

# ***DELIVERING ON COUNTRY COMMITMENTS FOR WOMEN'S CHILDREN'S AND ADOLESCENTS' HEALTH***

## ***MAPPING AND ASSESSMENT REPORT ON NATIONAL COMMITMENTS FOR WOMEN'S, CHILDREN'S AND ADOLESCENT'S HEALTH IN KENYA***

FINAL REPORT – AUGUST 2024

**TOWARDS A COLLABORATIVE ADVOCACY ACTION PLAN IN KENYA:  
ASSESSMENT OF WOMEN, CHILDREN AND ADOLESCENTS' HEALTH COMMITMENTS**

## ABBREVIATIONS AND ACRONYMS

ANC	Antenatal care
ARNS	The African Regional Nutrition Strategy
AU	African Union
AKU	Aga Khan University (AKU)
AHWB	Adolescent Health and Well-Being
ANC	Antenatal Care
ASRH	Adolescent Sexual and Reproductive Health
AHWB	Adolescent Health and Well-Being
CAAP	Collaborative Advocacy Action Plan
CBO	Community-Based Organization
CHV	Community Health Volunteer
CHX	Chlorhexidine
COVID-19	Coronavirus Disease 2019
CNAPS	County Nutrition Action Plans
CRC	Convention on the Rights of the Child
CRVS	Civil Registration and Vital Statistics
CSDS	Child Survival and Development Strategy
CSE	Comprehensive Sexuality Education
EBF	Exclusive Breastfeeding
ECD	Early Childhood Development
eMTCT	Eliminating mother to child transmission
ENAP	Every Newborn Action Plan
EPMM	Ending Preventable Maternal Mortality
ESA	Eastern and Southern Africa
FP	Family Planning
FP2030	Family Planning 2030
FBO	Faith Based Organizations
FBV	Faith Based Violence
FGM	Female Genital Mutilation
GBV	Gender-Based Violence
GEF	Generation Equality Forum
GFF	Global Financing Facility
GoK	Government of Kenya
HENNET	Health NGOS Network
HIV	Human Immunodeficiency Virus

HPV	Human Papillomavirus
ICPD	International Conference on Population and Development
IDP	Internally Displaced Person
ILO	International Labor Organization
JICC	The Joint Interagency Coordinating Committee
KASF	Kenya AIDS Strategic Framework
KNAP	Kenya National Nutrition Action Plan
KNASP	Kenya National Aids Strategic Plan
KCHS	Kenya Community Health Strategy
KDHS	Kenya Demographic Survey
KEPI	The Kenya Expanded Programme for Immunization
mCPR	Modern Contraceptive Prevalence
MoEST	Ministry of Education
MOH	Ministry of Health, Kenya
MNCH	Maternal Newborn and Child Health
MUSD	Million United States Dollar
NFNSP-IF	National Food and Nutrition Security Policy Implementation Framework
NCAH	Newborn Child and Adolescent Health
NCCS	National Cancer Control Strategy
NGO	Non-Government Organization
NHIF	National Hospital Insurance Fund
NHSSP	The National Health Sector Strategic Plan, Kenya
NPA	National Plan of Action
NPS	National Police Service
NRHS	National Reproductive Health Strategy
ODA	Official Development Assistance
PHC	Primary Health Care
PNC	Postnatal Care
PCC	Population-Concept-Context framework
PCNs	Primary Health Care Networks
PRISMA	Preferred Reporting Items for Systematic Reviews and Meta-Analyses
PMNCH	Partnership for Maternal, Newborn and Child Health
RMNCAH	Reproductive, Maternal, Newborn, Child and Adolescent Health
RH	Reproductive Health
RIA	Regulatory impact assessment
SBA	Skilled Birth Attendance

---

SDGs	Sustainable Development Goals
SGBV	Sexual and Gender-Based Violence
SMART	Specific Measurable Achievable Realistic and Time-Bound
SRH	Sexual Reproductive Health
SRHR	Sexual and Reproductive Health and Rights
SRMNAH	Sexual Reproductive, Maternal Newborn, Child and Adolescent Health
STI	Sexually transmitted infections
SVN	Small Vulnerable Newborn
ToT	Trainers of Trainers
UHC	Universal Health Care
UN	United Nations
UNICEF	United Nations Children's Fund
USD	United States Dollar
VAC	Violence against Children
VfM	Value for Money
YFS	Youth Friendly Services
VSO	Voluntary Service Overseas
WASH	Water Sanitation and Hygiene
WCAH	Women, Children and Adolescents' Health
WHA	World Health Assembly
WHO	World Health Organization

## ACKNOWLEDGEMENTS

The Partnership for Maternal, Newborn and Child Health (PMNCH) seeks to deepen accountability for existing commitments on women, children and adolescents' health (WCAH) while also identifying gaps where new commitments are required. The evidence generated informs advocacy and accountability efforts incorporated under the Collaborative Advocacy Action Plan (CAAP). The working group on the Kenyan commitments brought together several individuals and institutions that were all involved in consultative meetings as we reviewed relevant literature, guidelines and policy documents.

We feel greatly indebted to individuals and organizations who contributed in one way or another to this elaborate process of mapping and assessment of commitments on WCAH in Kenya. Specifically, we thank Prof. Marleen Temmerman from Center of Excellence in Women and Child Health, Aga Khan Kenya for her expert guidance during this assessment. We appreciate Prof. Violet Naanyu for the scoping review, synthesis, and incorporation of team feedback at every stage. We also wish to extend our gratitude to Grace Neema Oduori, who supported the literature review.

We further recognize all individuals who supported the review of the draft report and its finalization. They include Health NGOS Network (HENNET) Kenya, specifically Ms. Sharon Musakali, Dr. Margaret Lubaale, Faith Ndungu and Brian Anyega and PMNCH with the support of Ms. Sarah Bald and Ms Ilze Kalnina. They worked tirelessly with the Aga Khan Team to ensure success at each stage of the process.

## Contents

ABBREVIATIONS AND ACRONYMS.....	2
1. BACKGROUND .....	11
2. METHODOLOGY.....	14
Stage 1: Defining eligibility criteria .....	15
Stage 2: Identifying relevant documents and document selection.....	15
Stage 3: Charting data .....	16
Stage 4: Collation and summarization of results.....	17
3. FINDINGS.....	18
3.1 Mapping of commitments made by the Kenyan government on WCAH .....	18
Maternal newborn and child health .....	18
Sexual and reproductive health and rights .....	29
Adolescent health and well-being.....	36
3.2 Assessing the quality and progress status of select WCAH commitments .....	43
Linda Mama Program .....	43
Quality maternal newborn and child health.....	44
Universal health coverage (UHC).....	47
SRHR access.....	48
Adolescent pregnancy.....	49
Gender-based violence including female genital mutilation.....	50
3.3 Identifying gaps where new commitments are required.....	51
4. RECOMMENDATIONS.....	55
5. REFERENCES .....	59
ANNEX 1: KEY AREAS FOR COMMITMENT MAPPING AND ASSESSMENT OF WOMEN, CHILDREN AND ADOLESCENTS' HEALTH.....	65
ANNEX 2: WOMEN, CHILDREN, AND ADOLESCENT HEALTH COMMITMENTS IN KENYA ...	66
ANNEX 3: ASSESSMENT OF SELECTED SUB-COMMITMENTS .....	79

## EXECUTIVE SUMMARY

The government of Kenya (GoK) and health partners have made great efforts to address barriers to Reproductive, Maternal, Neonatal, Children and Adolescent Health and Nutrition (RMNCAHN), and this is in alignment to the Sustainable Development Goals (SDGs) and the Global Strategy for women, children and adolescents' health (WCAH), 2016-2030. RMNCAHN services are provided across the country and the GoK continues to prioritize increased service coverage. In 2022, the Partnership for Maternal, Newborn and Child Health (PMNCH) developed a revised approach for commitment mobilization and accountability on WCAH to precipitate progress towards deliverables under the PMNCH 2021-2025 Results Framework, with emphasis on accountability for existing WCAH commitments while also identifying where new commitments are required. The evidence generated informs advocacy and accountability efforts incorporated under the Collaborative Advocacy Action Plan (CAAP). A 'commitment' is defined as a statement of intent by the government to significantly improve WCAH. This assessment included three specific aims: 1) To identify commitments made by the Kenyan government on WCAH (2012-2023); 2) To conduct a commitment assessment detailing the quality and status of commitment implementation; and 3) To identify gaps where new and additional commitments are required.

We defined the eligibility criteria and identified relevant documents to ensure an exhaustive scoping review. This was followed by charting data, collation, and summarization of results. A thematic analysis of eligible documents was conducted using policy and technical markers defined by the PMNCH to show the extent to which any commitment was implemented. To assess the quality of commitments from a *policy point of view*, five attributes were used (strategic, equitable, attainable, relevant, and inclusive) while another seven facilitated the assessment of the quality of a commitment from *technical aspects* (specific, measurable, time-bound, operational, value for money, institutionalized accountability process, well documented and publicly available). Select WCAH subtopics were identified as key commitments to be evaluated. These are commitments that, if implemented fully will lead to significant WCAH outcomes. For each

selected commitment, we assessed whether the commitment was of adequate quality as defined by PMNCH to improve WCAH significantly, and also explored underlying reasons. Furthermore, we considered new commitments needed for the achievement of SDG targets and those without which the gains in WCAH cannot be realized.

A total of 60 commitments/policies/legislation that revealed pledges made by the GoK on WCAH in the period 2012-2023 were assessed. The commitments were then reported under the maternal neonatal child health (28), sexual and reproductive health and rights (17), and adolescent health and well-being categories (15). Consequently, seven sub-commitments were assessed for quality and status of commitment implementation and they included: Linda Mama program, quality maternal newborn and child health (MNCH), Universal health coverage, SRHR access, adolescent pregnancy, gender-based violence (GBV) including female genital mutilation (FGM). The *Linda Mama Program* was scored as very good quality and on moderate progress. On *quality MNCH*, the efforts to increase access to oxytocin, and widespread use of chlorhexidine for umbilical cord care were reported as very good quality and on track. The commitment to increase the national routine immunization coverage of infants was seen as very good quality and making moderate progress. Two commitments were rated as good quality but showing insufficient progress: To increase births attended by skilled personnel, and the Beyond Zero Campaign.

Most commitments on *universal health coverage* (UHC) were scored as very good quality and on track. However, the promise to improve the availability and utilization of quality family planning data for decision-making was good quality but showed insufficient progress. Moreover, two commitments were scored as of poor quality and insufficient progress: To prevent maternal deaths and morbidities through integrating comprehensive SRH interventions into national UHC strategies; and to facilitate access to legally approved safe abortion, measures to prevent unsafe abortions, and provision of post-abortion care. Regarding *SRHR access*, two commitments were of good quality but showed insufficient progress: To improve the availability and utilization of quality family planning data for decision-making; and to increase modern contraceptive prevalence (mCPR) for married women from 58% to 64% by 2030.

Commitments and legislation to address *adolescent pregnancy* through setting the age of consent and marriage guidelines were very good in quality and on track. Three commitments were of average quality and making moderate progress: To facilitate access



to information and services for adolescents and youth; to improve coordination to respond to and address teenage pregnancy; and education efforts to keep girls in school. The legislation to establish the Joint Interagency Coordinating Committee for coordinating resource mobilization and allocation to support in-school adolescents was of good quality but there was no data available to measure progress. On *gender-based violence*, the commitment to address sexual GBV and harmful practices (e.g. eliminating child/early/forced marriages and FGM) was of good quality and on track. However, while the promise to eliminate medicalized FGM and eradication of all forms of GBV and harmful reproductive health practices was of good quality, there was insufficient progress. Lastly, the GoK commitment to finance GBV and FGM programs and institute accountability frameworks for tracking expenditure was of very good quality, however, there was no data available to assess implementation progress.

Several gaps were noted where new critical commitments are required for the achievement of SDG targets. For *MNCH*, the following remain key: equitable access to care, commitments towards cost-effective affordable interventions, nutrition focus (promotion of breastfeeding and prevention of malnutrition), and attention to social protection and poverty concerns. The *SRHR* gaps ought to address family planning, reproductive cancers, and GBV. For *AHWB*, new commitments should aim to deliver concrete actions that cater to health and nutrition, social protection, and prohibition of early marriage. Commitments towards addressing the shortage of skilled AHWB providers, SRH education, targeted health programs, and integrated care for adolescents are promising. Moreover, Kenya would greatly benefit from joining other world governments in making commitments aligned with the seven asks of the Agenda for Action for Adolescents determined by adolescents and youth themselves.

This assessment reports on the mapping and assessment of commitments on WCAH and subsequently informs the CAAP to address WCAH commitments through improved advocacy and accountability. Strengthening the functionality of the Kenya RMNCAHN Multi-Stakeholder Country Platform will ensure dissemination of the commitments Kenya makes towards WCAH, determination of financing for implementation of the WCAH commitments, and monitoring of implementation progress of WCAH commitments. The following specific topical recommendations are considered valuable to the CAAP. Specific recommendations for commitments towards *MNCH* include more efforts to ensure the availability of and access to quality MNCH, SRH, and malaria care; health information and

education; essential medicines and commodities; and WASH and nutrition support. Areas of recommendation for commitments towards *SRHR* include comprehensive sexuality education, counseling and services for modern contraceptives, and safe abortion services. Other promising areas cover the prevention and treatment of STIs; prevention, detection, and treatment of SGBV and cervical cancer. Regarding *AHWP*, the Agenda for Action for Adolescents raises useful recommendations including establishing social protection mechanisms, vocational training and secondary education, provision of affordable, high-quality services, and paying attention to mental well-being.

## 1. BACKGROUND

The government of Kenya (GoK) has made strides in advancing women, children and adolescents' health (WCAH) with indications of dropping rates in maternal and child mortality, stunting and adolescent birth rates. The Reproductive, Maternal, Neonatal, Children and Adolescent Health and Nutrition (RMNCAHN) is one of the priority health agenda in the GoK that is catered for in the Constitution of Kenya 2010, and the RMNCAHN Investment Framework IF (2016-2020) shows specific services to be provided under each RMNCAHN element. The RMNCAHN is supported by national reproductive health policies, including the frameworks to enhance adolescent sexual reproductive health (Ministry of Health, 2022; 2015; 2016b). There are notable GoK and health partner efforts to address barriers to RMNCAHN including the free maternity services, elimination of user fee for primary care, and the Beyond Zero campaign. Furthermore, RMNCAHN is part of the Sustainable Development Goals (SDGs) and the updated Global Strategy for WCAH (2016-2030) which aims to achieve the highest attainable standard of health for women, neonates, children and adolescents.<sup>1</sup>

RMNCAHN services are provided at the county level and they contribute to key elements of SDG 3 including: reduction of maternal mortality ratio to less than 70 per 100,000 live births by 2030; ending preventable deaths of newborns and children under 5 years of age by 2030; achieving universal access to sexual and reproductive healthcare services; achieving universal health coverage including financial risk protection, and access to quality essential healthcare services, medicines, and vaccines.<sup>2</sup> The GoK continues to prioritize increased service coverage – with special attention to closing equity gaps - to ensure access for all to immunization, ante natal care, skilled delivery, and family planning. Increased domestic financing for health and health partners' support has led to upward change in budget allocation to health from 19% in 2015 to 34 % in 2021.<sup>3</sup> Using a multi-stakeholder country platform (including among others development partners, Civil Society Organisations, youth organizations, and private sector), the coordination of RMNCAH-N was well executed such that by June 2023, 14.7 million people had received essential health, nutrition, and population services. A record 7.3 million children had been immunized, and 7.4 million deliveries were attended by skilled health personnel.<sup>4</sup> Furthermore, there is increasing access to family planning services e.g. the modern contraceptive prevalence

<sup>1</sup> The State of RMNCAHN in Kenya By Health NGOs' Network (HENNET) Supported by PATH 2023

<sup>2</sup> WHO. Targets of Sustainable Development Goal 3. <https://www.who.int/europe/about-us/our-work/sustainable-development-goals/targets-of-sustainable-development-goal-3>

<sup>3</sup> Nakhumicha S.Wafula. Cabinet Secretary, Health, GoK. Eight Years of Kenya's Partnership with the GFF. 17TH GFF Investors Group Meeting. November 29th -30th, 2023.

<sup>4</sup> Ibid

rate improved from 39% in 2014 to 58% in 2021,<sup>5</sup> and improved access to skilled birth attendance from 62% to about 70% over the last seven years.<sup>6</sup>

In 2022, the Partnership for Maternal, Newborn and Child Health (PMNCH) developed a revised approach for commitment mobilization and accountability on WCAH to precipitate progress towards deliverables under the [PMNCH 2021-2025 Results Framework](#). Over the next two years, the revised approach will be implemented in 30 countries following the PMNCH Results Framework. This partner-led collaborative approach emphasizes deepening accountability for existing WCAH commitments while also identifying gaps where new commitments are required. The evidence generated informs advocacy and accountability efforts incorporated under the Collaborative Advocacy Action Plan (CAAP). In support of these partner efforts, PMNCH Secretariat teams collectively developed a [Guide for Commitment Mapping and Assessment](#). By providing partners with parameters to consider in undertaking mapping and assessment of commitments, the Guide makes accountability efforts robust and comparable across countries.

Using the 2012-2023 period, this document provides mapping and assessment of WCAH government commitments (pledges) in Kenya in domestic, regional, and global platforms and processes. It also identifies critical topics where commitments are missing, especially commitments that would have a multiplier effect on WCAH. For the CAAP process, a 'commitment' is a statement of intent by the government to significantly improve WCAH (See **Table 1.**) e.g. a specific financial, policy, or programmatic pledge. In shaping the CAAP process PMNCH partners identified selected key topics within the areas of Maternal Newborn and Child Health (MNCH), Sexual and Reproductive Health and Rights (SRHR) and Adolescent Health and Well-Being (AHWB) where further effort is required (**Annex 1**). For each topic, sub-topics were identified to provide the frame for the scoping and assessment of Kenyan commitments.

**Table 1: Operational Definition of Terms**

Term	Definition
Commitment	Is a statement of intent by the government to significantly improve WCAH e.g. a specific financial, policy, or programmatic

<sup>5</sup> <https://www.fp2030.org/kenya/>

<sup>6</sup> <https://kenya.unfpa.org/en/topics/maternal-health-and-hiv>

	pledge. For example, "Increase access to family by 10% in 2024" is a commitment.
Commitment source/ commitment platform	Is the national/ regional/ global platform or initiative where a commitment is made, recorded, or hosted. Within this source there are often numerous commitments' example FP2030 is the source of a commitment. Within FP2030 platform, there are numerous commitments related to SRHR.
Women's, children's and adolescent's health (WCAH)	Is a term used to collectively refer to Maternal, Newborn and Child Health (MNCH), Sexual Reproductive Health and Rights (SRHR), and Adolescent Health and Well-Being (AHWB)

To assess the quality of commitments, twelve universal attributes were applied as stipulated by PMNCH in the Terms of Service for this assessment. The first aim was to assess the quality of a commitment from a policy point of view, and five attributes were used to highlight the extent to which the commitment was:

1. *Strategic* - strategically prioritizes a set of targeted activities to address major bottlenecks, to achieve significant improvement for health outcomes of WCAH and beyond
2. *Equitable* - identifies and targets policy/financial/programmatic measures to tackle thematic gaps and inequities, and address the needs of most marginalized populations
3. *Attainable* - refers to a realistic context, which can feasibly be grounded in national plans/budgets/programs and based on the availability of human and financial resources as well as the level of progress achieved in the past
4. *Relevant* - reflects national priorities and the challenges it faces, and builds on evidence, latest data, including inputs from different population groups, and stakeholders collected via social accountability mechanisms, and independent analysis
5. *Inclusive* - has been developed/and is being monitored and progress reviewed with participation/buy-in by relevant stakeholders, partners, and those who either have responsibilities or will receive the services/expected benefit from the commitment

The second aim was to assess the quality of a commitment from a technical point of view, and the review used seven attributes to consider the extent to which the commitment was:

1. *Specific* - refers to a specific action (financial, policy and/or service delivery) and indicates the population group who will benefit from the action.
2. *Measurable* - can be monitored through an indicator or a set of indicators to enable progress and achievement of the commitment to be tracked.
3. *Time-bound* - with clear key milestones, and a realistic timeframe for achievement of the commitment
4. *Operational* - i.e., there are clear roles and responsibilities for the implementation of the commitment, with adequate resources (budgets, human resources, etc. allocated and accepted), and government responsibilities are supported by other stakeholder commitments/ responsibilities
5. *Represents good value for money* (vfm) - commitment reflects the five dimensions of VfM: economy, effectiveness, efficiency, equity, and sustainability
6. Implementation is *linked to a formal/institutionalized accountability process*, with clear roles and timelines - across monitor, review, and act/remedy processes, with a clear risk mitigation plan.
7. Information about this commitment and progress of implementation is *well documented* and publicly available, and awareness is raised with relevant stakeholders

Lastly, a third specific aim of this review was to identify gaps where new commitments are required. The entity undertaking the scoping and assessment in Kenya is the Centre of Excellence in Women and Child Health, Aga Khan University, Nairobi, Kenya.

## 2. METHODOLOGY

The specific objectives include:

1. To identify commitments made by the Kenyan government on WCAH (2012-2023)
2. To apply 12 attributes<sup>7</sup> in conducting a commitment assessment detailing the quality and status of commitment implementation
3. To identify gaps where new and additional commitments are required

The scoping work embraced a partly systematic review of relevant documents that had any information on WCAH commitments in Kenya. Several main steps were followed to

---

<sup>7</sup> For policy considerations, five aspects of the commitment were identified as available: 1) strategic, 2) equitable, 3) attainable, 4) relevant, and 5) inclusive. Seven technical considerations included: 1) Specific action and population group, 2) measurable, 3) time bound, 4) clear operational roles and resources, 5) value for money, 6) linked to accountability process and has risk mitigation, and 7) well documented and publicly available.

enable exhaustive review as well as logical reporting of findings. The four stages of this process are:

1. Defining eligibility criteria
2. Identifying relevant documents and document selection
3. Charting data
4. Collation and summarization of results

Further description of these steps are provided below.

## Stage 1: Defining eligibility criteria

For this scoping review, documents were considered eligible for inclusion if they successfully met a series of criteria. Documents were selected as per inclusion and exclusion criteria based on the Population-Concept-Context (PCC) framework (Aromataris & Munn, 2020). Thus documents were selected using the PCC framework if they:

- a) Focused on women, children, and adolescents (population)
- b) Described the commitments, viewpoints, quality of a commitment, status of implementation of a commitment, gaps where new and additional commitments are required, and any other content relevant to the assessment of WCAH commitments (concept)
- c) Covered WCAH commitments in Kenya (context).

Inclusion criteria also included documents that were:

- d) Published in English
- e) Available for full-text review
- f) Recognized/Signed off by the government of Kenya
- g) Published between 2012 and December 2023

## Stage 2: Identifying relevant documents and document selection

A comprehensive search was done to ensure all possibly available relevant mainstream and grey literature was accessed and reviewed accordingly. Boolean phrases (AND, OR), and SRMNCAH terms provided from the key areas for commitment mapping and assessment of women, children and adolescents' health were used on Google Scholar to



increase the probability of locating additional eligible documents. Generally, the scoping search was conducted in stages that also allowed an iterative cyclical process of refining the search to enhance the subsequent searches and selections.

The first stage focused on a search of the documents availed by the PMNCH Team and what was available from as well as references from a 2022 assessment on bottlenecks/gaps/emerging issues in Sexual Reproductive, Maternal Newborn, Child and Adolescent Health (SRMNCAH) in Kenya. This VSO assessment was done by an experienced WCAH expert from Kenya who was working for Voluntary Service Overseas (VSO) organization.<sup>8</sup>

The second stage consisted of the outright selection of relevant documents from MoH Kenya Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) sites, capturing commitments from past and current government leadership. The third stage consisted of a Google Scholar search for any other relevant references that were identified as reference materials in the main sources/documents noted in stages 1 and 2.

Lastly, reference lists of all eligible documents identified in all three stages were reviewed to identify any additional citations for potential review.

## Stage 3: Charting data

Using standard practice for scoping reviews, data charting forms were developed using Microsoft Word/Excel to organize key information from the eligible documents (Levac et al., 2010). The data charts include essential information for each of the main documents used including document title, author/s, date, source, the period covered by the document, and the category of WCAH commitments covered. **Annex 2** and the reference list provide the final list of all the documents/sources used in this assessment and in preparing the final report. Additional charts captured coded descriptions of the commitments, the quality of the commitments, the status of implementation of the commitments, and gaps where new and additional commitments are required.

---

<sup>8</sup> Voluntary Service Overseas <https://www.vsointernational.org/>



## Stage 4: Collation and summarization of results

Eligible documents were analyzed using a thematic approach. This multi-stage process consisted of conducting page-by-page reading of each selected document to identify pieces of relevant information that captured the WCAH commitments, including any existing assessments of the commitments. This was followed by a re-reading of the information to explore connections between different findings from diverse sources. Lastly, an overarching summary of the assessment of WCAH commitments was provided. All the thematic analysis of eligible documents was conducted using policy and technical markers as defined in the Guide for Country Commitment Mapping and Assessment by PMNCH to show the extent to which any commitment had been implemented. For policy considerations, five aspects of the commitment were identified as available: 1) strategic, 2) equitable, 3) attainable, 4) relevant, and 5) inclusive. Seven technical considerations included: 1) Specific action and population group, 2) measurable, 3) time bound, 4) clear operational roles and resources, 5) value for money, 6) linked to accountability process and has risk mitigation, and 7) well documented and publicly available.

To assess the quality of the commitments, select subtopics were identified as key commitments to be evaluated. These are commitments that, if implemented fully, would unlock the most significant WCAH outcomes. For each selected commitment, we assess whether the commitment is of adequate quality as defined in the Guide for Country Commitment Mapping and Assessment by PMNCH to significantly improve WCAH. Each commitment is discussed and assessed (Table in **Annex 3**) whereby the categories 'Very Good', 'Good', 'Average', 'Poor' are used, accordingly. In this case, 'Very Good' indicates the commitment meets all the quality requirements of 'Strategic', 'Equitable', 'Attainable', 'Relevant' and 'Inclusive.'

For each selected commitment, we check if adequate progress is being made in its implementation based on accountability mechanisms to deliver the expected results within the envisaged timelines. We explore underlying reasons and provide these observations as a narrative using the indicators proposed by PMNCH in its Guide for Country Commitment Mapping and Assessment on assessing implementation. We use the categories 'On Track', 'Moderate Progress', 'Insufficient Progress', 'No Data Available' to capture our findings and provide a summary in **Annex 3**.

To identify gaps where new or additional commitments are needed, we consider new commitments that are required for achievement of SDG targets and those without which the gains in WCAH cannot be realized.

### 3. FINDINGS

## 3.1 Mapping of commitments made by the Kenyan government on WCAH

**Annex 2** shows 60 commitments/policies/legislation that reveal pledges made by the Kenyan government on WCAH in the period 2012-2023. It also provides the period covered by specific commitments/policies/guidelines. The commitments are then reported under the MNCH, SRHR, and AHWB categories.

### Maternal newborn and child health

The government of Kenya (GoK) has made several commitments related to the four subtopics under MNCH. We have identified 28 key commitments spanning global, regional, and national pledging platforms (**Annex 2**).

### *High-quality MNCH services for mothers, newborns and children*

A summary of 7 commitments and one legislation related to high-quality MNCH services for mothers, newborns and children is provided in **Table 1**.

**Table 1: High-quality MNCH services for mothers, newborns and children**

Key WCAH areas	Type	Category	Date	Source
1. To increase access to oxytocin	Commitment	Global	2016	Ministry of Health. 2016b. Kenya Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Investment Framework. Ministry of Health, Government of Kenya January 31, 2016. <a href="https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf">https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf</a>
			2015	Acting on the Call. Ending Preventable Child and Maternal Deaths. June 2015.

			2016	<a href="https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf">https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf</a> HNN Team & PATH. Kenya Launches High-Impact Action Plan to Protect Mothers And Newborns <a href="https://www.healthynewbornnetwork.org/blog/kenya-launches-high-impact-action-plan-protect-mothers-newborns/">https://www.healthynewbornnetwork.org/blog/kenya-launches-high-impact-action-plan-protect-mothers-newborns/</a>
2. To increase the national routine immunization coverage of infants	Commitment	Global	2023	Ministry of Health. 2023b. Kenya National Immunization Policy Guidelines 2023. Vaccinate to Protect. Government of Kenya. <a href="http://guidelines.health.go.ke:8000/media/Kenya_National_Immunization_Policy_Guidelines_Version_signed.pdf">http://guidelines.health.go.ke:8000/media/Kenya_National_Immunization_Policy_Guidelines_Version_signed.pdf</a>
			2015	Acting on the Call. Ending Preventable Child and Maternal Deaths. June 2015. <a href="https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf">https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf</a>
3. To increase births attended by skilled personnel	Commitment	Global	2015	Acting on the Call. Ending Preventable Child and Maternal Deaths. June 2015. <a href="https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf">https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf</a>
4. To reduce maternal, perinatal and neonatal morbidity and mortality	Commitment	National	2022 - 2032	Ministry of Health. (2022). The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022. <a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf</a> Acting on the Call. Ending Preventable Child and Maternal Deaths. June 2015. <a href="https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf">https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf</a>
5. To reduce the HIV and AIDS burden and eliminate mother-to-child transmission (eMTCT) of HIV	Commitment	National	2022 - 2032	Ministry of Health. (2022). The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022. <a href="http://guidelines.health.go.ke:8000/media/T">http://guidelines.health.go.ke:8000/media/T</a>

				<a href="#">he National Reproductive Health Policy 2022 - 2032.pdf</a>
6. Zero preventable deaths of women, newborns or children, and no preventable stillbirths; where every pregnancy is wanted, every birth is celebrated and accounted for and where women, babies, children, and adolescents are free of HIV/AIDS, survive, thrive and reach their full social and economic potential	Commitment	National	2016	Ministry of Health. 2016b. Kenya Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Investment Framework. Ministry of Health, Government of Kenya January 31, 2016. <a href="https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf">https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf</a>
7. The Beyond Zero Campaign to improve maternal and child health in Kenya, and to reduce new HIV infections among children	Commitment	National	2013-To date	Beyond Zero. Inspiring Action Changing Lives. <a href="https://www.beyondzero.or.ke">https://www.beyondzero.or.ke</a>
8. Breast Milk Substitutes (Regulation and Control) Act	Legislation	National	2012; 2021	Ministry of Health.. 2021. The Breast Milk Substitutes (Regulation and Control) General Act, Government of Kenya, August 2021 <a href="http://www.parliament.go.ke/sites/default/files/2021-11/The%20Breast%20Milk%20substitutes%20%28Regulation%20and%20Control%29%20%28General%29%20Regulations%2C%202021.pdf">http://www.parliament.go.ke/sites/default/files/2021-11/The%20Breast%20Milk%20substitutes%20%28Regulation%20and%20Control%29%20%28General%29%20Regulations%2C%202021.pdf</a>

At the **global level**, there are three commitments pointing to high-quality MNCH services for mothers, newborns and children. The first focuses on increased access to oxytocin to stave off postpartum hemorrhage during childbirth, and dignity of care in health facilities as reported under EPMM. The second addresses an increase in the national routine immunization coverage of infant and the focus in on surviving infants who receive 2 WHO-recommended vaccines. The goal is to increase the national routine immunization coverage of infants - expressed as the percentage of surviving infants, children under the age of 12 months, who receive two WHO-recommended vaccines (3rd dose of DTP and 1st dose of measles) - to 100. This is calculated as the minimum value between the percentage of infants who have received the 3rd dose of DTP and the percentage who have received the 1st dose of measles.

The third global commitment, as outlined in the Sustainable Development Report,<sup>9</sup> seeks to increase the percentage of women attended by skilled trained providers. The GoK seeks to increase the percentage of births attended by personnel trained to give the necessary supervision, care, and advice to women during pregnancy, labor, and the postpartum period, to conduct deliveries on their own, and to care for newborns to 100.

As shown in **Table 1**, four commitments and one legislation are reported at the **national level**, the GoK commits to reducing maternal, perinatal and neonatal morbidity and mortality, as well as reducing the HIV and AIDS burden and eliminating mother to child transmission (eMTCT) of HIV. Kenya's RMNCAH investment framework envisions a Kenya where there are no preventable deaths of women, newborns or children, and no preventable stillbirths; where every pregnancy is wanted, every birth is celebrated and accounted for and where women, babies, children, and adolescents are free of HIV/AIDS, survive, thrive and reach their full social and economic potential.

There is also the Beyond Zero Campaign that was launched on 24th January 2014, by Her Excellency Margaret Kenyatta, as its founder and patron. It emanated from the commitment that H.E Margaret Kenyatta made during the Organization of African First Ladies against HIV/AIDS Conference (OAFLA conference). In their recommendations, the 17th Assembly of the African First Ladies committed to:<sup>10</sup>

1. Stop HIV infection and reduce vulnerability among young women and adolescent girls
2. Continue to advocate for increased investment in the health system
3. Accelerate advocacy for enhanced health education
4. Support youth and civil society in policy and program initiatives that promote young women's well-being as leaders and agents of social change in collaboration with the African Union Commission (AUC) and national governments
5. Ensure the launch of the campaign to End Child Marriage in all their countries

---

<sup>9</sup>Sustainable Development Report <https://dashboards.sdindex.org/profiles/kenya>

<sup>10</sup> Press Release N023/ 27th AU Summit African First Ladies Commit to Make Africa a Continent Free From HIV/AIDS, Maternal and Child Mortality [https://au.int/sites/default/files/pressreleases/31193-pr-pr\\_23\\_-\\_african\\_first\\_ladies\\_commit\\_to\\_make\\_africa\\_a\\_continent\\_free\\_from\\_hiv-aids\\_maternal\\_and\\_child\\_mortality.pdf](https://au.int/sites/default/files/pressreleases/31193-pr-pr_23_-_african_first_ladies_commit_to_make_africa_a_continent_free_from_hiv-aids_maternal_and_child_mortality.pdf)

The original idea of Beyond Zero<sup>11</sup> was conceived in June 2013 when Her Excellency Margaret Kenyatta committed to heighten advocacy efforts aimed at reducing preventable maternal and child deaths, as well as elimination of mother-to-child transmission of HIV and syphilis. The Beyond Zero Campaign's goals are to improve maternal and child health in Kenya and to reduce new HIV infections among children. Beyond Zero advocacy work is informed by its Strategic Frameworks: The Strategic Framework on Engagement for HIV Control and Promotion of Maternal, Newborn and Child Health, 2013-2017; The Strategic Framework for the Engagement of the First Lady in the Promotion of Health Lives and Well-being of Women, Children and Adolescents, 2018-2022 and the Beyond Zero Strategic Plan 2023-2027.

Closely touching on nutrition, Kenya enacted the Breast Milk Substitutes (Regulation and Control) Act in 2012 which provides for appropriate marketing and distribution of breast milk substitutes, and enhances safe and adequate nutrition for children. The GoK conducted a regulatory impact assessment (RIA) of the Act in 2021 to examine the economic, social and environmental costs and benefits of the regulations.

### ***MNCH interventions embedded in Universal Health Coverage (UHC) schemes***

A summary of 5 commitments, 2 policies, and one legislation tied to ***MNCH interventions embedded in Universal Health Coverage (UHC) schemes*** is provided in **Table 2**.

**Table 2: MNCH interventions embedded in Universal Health Coverage (UHC) schemes**

Key WCAH areas	Type	Category	Date	Source
1. Prevention of maternal deaths and morbidities through integrating comprehensive sexual and reproductive health	Commitment	Global	2016	Ministry of Health. 2016b. Kenya Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Investment Framework. Ministry of Health, Government of Kenya January 31, 2016.

<sup>11</sup> Beyond Zero. Inspiring Action Changing Lives. <https://www.beyondzero.or.ke/our-story>

interventions into national Universal Health Coverage (UHC) strategies.				<a href="https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf">https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf</a>
2. To make strategic investments in the health sector	Commitment	Global	2016	Ministry of Health. 2016b. Kenya Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Investment Framework. Ministry of Health, Government of Kenya January 31, 2016. <a href="https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf">https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf</a>
3. Establishment of laws to underpin realization of Universal Health Coverage in Kenya	Legislation	National	2023	Advancing Community Health Services Legislation in Kenya <a href="https://chu4uhc.org/advancing-community-health-services-legislation-in-kenya/">https://chu4uhc.org/advancing-community-health-services-legislation-in-kenya/</a>
4. Establishment of Primary Health Care Networks (PCNs)	Policy	National	2023  2021	Ministry of Health. 2023a. The Primary Health Care Bill, 2023. Special Issue Kenya Gazette Supplement No. 169 (Senate Bills No. 44) <a href="http://kenyalaw.org/kl/fileadmin/pdfdownloads/bills/2023/ThePrimaryHealthCareBill_2023.pdf">http://kenyalaw.org/kl/fileadmin/pdfdownloads/bills/2023/ThePrimaryHealthCareBill_2023.pdf</a>  Ministry of Health. (2021). Ministry of Health Primary Health Care Network Guidelines, Government of Kenya, May 2021 <a href="http://guidelines.health.go.ke:8000/media/PrimaryHealthCareNetworkGuidelines-May2021.pdf">http://guidelines.health.go.ke:8000/media/PrimaryHealthCareNetworkGuidelines-May2021.pdf</a>
5. Universal Health Coverage Policy	Policy	National	2020-2030	Ministry of Health. (2020). Kenya Universal Health Coverage Policy 2020 – 2030, Government of Kenya, December 2020 <a href="http://guidelines.health.go.ke:8000/media/KenyaUniversalHealthCoveragePolicy2020_2030.pdf">http://guidelines.health.go.ke:8000/media/KenyaUniversalHealthCoveragePolicy2020_2030.pdf</a>
6. Linda Mama Programme	Commitment	National	2013-To date	Republic of Kenya (2022). Performance audit report on implementation of the Linda Mama program by the National Health Insurance Fund <a href="https://www.oagkenya.go.ke/wp-content/uploads/2023/10/IMPLEMENTATION-OF-THE-LINDA-MAMA-PROGRAMME-BY-NHIF.pdf">https://www.oagkenya.go.ke/wp-content/uploads/2023/10/IMPLEMENTATION-OF-THE-LINDA-MAMA-PROGRAMME-BY-NHIF.pdf</a>



7. To increase universal health coverage (UHC) index of service coverage	Commitment	National	2020	Ministry of Health. (2020). Kenya Universal Health Coverage Policy 2020 – 2030, Government of Kenya, December 2020 <a href="http://guidelines.health.go.ke:8000/media/Kenya%20Universal%20Health%20Coverage%20Policy%202020-2030.pdf">http://guidelines.health.go.ke:8000/media/Kenya Universal Health Coverage Policy 2020 2030.pdf</a>
8. Reaffirmed commitments to the PMNCH COVID-19 Call to Action and commitment to advance gender equality as a part of the Government's Big Four Agenda, <sup>12</sup> to achieve Universal Health Coverage.	Commitment	National	2020	Republic of Kenya Ministry Of Public Service And Gender PMNCH Call To Action - Commitment to Protect the Progress for Women, Children And Adolescents' Health <a href="https://pmnch.who.int/docs/librariesprovide/r9/meeting-reports/kenya-commitment-covid19.pdf">https://pmnch.who.int/docs/librariesprovide/r9/meeting-reports/kenya-commitment-covid19.pdf</a>

On MNCH interventions embedded in UHC schemes, we report on two **global commitments**. The first focuses on prevention of maternal deaths and morbidities – Including integration of comprehensive sexual and reproductive health interventions into national Universal Health Coverage (UHC) strategies. The second promotes shared prosperity by making strategic investments in the health sector which will contribute to equitable growth and development.

At **national level**, three commitments, two policies, and one legislation are embedded in UHC schemes. In 2023, President Ruto, assented to law four crucial bills to underpin the realization of Universal Health Coverage in Kenya, 2023:

- The Primary Health Care Act
- The Facility Improvement Financing Act
- The Digital Health Act
- The Social Health Insurance Bill

The GoK aims to scale up and improve the delivery of primary health care services through the establishment of Primary Health Care Networks (PCNs) which will effectively result in the implementation of the Kenya Primary Health Care Strategic Framework 2019 - 2024. PCNs are expected to link and strengthen health care services by building on a person-centered approach to health.

<sup>12</sup> The Big Four Agenda was President Uhuru Kenyatta's development blueprint and it comprised of Food Security; Affordable Housing; Manufacturing; and Affordable Healthcare. <https://big4.delivery.go.ke/>



The UHC Policy gives direction towards ensuring improvement in the health status of Kenyans in line with the Constitution of Kenya 2010, Kenya Health Policy 2014-2030, Kenya Vision 2030, regional and global commitments. It demonstrates GoK's commitment to ensuring that the country implements health plans in a manner responsive to the needs of the population. Besides health financing, UHC implies setting up of efficient health service delivery systems, adequate health facilities and human resources, information systems, good governance and enabling legislation. This policy embraces the principles of equity, people centredness, efficiency, social solidarity and a multi-sectoral approach.

The Linda Mama Programme is a government initiative launched in June 2013 by President Uhuru Kenyatta, aiming to alleviate the financial burden on pregnant women. It aimed to provide services based on need rather than the ability to pay, a step towards achieving Universal Health Coverage (UHC) in Kenya. Linda Mama is part of the Kenya Vision 2030 under pillar 5.2 (Republic of Kenya, 2007) and is a program intended to implement commitments to SDG 3.1 that seek to reduce MMR to less than 70/100,000 live births (Republic of Kenya, 2022a).

There is commitment to increase universal health coverage (UHC) index of service coverage. As reported in the Sustainable Development Report,<sup>13</sup> the goal is to increase the coverage of essential health services (defined as the average coverage of essential services based on tracer interventions that include reproductive, maternal, newborn and child health, infectious diseases, non-communicable diseases and service capacity and access, among the general and the most disadvantaged population) to 100%. Lastly, The GoK reaffirmed commitments to the PMNCH COVID-19 Call to Action and commitment to advance gender equality as a part of the Government's Big Four Agenda, to achieve Universal Health Coverage.

### ***Health systems strengthening including MNCH data and accountability***

A summary of two commitments and one policy tied to health systems strengthening including MNCH data and accountability is provided in **Table 3**.

**Table 3: Health systems strengthening including MNCH data and accountability**

Key WCAH areas	Type	Category	Date	Source
----------------	------	----------	------	--------

<sup>13</sup> Sustainable Development Report <https://dashboards.sdindex.org/profiles/kenya>

1. To nurture a health system that is resilient, responsive and accountable to client needs and also capable of leveraging private, FBOs, civil society and community health delivery mechanisms and structures	Commitment	National	2016	Ministry of Health. 2016. Kenya Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Investment Framework. Ministry of Health, Government of Kenya January 31, 2016. <a href="https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf">https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf</a>  GFF. Kenya. <a href="https://www.globalfinancingfacility.org/partner-countries/kenya">https://www.globalfinancingfacility.org/partner-countries/kenya</a>
2. Calling for the widespread use of chlorhexidine for umbilical cord care	Commitment	Global	2016	Ministry of Health. 2016a. A guideline for the use of Chlorhexidine for newborn umbilical cord care in Kenya. Government of Kenya, April 2016. <a href="https://familyhealth.go.ke/wp-content/uploads/2018/02/CHLORHEXIDINE-FOR-NEWBORN-UMBILICAL-CORD-CARE-GUIDELINES.pdf">https://familyhealth.go.ke/wp-content/uploads/2018/02/CHLORHEXIDINE-FOR-NEWBORN-UMBILICAL-CORD-CARE-GUIDELINES.pdf</a>
3. National Nursing and Midwifery Policy 2022-2032	Policy	National	2022-2032	Ministry of Health. 2022a. National Nursing and Midwifery Policy. Towards Excellence in Nursing and Midwifery for All 2022-2032, Government of Kenya, <a href="https://repository.kippira.or.ke/bitstream/handle/123456789/4103/National-Nursing-and-Midwifery-Policy-2022-2032.pdf?sequence=1&amp;isAllowed=y">https://repository.kippira.or.ke/bitstream/handle/123456789/4103/National-Nursing-and-Midwifery-Policy-2022-2032.pdf?sequence=1&amp;isAllowed=y</a>

On the health systems strengthening including MNCH data and accountability, we report on one global and two national level commitments. The **global** commitment calls for the widespread use of chlorhexidine for umbilical cord care to prevent often deadly sepsis infections in newborns, and this is an intervention that PATH and the Kenya Ministry of Health are currently introducing and scaling up in select counties. While lacking a clear actual commitment, the first **national** policy document seeks to nurture a health system that is resilient, responsive and accountable to client needs and also capable of leveraging private, faith based organizations (FBOs), civil society, and community health delivery mechanisms and structures. The second refers to the National Nursing and Midwifery Policy 2022-2032 which discusses the importance of nursing and midwifery in Kenya, as they form approximately 70% of the health workforce and are responsible for over 80% of health indicators at all levels of the health system. The policy provides a framework for strengthening the nursing and midwifery profession and practice including education, workforce management, regulation, leadership and governance, financing, research and

innovation, and provision of quality services. It also enables the implementation of Kenya's international commitments including the Sustainable Development Goals (SDGs), the World Health Assembly (WHA) resolutions, and the WHO's global strategic directions for strengthening nursing and midwifery 2021-2025.

### ***Inter-sectoral approaches for MNCH across the life-course***

A summary of two commitments and one legislation tied to inter-sectoral approaches for MNCH across the life-course is provided in **Table 4**.

**Table 4. Inter-sectoral approaches for MNCH across the life-course**

Key WCAH areas	Type	Category	Date	Source
1. Prevention of maternal deaths and morbidities through integrating comprehensive sexual and reproductive health interventions into national and county strategies	Commitment	National	2022	Ministry of Health. (2022). The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022 <a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022 - 2032.pdf</a>
			2015	Population Reference Bureau. 2015. Connecting Paths: Integrating Reproductive Health and HIV Services in Kenya. <a href="https://www.prb.org/wp-content/uploads/2015/06/engage-kenya-rh-hiv-handout.pdf">https://www.prb.org/wp-content/uploads/2015/06/engage-kenya-rh-hiv-handout.pdf</a>
			2024	UNFPA.2024. Maternal Health and HIV. Kenya <a href="https://kenya.unfpa.org/en/topics/maternal-health-and-hiv">https://kenya.unfpa.org/en/topics/maternal-health-and-hiv</a>
			2024	UNFPA. 2024. Sexual & Reproductive Health. Kenya <a href="https://kenya.unfpa.org/en/topics/sexual-reproductive-health-4">https://kenya.unfpa.org/en/topics/sexual-reproductive-health-4</a>
2. Ensure country and county leadership and ownership that will	Commitment	National	2016	Ministry of Health. 2016. Kenya Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH)

provide appropriate stewardship of RMNCAH implementation plans			2017	Investment Framework. Ministry of Health, Government of Kenya January 31, 2016. <a href="https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf">https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf</a>  UNFPA. 2017. United Nations Joint Programme on Reproductive, Maternal, Newborn, Child, and Adolescent Health. 2016–2020. Reducing Preventable Maternal, Newborn, and Child Deaths in Ten High-Burden Counties in Kenya <a href="https://kenya.unfpa.org/sites/default/files/pub-pdf/RMNCAH%20JP%20Prod%200.pdf">https://kenya.unfpa.org/sites/default/files/pub-pdf/RMNCAH%20JP%20Prod%200.pdf</a>
3. Kenya National Nutrition Action Plan (KNAP) 2018 - 2022	Legislation	National	2018-2022	Ministry of Health. (2018). Kenya National Nutrition Action Plan (KNAP) 2018 – 2022. Government of Kenya, 2018 <a href="https://scalingupnutrition.org/wp-content/uploads/2020/10/Kenya-National-Nutrition-Action-Plan-2018-22.pdf">https://scalingupnutrition.org/wp-content/uploads/2020/10/Kenya-National-Nutrition-Action-Plan-2018-22.pdf</a>

On inter-sectoral approaches for MNCH across the life course, two **national level** commitments and one legislation are noted. The first commitment focuses on the prevention of maternal deaths and morbidities, including integrating comprehensive sexual and reproductive health interventions into national and county strategies. The second commitment is on ensuring country and county leadership and ownership and stewardship that is based on the national health sector strategies and county RMNCAH implementation plans integrated with the planning and budgeting processes, and cycles. Lastly, the Kenya National Nutrition Action Plan (KNAP) 2018 – 2022 is the second National Nutrition Action Plan that operationalizes the National Food and Nutrition Security Policy 2012 and its implementation framework (NFNSP-IF) 2017–2022. The plan is anchored on existing Country level policy and legal frameworks as well as other global and regional frameworks including: 1. The African Regional Nutrition Strategy (ARNS) 2015–2025, 2. AU Policy Framework Plan of Action on Ageing (2002), 3. World Health Assembly (WHA) 2025 nutrition targets, and 4. The Sustainable Development Goals (SDGs). The KNAP framework shows the investment required for Kenya to address malnutrition and it provides an umbrella framework and guidance to counties, who will in turn develop aligned County Nutrition Action Plans (CNAPs).

## Sexual and reproductive health and rights

The GoK has made several commitments related to the five sub-topics under SRHR. In **Annex 2** we provide 17 key commitments.

### *Access and choice to effective contraception methods*

A summary of 4 commitments and 2 policies tied to access and choice to effective contraception methods is provided in **Table 5**.

**Table 5. Access and choice to effective contraception methods**

Key WCAH areas	Type	Categor y	Date	Source
1. To increase modern contraceptive prevalence (mCPR) for married women from 58% to 64% by 2030	Commitment	Global	2021	2021. FP2030 Kenya Government Commitment <a href="https://www.fp2030.org/kenya/file:///C:/Users/User/Downloads/Kenya_FP2030Commitment.pdf">https://www.fp2030.org/kenya/file:///C:/Users/User/Downloads/Kenya_FP2030Commitment.pdf</a>
2. To improve the availability and utilization of quality family planning data for decision making	Commitment	Global	2023	FP2030 Sources: <a href="https://www.fp2030.org/kenya/">https://www.fp2030.org/kenya/</a> <a href="https://wordpress.fp2030.org/wp-content/uploads/2023/08/Kenya_FP2030Commitment.pdf">https://wordpress.fp2030.org/wp-content/uploads/2023/08/Kenya_FP2030Commitment.pdf</a> . Published 2023
3. To reduce unmet family planning needs	Commitment	National	2022-2032  2021	Ministry of Health. 2022a. The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022. <a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf</a>  2021. FP2030 Kenya Government Commitment <a href="https://www.fp2030.org/kenya/file:///C:/Users/User/Downloads/Kenya_FP2030Commitment.pdf">https://www.fp2030.org/kenya/file:///C:/Users/User/Downloads/Kenya_FP2030Commitment.pdf</a>
4. Mainstreaming special RH-related needs of people with disabilities, the elderly, people in	Policy	National	2022 – 2032	Ministry of Health.2022. The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022.

humanitarian settings and fragile contexts.			2021	<a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The National Reproductive Health Policy 2022 - 2032.pdf</a> 2021. FP2030 Kenya Government Commitment <a href="https://www.fp2030.org/kenya/file:///C:/Users/User/Downloads/Kenya_FP2030Commitment.pdf">https://www.fp2030.org/kenya/file:///C:/Users/User/Downloads/Kenya_FP2030Commitment.pdf</a>
5. To reduce the magnitude of infertility and increase access to management of infertile couples	Commitment	National	2022 - 2032	Ministry of Health.2022. The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022. <a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The National Reproductive Health Policy 2022 - 2032.pdf</a>
6. Promote a robust RH implementation environment	Policy	National	2022 - 2032	Ministry of Health. 2022. The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022. <a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The National Reproductive Health Policy 2022 - 2032.pdf</a>

On access and choice of effective contraception methods, there are four commitments and two policies. Two of the commitments are at the **global** level. The first focuses on increasing modern contraceptive prevalence (mCPR) for married women from 58% to 64% by 2030. The second seeks to improve availability and utilization of quality family planning data for decision making.

At the **national level**, four commitments are noted with two of them embedded in policies in The National Reproductive Health Policy 2022 - 2032 (Ministry of Health (2022)). The GoK aims to reduce unmet family planning needs. It also commits to mainstream special RH-related needs of people with disabilities, the elderly, people in humanitarian settings and fragile contexts. It commits to reducing the magnitude of infertility and increase access to management of infertility. Lastly, the GoK promotes robust RH implementation environment especially data systems, research for development, innovation, collaborations, human resources for RH and RH partnerships.

### ***Access to safe and legal abortion services***

A summary of two commitments tied to access to safe and legal abortion services is provided in **Table 6**.

**Table 6. Access to safe and legal abortion services**

Key WCAH areas	Type	Category	Date	Source
1. To address basic humanitarian needs in crises	Commitment	Global	2019	2019. ICPD Nairobi Commitments. Commitment Title: Western HIV/AIDS Network will implement SRHR -Program to save women and girls lives.13 November 2019. <a href="https://www.nairobisummiticpd.org/commitments">https://www.nairobisummiticpd.org/commitments</a>
2. Ratification of the Maputo Protocol	Commitment	Regional	2023  2016 - 2030	Taking stock: Maputo Protocol in Advancing Women's Rights November 16, 2023, The African Population and Health Research Center (APHRC). <a href="https://aphrc.org/blogarticle/taking-stock-maputo-protocol-in-advancing-womens-rights/">https://aphrc.org/blogarticle/taking-stock-maputo-protocol-in-advancing-womens-rights/</a>  Maputo Plan Of Action 2016 - 2030 <a href="https://au.int/sites/default/files/documents/24099-poa_5-revised_clean.pdf">https://au.int/sites/default/files/documents/24099-poa_5-revised_clean.pdf</a>

On access to safe and legal abortion services, we report one regional and one national commitment. At a **regional level**, Kenya ratified the Maputo Protocol but has made reservations about Article 14 2 © of the Protocol, which allows access to abortion services in cases of sexual violence. The Maputo Protocol guarantees African women and girls' equality and non-discrimination and covers various civil, political, economic, social and cultural rights.

At the **national level**, the GoK is committed to addressing basic humanitarian needs in crises. This involves ensuring access to comprehensive sexual and reproductive health information, education, and services, including safe abortion services where legal, and post-abortion care, especially for girls and women in humanitarian and environmental crises, and post-crisis contexts as committed under XXXX.

## ***Prevention and treatment/referrals for sexual and gender-based violence***

A summary of 3 commitments and 2 policies tied to access to prevention and treatment/referrals for SGBV is provided in **Table 7**.

**Table 7. Prevention and treatment/referrals for sexual and gender-based violence**

Key WCAH areas	Type	Categor y	Date	Source
1. To address SGBV and harmful practices	Commitment	Global	2019	2019. ICPD Nairobi Commitments. 13 November 2019. <a href="https://www.nairobisummiticpd.org/commitments">https://www.nairobisummiticpd.org/commitments</a>
2. Kenya is co-leading the Gender-Based Violence Action Coalition and commits to ending all forms of GBV and FGM and accelerating action at the national and global levels	Commitment	Global	2021	<a href="https://www.icrw.org/wp-content/uploads/2021/06/GEF_Kenya_GBV_summary-05.21-web.pdf">https://www.icrw.org/wp-content/uploads/2021/06/GEF_Kenya_GBV_summary-05.21-web.pdf</a>
3. National policy on the prevention, response and protection from unlawful sexual acts, and the administration of justice in sexual offenses matters	Policy	National	2021	Ministry of Health. 2021. National Policy on the Prevention, Response and Protection from Unlawful Sexual Acts, and the Administration of Justice in Sexual Offenses Matters, Government of Kenya, 2021 <a href="https://statelaw.go.ke/wp-content/uploads/2021/12/Sexual-Offences-Policy-2021.pdf">https://statelaw.go.ke/wp-content/uploads/2021/12/Sexual-Offences-Policy-2021.pdf</a>
4. National Policy for prevention and response to gender-based violence	Policy	National	2014	Ministry of Health. 2014. National Policy for Prevention and Response to Gender Based Violence, Government of Kenya, November 2014 <a href="https://psyg.go.ke/docs/National%20Policy%20on%20prevention%20and%20Response%20to%20Gender%20Based%20Violence.pdf">https://psyg.go.ke/docs/National%20Policy%20on%20prevention%20and%20Response%20to%20Gender%20Based%20Violence.pdf</a>



5. To invest USD 23 million for GBV prevention and response by 2022 and increase resource allocation up to USD 50 million by 2026	Commitment	National	2022	<a href="https://www.icrw.org/wp-content/uploads/2021/06/GEF_Kenya_GBV_summary-05.21-web.pdf">https://www.icrw.org/wp-content/uploads/2021/06/GEF_Kenya_GBV_summary-05.21-web.pdf</a>
---	------------	----------	------	---

Two global commitments cover the sub topic on prevention and treatment/referrals for sexual and gender-based violence (SGBV). The first **global level** commitment focuses on addressing SGBV and harmful practices including the elimination of child/forced marriages, and female genital mutilation as reported in commitment to 'Eliminate all forms of discrimination against women and girls, as well as gender-based violence.'<sup>14</sup> The second commitment is seen in Kenya's role as co-leading the Gender-Based Violence Action Coalition and committing to ending all forms of GBV and FGM and accelerating action at the national and global levels. Kenya is co-leading the coalition alongside the U.K., Uruguay, and Iceland as member states; the European Union; Ford Foundation; and civil society as well as private sector partners. In 2021, the GoK sought to leverage the Generation Equality platform as an opportunity to recommit to ending all forms of GBV and FGM, and accelerate action at the national and global levels by:

1. Implementing President Uhuru Kenyatta's commitment to end Female Genital Mutilation in Kenya
2. Responding to the escalation of GBV cases during the COVID-19 pandemic
3. Strengthening enforcement and implementation of Kenya's legal and policy environment for addressing FGM and GBV and platforms for multi-stakeholder coordination to implement holistic approaches to end all forms GBV and FGM.

At the **national level**, two policies and one commitment have been noted. The national policy on the prevention, response and protection from unlawful sexual acts and the administration of justice in sexual offences matters (2021) states that: A person who intentionally commits rape or an indecent act with another within the view of a family member, a child or a person with mental disabilities is guilty of an offence and is liable upon conviction to imprisonment for a term which shall not be less than ten years.

Secondly, the national policy for prevention and response to gender based violence is to accelerate efforts towards the elimination of all forms of GBV in Kenya. It seeks to ensure a coordinated approach in addressing GBV, enhanced enforcement of laws and policies towards GBV prevention and response, increase in access to quality and comprehensive

<sup>14</sup> 2019. ICPD Nairobi Commitments. 13 November 2019. <https://www.naibisummiticpd.org/commitments>

support services across sectors, and improved sustainability of GBV prevention and response interventions. The commitment is to invest USD 23 million for GBV prevention and response by 2022 and increase resource allocation up to USD 50 million by 2026 through a co-financing model. Specifically, the GoK commits to sustain the allocation of USD 2.79 million to GBV and FGM and incrementally work towards a minimum budget allocation of USD 5 million for the subsequent financial year and institute an accountability framework for tracking expenditure.

### ***Prevention, detection, and management of reproductive cancers***

A summary of one commitment and one policy tied to prevention, detection, and management of reproductive cancers, especially cervical cancer is provided in **Table 8**.

**Table 8. Prevention, detection, and management of reproductive cancers**

Key WCAH areas	Type	Category	Date	Source
1. National Cancer Control Strategic Plan 2023-2027	Policy	National	2023-2027	Ministry of Health. 2023c. The National Cancer Control Strategy (2023–2027), Government of Kenya, June 2023. <a href="http://guidelines.health.go.ke:8000/media/NATIONAL_CANCER_CONTROL_STRATEGY_2023-2027_7uTQQP4.pdf">http://guidelines.health.go.ke:8000/media/NATIONAL_CANCER_CONTROL_STRATEGY_2023-2027_7uTQQP4.pdf</a>
2. To reduce morbidity and mortality associated with the common cancers of the reproductive organs in men and women	Commitment	National	2022 - 2032	Ministry of Health. 2022. The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022. <a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf</a>

On prevention, detection and management of reproductive cancers, we note one **national** policy (The National Cancer Control Strategy, 2023–2027), and a national level commitment to reduce morbidity and mortality associated with the common cancers of the reproductive organs in men and women. Indeed, Kenya is a signatory to several global commitments on cancer and they are in alignment with the 2030 Agenda for Sustainable Development Goals. In 2018, The United Nations General Assembly passed a political declaration for

promotion of access to affordable diagnostics, screening, treatment and care, as well as vaccines that lower the risk of cancer. In 2019, another commitment was made to strengthen efforts to address non-communicable diseases and include cancer as part of universal health coverage.

This National Cancer Control Strategic Plan 2023-2027 builds on critical lessons learnt in implementing the second National Cancer Control Strategy 2017-2022. The mission of this strategic plan is to implement a coordinated framework to reduce morbidity and mortality and improve quality of life of patients living with cancer by the year 2028. The ultimate goal is to reduce premature mortality from cancer in Kenya by a third by the same year. This strategic plan is aligned to the Constitution of Kenya which guarantees all Kenyans the right to the highest attainable standards of healthcare and the Bottom-Up Economic Transformation Agenda 2022-2027 with a strategic pivot towards cancer prevention, strengthening primary based healthcare and community health interventions as well as digitalization of cancer services. It operationalizes the Kenya Cancer Policy 2019-2030 and also outlines various guidelines that will need to be formulated by the Ministry for use across the cancer care continuum among other priority actions.

### ***Inclusion of essential packages of SRHR interventions within UHC and PHC schemes***

The last sub topic under SRHR is the inclusion of essential packages of SRHR interventions within UHC and PHC schemes. A summary of one relevant commitment and one legislation is provided in **Table 9**.

**Table 9. Inclusion of essential packages of SRHR interventions within UHC and PHC schemes**

Key WCAH areas	Type	Category	Date	Source
1. Universal Health Coverage (UHC) strategies to enhance access to abortion related services	Commitment	Global	2019	ICPD25 – Nairobi Summit, Kenya Commitments <a href="https://ncpd.go.ke/wp-content/uploads/2022/06/Final-Kenya-Country-Commitments-for-ICPD25-Nairobi-Summit-2019.pdf">https://ncpd.go.ke/wp-content/uploads/2022/06/Final-Kenya-Country-Commitments-for-ICPD25-Nairobi-Summit-2019.pdf</a>
2. The Kenya AIDS Strategic Framework (KASF) 2014-2019	Legislation	National	2015	Kenya AIDS Strategic Framework (KASF) II 2020/21-2024/25

				<a href="https://nsdcc.go.ke/kenya-aids-strategic-framework-kasf-ii/">https://nsdcc.go.ke/kenya-aids-strategic-framework-kasf-ii/</a>
--	--	--	--	---

One **global level** commitment is noted and it addresses UHC strategies to enhance access to safe legally approved abortion, measures to prevent unsafe abortions, and provision of post-abortion care.

At **national level**, the Kenya AIDS Strategic Framework (KASF) 2014-2019 succeeds the Kenya National Aids Strategic Plan (KNASP) III that came to an end in June 2014. KASF is aligned with international, regional and national obligations, commitments and targets that are related to HIV and AIDS. The framework addresses the drivers of the HIV epidemic and builds on achievements of the previous country's strategic plans to achieve its goal of contributing to the country's Vision 2030 through universal access to comprehensive HIV prevention, treatment and care.

## Adolescent health and well-being

The GoK is committed to addressing issues affecting adolescents. At the national level, adolescent SRH issues are addressed within various legislative and policy frameworks. In this assessment, there are four subtopics under **AHWB** and we report 15 associated commitments

### ***National policy and programs for adolescent well-being (10-19 years) offering information and services in the public sector***

A summary of 2 commitments, 1 policy, and 2 legislations tied to programs for adolescent well-being (10-19 years) offering information and services in the public sector is provided in **Table 10**.

**Table 10. National policy and programs for adolescent well-being (10-19 years) offering information and services in the public sector**

Key WCAH areas	Type	Category	Date	Source
----------------	------	----------	------	--------

1. National Guidelines for Provision Of Adolescent Youth-Friendly Services in Kenya	Legislation	Global	2016	Ministry of Health. 2016c. <u>National Guidelines for Provision of Adolescent and Youth-Friendly Services in Kenya, Second Edition, Government of Kenya 2016</u> <a href="https://faces.ucsf.edu/sites/g/files/tkssra4711/f/YouthGuidelines2016.pdf">https://faces.ucsf.edu/sites/g/files/tkssra4711/f/YouthGuidelines2016.pdf</a>
2. To eliminate legal, policy, and programmatic barriers that impede youth participation in decision-making, planning, and implementation of development activities at all levels by 2030	Commitment	National	2019	ICPD25 – Nairobi Summit, Kenya Commitments <a href="https://ncpd.go.ke/wp-content/uploads/2022/06/Final-Kenya-Country-Commitments-for-ICPD25-Nairobi-Summit-2019.pdf">https://ncpd.go.ke/wp-content/uploads/2022/06/Final-Kenya-Country-Commitments-for-ICPD25-Nairobi-Summit-2019.pdf</a>
3. To improve reproductive health outcomes among adolescents and young people	Commitment	National	2022 - 2032	Ministry of Health. 2022. The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022. <a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf</a>
4. The Education Sector Policy on HIV and AIDS, 2013	Legislation	National	2013	Republic of Kenya. 2013. Education Sector Policy on HIV and AIDS, Ministry of Education Science and Technology, Government of Kenya, 2013 <a href="https://www.medbox.org/pdf/5e148832db60a2044c2d4486">https://www.medbox.org/pdf/5e148832db60a2044c2d4486</a>
5. The Newborn, Child and Adolescent Health Policy	Policy	National	2018	<a href="https://platform.who.int/docs/default-source/mca-documents/policy-documents/policy/ken-ad-17-03-policy-2018-eng-ncah-policy.pdf">https://platform.who.int/docs/default-source/mca-documents/policy-documents/policy/ken-ad-17-03-policy-2018-eng-ncah-policy.pdf</a>

On the **global level**, the ICPD 1994 plan of action urged governments to make reproductive health services available, accessible, acceptable and affordable to young people. The national guidelines for provision of adolescent youth-friendly services (YFS) in Kenya guidelines outline the minimum essential service package that should be available to young people and describe how the services should be made available and accessible to them. The GoK intends to ensure the provision of adolescent-friendly reproductive health, information, and services at all levels of health care.

At the **national** level, the first commitment under Kenya commitments from the Nairobi Summit on ICPD25 focuses on eliminating legal, policy and programmatic barriers that impede youth participation in decision-making, planning and implementation of development activities at all levels by 2030. The second is a commitment to improving reproductive health outcomes among adolescents and young people in the period 2022 – 2032. The third policy – the Newborn, Child and Adolescent Health Policy – is aligned with the newborn, child and adolescent targets of the SDG Goal: 3 “Ensure Healthy Lives and Promote Wellbeing for all at all ages.” This policy has six objectives and it aims to:

- Reduce newborn, child and adolescent morbidity and mortality due to preventable communicable diseases,
- Reduce newborn, child and adolescent morbidity and mortality due to non-communicable diseases and conditions,
- Promote access to quality and comprehensive early childhood development interventions for all children especially in the first 1000 days of life,
- Promote interventions to end all forms of malnutrition, and address the nutritional needs amongst newborns, children and adolescents,
- Promote universal access to adolescent responsive health care services Policy,
- Create an enabling environment for provision of quality newborn, child and adolescent health services.

The legislative effort captures the Education Sector Policy on HIV and AIDS, 2013 which provides a framework for prevention, treatment, care, and support as well as the management of response within the education sector at all levels.

***National standards for the delivery of AHWB information and services to adolescents, including on user fee exemption***

**Table 11** provides a summary of one commitment, one policy, and one legislation tied to national standards for the delivery of AHWB information and services to adolescents.

**Table 11. National standards for the delivery of AHWB information and services to adolescents**

Key WCAH areas	Type	Category	Date	Source
----------------	------	----------	------	--------

1. Establishment of a National Coordination Mechanism for Demographic Dividend	Commitment	National	2019	ICPD25 – Nairobi Summit, Kenya Commitments <a href="https://ncpd.go.ke/wp-content/uploads/2022/06/Final-Kenya-Country-Commitments-for-ICPD25-Nairobi-Summit-2019.pdf">https://ncpd.go.ke/wp-content/uploads/2022/06/Final-Kenya-Country-Commitments-for-ICPD25-Nairobi-Summit-2019.pdf</a>
2. National Plan of Action for Addressing Adolescent Health Teenage Pregnancy in Kenya	Legislation	National	2021	Ministry of Health. 2021. National Plan of Action for Addressing Adolescent Health Teenage Pregnancy in Kenya, Government of Kenya, September 2021. <a href="https://drive.google.com/file/d/1LgftjWEMtT-AyZOwI-VI9XrF7DA5A6i/view">https://drive.google.com/file/d/1LgftjWEMtT-AyZOwI-VI9XrF7DA5A6i/view</a>
3. National Adolescent Sexual and Reproductive Health Policy	Policy	National	2015	Ministry of Health. (2015). National Adolescent Sexual and Reproductive Health Policy, Government of Kenya, 2015. <a href="https://tciurbanhealth.org/wp-content/uploads/2018/03/Ministry-of-Health-ASRH-POLICY-2015.pdf">https://tciurbanhealth.org/wp-content/uploads/2018/03/Ministry-of-Health-ASRH-POLICY-2015.pdf</a>

The GoK has committed to harness the demographic dividend through investments in health and citizens wellbeing, education and skills training, employment creation and entrepreneurship, and rights, governance, and empowerment of young people by 2022 as outlined in the Kenya's Demographic Dividend Roadmap. This includes the establishment of a National Coordination Mechanism for Demographic Dividend by 2020.

The National Plan of Action (NPA) on Adolescents and Teenage Pregnancy was first developed in 2019. The COVID-19 challenges that may have aggravated the issue of teenage pregnancy in Kenya and ICDP25 commitments necessitated revision of the NPA to incorporate new programmes towards teenage pregnancy prevention. The NPA contains comprehensive action points, a costed implementation plan, and describes the processes and investments that go into addressing adolescent health.

Thirdly, the National Adolescent Sexual and Reproductive Health Policy (2105) aims to enhance SRH status of adolescents in Kenya and contribute towards realization of their full potential in national development. The policy intends to bring adolescent sexual and

reproductive health and rights issues into the country's mainstream health and development agenda.

***Legal systems to protect the rights of adolescents (both female and male) with a specific focus on minimum age of consent***

A summary of two commitments and three legislation tied to legal systems to protect the rights of adolescents (both female and male) with a specific focus on the minimum age of consent is provided in **Table 12**.

**Table 12. Legal systems to protect the rights of adolescents with a specific focus on minimum age of consent**

Key WCAH areas	Type	Category	Date	Source
1. To facilitate access to information and services for adolescents and youth	Commitment	Global	2020	Republic of Kenya. 2022. National Treasury And Planning State Department for Planning. Second Voluntary National Review Report On the Implementation of The Sustainable Development Goals. June 2022. <a href="https://gender.go.ke/wp-content/uploads/2022/06/SDG-2020 VNR Final Kenya .pdf">https://gender.go.ke/wp-content/uploads/2022/06/SDG-2020 VNR Final Kenya .pdf</a>
2. Marriage Act 2014	Legislation	National	2014	The Marriage Act, 2014. Special Issue, Kenya Gazette Supplement No. 62 (Acts No. 4) <a href="http://kenyalaw.org/kl/fileadmin/pdfdownloads/Acts/TheMarriage Act2014.pdf">http://kenyalaw.org/kl/fileadmin/pdfdownloads/Acts/TheMarriage Act2014.pdf</a>
3. Setting the age of consent (above 18 years) and education efforts to keep girls in school	Legislation	National	2015	Ministry of Health. 2015. National Adolescent Sexual and Reproductive Health Policy, Government of Kenya, 2015.



				<a href="https://tciurbanhealth.org/wp-content/uploads/2018/03/Ministry-of-Health-ASRH-POLICY-2015.pdf">https://tciurbanhealth.org/wp-content/uploads/2018/03/Ministry-of-Health-ASRH-POLICY-2015.pdf</a>
4. Guidelines for Conducting Adolescent HIV Sexual and Reproductive Health Research in Kenya	Legislation	National	2016	Ministry of Health. 2015. Guidelines for Conducting Adolescent HIV Sexual and Reproductive Health Research in Kenya, Government of Kenya, May 2015. <a href="https://icop.or.ke/wp-content/uploads/2016/10/Adolescent-s-Guidance-on-HIV-SRH-Research.pdf">https://icop.or.ke/wp-content/uploads/2016/10/Adolescent-s-Guidance-on-HIV-SRH-Research.pdf</a>
5. To promote gender equity, eliminate medicalized FGM and eradicate all forms of gender-based violence and harmful reproductive health practices	Commitment	National	2022 - 2032	Ministry of Health. (2022). The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022. <a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf</a>

At the global the **global level**, there is a commitment to facilitate access to information and services for adolescents and youth. It focuses on comprehensive, age-responsive information and services for adolescents, especially girls. This includes education to help them make informed decisions about their sexuality and reproductive lives, protection from unintended pregnancies, sexual and gender-based violence, harmful practices, and sexually transmitted infections, including HIV/AIDS.

At the **national** level, the GoK policy The National Reproductive Health Policy 2022 – 2032 shows commitment to the promotion of gender equity, the elimination of medicalized FGM, and eradication of all forms of gender-based violence and harmful reproductive health practices.

The GoK has provided clear guidance on the definition of minimum age and age of consent in Kenya. Under the Marriage Act 2014 the minimum legal age of marriage is 18 years with no exceptions. There are educational efforts to keep girls in school and help those who get pregnant in school to go back to and complete secondary education as reported in National Adolescent Sexual and Reproductive Health Policy, Government of Kenya (2015). There is also a practical guidance on conducting research with adolescents in Kenya was developed in 2015 to provide a framework to interpret the ethical and legal regulations for the protection of adolescent (10 - 19 years) participants in research, in light of the unique

legal, ethical and contextual issues that affect adolescents in Kenya. The exclusion of adolescents from research was seen as possibly leading to inadequate understanding of their particular needs and consequently, failure to deliver interventions that reflect and target the needs of this special group.

### ***AHWB is embedded in national policies and plans with dedicated financing for AHWB programs***

The last subtopic under AHWB queries whether AHWB issues are embedded in national policies and plans that include with dedicated financing for programs. **Table 13** provides two relevant legislations.

**Table 13. AHWB is embedded in national policies and plans with dedicated financing**

Key WCAH areas	Type	Category	Date	Source
Establishment of the Joint Interagency Coordinating Committee (JICC) for coordinating resource mobilization and allocation to support in-school adolescent	Legislation	National	2015	Ministry of Health. (2015). National Adolescent Sexual and Reproductive Health Policy, Government of Kenya, 2015. <a href="https://tciurbanhealth.org/wp-content/uploads/2018/03/Ministry-of-Health-ASRH-POLICY-2015.pdf">https://tciurbanhealth.org/wp-content/uploads/2018/03/Ministry-of-Health-ASRH-POLICY-2015.pdf</a>
Improved coordination to respond to and address teenage pregnancy	Legislation	National	2021	Ministry of Health. (2021). Draft Action Plan for Addressing Adolescent Health and Teenage Pregnancy in Kenya, Government of Kenya, May 2021 <a href="https://ncpd.go.ke/wp-content/uploads/2021/10/Draft-Action-Plan-for-Addressing-Adolescent-Health-and-Teenage-Pregnancy-in-Kenya.pdf">https://ncpd.go.ke/wp-content/uploads/2021/10/Draft-Action-Plan-for-Addressing-Adolescent-Health-and-Teenage-Pregnancy-in-Kenya.pdf</a>

We report on two **national** level legislations. Firstly, the Ministry of Health (MoH) seeks to collaborate closely with the Ministry of Education (MoEST) for in-school adolescents who form the largest proportion of adolescents. The Joint Interagency Coordinating Committee (JICC) is held to be the key mechanism for involving other ministries and development partners in coordinating resource mobilization and allocation. The National Treasury is given the role of allocating financial resources for the implementation of the policy and improving fiscal responsibility.

The second legislation embodies the commitment to improve coordination to respond to and address teenage pregnancy. This effort seeks to fulfill the following four goals:

- To adopt a more streamlined and coordinated approach to end teenage pregnancy
- To establish a multi-sectoral mechanism to coordinate teenage pregnancy prevention approaches
- To assign issue-based roles to various actors and avoid fragmented implementation of programs and leveraging resources
- To attain quality integrated adolescent health and elimination of pregnancy among adolescents in Kenya by 2030.

## 3.2 Assessing the quality and progress status of select WCAH commitments

In this section, findings capture the assessment of selected sub-commitments for quality and status of commitment implementation as well as gaps where new and additional commitments are required. See **Annex 3**.

To assess the quality of the commitments, select (seven) subtopics were identified as key areas for commitments to be evaluated. These are WCAH areas that have potential to unlock the most significant WCAH outcomes if fully implemented. They include:

- Linda Mama program
- Quality maternal newborn and child health
- Universal health coverage
- SRHR access
- Adolescent pregnancy
- Gender-Based Violence
- Female genital mutilation

### Linda Mama Program

The Linda Mama Program is scored as very good quality and on moderate progress (**Annex 3**). In 2013, Kenya joined other nations in the abolishment of delivery fees in all public health facilities (Gitobu et al. 2018) as we launched the Linda Mama Program as a national free maternity service program geared at eliminating charges for intra-partum care in public health facilities and providing a package of basic health services to be accessed by all in the targeted population on the basis of need and not ability to pay – a

clear pathway to Universal Health Coverage (Mutungi, 2018). Through this policy, public health facilities are reimbursed for costs incurred while providing delivery services through a capitation fund provided by the MoH and the amounts reimbursed to health facilities are based on their capacity to manage pregnancy and delivery complications (MoH, 2013). In 2017, the Linda Mama was transferred to the National hospital insurance fund (NHIF) to improve access to healthcare and social protection for all Kenyans. NHIF expanded provider network to include public, private and faith based facilities and registration in the program was simplified – including through mobile phones. Noteworthy, from 2017, registration included payment of the 500ksh NHIF fee.

While the Linda Mama provides a package of basic health services accessed by all, the existence of hidden costs, discourages utilization and consequently defeats the program's primary purpose. Initial assessments on implementation of Linda mama project also reveal that resource constraints, lack of skilled workforce, absence of stakeholder involvement, lack of employment commitment and delayed reimbursement of costs have in one way or another contributed to underperformance of Linda Mama project (Wamalwa, 2015). The programs reach is limited due to inadequate community sensitization and distrust and skepticism about the program. Furthermore, many health facilities have various perennial challenges that affect services delivery including few staff, poor hygiene, drug stock outs, and referrals and complications are not well compensated (Abuya, et al., 2018; Chuma et al 2013; Orangi, et al., 2021)

## Quality maternal newborn and child health

The global GFF commitment to increased access to oxytocin to stave off postpartum hemorrhage during childbirth, and dignity of care in health facilities is scored as very good and on track (**Annex 3**). The availability and affordability of oxytocin in Kenya at health facilities meets the WHO benchmark of 80%. Oxytocin is available easily in the public sector and is affordable for it costs less than a day's wages (Kibira et al, 2021). However, more monitoring and evaluation is needed to ensure only properly manufactured products that are free of impurities are in the Kenyan market and that they meet required storage standards (Ammersdorffer et al., 2022).

The global goal to increase the national routine immunization of infants is scored as good quality and experiencing moderate progress (**Annex 3**). The Kenya Expanded Programme for Immunization (KEPI) was established in 1980 to ensure all child diseases are prevented including tuberculosis, pneumonia, diarrhea, polio, measles, diphtheria, whooping cough,

tetanus, hepatitis, meningitis, yellow fever, malaria and cervical cancer. Furthermore, in 2023, Kenya launched the malaria vaccine expansion outreach following a successful pilot that had resulted in substantial reduction in severe malaria attacks, deaths and child hospital admissions.<sup>15</sup> The new Kenya National Immunization Policy Guidelines 2023 shows the national vaccines and immunization program currently provides 14 vaccines and 5 non-EPI vaccines (Hepatitis B, Anti-snake venom, Anti-rabies, Yellow Fever and Typhoid vaccines) through public, private, faith based facilities and NGOs, at no cost. The MoH has updated these guidelines to enhance the implementation of immunization at all levels and ensure uniformity and standardization with the latest knowledge and advancements (MoH, 2023b). Predictors of full immunization have been reported to include among mothers' education level, household wealth quintile place of birth, rural vs, urban location, number of children within the family, advice on future visits for growth monitoring, and opinion on the health immunization services offered (Allan et al., 2021; Maina et al., 2013). Targeted immunization programs are needed to reach under-immunized children and balance out the inequities in childhood immunization coverage.

The global commitment to increase the percentage of women attended by skilled trained providers is scored as good quality, however, it shows insufficient progress (**Annex 3**). There has been increase in access and utilization of skilled birth attendants driven UHC and Linda Mama Program. The proportion births attended by skilled health personnel in 2018 was 70.2 per cent, an increase from 61.8 per cent in 2014. The number of registered births increased by 22.9 per cent from 923,487 in 2017 to 1,135,378 in 2018. Skilled deliveries at a health facility increased from 51 per cent in 2013/14 to 62.1 per cent in 2015/16 before declining to 60.1 per cent in 2017/18 and then increasing to 64.4 per cent in 2018/19 (Republic of Kenya, 2022a). As of 2022 estimated annual births, at least 5,000 women and girls were dying due to complications of pregnancy or birth. These deaths are attributed to many factors including a shortage of skilled and motivated staff, poor infrastructure, service users' sociocultural beliefs, and poor attitude among providers (Lusambili et al, 2020).<sup>16</sup> Attending to these challenges ought to increase the percentage of women attended by skilled trained providers.

The global commitment on the widespread use of chlorhexidine for umbilical cord care is scored as very good quality and on track (**Annex 3**). Chlorhexidine digluconate 7.1 % w/w

<sup>15</sup> WHO. Regional Office for Africa. Kenya celebrates immunization as more children are reached with RTS,S 23 April 2023. <https://www.afro.who.int/countries/kenya/news/kenya-celebrates-immunization-more-children-are-reached-rtss>

<sup>16</sup> UNFPA. Kenya needs greater investments in midwifery for life-saving maternity care. 7 May 2021 <https://kenya.unfpa.org/en/news/kenya-needs-greater-investments-midwifery-life-saving-maternity-care>

(CHX; equivalent to 4 % w/w chlorhexidine) is a UN recognized life-saving commodity for newborn cord care and is included on WHO and Kenyan Essential Medicines Lists (Brown et al., 2021; MoH, 2018). Recent estimated healthcare cost savings and benefits provide compelling evidence to encourage expanded implementation of CHX for umbilical cord care in Kenya. Indeed, the evidence estimates that, over 1 year, ~ 23,000 omphalitis cases per 500,000 births could be avoided through CHX application circumventing ~ 13,000 outpatient visits, ~ 43,000 bed days and preserving ~ 114,000 workdays. CHX was associated with annual direct cost savings of ~ 590,000 US dollars (USD), increasing to ~ 2.5 million USD after including indirect costs (Brown et al., 2021). The Kenyan 'guideline for the use of chlorhexidine for newborn umbilical cord care in Kenya' (MoH, 2018) continues to provide guidance on application of chlorhexidine at health facilities and at home. It provides step-by-step instructions for the application of chlorhexidine to the umbilical cord immediately after delivery and in the immediate postnatal period. The guideline highlights the high contribution of newborn infections to newborn mortality and provides a brief overview of the evidence supporting the use of chlorhexidine as an effective intervention for the reduction of newborn deaths. The MoH includes chlorhexidine in the Kenya Essential Medicines List and the guideline is accompanied by simplified job aids providing step-by-step instructions for its application.

The national level Beyond Zero Campaign is as scored having good quality and experiencing insufficient progress (**Annex 3**). The GoK has committed to providing free maternity services and in 2014, Kenya's First Lady launched the "Beyond Zero" campaign to mobilize additional resources from the MoH, inter-agency groups, and development partners towards a joint effort aimed at ending preventable child and maternal deaths.<sup>17</sup> By 2017, Beyond Zero had donated a minimum of one mobile clinic to each of the 47 counties in Kenya, thus also reaching far flung isolated nomadic communities with diverse services such as antenatal care, immunization, cervical cancer screening, minor surgery, and the treatment of minor illnesses.<sup>18</sup> The campaign has contributed to reduction of HIV infections among children, decreased maternal deaths, and increase skilled delivery. By 2022, great impacts were noted as 1,246,633 people had received primary health services through the mobile clinic outreaches, over 45,000 households had been reached with free health services through the Medical Safaris, over 200 partners had been successfully mobilized to support the program. However, maternal mortality ratio remains high at 355

<sup>17</sup> ACTING ON THE CALL: Ending Preventable Child and Maternal Deaths Report June 2015  
<https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf>

<sup>18</sup> HOW MOBILE CLINICS ARE INCREASING ACCESS TO HEALTH CARE. The Beyond Zero Campaign in Kenya  
<https://borgenproject.org/tag/the-beyond-zero-campaign-in-kenya/>

deaths per 100,000 live births<sup>19</sup> and many of the Beyond Zero clinics are now grounded in the 47 Kenyan counties.<sup>20</sup>

## Universal health coverage (UHC)

UHC aims at ensuring promotive, preventive, curative, rehabilitative and palliative health services reach all Kenyans. Four of the UHC related commitments are reported to be of very good quality and on track (**Annex 3**):

- 1) To promote shared prosperity by making strategic investments in the health sector which will contribute to equitable growth and development
- 2) Establishment of laws to underpin realization of UHC in Kenya
- 3) Establishment of Primary Health Care Networks (PCNs)
- 4) UHC Policy

The national commitment to promote shared prosperity by making strategic investments in the health sector which will contribute to equitable growth and development is scored as very good quality and on track (**Annex 3**).

Technical assistance has been provided in several areas that strengthen the health system including (MoH, 2016b):

- Capacity building among national and county governments by standardizing counties' planning and budgeting processes, which were highly fragmented
- Supply-chain management in 5 counties
- Coordinating stakeholders in 22 counties
- RMNCAH-focused monitoring and evaluation in 8 counties
- Mapping and tracking resources to ensure that all health investments (on-budget, off-budget, and in-kind) are reflected in the health sector's annual work plan and that resources are linked with planning and reporting processes.

On September 16th, 2023, the MoH kicked off Master Trainers of Trainers training (ToTs) towards scaling up of Primary Health Care Networks (PCNs).<sup>21</sup> The Government intends to establish 315 PCNs across the country to accelerate UHC. The implementation is on track.

<sup>19</sup> UNFPA. Maternal Health and HIV. <https://kenya.unfpa.org/en/topics/maternal-health-and-hiv>

<sup>20</sup> 'Beyond Zero' clinics: How multi-million shilling initiative flopped. Nation Media Group. Tuesday, May 10, 2022 <https://nation.africa/kenya/health/-beyond-zero-clinics-how-multi-million-shilling-initiative-flopped-3809518>

<sup>21</sup> Capacity Building Towards Scaling Up Primary Care Networks. MOH NEWS/ SAT, 09/16/2023. <https://www.health.go.ke/capacity-building-towards-scaling-primary-care-networks>



The commitment to prevent maternal deaths and morbidities through integrating comprehensive sexual and reproductive health interventions into national UHC strategies is scored as poor in quality and showing insufficient progress. In Kenya, antenatal coverage has improved over the years with statistics indicating that the number of pregnant women who attended at least one ANC visit increased from 44.3 per cent in 2011 to 66.6 per cent in 2019. The number of pregnant women who had attended at least four antenatal visits increased from 33.7 per cent in 2011 to 50.4 per cent in 2019. However, maternal mortality is still high at 362 persons per 100,000 population according to 2014 figures (Republic of Kenya, 2020). Furthermore, Kenya withdrew from the Eastern and Southern Africa Ministerial Commitment (ESA Commitment) in May 2023, and consequently raised a barrier to Comprehensive Sexuality Education (CSE).<sup>22</sup>

The UHC strategies to facilitate access to legally approved safe abortion, measures to prevent unsafe abortions, and provision of post-abortion care is scored as being of poor quality and showing insufficient progress. As noted by Owino and colleagues (2020), while the Kenyan Constitution alludes to reproductive health and rights, including guaranteeing the right to non-discrimination and liberalizing access to safe abortion, the UHC fails to apply the Constitution within the lens of sexual and reproductive health (SRH). Consequently, restriction of access to safe and legal abortion persist, yet women have access to post-abortion care after an incomplete abortion. Moreover, family planning commodities are not always available nor readily included in essential benefits packages. Thus, although UHC provides a good opportunity for realization of universal access to SRHR, its implementation has fallen short due to its limited focus on safe motherhood and newborn health (Owino et al., 2020).

## SRHR access

The commitment to increase mCPR for married women from 58% to 64% by 2030 is evaluated as of poor quality and making insufficient progress. The commitment to improve availability and utilization of quality FP data for decision-making is good but also showing insufficient progress as the foregoing SRHR commitment. Kenya is known for blazing the trail for nationwide family planning programs in sub-Saharan Africa. However, Kenya is highly populated with a population of more than 52 million. The vision of FP2030 aims to

---

<sup>22</sup> Alarm as Kenya pulls out of regional accord on teen sex education. Nation Media Group. Wednesday, May 17, 2023  
<https://nation.africa/kenya/health/alarm-as-kenya-pulls-out-of-regional-accord-on-teen-sex-education-4237324?s=03>



'reap the socio-economic benefits to all citizens through accessible, acceptable, equitable and affordable quality family planning services with zero unmet need for family planning by 2030' and targeted programming and resource allocation is needed to ensure this becomes a reality.<sup>23</sup> This is because Kenya has increased access to family planning services, nevertheless, gaps remain large and supply and demand side factors contributing to this trend require attention. Demand generation requires thoughtful targeted interventions for there is evidence that women's education level, marital status, husbands' education, marital status, and rural or urban location have implications for family planning service utilization (Kamuyango et al. 2020). Thoughtful planning on the supply side will ensure equitable access to FP information and services especially in marginalized areas and also include populations in humanitarian/emergency situations. It will also address stock outs and ensure continuity of service provision.<sup>24</sup>

## Adolescent pregnancy

The Marriage Act (2014) and setting of the age of consent (above 18 years) are both evaluated as very good and on track (**Annex 3**). The commitments to facilitate access to information and services for adolescents and youth, and education efforts to keep girls in school were scored as average in quality and as showing moderate progress. Educational interventions for girls must be emphasized because poverty and a lack of education have been associated with higher rates of adolescent pregnancy in Kenya.<sup>25</sup>

Kenya's 2023 withdrawal from the ESA Commitment raises a barrier to Comprehensive Sexuality Education (CSE) to teenagers.<sup>26</sup> This implies Kenyan teenagers will have decreased access to quality comprehensive sexuality education and a reduction of information relevant to reducing early and unintended pregnancies. The commitment to establish a Joint Interagency Coordinating Committee (JICC) for coordinating resource mobilization and allocation to support in-school adolescent is of good quality, however, there is no publicly available data at the moment available to evaluate JICC progress.

The commitment towards improved coordination to respond to and address teenage pregnancy is rated as good quality and showing moderate progress (**Annex 3**). Teenage pregnancy rates declined to 15% in 2022, from 18% in 2014 with the highest rates being

<sup>23</sup> <https://www.fp2030.org/kenya/>

<sup>24</sup> Ibid

<sup>25</sup> UNFPA. 2023. Kenya Demographic and Health Survey 2022 key indicators report shows drop in FGM, teen pregnancy rates <https://kenya.unfpa.org/en/news/kenya-demographic-and-health-survey-2022-key-indicators-report-shows-drop-fgm-teen-pregnancy>

<sup>26</sup> Alarm as Kenya pulls out of regional accord on teen sex education. Nation Media Group. Wednesday, May 17, 2023 <https://nation.africa/kenya/health/alarm-as-kenya-pulls-out-of-regional-accord-on-teen-sex-education-4237324?s=03>

recorded in Samburu (50%), West Pokot (36%), Marsabit (29%), and Narok (28%) counties.<sup>27</sup> As reported by FP2030,<sup>28</sup> four Kenyan counties (Kisii, Kakamega, Homa Bay, and Narok) have - for the first time - established a multi-agency government task force to address their high teenage pregnancy rates and by June 2019, their action plans had been officially approved for implementation. Moreover, all four counties now intentionally collect more data on teenage pregnancy and use it to inform their action plans. In addition, in an effort towards improved response to address teenage pregnancy, the first ladies from the four counties developed their own county-specific advocacy objectives on prevention of teenage pregnancy.

## Gender-based violence including female genital mutilation

The commitment to address sexual and GBV and harmful practices (including striving to eliminate child, early and forced marriages, and FGM) was seen as good in quality and on track (**Annex 3**). Nonetheless, reports on femicide show a need for more concerted efforts because 500 women and girls have been murdered in Kenya since 2016<sup>29</sup> and the rate for medicalization of FGM in Kenya is at 15% and this threatens the efforts aimed at the elimination of FGM (UNICEF, 2021).

The GoK has committed to ending GBV by 2026 as part of its global co-leadership of Generation Equality's Action Coalition, and Kenya has many legal provisions which if effectively enforced could significantly reduce GBV. They include Article 23 of the Constitution of Kenya, National Gender and Equality Commission Act no 15 of 2011 section 8, the prohibition of FGM Act 2011, Matrimonial Property Act 2013 and Marriage Act 2014 and the Prevention against Domestic Violence Act, 2015 (Republic of Kenya, 2020). There are also relevant policies in place (See 3.1 above). Other significant steps towards implementing GBV prevention and support of survivors have been noted.<sup>30</sup> There is the Policare policy statement and Standard Operating Procedures that have been launched, and Policare centres have been established in two counties. Policare refers a National Police Service (NPS) integrated multi-agency 'one stop center' to response to SGBV in Kenya. The allocation for GBV programming has also gradually increased to 2.3 million

<sup>27</sup> UNFPA. 2023. Kenya Demographic and Health Survey 2022 key indicators report shows drop in FGM, teen pregnancy rates <https://kenya.unfpa.org/en/news/kenya-demographic-and-health-survey-2022-key-indicators-report-shows-drop-fgm-teen-pregnancy>

<sup>28</sup> Kenyan Counties Take Action to Prevent Teenage Pregnancies. June 10, 2019 <https://www.fp2030.org/news/kenyan-counties-take-action-prevent-teenage-pregnancies/>

<sup>29</sup> Silencing Women.Tracking Femicide Cases reported in Kenyan Newspapers from 2016 to date. <https://www.africadatahub.org/femicide-kenya>

<sup>30</sup> Action Coalitions Commitments Dashboard. 2023 Survey <https://dashboard.commitments.generationequality.org/2023survey/>

USD from 2 million USD and the civil society in partnership with the private sector is providing funds in support of GBV survivors.

There has been increased funding for anti-FGM programs by the national government due to the advocacy programs in the 22 hot-spot counties. Furthermore, the GBV module was included in the recent Kenya Demographic Survey (KDHS) to ensure relevant data is collected (KNBS and ICF, 2023). In addition, engagement of communities, men, and boys seems to have contributed to the reduction in the national prevalence of FGM from 21% to 15% (KNBS and ICF, 2023). Establishment of service centers and committees has facilitated realization of the GoK Acts and policy documents. The following are noteworthy<sup>31</sup>:

- Guidelines for establishing Gender Based Violence Recovery Centres in health facilities have been developed and there are plans to launch a GBV prevention system.
- Establishment of SBV courts in two regions of the counties.
- Establishment of County FBV/FGM committees. This is through the quarterly meeting held in the 47 counties in the country
- Establishment of a working group on male engagement in 2022

### 3.3 Identifying gaps where new commitments are required

There has been a lot of progress and gains made from WCAH commitments in Kenya. We found 60 commitments and promises within policy/legislations tied to MNCH (28), SRHR (17) and AHWB (15). New commitments are needed and they ought to be SMART (Specific, Measurable, Achievable, Realistic, and Time Bound)<sup>32</sup> and stakeholders informed. The commitment-making process should be informed by evidence-based content and existing relevant national commitments. It should also involve all stakeholders - including young people - in a meaningful way.

As noted by the PMNCH, when governments are drafting commitments, they ought to consider one or more of the following three areas:<sup>33</sup>

---

<sup>31</sup> Ibid

<sup>32</sup> Committing to adolescent well-being. Guidance note for non-state actors on making organizational commitments in support of adolescent well-being [https://pmnch.who.int/docs/librariesprovider9/meeting-reports/guidance-note-for-government-led-commitments-to-adolescent-well-being.pdf?sfvrsn=cee16d13\\_35](https://pmnch.who.int/docs/librariesprovider9/meeting-reports/guidance-note-for-government-led-commitments-to-adolescent-well-being.pdf?sfvrsn=cee16d13_35)

<sup>33</sup> Ibid

1. Financial: These are commitments aimed at mobilizing domestic resources, and/or catalytic donor financing, or supporting key actors in a country to implement plans to improve health and well-being
2. Policy: These are commitments aimed at developing appropriate processes (including legislation, and governmental policy-making) and supporting advocacy to ensure wellbeing
3. Programme (service and delivery): These are commitments that would strengthen and expand programmes to meet the needs of women, children, and adolescents enabling awareness about SRMNCAH matters, and improving access to services.

Several critical commitments are required, without which the envisaged overall gains in WCAH cannot be realized. Below we identify gaps where new or additional commitments are needed as we consider new commitments that are required for achievement of SDG targets.

### a. Maternal newborn and child health

While there are several commitments on MNCH, the following are areas within the MNCH topics where new or revised commitments are needed

- *Equitable access and establishing mobile clinics:* Commitments to avail mobile clinic programs<sup>34</sup> with skilled personnel should be enhanced to support deliveries in far-flung counties
- *Prioritization of low cost interventions:* Creation of neonate nurseries is expensive, therefore, commitments towards cost-effective affordable interventions such as kangaroo care are valuable
- *Nutrition:*<sup>35</sup> Commitments towards scale-up of sustained behavior change communication for promotion of breastfeeding will be useful. Furthermore, systems to ensure the availability of, and access to services for the prevention and management of all forms of malnutrition ought to be considered at facility and community level.
- *Social protection and poverty concerns:* Few mothers with newborns receive maternity cash benefits and the NHIF engaged the International Labour Organization (ILO) to guide a feasibility study on the design and costing for the introduction of a Maternity Cash Benefit in Kenya (ILO, 2023).<sup>36</sup> Access and affordability remain a key concern. Realistic commitments to elimination of user-fees for primary health care services,

<sup>34</sup> Ten Counties Specific Gender Data Sheet: The Council Of County Governors

<sup>35</sup> Kenya Reproductive, Maternal, Newborn, Child And Adolescent Health (RMNCAH) Investment Framework 2016

<sup>36</sup> Ibid

and additional social protections e.g. social/national health insurance can ensure uptake of health services.

## b. Sexual and reproductive health and rights gaps

Several commitments on SRHR have been noted in **Annex 3**, however, more commitments are needed regarding family planning, reproductive cancers, and GBV.

- *Family planning*: We have discussed three existing commitments addressing *family planning* (**Annex 3**): 1) To increase modern contraceptive prevalence (mCPR) for married women from 58% to 64% by 2030; 2) To improve the availability and utilization of quality family planning data for decision making; and 3) To reduce unmet family planning needs. There is a need for commitments to make family planning services more available and accessible. There are specific technical assistance components to be considered to ensure full implementation of the family planning accountability approach:<sup>37</sup>
  1. Technical support in data collection, analysis and connecting dissemination for use
  2. Technical assistance in development and integration of new and existing tools
  3. Exchange and sharing of best practices across Kenyan counties
  4. Use of a knowledge management hub for FP2030 best practices
  5. Introduction of short courses on FP programme management
- *Reproductive cancers*: Two commitments on reproductive cancers are noted in **Annex 3**: 1) the National Cancer Control Strategic Plan 2023-2027; and 2) commitment to reduce morbidity and mortality associated with the common cancers of the reproductive organs in men and women. A deliberate commitment to include training modules on cervical and breast cancer screening will enhance health workers ability to provide related services. Moreover, commitment to establish regional diagnostic and treatment centers for reproductive cancers, and integrating screening for reproductive cancers into HIV, FP, STI and PNC services will increase screening coverage.
- *Gender Based Violence (GBV)*: Several commitments have been discussed in relation to GBV (**Annex 3**). The aim to address SGBV and harmful practices, protection from unlawful sexual acts, and commit to ending all forms of GBV and FGM. Furthermore, there are clear financial and programming commitments GBV prevention and response. However, there is a need for expanded awareness programs about RH

<sup>37</sup> Family Planning 2030 – Kenya Government Commitment, 2021

and GBV that utilize multiple channels of communication (including peer-to-peer learning and community/local media).

### c. Adolescent health and well-being gaps

Progress made on commitments for AHWB is affected by several perennial factors.<sup>38</sup> There is limited awareness about relevant policies and guidelines, and weak coordination among implementers. Low stakeholder involvement, political will, and intentional youth engagement remain a concern. Inadequacy in ASRH services (availability and quality) and unsupportive socio-cultural practices (e.g. early marriages), are all barriers to successful and sustained policy implementation.

For the adolescents, new commitments should aim to deliver concrete actions that address their context-specific needs. Commitments to AHWB must be demonstrably linked to one or more of the five domains of adolescent well-being:<sup>39</sup>

1. Health and nutrition
2. Connectedness, positive values, and contribution to society
3. Safety and a supportive environment
4. Learning, competence, education, skills, and employability
5. Agency and resilience

As new commitments under AHWB are considered, the following are key areas of interest:

- *Social protection and early marriages:* A commitment by all leaders (political leaders, planners, and community leaders) ought to be encouraged to enforce laws and policies to prohibit the marriage of girls below 18 years. Furthermore, there is a need for commitments to strengthen and scale up social protection for vulnerable adolescent girls to delay sexual debut as well as improve their educational outcomes
- *Skilled AHWB providers:* More commitment is needed towards recruitment/building the capacity of health workers to provide adolescent-friendly SRH services.
- *SRH education:* There should be dedicated commitments to support the Ministry of Education and Ministry of Health to operationalize fully the School Health Policy and Strategy and revise the school curriculum to allow comprehensive and age-appropriate SRH education.

<sup>38</sup> Kenya Adolescent Reproductive Health and Development Policy Implementation Assessment Report, 2013

<sup>39</sup> Ibid

- *Integrated care including HPV vaccination:* Commitment to expansion of integrated adolescent health data and interventions that include HIV, SRH, and HPV will increase impact and evidence-based programming for adolescents.
- *Equitable access and targeted programs:* There is need for commitments to develop and implement innovative strategies to do targeted reach<sup>40</sup> e.g. adolescents who are out of school, those living with HIV, or disabilities, in prison, those living in remote areas, those living in humanitarian contexts, and those living on the street. Mainstreaming of special needs and disabilities into all adolescent policies and programs is overdue. Promising areas for new/revised commitment include:
  1. Establishment of more boarding schools (e.g. in the arid pastoral zones)
  2. Free school lunch programs especially in marginalized and poverty ridden zones
  3. Full implementation of a return-to-school policy for girls who have had teenage pregnancies.
  4. Conditional/unconditional cash transfers to encourage girls from marginalized areas and poor families stay in school and avoid risky sexual behaviors.

Notably, Kenya is not among the 20 countries that have [commitments to adolescent health and well-being](#) that were eminent at the Global Forum for Adolescents held in October 2023 and supported by PMNCH and partners.<sup>41</sup> These commitments prioritize adolescent well-being through financial pledges, policy changes, and increased investments in young people. Kenya would greatly benefit from joining other world governments in making more investments, better policies, and smarter programmes aligned with the seven asks of the Agenda for Action for Adolescents determined by adolescents and youth themselves.<sup>42</sup>

#### 4. RECOMMENDATIONS

This assessment reports on mapping and assessment of commitments on WCAH with the aim to provide observations on recent trends on specific commitments made by the GoK. This report informs a collaborative advocacy action plan (CAAP) to address WCAH commitments through improved advocacy and accountability.

<sup>40</sup> Kenya Reproductive, Maternal, Newborn, Child And Adolescent Health (RMNCAH) Investment Framework 2016

<sup>41</sup> PMNCH. Committing to adolescent health and well-being

<https://pmnch.who.int/news-and-events/campaigns/agenda-for-action-for-adolescents/country-commitments>

<sup>42</sup> Ibid



The Kenya RMNCAHN Multi-Stakeholder Country Platform<sup>43</sup> was established in 2021 to provide Advisory, oversight, coordination, guidance, advocacy and accountability for the country's ongoing and proposed efforts in order to improve RMNCAH-N services and health outcomes in Kenya. Strengthening functionality of this platform would be key in three ways:

1. Dissemination of the commitments Kenya makes towards WCAH
2. Determination of financing for implementation of the WCAH commitments
3. Keeping track and progress of the implementation WCAH commitments

The following specific topical recommendations are considered valuable to the CAAP.

#### **a. Maternal Newborn and Child Health**

The following recommendations for commitments towards MNCH are relevant to Kenya and they emanate from the WHO-based proposal by six countries to accelerate progress towards reducing maternal, newborn and child mortality in order to achieve SDG targets 3.1 and 3.2:<sup>44</sup>

1. To ensure availability of and access to essential medicines and commodities, and WASH and nutrition support
2. To facilitate universal access to SRH services, information and education – including family planning
3. To reinvigorate commitment to SDG target 5.6 (Ensure universal access to SRHR) through laws and regulations that guarantee full and equal access to SRH care, information, and education
4. To invest in effective health information management systems to support evidence-based planning and delivery of health services, monitor implementation, measure progress, and strengthen accountability towards national and county targets

<sup>43</sup> Global Financing Facility (GFF) Hub. Kenya. Government-led Process. <https://www.csogffhub.org/country/kenya/>

<sup>44</sup> WHO. 2024. Accelerate progress towards reducing maternal, newborn and child mortality in order to achieve Sustainable Development Goal targets 3.1 and 3.2. Draft decision proposed by Egypt, Ethiopia, Paraguay, Somalia, South Africa and United Republic of Tanzania. EXECUTIVE BOARD 154th session Agenda item 12. EB154/CONF./4 23 January 2024. [https://apps.who.int/gb/ebwha/pdf\\_files/EB154/B154\\_CONF4-en.pdf](https://apps.who.int/gb/ebwha/pdf_files/EB154/B154_CONF4-en.pdf)



5. To identify and remove barriers that limit access to quality MNCH, including norms that result in low prioritization of the rights of women and girls, including access to quality SRH services
6. To enable access to essential quality medicines for pregnant women, lactating women, mothers, newborns, and children including promoting, supporting and financing accelerated development, registration, and supply of formulations of medicines for diseases that affect them
7. To consider introducing malaria vaccines into routine immunization programmes, as well as scale up malaria treatment in pregnant women and children to reduce malaria illness and child deaths
8. To address the social determinants of MCH (including discrimination, poverty, gender inequality, obstetric violence, lack of education and lack of access to clean water and sanitation) through strengthening multisector collaboration and holistic and integrated systems approaches

## **b. Sexual and Reproductive Health and Rights**

The following areas of recommendations for commitments towards SRHR are informed by the SDGs which explicitly recognize SRH as essential to health, development and empowerment. To speed up and deliver on key SRHR and UHC targets in the SDGs, the following areas require attention.<sup>45,46</sup>

1. Comprehensive sexuality education for those in and out of school
2. Counselling and services for modern contraceptives
3. Safe abortion services and treatment of the complications of unsafe abortion
4. Prevention and treatment of STIs including HIV infection
5. Prevention, detection, and immediate services for cases of SGBV
6. Prevention, detection, and management of reproductive cancers, especially cervical cancer
7. Provision of information, counselling and services for sexual health and well-being

## **c. Adolescent Health and Well-Being**

At the national level, the GoK has addressed adolescent SRH issues within various legislative and policy frameworks. Kenya has also demonstrated its commitment by its signatory position to several regional and international human rights treaties and

<sup>45</sup> UNFP. 2019. Sexual and Reproductive Health and Rights: An Essential Element of Universal Health Coverage. Background document for the Nairobi summit on ICPD25 – Accelerating the promise.

[https://www.unfpa.org/sites/default/files/pub-pdf/SRHR\\_an\\_essential\\_element\\_of\\_UHC\\_SupplementAndUniversalAccess\\_27-online.pdf](https://www.unfpa.org/sites/default/files/pub-pdf/SRHR_an_essential_element_of_UHC_SupplementAndUniversalAccess_27-online.pdf)

<sup>46</sup> Alarm as Kenya pulls out of regional accord on teen sex education. Nation Media Group. Wednesday, May 17, 2023

<https://nation.africa/kenya/health/alarm-as-kenya-pulls-out-of-regional-accord-on-teen-sex-education-4237324?s=03>

declarations including the Maputo Plan of Action 2007-2010 Convention on the Rights of the Child (CRC), and the Sustainable Development Goals. However, more traction is needed in the following recommendations for commitments towards AHWB which emanate from the Agenda for Action for Adolescents:<sup>47</sup>

1. Provision of vocational training and secondary education
2. Provision of affordable, high-quality adolescent health and well-being services
3. Ensuring mental well-being and resilience
4. Reformation of harmful and punitive laws and institute affirmative and protective legal and policy mechanisms
5. Strengthening and establishing social protection mechanisms

---

<sup>47</sup> PMNCH. Committing to adolescent health and well-being  
<https://pmnch.who.int/news-and-events/campaigns/agenda-for-action-for-adolescents/country-commitments>

## 5. REFERENCES

1. Abuya T, Obare F, Matanda D, Dennis ML, Bellows B. 2018. Stakeholder perspectives regarding transfer of free maternity services to National Health Insurance Fund in Kenya: Implications for universal health coverage. *Int J Health Plann Manage.* Apr;33(2):e648-e662.  
<https://onlinelibrary.wiley.com/doi/abs/10.1002/hpm.2515>
2. Allan, S., Adetifa, I.M.O. & Abbas, K. 2021. Inequities in childhood immunisation coverage associated with socioeconomic, geographic, maternal, child, and place of birth characteristics in Kenya. *BMC Infect Dis* 21, 553.  
<https://doi.org/10.1186/s12879-021-06271-9>
3. Ammerdorffer A, Rushwan S, Timms R, Wright P, Beeson L, Devall AJ, et al. 2022. Quality of oxytocin and tranexamic acid for the prevention and treatment of postpartum hemorrhage in Kenya, Nigeria, South Africa, and Tanzania. *Int J Gynaecol Obstet.* Jun;158 Suppl 1(Suppl 1):46-55.  
<https://obgyn.onlinelibrary.wiley.com/doi/full/10.1002/ijgo.14197>
4. Aromataris, E., & Munn, Z. (Eds.). 2020. *JBIManual of Evidence Synthesis*. JBI.
5. Brown, L., Martin, A., Were, C. et al. Cost and consequences of using 7.1 % chlorhexidine gel for newborn umbilical cord care in Kenya. *BMC Health Serv Res* 21, 1249 (2021). <https://doi.org/10.1186/s12913-021-06971-7>
6. Chuma, J & Maina T. 2013. Free maternal care and removal of user fees at primary-level facilities in kenya: monitoring the implementation and impact—baseline report. Washington, DC: Health Policy Project, Futures Group.  
[https://www.healthpolicyproject.com/pubs/400\\_KenyaUserFeesBaselineReportFINAL.pdf](https://www.healthpolicyproject.com/pubs/400_KenyaUserFeesBaselineReportFINAL.pdf)
7. Gitobu, C. M., Gichangi, P. B. & Mwanda, W. O. 2018. Satisfaction with delivery services offered under the free maternal healthcare policy in Kenyan public health facilities. *Journal of Environmental and Public Health*, 2018, 1-9.. Retrieved from <https://doi.org/10.1155/2018/4902864>
8. ILO. 2023. The introduction of a maternity cash benefit in Kenya, Geneva: International Labour Office and National Health Insurance Fund, 2023. © ILO and NHIF. <https://www.social-protection.org/gimi/Media.action?sessionId=Zh0EL4T298ZAhVHJrZiYDuxDDXCNbOggjN6vLf3TGrPfuvx-c7nG!1534231366?id=19372>
9. Kamuyango A, Hou WH, Li CY. 2020. Trends and contributing factors to contraceptive use in Kenya: a large population-based survey 1989 to 2014. *Int J*

- Environ Res Public Health. Sep 27;17(19):7065. <https://www.mdpi.com/1660-4601/17/19/7065>
10. KNBS and ICF. 2023. Kenya Demographic and Health Survey 2022. Nairobi, Kenya, and Rockville, Maryland, USA: KNBS and ICF.  
<https://www.knbs.or.ke/wp-content/uploads/2023/07/Kenya-DHS-2022-Main-Report-Volume-2.pdf>
  11. Kibira D, Ooms GI, van den Ham HA, Namugambe JS, Reed T, Leufkens HG, Mantel-Teeuwisse A. 2021. Access to oxytocin and misoprostol for management of postpartum haemorrhage in Kenya, Uganda and Zambia: a cross-sectional assessment of availability, prices and affordability. BMJ Open. Jan 7;11(1):e042948.  
<https://pubmed.ncbi.nlm.nih.gov/33414148/>
  12. Levac, D, Colquhoun, H, O'Brien, K. 2010. Scoping studies: Advancing the methodology. Implementation Science, 5(69).  
<https://doi.org/10.1017/cbo9780511814563.003>
  13. Lusambili A, Wisofski S, Shumba C, Obure J, Mulama K, Nyaga L, Wade TJ, Temmerman M. 2020. Health care workers' perspectives of the influences of disrespectful maternity care in rural Kenya. International Journal of Environmental Research and Public Health, 17(21):8218. <https://doi.org/10.3390/ijerph17218218>
  14. Maina LC, Karanja S, Kombich J. 2013. Immunization coverage and its determinants among children aged 12 - 23 months in a peri-urban area of Kenya. Pan Afr Med J. 14:3. <https://www.panafrican-med-journal.com/content/article/14/3/full/>
  15. Ministry of Health. 2023a. The Primary Health Care Bill, 2023. Special Issue Kenya Gazette Supplement No. 169 (Senate Bills No. 44)  
[http://kenyalaw.org/kl/fileadmin/pdfdownloads/bills/2023/ThePrimaryHealthCareBill\\_2023.pdf](http://kenyalaw.org/kl/fileadmin/pdfdownloads/bills/2023/ThePrimaryHealthCareBill_2023.pdf)
  16. Ministry of Health. 2023b. Kenya National Immunization Policy Guidelines 2023. Vaccinate to Protect. Government of Kenya.  
[http://guidelines.health.go.ke:8000/media/Kenya\\_National\\_Immunization\\_Policy\\_Guidelines\\_Version\\_signed.pdf](http://guidelines.health.go.ke:8000/media/Kenya_National_Immunization_Policy_Guidelines_Version_signed.pdf)
  17. Ministry of Health. 2023c. The National Cancer Control Strategy (2023–2027), Government of Kenya, June 2023.  
[http://guidelines.health.go.ke:8000/media/NATIONAL\\_CANCER\\_CONTROL\\_STRATEGY\\_2023-2027\\_7uTQQP4.pdf](http://guidelines.health.go.ke:8000/media/NATIONAL_CANCER_CONTROL_STRATEGY_2023-2027_7uTQQP4.pdf)
  18. Ministry of Health. 2022a. National Nursing and Midwifery Policy. Towards Excellence in Nursing and Midwifery for All 2022-2032, Government of Kenya,

- <https://repository.kippra.or.ke/bitstream/handle/123456789/4103/National-Nursing-and-Midwifery-Policy-2022-2032.pdf?sequence=1&isAllowed=y>
19. Ministry of Health. 2022b. The National Reproductive Health Policy 2022-2032, Government of Kenya, July 2022.  
[http://guidelines.health.go.ke:8000/media/The National Reproductive Health Policy 2022 - 2032.pdf](http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf)
  20. Ministry of Health. 2021. National Plan of Action for Addressing Adolescent Health Teenage Pregnancy in Kenya, Government of Kenya, September 2021.  
[https://drive.google.com/file/d/1LgftjWEMtT-AyZOwI-V\\_l9XrF7DA5A6i/view](https://drive.google.com/file/d/1LgftjWEMtT-AyZOwI-V_l9XrF7DA5A6i/view)
  21. Ministry of Health. 2021. National Policy on the Prevention, Response and Protection from Unlawful Sexual Acts, and the Administration of Justice in Sexual Offenses Matters, Government of Kenya, 2021  
<https://statelaw.go.ke/wp-content/uploads/2021/12/Sexual-Offences-Policy-2021.pdf>
  22. Ministry of Health. 2021. The Breast Milk Substitutes (Regulation and Control) General Act, Government of Kenya, August 2021  
<http://www.parliament.go.ke/sites/default/files/2021-11/The%20Breast%20Milk%20substitutes%20%28Regulation%20and%20Control%29%20%28General%29%20Regulations%2C%202021.pdf>
  23. Ministry of Health. 2021. Ministry of Health Primary Health Care Network Guidelines, Government of Kenya, May 2021  
[http://guidelines.health.go.ke:8000/media/Primary Health Care Network Guidelines - May 2021.pdf](http://guidelines.health.go.ke:8000/media/Primary_Health_Care_Network_Guidelines_-_May_2021.pdf)
  24. Ministry of Health. 2020. Kenya Universal Health Coverage Policy 2020 – 2030, Government of Kenya, December 2020  
[http://guidelines.health.go.ke:8000/media/Kenya Universal Health Coverage Policy 2020 2030.pdf](http://guidelines.health.go.ke:8000/media/Kenya_Universal_Health_Coverage_Policy_2020_2030.pdf)
  25. Ministry of Health. 2018. Kenya National Nutrition Action Plan (KNAP) 2018 – 2022. Government of Kenya, 2018  
<https://scalingupnutrition.org/wp-content/uploads/2020/10/Kenya-National-Nutrition-Action-Plan-2018-22.pdf>
  26. Ministry of Health. 2016a. A guideline for the use of Chlorhexidine for newborn umbilical cord care in Kenya. Government of Kenya, April 2016.  
<https://familyhealth.go.ke/wp-content/uploads/2018/02/CHLORHEXIDINE-FOR-NEWBORN-UMBILICAL-CORD-CARE-GUIDELINES.pdf>

27. Ministry of Health. 2016b. Kenya Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Investment Framework. Ministry of Health, Government of Kenya January 31, 2016.  
[https://www.globalfinancingfacility.org/sites/gff\\_new/files/Kenya-Investment-Case.pdf](https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf)
28. Ministry of Health. 2016c. National Guidelines for Provision of Adolescent and Youth-Friendly Services in Kenya, Second Edition, Government of Kenya 2016  
<https://faces.ucsf.edu/sites/g/files/tkssra4711/f/YouthGuidelines2016.pdf>
29. Ministry of Health. 2015. National Adolescent Sexual and Reproductive Health Policy, Government of Kenya, 2015. <https://tciurbanhealth.org/wp-content/uploads/2018/03/Ministry-of-Health-ASRH-POLICY-2015.pdf>
30. The Marriage Act, 2014. Special Issue, Kenya Gazette Supplement No. 62 (Acts No. 4)  
[http://kenyalaw.org/kl/fileadmin/pdfdownloads/Acts/TheMarriage\\_Act2014.pdf](http://kenyalaw.org/kl/fileadmin/pdfdownloads/Acts/TheMarriage_Act2014.pdf)
31. Ministry of Health. 2014. The Kenya AIDS Strategic Framework (KASF) 2014-2019, Government of Kenya, 2014  
[https://nsdcc.go.ke/wp-content/uploads/2015/09/KASF\\_Final.pdf](https://nsdcc.go.ke/wp-content/uploads/2015/09/KASF_Final.pdf)
32. Ministry of Health. 2014. National Policy for Prevention and Response to Gender Based Violence, Government of Kenya, November 2014  
<https://psyg.go.ke/docs/National%20Policy%20on%20prevention%20and%20Response%20to%20Gender%20Based%20Violence.pdf>
33. Republic of Kenya. 2022a. Performance audit report on implementation of the Linda Mama program by the National Health Insurance Fund  
<https://www.oagkenya.go.ke/wp-content/uploads/2023/10/IMPLEMENTATION-OF-THE-LINDA-MAMA-PROGRAMME-BY-NHIF.pdf>
34. Republic of Kenya. 2022. National Treasury And Planning State Department for Planning. Second Voluntary National Review Report On the Implementation of The Sustainable Development Goals. June 2022. [https://gender.go.ke/wp-content/uploads/2022/06/SDG-2020\\_VNR\\_Final\\_Kenya\\_.pdf](https://gender.go.ke/wp-content/uploads/2022/06/SDG-2020_VNR_Final_Kenya_.pdf)
35. Republic of Kenya. 2020. National Treasury And Planning State Department for Planning. Second Voluntary National Review on the Implementation of the Sustainable Development Goals  
[https://sustainabledevelopment.un.org/content/documents/26360VNR\\_2020\\_Kenya\\_Report.pdf](https://sustainabledevelopment.un.org/content/documents/26360VNR_2020_Kenya_Report.pdf)

36. Republic of Kenya. 2013. Education Sector Policy on HIV and AIDS, Ministry of Education Science and Technology, Government of Kenya, 2013  
<https://www.medbox.org/pdf/5e148832db60a2044c2d4486>
37. Republic of Kenya, 2007. Kenya Vision 2030. The Popular Version.  
<https://nairobi.aics.gov.it/wp-content/uploads/2019/01/Kenya-Vision-2030.pdf>
38. Mutungi, B, W. 2018. Perceived factors influencing uptake of Linda mama maternal healthcare delivery programme among women in informal settlements in Starehe Sub County, Kenya. Masters Research Project, University Of Nairobi, Nairobi, Kenya. <http://erepository.uonbi.ac.ke/handle/11295/104859>
39. Orangi S, Kairu A, Ondera J, Mbuthia B, Koduah A, Oyugi B, Ravishankar N, Barasa E. 2021, Examining the implementation of the Linda Mama free maternity program in Kenya. Int J Health Plann Manage. Nov;36(6):2277-2296.  
<https://onlinelibrary.wiley.com/doi/full/10.1002/hpm.3298>
40. Owino L, Wangong'u A, Were N, Maleche A. 2020. The missing link in Kenya's universal health coverage experiment: a preventive and promotive approach to SRHR. Sex Reprod Health Matters. Dec;28(2):1851347.  
<https://pubmed.ncbi.nlm.nih.gov/33393897/>
41. UNICEF. 2021. The medicalization of FGM in Kenya, Somalia, Ethiopia and Eritrea  
<https://www.unicef.org/esa/media/8866/file/The-Medicalization-of-FGM-2021.pdf>
42. Wamalwa, E. W. 2015. Implementation challenges of free maternity services policy in Kenya: the health workers' perspective. The Pan African Medical Journal. 2015(22), 375. <https://doi.org/10.11604/pamj.2015.22.375.6708>

### Other sources

43. Acting on the Call. Ending Preventable Child and Maternal Deaths. June 2015.  
<https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf>
44. Advancing Community Health Services Legislation in Kenya  
<https://chu4uhc.org/advancing-community-health-services-legislation-in-kenya/>
45. Beyond Zero. Inspiring Action Changing Lives.  
<https://www.beyondzero.or.ke>
46. Every Newborn Action Plan (ENAP) and Ending Preventable Maternal Mortality (EPMM)  
ENAP/EPMM Dashboard  
<https://platform.who.int/data/maternal-newborn-child-adolescent-ageing/ENAP-EPMM-dashboard>



47. FP2030 Kenya Government Commitment  
<https://www.fp2030.org/kenya/>
48. Generation Equality Forum  
<https://dashboard.commitments.generationequality.org/>
49. Global Financing Facility (GFF) <https://data.gffportal.org/country/kenya>
50. Global Financing Facility (GFF). Kenya.  
<https://www.globalfinancingfacility.org/partner-countries/kenya>
51. HNN Team & PATH. Kenya Launches High-Impact Action Plan to Protect Mothers And Newborns  
<https://www.healthynewbornnetwork.org/blog/kenya-launches-high-impact-action-plan-protect-mothers-newborns/>
52. Kenyan Counties Take Action to Prevent Teenage Pregnancies. June 10, 2019  
<https://www.fp2030.org/news/kenyan-counties-take-action-prevent-teenage-pregnancies/>
53. PMNCH. Committing to adolescent health and well-being  
<https://pmnch.who.int/news-and-events/campaigns/agenda-for-action-for-adolescents/country-commitments>
54. Silencing Women.Tracking Femicide Cases reported in Kenyan Newspapers from 2016 to date.  
<https://www.africadatahub.org/femicide-kenya>
55. UNFPA.2024. Maternal Health and HIV. Kenya  
<https://kenya.unfpa.org/en/topics/maternal-health-and-hiv>
56. UNFPA. 2024. Sexual & Reproductive Health. Kenya  
<https://kenya.unfpa.org/en/topics/sexual-reproductive-health-4>
57. UNFPA. 2017. United Nations Joint Programme on Reproductive, Maternal, Newborn, Child, and Adolescent Health. 2016–2020. Reducing Preventable Maternal, Newborn, and Child Deaths in Ten High-Burden Counties in Kenya  
[https://kenya.unfpa.org/sites/default/files/pub-pdf/RMNCAH%20JP%20Prodoc\\_0.pdf](https://kenya.unfpa.org/sites/default/files/pub-pdf/RMNCAH%20JP%20Prodoc_0.pdf)



## ANNEX 1: KEY AREAS FOR COMMITMENT MAPPING AND ASSESSMENT OF WOMEN, CHILDREN AND ADOLESCENTS' HEALTH

MNCH	SRHR	AHWB
<p><b>High-quality MNCH services for mothers, newborns and children, including stillbirths: essential antenatal, childbirth and postnatal packages of care, including emergency obstetric and newborn care, and the prevention of stillbirths.</b></p> <p><b>Maternal:</b></p> <ul style="list-style-type: none"> <li>● Preconception care</li> <li>● Antenatal care</li> <li>● Skilled birth attendants</li> <li>● Postnatal care</li> <li>● Emergency obstetric care</li> </ul> <p><b>Newborn</b></p> <ul style="list-style-type: none"> <li>● Small and vulnerable newborn care</li> <li>● Stillbirths</li> </ul> <p><b>Child:</b></p> <ul style="list-style-type: none"> <li>● Childcare health services including</li> <li>● Child nutrition</li> <li>● Immunization services</li> </ul> <p><b>MNCH interventions embedded in UHC schemes, including financial protection and MNCH financing</b></p> <ul style="list-style-type: none"> <li>● UHC Schemes</li> <li>● Country health expenditure per capita on MNCH financed from domestic sources and ODA for MNCH</li> <li>● Out-of-pocket expenditure for MNCH services (% of current health expenditure)</li> </ul> <p><b>Health systems strengthening including MNCH data and accountability, human resources for health - especially midwifery and nursing - and essential medicines and commodities</b></p> <ul style="list-style-type: none"> <li>● MNCH data information systems and accountability mechanisms including birth registration and disaggregation of data</li> <li>● Training and support for health workers for service delivery</li> <li>● Essential medicines, vaccines, commodities, technologies and innovations</li> <li>● Health information systems</li> <li>● Health system financing</li> <li>● Leadership and governance</li> </ul> <p><b>Intersectoral approaches for MNCH across the life-course, including nutrition, WASH, environment, and gender equality</b></p> <ul style="list-style-type: none"> <li>● Nutrition schemes and food security across the life course: pregnancy nutrition, breastfeeding support, child nutrition, adolescent nutrition</li> <li>● Financing for WCAH</li> <li>● Education</li> </ul>	<p><b>Access and choice to effective contraception methods (family planning).</b></p> <ul style="list-style-type: none"> <li>● Family planning needs satisfied</li> <li>● Strengthened autonomy and access to contraceptive services</li> <li>● Comprehensive sexual health education</li> </ul> <p><b>Access to safe and legal abortion services.</b></p> <ul style="list-style-type: none"> <li>● Legalized abortion and access to safe abortion services</li> </ul> <p><b>Prevention and treatment/referrals for Sexual and Gender-Based Violence.</b></p> <ul style="list-style-type: none"> <li>● Legal mechanisms for addressing GBV</li> <li>● Training and support for health workers on GBV</li> <li>● Violence against women and girls including intimate partner violence</li> </ul> <p><b>Prevention, detection and management of reproductive cancers, especially cervical cancer.</b></p> <ul style="list-style-type: none"> <li>● Cervical cancer screening programs</li> <li>● HPV vaccine programs</li> </ul> <p><b>Inclusion of essential packages of SRHR interventions within UHC and PHC schemes, including financial protection and SRHR financing.</b></p> <ul style="list-style-type: none"> <li>● Coverage of all essential SRH interventions</li> <li>● Country health expenditure per capita on SRHR financed from domestic sources and ODA for SRHR</li> <li>● Out-of-pocket expenditure for SRHR services (% of current health expenditure)</li> </ul>	<p><b>Policy: National policy and programs for adolescent well-being (10-19 years) offering information and services in the public sector (e.g., health, education including CSE, nutrition, financial protection, and vocational training)</b></p> <ul style="list-style-type: none"> <li>● Health education for children and adolescents – including mental health</li> <li>● Nutrition programs for children and adolescents</li> <li>● Pregnant adolescent support</li> <li>● Financial protection for adolescent health</li> </ul> <p><b>National standards for delivery of AWB information and services to adolescents, including on user fee exemption</b></p> <ul style="list-style-type: none"> <li>● Health services for adolescents – user fee exemptions for contraceptives</li> </ul> <p><b>Legal systems to protect the rights of adolescent girls and boys with a specific focus on minimum age of consent (e.g. for marriage, sexual activity, and medical treatment without parental consent)</b></p> <ul style="list-style-type: none"> <li>● Legal interventions child marriage</li> <li>● Female genital mutilation</li> </ul> <p><b>AWB is embedded in national policies and plans with dedicated financing for AWB programs</b></p> <ul style="list-style-type: none"> <li>● Country health expenditure per capita AHWB financed from domestic sources and ODA for AHWB</li> <li>● Out-of-pocket expenditure for AHWB services (% of current health expenditure)</li> </ul>

- Shelter
- WASH facilities and services
- Social protection
- Child Protection
- Women in the workforce and leadership positions

## ANNEX 2: WOMEN, CHILDREN, AND ADOLESCENT HEALTH COMMITMENTS IN KENYA

Key WCAH areas	Type	Category	Date	Source
<b>MNCH</b>				
<b>High-quality MNCH services for mothers, newborns and children</b>				
1. To increase access to oxytocin	Commitment	Global	2016	Ministry of Health. 2016b. Kenya Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Investment Framework. Ministry of Health, Government of Kenya January 31, 2016. <a href="https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf">https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf</a>
			2015	Acting on the Call. Ending Preventable Child and Maternal Deaths. June 2015. <a href="https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf">https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf</a>
			2016	HNN Team & PATH. Kenya Launches High-Impact Action Plan to Protect Mothers And Newborns <a href="https://www.healthynewbornnetwork.org/blog/kenya-launches-high-impact-action-plan-protect-mothers-newborns/">https://www.healthynewbornnetwork.org/blog/kenya-launches-high-impact-action-plan-protect-mothers-newborns/</a>
2. To increase the national routine immunization coverage of infants	Commitment	Global	2023	Ministry of Health. 2023b. Kenya National Immunization Policy

Key WCAH areas		Type	Category	Date	Source
				2015	Guidelines 2023. Vaccinate to Protect. Government of Kenya. <a href="http://guidelines.health.go.ke:8000/media/Kenya_National_Immunization_Policy_Guidelines_Version_signed.pdf">http://guidelines.health.go.ke:8000/media/Kenya_National_Immunization_Policy_Guidelines_Version_signed.pdf</a>  Acting on the Call. Ending Preventable Child and Maternal Deaths. June 2015. <a href="https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf">https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf</a>
3.	To increase births attended by skilled personnel	Commitment	Global	2015	Acting on the Call. Ending Preventable Child and Maternal Deaths. June 2015. <a href="https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf">https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf</a>
4.	To reduce maternal, perinatal and neonatal morbidity and mortality	Commitment	National	2022 - 2032	Ministry of Health. 2022. The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022. <a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf</a>  Acting on the Call. Ending Preventable Child and Maternal Deaths. June 2015. <a href="https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf">https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf</a>
5.	To reduce the HIV and AIDS burden and eliminate mother-to-child transmission (eMTCT) of HIV	Commitment	National	2022 - 2032	Ministry of Health. 2022. The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022. <a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf</a>

Key WCAH areas		Type	Category	Date	Source
6.	Zero preventable deaths of women, newborns or children, and no preventable stillbirths; where every pregnancy is wanted, every birth is celebrated and accounted for and where women, babies, children, and adolescents are free of HIV/AIDS, survive, thrive and reach their full social and economic potential	Commitment	National	2016	Ministry of Health. 2016b. Kenya Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Investment Framework. Ministry of Health, Government of Kenya January 31, 2016. <a href="https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf">https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf</a>
7.	The Beyond Zero Campaign to improve maternal and child health in Kenya, and to reduce new HIV infections among children	Commitment	National	2013-To date	Beyond Zero. Inspiring Action Changing Lives. <a href="https://www.beyondzero.or.ke">https://www.beyondzero.or.ke</a>
8.	Breast Milk Substitutes (Regulation and Control) Act	Legislation	National	2012; 2021	Ministry of Health. 2021. The Breast Milk Substitutes (Regulation and Control) General Act, Government of Kenya, August 2021 <a href="http://www.parliament.go.ke/sites/default/files/2021-11/The%20Breast%20Milk%20substitutes%20%28Regulation%20and%20Control%29%20%28General%29%20Regulations%2C%202021.pdf">http://www.parliament.go.ke/sites/default/files/2021-11/The%20Breast%20Milk%20substitutes%20%28Regulation%20and%20Control%29%20%28General%29%20Regulations%2C%202021.pdf</a>
<b>MNCH interventions embedded in UHC schemes</b>					
1.	Prevention of maternal deaths and morbidities through integrating comprehensive sexual and reproductive health interventions into national Universal Health Coverage (UHC) strategies.	Commitment	Global	2016	Ministry of Health. 2016b. Kenya Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Investment Framework. Ministry of Health, Government of Kenya January 31, 2016. <a href="https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf">https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf</a>
2.	To make strategic investments in the health sector	Commitment	Global	2016	Ministry of Health. 2016b. Kenya Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Investment Framework. Ministry of Health, Government of Kenya January 31, 2016. <a href="https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf">https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf</a>

Key WCAH areas		Type	Category	Date	Source
					<a href="https://sites/gff_new/files/Kenya-Investment-Case.pdf">https://sites/gff_new/files/Kenya-Investment-Case.pdf</a>
3.	Establishment of laws to underpin realization of Universal Health Coverage in Kenya	Legislation	National	2023	Advancing Community Health Services Legislation in Kenya <a href="https://chu4uhc.org/advancing-community-health-services-legislation-in-kenya/">https://chu4uhc.org/advancing-community-health-services-legislation-in-kenya/</a>
4.	Establishment of Primary Health Care Networks (PCNs)	Policy	National	2023  2021	Ministry of Health. 2023a. The Primary Health Care Bill, 2023. Special Issue Kenya Gazette Supplement No. 169 (Senate Bills No. 44) <a href="http://kenyalaw.org/kl/fileadmin/pdfdownloads/bills/2023/ThePrimaryHealthCareBill_2023.pdf">http://kenyalaw.org/kl/fileadmin/pdfdownloads/bills/2023/ThePrimaryHealthCareBill_2023.pdf</a>  Ministry of Health. 2021. Ministry of Health Primary Health Care Network Guidelines, Government of Kenya, May 2021 <a href="http://guidelines.health.go.ke:8000/media/Primary_Health_Care_Network_Guidelines_-_May_2021.pdf">http://guidelines.health.go.ke:8000/media/Primary_Health_Care_Network_Guidelines_-_May_2021.pdf</a>
5.	Universal Health Coverage Policy	Policy	National	2020-2030	Ministry of Health. 2020. Kenya Universal Health Coverage Policy 2020 – 2030, Government of Kenya, December 2020 <a href="http://guidelines.health.go.ke:8000/media/Kenya_Universal_Health_Coverage_Policy_2020_2030.pdf">http://guidelines.health.go.ke:8000/media/Kenya_Universal_Health_Coverage_Policy_2020_2030.pdf</a>
6.	Linda Mama Programme	Commitment	National	2013-To date	Republic of Kenya. 2022. Performance audit report on implementation of the Linda Mama program by the National Health Insurance Fund <a href="https://www.oagkenya.go.ke/wp-content/uploads/2023/10/IMPLEMENTATION-OF-THE-LINDA-MAMA-PROGRAMME-BY-NHIF.pdf">https://www.oagkenya.go.ke/wp-content/uploads/2023/10/IMPLEMENTATION-OF-THE-LINDA-MAMA-PROGRAMME-BY-NHIF.pdf</a>

Key WCAH areas		Type	Category	Date	Source
7.	To increase universal health coverage (UHC) index of service coverage	Commitment	National	2020	Ministry of Health. 2020. Kenya Universal Health Coverage Policy 2020 – 2030, Government of Kenya, December 2020 <a href="http://guidelines.health.go.ke:8000/media/Kenya%20Universal%20Health%20Coverage%20Policy%202020%202030.pdf">http://guidelines.health.go.ke:8000/media/Kenya Universal Health Coverage Policy 2020 2030.pdf</a>
8.	Reaffirmed commitments to the PMNCH COVID-19 Call to Action and commitment to advance gender equality as a part of the Government's Big Four Agenda, <sup>48</sup> to achieve Universal Health Coverage.	Commitment	National	2020	Republic of Kenya. 2020. Ministry Of Public Service And Gender PMNCH Call To Action - Commitment to Protect the Progress for Women, Children And Adolescents' Health <a href="https://pmnch.who.int/docs/libraries/provider9/meeting-reports/kenya-commitment-covid19.pdf">https://pmnch.who.int/docs/libraries/provider9/meeting-reports/kenya-commitment-covid19.pdf</a>
<b>Health systems strengthening including MNCH data and accountability</b>					
1.	To nurture a health system that is resilient, responsive and accountable to client needs and also capable of leveraging private, FBOs, civil society and community health delivery mechanisms and structures	Commitment	National	2016	Ministry of Health. 2016b. Kenya Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Investment Framework. Ministry of Health, Government of Kenya January 31, 2016. <a href="https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf">https://www.globalfinancingfacility.org/sites/gff_new/files/Kenya-Investment-Case.pdf</a>  GFF. Kenya. <a href="https://www.globalfinancingfacility.org/partner-countries/kenya">https://www.globalfinancingfacility.org/partner-countries/kenya</a>
2.	Calling for the widespread use of chlorhexidine for umbilical cord care	Commitment	Global	2016	Ministry of Health. 2016a. A guideline for the use of Chlorhexidine for newborn umbilical cord care in Kenya. Government of Kenya, April 2016. <a href="https://familyhealth.go.ke/wp-content/uploads/2018/02/CHLORHEXIDINE-FOR-NEWBORN-UMBILICAL-CORD-CARE-GUIDELINES.pdf">https://familyhealth.go.ke/wp-content/uploads/2018/02/CHLORHEXIDINE-FOR-NEWBORN-UMBILICAL-CORD-CARE-GUIDELINES.pdf</a>

<sup>48</sup> The Big Four Agenda was President Uhuru Kenyatta's development blueprint and it comprised of Food Security; Affordable Housing; Manufacturing; and Affordable Healthcare. <https://big4.delivery.go.ke/>

Key WCAH areas	Type	Category	Date	Source
3. National Nursing and Midwifery Policy 2022-2032	Policy	National	2022-2032	Ministry of Health. 2022a. National Nursing and Midwifery Policy. Towards Excellence in Nursing and Midwifery for All 2022-2032, Government of Kenya, <a href="https://repository.kippra.or.ke/bitstream/handle/123456789/4103/National-Nursing-and-Midwifery-Policy-2022-2032.pdf?sequence=1&amp;isAllowed=y">https://repository.kippra.or.ke/bitstream/handle/123456789/4103/National-Nursing-and-Midwifery-Policy-2022-2032.pdf?sequence=1&amp;isAllowed=y</a>
<b>Inter-sectoral approaches for MNCH across the life-course</b>				
1. Prevention of maternal deaths and morbidities through integrating comprehensive sexual and reproductive health interventions into national and county strategies	Commitment	National	2022	Ministry of Health. 2022. The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022 <a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf</a>
			2015	Population Reference Bureau. 2015. Connecting Paths: Integrating Reproductive Health and HIV Services in Kenya. <a href="https://www.prb.org/wp-content/uploads/2015/06/engage-kenya-rh-hiv-handout.pdf">https://www.prb.org/wp-content/uploads/2015/06/engage-kenya-rh-hiv-handout.pdf</a>
			2024	UNFPA. 2024. Maternal Health and HIV. Kenya <a href="https://kenya.unfpa.org/en/topics/maternal-health-and-hiv">https://kenya.unfpa.org/en/topics/maternal-health-and-hiv</a>
			2024	UNFPA. 2024. Sexual & Reproductive Health. Kenya <a href="https://kenya.unfpa.org/en/topics/sexual-reproductive-health-4">https://kenya.unfpa.org/en/topics/sexual-reproductive-health-4</a>
2. Ensure country and county leadership and ownership that will provide appropriate stewardship of RMNCAH implementation plans	Commitment	National	2016	Ministry of Health. 2016b. Kenya Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Investment Framework. Ministry of Health, Government of Kenya January 31, 2016. <a href="https://www.globalfinancingfacility.org">https://www.globalfinancingfacility.org</a>

Key WCAH areas		Type	Category	Date	Source
				2017	<a href="https://sites/gff_new/files/Kenya-Investment-Case.pdf">https://sites/gff_new/files/Kenya-Investment-Case.pdf</a>  UNFPA. 2017. United Nations Joint Programme on Reproductive, Maternal, Newborn, Child, and Adolescent Health. 2016–2020. Reducing Preventable Maternal, Newborn, and Child Deaths in Ten High-Burden Counties in Kenya <a href="https://kenya.unfpa.org/sites/default/files/pub-pdf/RMNCAH%20JP%20Prodoc%200.pdf">https://kenya.unfpa.org/sites/default/files/pub-pdf/RMNCAH%20JP%20Prodoc 0.pdf</a>
3.	Kenya National Nutrition Action Plan (KNAP) 2018 - 2022	Legislation	National	2018-2022	Ministry of Health. 2018. Kenya National Nutrition Action Plan (KNAP) 2018 – 2022. Government of Kenya, 2018 <a href="https://scalingupnutrition.org/wp-content/uploads/2020/10/Kenya-National-Nutrition-Action-Plan-2018-22.pdf">https://scalingupnutrition.org/wp-content/uploads/2020/10/Kenya-National-Nutrition-Action-Plan-2018-22.pdf</a>
<b>SRHR</b>					
<b>Access and choice to effective contraception methods</b>					
1.	To increase modern contraceptive prevalence (mCPR) for married women from 58% to 64% by 2030	Commitment	Global	2021	2021. FP2030 Kenya Government Commitment <a href="https://www.fp2030.org/kenya/file:///C:/Users/User/Downloads/Kenya_FP2030Commitment.pdf">https://www.fp2030.org/kenya/file:///C:/Users/User/Downloads/Kenya_FP2030Commitment.pdf</a>
2.	To improve the availability and utilization of quality family planning data for decision making	Commitment	Global	2023	FP2030 Sources: <a href="https://www.fp2030.org/kenya/">https://www.fp2030.org/kenya/</a> <a href="https://wordpress.fp2030.org/wp-content/uploads/2023/08/Kenya_FP2030Commitment.pdf">https://wordpress.fp2030.org/wp-content/uploads/2023/08/Kenya_FP2030Commitment.pdf</a> . Published 2023
3.	To reduce unmet family planning needs	Commitment	National	2022-2032	Ministry of Health. 2022a. The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022.



Key WCAH areas		Type	Category	Date	Source
				2021	<a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf</a>  2021. FP2030 Kenya Government Commitment <a href="https://www.fp2030.org/kenya/file:///C:/Users/User/Downloads/Kenya_FP2030Commitment.pdf">https://www.fp2030.org/kenya/file:///C:/Users/User/Downloads/Kenya_FP2030Commitment.pdf</a>
4.	Mainstreaming special RH-related needs of people with disabilities, the elderly, people in humanitarian settings and fragile contexts.	Policy	National	2022 – 2032  2021	Ministry of Health. 2022. The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022. <a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf</a>  2021. FP2030 Kenya Government Commitment <a href="https://www.fp2030.org/kenya/file:///C:/Users/User/Downloads/Kenya_FP2030Commitment.pdf">https://www.fp2030.org/kenya/file:///C:/Users/User/Downloads/Kenya_FP2030Commitment.pdf</a>
5.	To reduce the magnitude of infertility and increase access to management of infertile couples	Commitment	National	2022 – 2032	Ministry of Health. 2022. The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022. <a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf</a>
6.	Promote a robust RH implementation environment	Policy	National	2022 - 2032	Ministry of Health. 2022. The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022. <a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf</a>
<b>Access to safe and legal abortion services</b>					

Key WCAH areas	Type	Category	Date	Source
1. To address basic humanitarian needs in crises	Commitment	Global	2019	2019. ICPD Nairobi Commitments. Commitment Title: Western HIV/AIDS Network will implement SRHR - Program to save women and girls lives. 13 November 2019. <a href="https://www.nairobisummiticpd.org/commitments">https://www.nairobisummiticpd.org/commitments</a>
2. Ratification of the Maputo Protocol	Commitment	Regional	2023  2016 - 2030	Taking stock: Maputo Protocol in Advancing Women's Rights November 16, 2023, The African Population and Health Research Center (APHRC). <a href="https://aphrc.org/blogarticle/taking-stock-maputo-protocol-in-advancing-womens-rights/">https://aphrc.org/blogarticle/taking-stock-maputo-protocol-in-advancing-womens-rights/</a>  Maputo Plan Of Action 2016 - 2030 <a href="https://au.int/sites/default/files/documents/24099-poa_5-revised_clean.pdf">https://au.int/sites/default/files/documents/24099-poa_5-revised_clean.pdf</a>
<b>Prevention and treatment/referrals for sexual and gender-based violence</b>				
1. To address SGBV and harmful practices	Commitment	Global	2019	2019. ICPD Nairobi Commitments. 13 November 2019. <a href="https://www.nairobisummiticpd.org/commitments">https://www.nairobisummiticpd.org/commitments</a>
2. Kenya is co-leading the Gender-Based Violence Action Coalition and commits to ending all forms of GBV and FGM and accelerating action at the national and global levels	Commitment	Global	2021	<a href="https://www.icrw.org/wp-content/uploads/2021/06/GEF_Kenya_GBV_summary-05.21-web.pdf">https://www.icrw.org/wp-content/uploads/2021/06/GEF_Kenya_GBV_summary-05.21-web.pdf</a>
3. National policy on the prevention, response and protection from unlawful sexual acts, and the administration of justice in sexual offenses matters	Policy	National	2021	Ministry of Health. 2021. National Policy on the Prevention, Response and Protection from Unlawful Sexual Acts, and the Administration of Justice in Sexual Offenses Matters, Government of Kenya, 2021 <a href="https://statelaw.go.ke/wp-content/uploads/2021/12/Sexual-Offences-Policy-2021.pdf">https://statelaw.go.ke/wp-content/uploads/2021/12/Sexual-Offences-Policy-2021.pdf</a>

Key WCAH areas	Type	Category	Date	Source
4. National Policy for prevention and response to gender-based violence	Policy	National	2014	Ministry of Health. 2014. National Policy for Prevention and Response to Gender Based Violence, Government of Kenya, November 2014 <a href="https://psyg.go.ke/docs/National%20Policy%20on%20prevention%20and%20Response%20to%20Gender%20Based%20Violence.pdf">https://psyg.go.ke/docs/National%20Policy%20on%20prevention%20and%20Response%20to%20Gender%20Based%20Violence.pdf</a>
5. To invest USD 23 million for GBV prevention and response by 2022 and increase resource allocation up to USD 50 million by 2026	Commitment	National	2022	<a href="https://www.icrw.org/wp-content/uploads/2021/06/GEF_Kenya_GBV_summary-05.21-web.pdf">https://www.icrw.org/wp-content/uploads/2021/06/GEF_Kenya_GBV_summary-05.21-web.pdf</a>
<b>Prevention, detection and management of reproductive cancers, especially cervical cancer</b>				
1.. National Cancer Control Strategic Plan 2023-2027	Policy	National	2023-2027	Ministry of Health. 2023c. The National Cancer Control Strategy (2023–2027), Government of Kenya, June 2023. <a href="http://guidelines.health.go.ke:8000/media/NATIONAL_CANCER_CONTROL_STRATEGY_2023-2027_7uTQOP4.pdf">http://guidelines.health.go.ke:8000/media/NATIONAL_CANCER_CONTROL_STRATEGY_2023-2027_7uTQOP4.pdf</a>
2.. To reduce morbidity and mortality associated with the common cancers of the reproductive organs in men and women	Commitment	National	2022 - 2032	Ministry of Health. 2022. The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022. <a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf</a>
<b>Inclusion of essential packages of SRHR interventions within UHC and PHC schemes</b>				
1. Universal Health Coverage (UHC) strategies to enhance access to abortion related services	Commitment	Global	2019	ICPD25 – Nairobi Summit, Kenya Commitments <a href="https://ncpd.go.ke/wp-content/uploads/2022/06/Final-Kenya-Country-Commitments-for-ICPD25-Nairobi-Summit-2019.pdf">https://ncpd.go.ke/wp-content/uploads/2022/06/Final-Kenya-Country-Commitments-for-ICPD25-Nairobi-Summit-2019.pdf</a>
2. The Kenya AIDS Strategic Framework (KASF) 2014-2019	Legislation	National	2015	Kenya AIDS Strategic Framework (KASF) II 2020/21-2024/25 <a href="https://nsdcc.go.ke/kenya-aids-strategic-framework-kasf-ii/">https://nsdcc.go.ke/kenya-aids-strategic-framework-kasf-ii/</a>
<b>AHWB</b>				

Key WCAH areas	Type	Category	Date	Source
<b>National policy and programs for adolescent well-being (10-19 years) offering information and services in the public sector</b>				
1. National Guidelines for Provision Of Adolescent Youth-Friendly Services in Kenya	Legislation	Global	2016	Ministry of Health. 2016c. <u>National Guidelines for Provision of Adolescent and Youth-Friendly Services in Kenya, Second Edition</u> . Government of Kenya 2016 <a href="https://faces.ucsf.edu/sites/g/files/tkssra4711/f/YouthGuidelines2016.pdf">https://faces.ucsf.edu/sites/g/files/tkssra4711/f/YouthGuidelines2016.pdf</a>
2. To eliminate legal, policy, and programmatic barriers that impede youth participation in decision-making, planning, and implementation of development activities at all levels by 2030	Commitment	National	2019	ICPD25 – Nairobi Summit, Kenya Commitments <a href="https://ncpd.go.ke/wp-content/uploads/2022/06/Final-Kenya-Country-Commitments-for-ICPD25-Nairobi-Summit-2019.pdf">https://ncpd.go.ke/wp-content/uploads/2022/06/Final-Kenya-Country-Commitments-for-ICPD25-Nairobi-Summit-2019.pdf</a>
3. To improve reproductive health outcomes among adolescents and young people	Commitment	National	2022 - 2032	Ministry of Health. 2022. The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022. <a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf</a>
4. The Education Sector Policy on HIV and AIDS, 2013	Legislation	National	2013	Republic of Kenya. 2013. Education Sector Policy on HIV and AIDS, Ministry of Education Science and Technology, Government of Kenya, 2013 <a href="https://www.medbox.org/pdf/5e148832db60a2044c2d4486">https://www.medbox.org/pdf/5e148832db60a2044c2d4486</a>
5. The Newborn, Child and Adolescent Health Policy	Policy	National	2018	<a href="https://platform.who.int/docs/default-source/mca-documents/policy-documents/policy/ken-ad-17-03-policy-2018-eng-ncah-policy.pdf">https://platform.who.int/docs/default-source/mca-documents/policy-documents/policy/ken-ad-17-03-policy-2018-eng-ncah-policy.pdf</a>
<b>National standards for the delivery of AHWB information and services to adolescents, including on user fee exemption</b>				

Key WCAH areas	Type	Category	Date	Source
1. Establishment of a National Coordination Mechanism for Demographic Dividend	Commitment	National	2019	ICPD25 – Nairobi Summit, Kenya Commitments <a href="https://ncpd.go.ke/wp-content/uploads/2022/06/Final-Kenya-Country-Commitments-for-ICPD25-Nairobi-Summit-2019.pdf">https://ncpd.go.ke/wp-content/uploads/2022/06/Final-Kenya-Country-Commitments-for-ICPD25-Nairobi-Summit-2019.pdf</a>
2. National Plan of Action for Addressing Adolescent Health Teenage Pregnancy in Kenya	Legislation	National	2021	Ministry of Health. 2021. National Plan of Action for Addressing Adolescent Health Teenage Pregnancy in Kenya, Government of Kenya, September 2021. <a href="https://drive.google.com/file/d/1LgftjWEMtT-AyZOwI-VI9XrF7DA5A6i/view">https://drive.google.com/file/d/1LgftjWEMtT-AyZOwI-VI9XrF7DA5A6i/view</a>
3. National Adolescent Sexual and Reproductive Health Policy	Policy	National	2015	Ministry of Health. 2015. National Adolescent Sexual and Reproductive Health Policy, Government of Kenya, 2015. <a href="https://tcurbanhealth.org/wp-content/uploads/2018/03/Ministry-of-Health-ASRH-POLICY-2015.pdf">https://tcurbanhealth.org/wp-content/uploads/2018/03/Ministry-of-Health-ASRH-POLICY-2015.pdf</a>
<b>Legal systems to protect the rights of adolescents (both female and male) with a specific focus on minimum age of consent</b>				
1. To facilitate access to information and services for adolescents and youth	Commitment	Global	2019	ICPD25 – Nairobi Summit, Kenya Commitments <a href="https://ncpd.go.ke/wp-content/uploads/2022/06/Final-Kenya-Country-Commitments-for-ICPD25-Nairobi-Summit-2019.pdf">https://ncpd.go.ke/wp-content/uploads/2022/06/Final-Kenya-Country-Commitments-for-ICPD25-Nairobi-Summit-2019.pdf</a>
2. Marriage Act 2014	Legislation	National	2014	The Marriage Act, 2014. Special Issue, Kenya Gazette Supplement No. 62 (Acts No. 4) <a href="http://kenyalaw.org/kl/fileadmin/pdfdownloads/Acts/TheMarriageAct2014.pdf">http://kenyalaw.org/kl/fileadmin/pdfdownloads/Acts/TheMarriageAct2014.pdf</a>
3. Setting the age of consent (above 18 years) and education efforts to keep girls in school	Legislation	National	2015	Ministry of Health. 2015. National Adolescent Sexual and Reproductive Health Policy, Government of Kenya, 2015.

Key WCAH areas		Type	Category	Date	Source
					<a href="https://tciurbanhealth.org/wp-content/uploads/2018/03/Ministry-of-Health-ASRH-POLICY-2015.pdf">https://tciurbanhealth.org/wp-content/uploads/2018/03/Ministry-of-Health-ASRH-POLICY-2015.pdf</a>
4.	Guidelines for Conducting Adolescent HIV Sexual and Reproductive Health Research in Kenya	Legislation	National	2016	Ministry of Health. 2015. Guidelines for Conducting Adolescent HIV Sexual and Reproductive Health Research in Kenya, Government of Kenya, May 2015. <a href="https://icop.or.ke/wp-content/uploads/2016/10/Adolescents-Guidance-on-HIV-SRH-Research.pdf">https://icop.or.ke/wp-content/uploads/2016/10/Adolescents-Guidance-on-HIV-SRH-Research.pdf</a>
5.	To promote gender equity, eliminate medicalized FGM and eradicate all forms of gender-based violence and harmful reproductive health practices	Commitment	National	2022 - 2032	Ministry of Health. 2022. The National Reproductive Health Policy 2022 - 2032, Government of Kenya, July 2022. <a href="http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf">http://guidelines.health.go.ke:8000/media/The_National_Reproductive_Health_Policy_2022_-_2032.pdf</a>
<b>AHWB is embedded in national policies and plans with dedicated financing for AHWB programs</b>					
1.	Establishment of the Joint Interagency Coordinating Committee (JICC) for coordinating resource mobilization and allocation to support in-school adolescent	Legislation	National	2015	Ministry of Health. 2015. National Adolescent Sexual and Reproductive Health Policy, Government of Kenya, 2015. <a href="https://tciurbanhealth.org/wp-content/uploads/2018/03/Ministry-of-Health-ASRH-POLICY-2015.pdf">https://tciurbanhealth.org/wp-content/uploads/2018/03/Ministry-of-Health-ASRH-POLICY-2015.pdf</a>
2.	Improved coordination to respond to and address teenage pregnancy	Legislation	National	2021	Ministry of Health. 2021. Draft Action Plan for Addressing Adolescent Health and Teenage Pregnancy in Kenya, Government of Kenya, May 2021 <a href="https://ncpd.go.ke/wp-content/uploads/2021/10/Draft-Action-Plan-for-Addressing-Adolescent-Health-and-Teenage-Pregnancy-in-Kenya.pdf">https://ncpd.go.ke/wp-content/uploads/2021/10/Draft-Action-Plan-for-Addressing-Adolescent-Health-and-Teenage-Pregnancy-in-Kenya.pdf</a>

### ANNEX 3: ASSESSMENT OF SELECTED SUB-COMMITMENTS

Commitment /Policy/Legislation	Quality of Commitment /Policy/Legislation	Implementation progress	Source
<b>Linda Mama Program</b>			
Linda Mama package of health services	Very good	Moderate progress	<p>Abuya, et al., 2018. Stakeholder perspectives regarding transfer of free maternity services to National Health Insurance Fund in Kenya: Implications for universal health coverage. Int J Health Plann Manage. 2018 Apr;33(2):e648-e662. <a href="https://onlinelibrary.wiley.com/doi/abs/10.1002/hpm.2515">https://onlinelibrary.wiley.com/doi/abs/10.1002/hpm.2515</a></p> <p>Chuma et al 2013. Free maternal care and removal of user fees at primary-level facilities in Kenya: monitoring the implementation and impact—baseline report. Washington, DC: Health Policy Project, Futures Group. <a href="https://www.healthpolicyproject.com/pubs/400_KenyaUserFeesBaselineReportFINAL.pdf">https://www.healthpolicyproject.com/pubs/400_KenyaUserFeesBaselineReportFINAL.pdf</a></p> <p>Gitobu, CM et al. 2018. Satisfaction with delivery services offered under the free maternal healthcare policy in Kenyan public health facilities. JEPH, 2018, 1-9.. Retrieved from <a href="https://doi.org/10.1155/2018/4902864">https://doi.org/10.1155/2018/4902864</a></p> <p>Ministry of Health. 2013. Kenya: Free maternal health care policy launch. Government of Kenya, 2013.</p>



Commitment /Policy/Legislation	Quality of Commitment /Policy/Legislation	Implementation progress	Source
			<a href="http://www.knchr.org/Portals/0/EcosocReports/Implementing%20Free%20Maternal%20Health%20Care%20in%20Kenya.pdf">http://www.knchr.org/Portals/0/EcosocReports/Implementing%20Free%20Maternal%20Health%20Care%20in%20Kenya.pdf</a> Mutungi, B, W. 2018. Perceived factors influencing uptake of Linda mama maternal healthcare delivery programme among women in informal settlements in Starehe Sub County, Kenya. UON, Kenya. <a href="http://erepository.uonbi.ac.ke/handle/11295/104859">http://erepository.uonbi.ac.ke/handle/11295/104859</a> Orangi, et al., 2021. Examining the implementation of the Linda Mama free maternity program in Kenya. IJPM. 2021 Nov;36(6):2277-2296. <a href="https://onlinelibrary.wiley.com/doi/full/10.1002/hpm.3298">https://onlinelibrary.wiley.com/doi/full/10.1002/hpm.3298</a> Wamalwa, E. W. 2015. Implementation challenges of free maternity services policy in Kenya: the health workers' perspective. PAMJ. 22, 375. <a href="https://doi.org/10.11604/pamj.2015.22.375.6708">https://doi.org/10.11604/pamj.2015.22.375.6708</a>
<b>Quality maternal newborn and child health</b>			
1. To increase access to oxytocin	Very good	On track	Kibira D et al. Access to oxytocin and misoprostol for management of postpartum haemorrhage in Kenya, Uganda and Zambia: a cross-sectional assessment of availability, prices and affordability. BMJ Open. 2021 Jan 7;11(1):e042948. <a href="https://pubmed.ncbi.nlm.nih.gov/33414148/">https://pubmed.ncbi.nlm.nih.gov/33414148/</a>  Ammerdorffer A et al. Quality of oxytocin and tranexamic acid for the prevention and treatment of postpartum hemorrhage in Kenya, Nigeria, South Africa, and Tanzania. IJGO. 2022 Jun;158 Suppl 1(Suppl 1):46-55.
2. To increase the national routine immunization coverage of infants	Very good	Moderate progress	
3. To increase births attended by skilled personnel	Good	Insufficient progress	
4. Calling for and rolling out the widespread use of chlorhexidine for umbilical cord care to prevent often deadly sepsis infections in newborns	Very good	On track	
5. The Beyond Zero Campaign to improve maternal and child health in Kenya, and to reduce new HIV infections among children	Good	Insufficient progress	

Commitment /Policy/Legislation	Quality of Commitment /Policy/ Legislation	Implementation progress	Source
			<p><a href="https://obgyn.onlinelibrary.wiley.com/doi/full/10.1002/ijgo.14197">https://obgyn.onlinelibrary.wiley.com/doi/full/10.1002/ijgo.14197</a></p> <p>Ministry of Health. 2023b. Kenya National Immunization Policy Guidelines 2023. Vaccinate to Protect. Government of Kenya. <a href="http://guidelines.health.go.ke:8000/media/Kenya_National_Immunization_Policy_Guidelines_Version_signed.pdf">http://guidelines.health.go.ke:8000/media/Kenya_National_Immunization_Policy_Guidelines_Version_signed.pdf</a></p> <p>Allan, S et al. Inequities in childhood immunisation coverage associated with socioeconomic, geographic, maternal, child, and place of birth characteristics in Kenya. BMC Infect Dis 21, 553 (2021). <a href="https://doi.org/10.1186/s12879-021-06271-9">https://doi.org/10.1186/s12879-021-06271-9</a></p> <p>Maina LC, Karanja S, Kombich J. Immunization coverage and its determinants among children aged 12 - 23 months in a peri-urban area of Kenya. PAMJJ. 2013;14:3. <a href="https://www.panafrican-med-journal.com/content/article/14/3/full/">https://www.panafrican-med-journal.com/content/article/14/3/full/</a></p> <p>Republic of Kenya. (2022). National Treasury And Planning State Department for Planning. Second Voluntary National Review Report On the Implementation of The Sustainable Development Goals. June 2022. <a href="https://gender.go.ke/wp-content/uploads/2022/06/SDG-2020_VNR_Final_Kenya_.pdf">https://gender.go.ke/wp-content/uploads/2022/06/SDG-2020_VNR_Final_Kenya_.pdf</a></p> <p>Lusambili A et al. Health care workers' perspectives of the influences of disrespectful maternity care in rural</p>

Commitment /Policy/Legislation	Quality of Commitment /Policy/ Legislation	Implementation progress	Source
			<p>Kenya. IJERPH. 2020; 17(21):8218. <a href="https://doi.org/10.3390/ijerph17218218">https://doi.org/10.3390/ijerph17218218</a></p> <p>HNN Team &amp; PATH. 2016. Kenya launches high-impact action plan to protect mothers and newborns. <a href="https://www.healthynewbornnetwork.org/blog/kenya-launches-high-impact-action-plan-protect-mothers-newborns/">https://www.healthynewbornnetwork.org/blog/kenya-launches-high-impact-action-plan-protect-mothers-newborns/</a></p> <p>Brown, L et al. Cost and consequences of using 7.1 % chlorhexidine gel for newborn umbilical cord care in Kenya. BMC Health Serv Res 21, 1249 (2021). <a href="https://doi.org/10.1186/s12913-021-06971-7">https://doi.org/10.1186/s12913-021-06971-7</a></p> <p>Ministry of Health. (2018). Kenya National Nutrition Action Plan (KNAP) 2018 – 2022. <a href="https://scalingupnutrition.org/wp-content/uploads/2020/10/Kenya-National-Nutrition-Action-Plan-2018-22.pdf">https://scalingupnutrition.org/wp-content/uploads/2020/10/Kenya-National-Nutrition-Action-Plan-2018-22.pdf</a></p> <p>WHO. Regional Office for Africa. Kenya celebrates immunization as more children are reached with RTS,S 23 April 2023. <a href="https://www.afro.who.int/countries/kenya/news/kenya-celebrates-immunization-more-children-are-reached-rtss">https://www.afro.who.int/countries/kenya/news/kenya-celebrates-immunization-more-children-are-reached-rtss</a></p> <p>UNFPA. Kenya needs greater investments in midwifery for life-saving maternity care. 7 May 2021 <a href="https://kenya.unfpa.org/en/news/kenya-needs-greater-investments-midwifery-life-saving-maternity-care">https://kenya.unfpa.org/en/news/kenya-needs-greater-investments-midwifery-life-saving-maternity-care</a></p>

Commitment /Policy/Legislation	Quality of Commitment /Policy/Legislation	Implementation progress	Source
			<p>Acting On The Call: Ending Preventable Child and Maternal Deaths Report June 2015  <a href="https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf">https://2012-2017.usaid.gov/sites/default/files/documents/1864/USAID-2015-Acting-on-the-Call.pdf</a></p> <p>How Mobile Clinics are Increasing Access To Health Care. The Beyond Zero Campaign in Kenya  <a href="https://borgenproject.org/tag/the-beyond-zero-campaign-in-kenya/">https://borgenproject.org/tag/the-beyond-zero-campaign-in-kenya/</a></p> <p>UNFPA. Maternal Health and HIV.  <a href="https://kenya.unfpa.org/en/topics/maternal-health-and-hiv">https://kenya.unfpa.org/en/topics/maternal-health-and-hiv</a></p> <p>'Beyond Zero' clinics: How multi-million shilling initiative flopped. Nation Media Group. Tuesday, May 10, 2022  <a href="https://nation.africa/kenya/health/-beyond-zero-clinics-how-multi-million-shilling-initiative-flopped-3809518">https://nation.africa/kenya/health/-beyond-zero-clinics-how-multi-million-shilling-initiative-flopped-3809518</a></p>
<b>Universal health coverage (UHC)</b>			
To promote shared prosperity by making strategic investments in the health sector which will contribute to equitable growth and development	Very good	On track	<p>Kamuyango A et al. Trends and contributing factors to contraceptive use in Kenya: a large population-based survey 1989 to 2014. Int J Environ Res Public Health. 2020 Sep 27;17(19):7065.  <a href="https://www.mdpi.com/1660-4601/17/19/7065">https://www.mdpi.com/1660-4601/17/19/7065</a></p> <p>Ministry of Health. 2016b. Kenya Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Investment Framework. Ministry of Health, Government of Kenya January 31, 2016.  <a href="https://www.globalfinancingfacility.org/sit">https://www.globalfinancingfacility.org/sit</a></p>
To prevent maternal deaths and morbidities through integrating comprehensive sexual and reproductive health interventions into national UHC strategies	Poor	Insufficient progress	
Establishment of laws to underpin realization of Universal Health Coverage in Kenya	Very good	On track	
Establishment of Primary Health Care Networks (PCNs)	Very good	On track	

Commitment /Policy/Legislation	Quality of Commitment /Policy/Legislation	Implementation progress	Source
UHC Policy	Very good	On track	<a href="#">es/gff_new/files/Kenya-Investment-Case.pdf</a>  Owino L et al. 2020. The missing link in Kenya's universal health coverage experiment: a preventive and promotive approach to SRHR. Sex Reprod Health Matters; 28(2):1851347. <a href="https://pubmed.ncbi.nlm.nih.gov/33393897/">https://pubmed.ncbi.nlm.nih.gov/33393897/</a>  FP2030. Kenya <a href="https://www.fp2030.org/kenya/">https://www.fp2030.org/kenya/</a>  Republic of Kenya. 2020. National Treasury And Planning State Department for Planning. Second Voluntary National Review on the Implementation of the Sustainable Development Goals <a href="https://sustainabledevelopment.un.org/content/documents/26360VNR_2020_Kenya_Report.pdf">https://sustainabledevelopment.un.org/content/documents/26360VNR_2020_Kenya_Report.pdf</a>
UHC strategies to facilitate access to legally approved safe abortion, measures to prevent unsafe abortions, and provision of post-abortion care	Poor	Insufficient progress	
To increase mCPR for married women from 58% to 64% by 2030	Good	Insufficient progress	
Improve availability and utilization of quality FP data for decision-making	Good	Insufficient progress	
Sexual reproductive health rights			
1. To increase modern contraceptive prevalence (mCPR) for married women from 58% to 64% by 2030	Good	Insufficient progress	FP2030. Kenya <a href="https://www.fp2030.org/kenya/">https://www.fp2030.org/kenya/</a>  Kamuyango A et al. Trends and contributing factors to contraceptive use in Kenya: a large population-based survey 1989 to 2014. Int J Environ Res Public Health. 2020 Sep 27;17(19):7065. <a href="https://www.mdpi.com/1660-4601/17/19/7065">https://www.mdpi.com/1660-4601/17/19/7065</a>
2. To improve the availability and utilization of quality family planning data for decision-making	Good	Insufficient progress	
Adolescent pregnancy			
1. To facilitate access to information and services for adolescents and youth	Average	Moderate progress	UNFPA. 2023. Kenya Demographic and Health Survey 2022 key indicators UNFPA. 2023. Kenya Demographic and Health Survey 2022 key indicators report shows drop in FGM, teen pregnancy rates
2. Marriage Act 2014	Very good	On track	
3. Setting the age of consent (above 18 years)	Very good	On track	

Commitment /Policy/Legislation	Quality of Commitment /Policy/Legislation	Implementation progress	Source
4. Education efforts to keep girls in school	Average	Moderate progress	<a href="https://kenya.unfpa.org/en/news/kenya-demographic-and-health-survey-2022-key-indicators-report-shows-drop-fgm-teen-pregnancy">https://kenya.unfpa.org/en/news/kenya-demographic-and-health-survey-2022-key-indicators-report-shows-drop-fgm-teen-pregnancy</a>
5. Establishment of the Joint Interagency Coordinating Committee (JICC) for coordinating resource mobilization and allocation to support in-school adolescent	Good	No data available	Alarm as Kenya pulls out of regional accord on teen sex education. Nation Media Group. Wednesday, May 17, 2023 <a href="https://nation.africa/kenya/health/alarm-as-kenya-pulls-out-of-regional-accord-on-teen-sex-education-4237324?s=03">https://nation.africa/kenya/health/alarm-as-kenya-pulls-out-of-regional-accord-on-teen-sex-education-4237324?s=03</a>
6. Improved coordination to respond to and address teenage pregnancy	Good	Moderate progress	UNFPA. 2023. Kenya Demographic and Health Survey 2022 key indicators report shows drop in FGM, teen pregnancy rates <a href="https://kenya.unfpa.org/en/news/kenya-demographic-and-health-survey-2022-key-indicators-report-shows-drop-fgm-teen-pregnancy">https://kenya.unfpa.org/en/news/kenya-demographic-and-health-survey-2022-key-indicators-report-shows-drop-fgm-teen-pregnancy</a>  Republic of Kenya. 2020. National Treasury And Planning State Department for Planning. Second Voluntary National Review on the Implementation of the Sustainable Development Goals <a href="https://sustainabledevelopment.un.org/content/documents/26360VNR_2020_Kenya_Report.pdf">https://sustainabledevelopment.un.org/content/documents/26360VNR_2020_Kenya_Report.pdf</a>  Kenyan Counties Take Action to Prevent Teenage Pregnancies. June 10, 2019 <a href="https://www.fp2030.org/news/kenyan-counties-take-action-prevent-teenage-pregnancies/">https://www.fp2030.org/news/kenyan-counties-take-action-prevent-teenage-pregnancies/</a>
<b>Gender-based violence including female genital mutilation</b>			
1. Addressing sexual and GBV and harmful practices including striving to eliminate child, early and forced marriages, and FGM	Good	On track	Silencing Women.Tracking Femicide Cases reported in Kenyan Newspapers from 2016 to date.

Commitment /Policy/Legislation	Quality of Commitment /Policy/Legislation	Implementation progress	Source
2. Kenya is co-leading the Gender-Based Violence Action Coalition. In 2021, the GoK sought to leverage the Generation Equality platform as an opportunity to recommit to ending all forms of GBV and FGM, and accelerate action at the national and global levels	Very good	Moderate progress	<a href="https://www.africadatahub.org/femicide-kenya">https://www.africadatahub.org/femicide-kenya</a>  Action Coalitions Commitments Dashboard. 2023 Survey <a href="https://dashboard.commitments.generationequality.org/2023survey/">https://dashboard.commitments.generationequality.org/2023survey/</a>  UNICEF. (2021) The medicalization of FGM in Kenya, Somalia, Ethiopia and Eritrea <a href="https://www.unicef.org/esa/media/8866/file/The-Medicalization-of-FGM-2021.pdf">https://www.unicef.org/esa/media/8866/file/The-Medicalization-of-FGM-2021.pdf</a>
3. The GoK commits to finance GBV and FGM programs and institute accountability frameworks for tracking expenditure.	Very good	No data available	Republic of Kenya. (2020). National Treasury And Planning State Department for Planning. Second Voluntary National Review on the Implementation of the Sustainable Development Goals <a href="https://sustainabledevelopment.un.org/content/documents/26360VNR_2020_Kenya_Report.pdf">https://sustainabledevelopment.un.org/content/documents/26360VNR_2020_Kenya_Report.pdf</a>
4. Elimination of medicalized FGM and eradication of all forms of gender-based violence and harmful reproductive health practices	Good	Insufficient progress	KNBS and ICF. 2023. Kenya Demographic and Health Survey 2022. Nairobi, Kenya, and Rockville, Maryland, USA: KNBS and ICF <a href="https://www.knbs.or.ke/wp-content/uploads/2023/07/Kenya-DHS-2022-Main-Report-Volume-2.pdf">https://www.knbs.or.ke/wp-content/uploads/2023/07/Kenya-DHS-2022-Main-Report-Volume-2.pdf</a>