized Private Sectors and 2 Whole Health Market Coordination Units Established.



50 Pilot Community Pharmacies Trained to Dispense ARVs to Recipients of Care to Decongest the Public Health Sector.

Over 6 Health Policy Initiatives Supported - TB, Malaria, HIV, FP, MNCH and Quality.

Over 17,000 Healthcare Providers Capacity Strengthened (FP, HIV, TB, MNCH, Malaria, Quality and UHC Acts). 6 Local Manufacturers Engaged (Filmed) to Increase Visibility for Local Health Products.



Supported the Development of the Public-Private Frameworks in Mombasa, and Uasin Gishu Counties.



# **The Kenya Health Market Assessment**

The State of Kenya's Health Market Study 2024 assessed the whole health market (public and private) foundations and conditions

and identified the root causes of market failures and growth opportunities. The scores for market foundations and conditions ranged from 2-3, emphasizing the need for stronger public-private collaborations. The Program will collaborate with the Government to strengthen the health market's performance in the coming year.

		Dimension	Defination	Score out of 5
Market Foundations	Su	Market Data	Checks whether quality data needed by both sectors is available	2
	atio	Market Analytics	Capacity and funding to support routine health tools	2
	Ē	Market Management	Capacity and frameworks to lead and manage a mixed health system	2
	ß.	Market Institutions	Are policies and institutions necessary for national markets to function well available	3
Market		Finance	Adequate, sustainable, and predictable financing	2
		Supply	Sufficient and reliable supply of health products and services	2
	Conditions	Consumer Demand	System able to meet the needs and preferences of consumers	3
	õ	Price	Products are available at competative and affordable prices	3
		Quality	Products across national market channels are meeting quality standards	3

# Moving from a Fragmented to a More Organized Private Sector

The USAID PSE Program organized the Private Sector in Kisumu and Uasin Gishu and further supported the establishment of the Whole Health Market Coordination Units to foster dialogue between the public and private sectors.

# **Advancing Healthcare Quality in the Private Sector**

The Program supported the implementation of the Kenya Quality Model for Health (KQMH), with a focus on its utilization across 50 private health facilities.

# **Developing Strategic Public-Private Framework**

The USAID Private Sector Engagement Program supported the development of the Public-Private Framework in Mombasa and Uasin Gishu counties to strengthen public-private partnerships and collaborations for health system strengthening interventions and addressing critical health market gaps.

# **Geared Efforts to Improve the Quality of Services Provided**

The Program enhanced the capacity of over 17,000 healthcare providers through webinars, Continuous Medical Education (CMEs), and classroom training to equip private sector providers with skills to deliver high-quality healthcare services and align them with the most updated health quidelines for Malaria, HIV, TB, FP, MNCH and UHC Acts.

# Increasing the Visibility of Local Health Products Manufacturers

In collaboration with the Directorate of Health Products and Technologies (DHPT), Kenya Export Promotion and Branding Agency (KEPROBA), and local manufacturers, the Program developed a communication strategy and initiated the development and production of professional videos to highlight the capabilities, quality, and economic contributions of Kenya's local manufacturing sector. The Program will continue to expand its efforts with targeted awareness campaigns to amplify the "Buy Kenya, Build Kenya" initiative and further promote the role of local manufacturing in Kenya's healthcare ecosystem.



# SaraMed Clinic Management System

### **Resource Mobilization**

In June 2024, PS Kenya partnered with Amref Health Africa in Kenya under the Global Fund Tuberculosis Mechanism to implement a TB Active Case Finding (ACF) module within the SaraMed Clinic Management System (CMS). This module was deployed at Kwa Ng'ang'a facility in Murang'a County to enhance early TB case detection at the facility level. Impressively, the module was developed, deployed, and accompanied by comprehensive training within just two weeks.

Recognizing the need for innovative TB interventions, the USAID Private Sector Engagement (PSE) program supported the scale-up of the ACF module to additional private healthcare facilities in priority counties. This collaboration allowed the SaraMed CMS technical team to activate the system and conduct user sensitization in six more private facilities, significantly boosting TB case-finding capabilities in the private health sector. These achievements underscore our commitment to leveraging technology to address Kenya's high TB burden and bridging gaps in healthcare delivery.

### **Innovation**

SaraMed CMS continues to advance Kenya's universal health coverage (UHC) goals by using Application Programming Interface (API) to gather and visualize data. Through intuitive dashboards, the system aggregates information across various modules, providing actionable insights while ensuring compliance with the Data Protection Act of 2019.

### Key benefits of these enhancements include:

- Real-time monitoring of health trends, especially in Reproductive, Maternal, Newborn, Child, and Adolescent Health (RMNCAH).
- Improved identification of health intervention needs and priority areas.
- Enhanced program impact reporting across health areas such as TB, malaria, and maternal health.
- These innovations demonstrate our dedication to digital inclusion, enabling resource-constrained facilities to make data-driven decisions that improve patient outcomes.

### **Future Outlook**

Aligned with the Ministry of Health's Digital Health Strategy, SaraMed CMS is driving Kenya's digital health transformation by integrating private healthcare providers into the digital ecosystem.







# **DESIP Programme**



# **Delivering Sustainable and Equitable Increases in Family Planning**

The goal of the six year Family Planning (FP) Programme (2019–2025), funded by the United Kingdom's Foreign, Commonwealth and Development Office (FCDO), is to ensure women and girls can safely plan pregnancies and improve sexual reproductive health and rights (SRHR), targeting women of reproductive age, particularly adolescents, poor women (earning <\$1.90/day), and persons with disabilities in 12 counties in Kenya with less than 45% modern contraceptive prevalence. DESIP ended its fifth year of implementation and started the sixth and final year in April 2024. Some of the highlights for the year are as follows:

# **Programme Highlights**

# **Demand Creation for Family Planning**

- Transferred social behavior change (SBC) and demand creation responsibilities to county teams.
- Integrated FP messaging into non-FP events, utilized social media, and engaged communities via human interest stories and technical support for broader outreach.

# Improving Service Delivery

- Strengthened service availability through training and mentorship for healthcare workers and integration of FP services into other health service points.
- Advocated for sustainable FP services and improved data

- quality through audits and mentorship.
- Continued community-based FP services through 132 community-based distributors (CBDs) in key counties.

# Support to the Ministry of Health (MOH)

- National Level: Assisted in policy revisions, including updates to the National FP Guidelines and commodity management, and contributed to technical working groups and advocacy for domestic financing of FP.
- County Level: Participated in planning and coordination meetings, health day celebrations, and regional conferences.

### Learning and Dissemination

 The programme shared learnings on various topics, including social inclusion and community-based FP distribution, through webinars and other dissemination channels.

### **Donor Field Visits**

• Supported two FCDO field visits, including an Annual Review and a Project Closeout Review.

DESIP continues to make significant strides toward its goal of improving family planning access and reproductive health for women and girls across Kenya.



PS Kenya 2024



# **Accelerate Program**



The Accelerate program, funded by the Embassy of Denmark in Kenya, works to improve access to sexual and reproductive health services and rights (SRHR) and gender-based violence (GBV) response in 13 counties, aligned with the ICPD +25 Promise. We made significant strides in transforming the lives of our beneficiaries through impactful initiatives. Below is a summary of our achievements:



# 102%

of CYPs target achieved



# 5 of 10

Clients received injections as the FP method



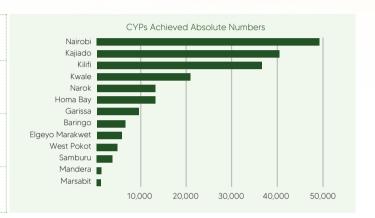
# 275.251

WRAs & adolescents reached through IPC & schools,110% of target



# 8%

Adolescents contraceptive uptake clients





# 9.659

Survivors reached with comprehensive GBV services



### 4 in 10

SGBV survivors delayed in getting medical attention at a health facility



### 85 FGM Cases

Reported in the year with over a third from Narok County



### 70%

GBV cases reported were survivors of SGBV





# **Binti Shupavu Program**



A360 funded by the Children's Investment Fund Foundation, running from 2021 to 2025. It aims to empower adolescent girls (ages 15-19) with unmet contraceptive needs by improving access to sexual and reproductive health (SRH) information and services. Implemented by Population Services Kenya under Population Services International (PSI), the program is active in four counties: Migori, Homa Bay, Kilifi, and Narok.

The program's key components include Binti Shupavu stories, girl-led clinics, life skills training, and celebratory graduation festivals that link adolescents to economic empowerment pathways and return to school. By engaging community influencers and relevant stakeholders, it promotes informed decision-making about contraceptives, reduces gender-based violence, and provides opportunities for education and economic empowerment.

# **Key Achievements**

# 1. Impact on Adolescents

The program trained 825 girls in life skills, linked 350 to return to school, supported over 1,000 in starting businesses, and reached over 124,000 adolescents with reproductive health messages, surpassing targets. Additionally, more than 63,000 adolescents adopted contraceptives, exceeding expectations.

# 2. Quality of Care (QoC)

External evaluations showed 78% performance in reproductive health services, with improved access to adolescent-friendly SRH services and significant reductions in adolescent pregnancies. Over 166 Joint Supportive Supervision Visits (JSSVs) were conducted to improve service delivery.

### 3. National and Community Engagement

A360 marked World Contraceptive Day with mobile clinics and raised ASRH awareness. The program also engaged in 16 Days of Activism to address gender-based violence (GBV) and participated in national workshops influencing the inclusion of Counseling for Continuation (C4C) in Kenya's Family Planning Guidelines

### 4. Sustainability and Partnerships

A360 Kenya transitioned 119 new sites to government-led implementation, bringing the total to 240 sites. The program successfully advocated for inclusion in county Annual Work Plans (AWPs) for 2024/25 and contributed to the development of the National AYSRH SBC strategy.

### 5. Meaningful Adolescent Engagement (MAYE)

Peer-to-peer learning through local Adolescent Forums strengthened and empowered adolescents as role models, helping to reduce stigma and promote open discussions about Sexual Reproductive Health.

# 6. Research and Learning

A continuation study showed an 87.8% contraceptive continuation rate 12 months post-adoption, highlighting strong service retention. Baseline data indicated that 80% of Binti Shupavu participants were out of school and 39% were engaged in income-generating activities, emphasizing the need for economic empowerment initiatives





# **Malaria Program**



The Malaria Program aims to significantly reduce the burden of malaria, targeting a 75% decrease in incidence and deaths compared to 2016 levels by 2023, with the expected outcome of reducing morbidity and mortality by two-thirds across various epidemiological zones.

# **Strategies for Program Implementation**

- Community case management of uncomplicated malaria by trained community health promoters (CHPs).
- Health systems strengthening through the provision of incentives to CHPs.
- Specific prevention Interventions: Promotion of malaria prevention and control through school children.
- HMIS: Supervision of health facilities and routine data quality audit to health facilities.

# **Community Case Management of Malaria**

PS Kenya supports strengthening of community case management by use of trained community health workers in partnership with the Ministry of health. The interventions in case management include; training of CHPs on targeted counties, supportive supervision conducted in all the 185 CHUs by the SCHMT using a standard checklist on quarterly basis, these strategy aims at ensuring timely and effective malaria case management through the use of rapid diagnostic tests (RDTs) to test all suspected cases and treatment of all positive cases by Artemether Lumefantrine.

# **Key Achievements**

- In Busia County, through CHPs, 459,223 cases were tested and 412,847 malaria cases were treated between January and December 2024. This represents 56% of cases being managed at the community level.
- Mentorship and supportive supervision were provided to 1,850 CHPs to strengthen community health systems in Busia County.
- The project contributed to a 100% reporting rate on DHIS2 by facilitating Health Records and Information Officers (HRIOs) and Community Health Extension Workers (CHEWs).
- The project supported 15,000 people affected and displaced by floods through integrated outreaches in all eight sub-counties of Busia County.





# **Strategy Launch**

































### **Editorial Team:**

Georgette Adrianne - Senior Manager Communications

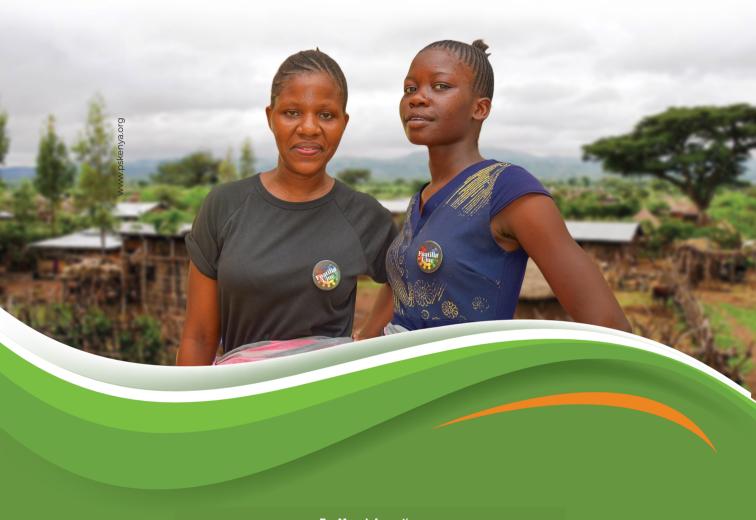
Patrick Mungai - Graphic Designer

Cheryl Odiero - Digital Marketing and Communications Assistant

Fidel Castro - Communications Assistant

Jedidah Chepkosgei - Media Assistant

Reuben Njoroge - Graphic Design Assistant



# For More Information

Jumuia Place, Wing B, 3rd Floor, Lenana Road P.O Box 22591 - 00400 Nairobi, Kenya





