

WHO KENYA NEWSLETTER



Image

Community Health Worker
takes the blood pressure of
an elderly man in Laikipia
County April, 2024.



**World Health
Organization**

Kenya



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This Month

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ii CONTENTS

FORWARD

02 Message from the WHO Kenya Representative

03 HEALTHIER POPULATIONS

Expanding Tobacco-Free Farms

"During the picking season, my children used to miss 2-3 days of school a week to help make money."

07 HUMAN RESOURCES FOR HEALTH

Health Workforce Doubles

In the past 10 years Kenya's health workforce has doubled. "With an increase in staff, we are now able to attend to our patients efficiently".

09 UNIVERSAL HEALTH COVERAGE

Laikipia's Community Health Promoters

WHO provides technical assistance to support Laikipia County with operationalisation of PCNs

15 UNIVERSAL HEALTH COVERAGE

Primary Health Care Network Activities Roll Out in Counties

Isiolo, Bomet and Marsabit receive support to roll out the actualisation of Primary Care Networks.

17 GENDER

Gender, Equity & Human Rights in Kenyas Health Sector

WHO hold 3-day workshop focused on enhancing integration of gender, equity, and human rights into Kenya's health sector response.



17 HIV & AIDS

Three-Tier HIV Testing

WHO, conducted a Master Training of Trainers workshop with the new rollout of the three-tier HIV testing.

18 ONE HEALTH

Enhancing One Health in Africa

In May and June, WHO Kenya advanced One Health through workshops in Nairobi and Laikipia.

18 CHILD HEALTH

Baby Friendly Hospital Initiative

WHO supports a 6-day Baby Friendly Hospital Initiative Workshop in Nakuru

19 SEXUAL REPRODUCTIVE HEALTH

PS Kimtai Discusses Sexual & Reproductive Health Program

Dr. Diallo and team meet with Mr. Harry Kimtai, to discuss support for the Sexual and Reproductive Health & Rights program.

OTHER STORIES

20 Health Systems for Infants

20 Laikipia Visit and Medicine Handover

20 77th World Health Assembly

21 David Rudisha Advocates for Clean Air

21 HIV Service Delivery Summit

22 Health Labour Market Analysis

22 Kenya's First Health Workforce Policy

23 Road Safety Report in Africa

23 Vaccine Safety in Africa

24 Polio Investigation in Kamukunji

24 Verbal Autopsy Pilot

25 Thank you! From the WHO Kenya



**We champion
health and a better
future for all.**



Message from the WHO Kenya Representative

Dear Partners and Colleagues,

I am pleased to present the latest updates from WHO Kenya in our newsletter.

In May, WHO celebrated World No Tobacco Day under the theme "Protecting Children from Industry Interference." Kenya highlighted its ongoing expansion of the Tobacco-Free Farms project, now reaching three new counties: Bungoma, Meru, and Busia. This initiative, supported by WHO and partners, is helping tobacco farmers transition to growing high-iron beans (Page 3).

In June, Kenya launched the Health Labour Market Analysis, supported by WHO. This document is a key instrument for enhancing health workforce policies for Universal Health Coverage. The launch celebrated Kenya's significant achievement of doubling its health workforce over the past 10 years (Page 7). In July, Kenya marked a key milestone by drafting Kenya's first Human Resources for Health policy.

In Laikipia County, WHO is providing technical assistance and support for the operationalization of Primary Care Networks. This includes strengthening community health promoters, who play a crucial role in health education, disease prevention, health emergencies, linking communities to health services and more. (Page 9).

Other stories of interest include the strengthening of a baby friendly hospital initiative in Nakuru County (Page 10), Kenyan runner David Rudisha's advocacy for clean air at the 77th World Health Assembly (Page 12), and the piloting of a verbal autopsy project in Kakamega and Kitui counties (Page 13).

We hope you find these updates informative and insightful. Thank you for your continued support and collaboration as we work towards achieving health for all in Kenya.

Best regards,
Dr. Abdourahmane Diallo



"Kenya is committed to achieving health for all through action. Improving the quality and quantity of the health workforce will help make universal health coverage a reality."

- Dr. Abdourahmane Diallo



Expanding Tobacco-Free Farms

WHO EXTENDS SUPPORT TO BUNGOMA, MERU AND BUSIA



"During the picking season, my children used to miss 2-3 days of school a week to help make money,"

recalls Moses, an ex-tobacco farmer from Bungoma County. Now, his children attend school regularly, as growing high-iron beans (Nyota) requires less labour and yields more income. This transformation is part of the Tobacco-Free Farms initiative, a joint effort by WHO, WFP, FAO, and the Kenyan government.

On May 31st, World No Tobacco Day was celebrated under the theme "Protecting Children from Industry Interference." Tobacco farming is labour-intensive with low financial returns, often involving children and impacting their education and health.

Initially launched in Migori County, the initiative has expanded to Bungoma, Meru, and Busia counties. So far 6618 tobacco farmers have successfully transitioned to

high-iron beans, enjoying higher incomes and better health. Many schools in Kenya accept beans as payment for fees, making education more accessible and improving family nutrition.

Moses' switch from tobacco to Nyota beans has significantly improved his family's financial stability, health, and educational opportunities. In 2024, WHO supports sensitizing tobacco farmers in Bungoma, Busia, and Meru counties, with 1,581 farmers sensitized in Bungoma so far. This comprehensive support system helps ensure a sustainable transition to alternative crops.

Kenya's commitment to this initiative is part of a broader strategy to combat the adverse effects of tobacco farming, promoting sustainable agriculture and improving livelihoods. As the project expands, it promises a brighter future for more Kenyan farmers and their families, fostering a healthier, more educated, and economically stable community.



Air Pollution

Tobacco farmer stands outside a hut where tobacco is dried during the curing process. The black char on the side shows where the smoke gets released. This affects air quality in his neighbourhood as far as 5km away causing illness to families.



Sensitisation Meetings

Catherine, a once tobacco farmer attends a meeting with WHO. Since transitioning she talked about her positive experiences since the shift, including her lung health as she no longer coughs as much as she used to.



Environmental Effects

On many tobacco farms, many trees are cut down as firewood during the tobacco curing process. Farmer Moses Kikulesi noted, "when I started tobacco farming I had a lot of trees, but in the end it left me without any."

Sensitisation meetings in Bungoma County **in Images****BUNGOMA COUNTY**

Tobacco farmers attend a meeting with WHO and partners to learn about the benefits of growing high-iron beans. It's the perfect time to ask questions, learn the benefits and plan their transition.

**TOBACCO FARMER, DAWIN LUSAKIA**

Dawin attends a meeting with his grandson. "I am excited to grow other crops and not be faced with the effects of tobacco and it's illnesses."



PESTICIDES

Dawin from Bungoma county pulls out a packet of pesticides from his pocket, as well as a chemical box that he stores in his house that he uses for tobacco farming.

**NON-COMMUNICABLE DISEASE LEAD, DR JOYCE NATO**

Dr. Nato from WHO talks to farmers about the health risks of growing tobacco, including the potential for nicotine poisoning, respiratory issues, long-term effects such as cancer & more.



Kenya's Health Workforce Doubles Over the Past 10 Years



"With an increase in staff, we are now able to attend to our patients efficiently and, as a result, we have noticed a large increase in our patients."

**Railways Health Centre in
Kisumu County**

Robert, PHARMACIST

Health workers are fundamental to strong health systems and essential for progress toward universal health coverage (UHC).

Over the past decade, Kenya has doubled its health workforce, significantly improving patient care. However, challenges in equitable distribution across counties remain. The Railways Health Clinic is one such example whereby it has expanded its staff from 10 to 30 over the past five years, reflecting the broader national initiative to enhance healthcare delivery.

WHO has supported Kenya's health workforce by enhancing data utilization, promoting strategic dialogues to facilitate strategic investments. Guided by the Kenya Human Resources for Health Strategy 2019-2023 and the Health Labour Market Analysis launched in June 2024 (page 20), WHO's efforts have informed policy recommendations and resulted in the Kericho National Declaration outlining actionable steps for the Ministry of Health.

Strengthening the health workforce is crucial for achieving UHC in Kenya. Dr. Diallo Abdourahmane, WHO Representative to Kenya, emphasizes, "Health workers are the backbone of the system. The milestones from the national dialogue are vital to making UHC a reality."



Digitalization has significantly transformed healthcare delivery at Railways Health Clinic in Kisumu County. The shift from manual data collection to digital systems has enabled timely and accurate reporting, enhancing overall efficiency.

“Currently, we can report on the specific services that we are offering and identify the specific services we need,” says Flavia Naudi, Data Manager captured at the health centre.

With 6 dedicated digital data staff, the clinic can now track patient services and identify specific needs, aiding in more informed decision-making.

By leveraging digital tools, the clinic ensures that healthcare services are responsive and well-coordinated, ultimately contributing to better health outcomes for the community.

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The Vital Role of Community Health Promoters in Laikipia County



A 100 year old man gets his blood pressure checked by a community health promoter in Laikipia. “According to WHO standards, your blood pressure is optimal ” read the machine.

Primary health care (PHC) is the cornerstone of effective health systems, providing essential services that are universally accessible and cost-effective. Despite Laikipia County's challenging terrain, significant strides have been made in extending health services to remote areas through Community Health Promoters (CHPs).

Laikipia's PHC system includes 20 Community Health Units (CHUs) and 237 CHPs. These promoters conduct home visits, which are crucial for health education, disease prevention, maternal and child health, infectious diseases surveillance, health emergencies and in linking communities to health services. They embody PHC principles as outlined by WHO standards, acting as the first point of contact for health concerns.

In 2021, Kenya introduced the Primary Healthcare Networks (PCNs) approach, initially piloting in 5 counties which has now expanded to over 13 counties. The Kenya Primary Healthcare Strategic Framework 2019-2024, supported by WHO, has been instrumental in this progress. WHO is now leading discussions for the new PHC strategic framework 2025-2030, focusing on Sexual and Reproductive Health and UHC integration.



SMART APP

Community Health Promoters use an eCHIS app on their smartphones to record health data during their household visits.



Primary health care networks ensure essential services reach every community, and empower individuals to lead healthier lives.

However, several gaps hinder effective PHC delivery in Laikipia. The rugged terrain forces many residents to walk long distances to health facilities, with only 59% of facilities accessible year-round. Additionally, inadequate digital infrastructure complicates service delivery. Only 18% of facilities use Electronic Medical Records (EMR), and many CHPs lack reliable mobile and internet connectivity.

WHO is currently providing dedicated technical assistance and support to Laikipia County with the operationalisation of PCNs, which includes strengthening the level 1 of the health system (community level) for improved demand creation for integrated UHC services packages. This support includes capacity building across Sexual and Reproductive Health



and Rights thematic areas such as Emergency Obstetric and Newborn Care, Postpartum Hemorrhage, Reproductive Health Self-Care, Neonatal Health, data analytics and visualization, and Continuous Quality Improvement using the Kenya Quality Model of Health Framework. Additionally, WHO is involved in catalytic procurement of equipment, commodities, and supplies.

Laikipia County's PHC network, driven by community health promoters, showcases the power of community-driven health care. By leveraging the dedication of CHPs and fostering collaborative efforts, Laikipia can move closer to achieving UHC, improving health outcomes, and promoting a healthier, more resilient community.



Community Health Care Workers in Laikipia **in Images**



Home Visits

A community health worker visits a temporary Massai Manyatta which has been set up for moran (men) who will be transitioning to elders. The health promoter has come to ensure members of the community are healthy and know where their closest health facility is.



Transport of Samples

George Metto helps to transport blood and stool samples between Ipolei dispensary and a larger facility in Dol Dol. Ipolei only has 1 nursing officer and no laboratory. Patients might wait 4-5 days to hear results.



Health Checkup

A community health promoter takes the blood pressure of Nanare Meshami, a lady who is married to one of the moran that will be transitioning to being an elder. She also gets asked a few follow up questions to ensure she is healthy.



The Laikipia “Ambulance”

Many parts of Laikipia are hard to reach, with little transport options. The probox, is often used in emergency cases to transport patients to larger facilities.



Nutrition Checkup

“I didn’t come far, I only walked 5km” said Enis Nanrerio who was taking her daughter Malalua for a nutrition checkup at Kimanji Sub-District hospital.



Respiratory Problems

Joseph Larpei brings his daughter Catherine to Kimanji Sub-District Hospital after she began coughing and struggling to breathe. They traveled over 20 kilometers by motorbike, as their nearest facility, staffed with just one nurse, was unavailable.



WHO's Strategic Assessment of Sexual Reproductive Health in Laikipia County

Story by John Kismir

The WHO team visited Laikipia County in July to conduct a rapid assessment of sexual reproductive health services. This assessment was part of a broader initiative to evaluate and enhance the healthcare infrastructure in the region. The WHO team was accompanied by the county health leadership, reflecting a strong collaborative effort between international and local health authorities. Their visits included key healthcare facilities in Laikipia North (Doldol), Laikipia East (Lamuria), and Nyahururu Referral Hospital in the west. During these visits, the team conducted thorough evaluations.

The data gathered from this assessment is critical for developing a comprehensive plan to address key priority areas in Laikipia County's healthcare system. Among the agreed priorities are the strengthening of Maternal and Perinatal Death Surveillance and Response (MPDSR) committees, which are essential for monitoring and reducing maternal and perinatal mortality rates. Additionally, there is a focus on improving Post Abortion Care (PAC) services to ensure that women receive high-quality care and support.

Community engagement, particularly among pastoralist communities where teenage pregnancy rates are high, was also identified as a crucial area. This will involve educational programs and outreach activities to address the cultural and social factors contributing to teenage pregnancies. Furthermore, a training plan for healthcare workers on infection prevention and control (IPC) and data quality management at the facility level was established, aiming to enhance the overall effectiveness and safety of healthcare services.





Primary Health Care Networks Activities Rollout in New Counties

Story by John Kismir

Funded by

STBF, the Government of
Canada, the Department of
Health and Social Care-UK



Targeting

Isiolo County, located in central Kenya, **Marsabit County**, in northern Kenya, and **Bomet County**, situated in the Rift Valley region.

WHO-Kenya continues to support the Ministry of Health in rolling out activities toward the actualization of the Primary Health Care Networks (PCNs) model in Kenya.

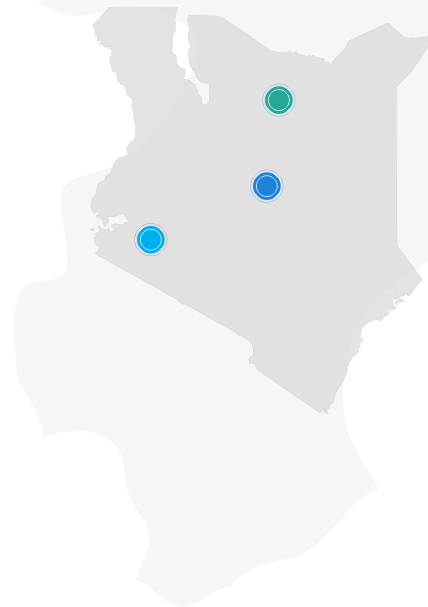
This is in line with the government's plan to establish PCNs in all sub-counties across the country. The PCN (Primary Care Networks) project activities aim to build the capacity of county departments of health in actualizing the Universal Health Coverage (UHC) agenda by ensuring they can implement person-centered services closer to communities and assure quality, continuity, and sustainability of health care delivery services.

The Kenya Primary Health Care Strategic Framework 2019-2024 recognizes PCNs as the optimal model for providing comprehensive health care through efficient and effective client-centered community-level health care services. A critical aspect of this initiative is the integration of Sexual Reproductive Health and Rights (SRHR) services within the PCN framework to ensure that communities can access a broad range of reproductive health services, including family

planning, maternal and child health, and post-abortion care and treatment.

The PCN establishment activities include sensitization of County Health Management Teams and various stakeholders. It also entails carrying out a health facility baseline assessment, data analysis, and report writing. The findings of the reports are disseminated to the stakeholders which include Sub-County Health Management, Facility in-charges, Community Health Assistants, Hospital Managers, Level 4 sub-county multi-disciplinary teams, and County Directors). The findings also highlight gaps and potential opportunities for strengthening Primary Health Care as the foundation for accelerating Universal Health Coverage (UHC). Finally, the multidisciplinary teams are trained for comprehensive service provision.

In Bomet, the project is targeted at Sotik, Chepalungu, and Konoin sub-counties, while in Marsabit, the sub-counties of Moyale, Saku, North Horr, and Laisamis will benefit. In Isiolo's Merti and Isiolo sub-counties, the PCNs have already been established.





Gender, Equity & Human Rights in Kenya's Health Sector



May



WHO, MoH, WHO, UN Women, UNICEF, UNFPA, AMREF & more.

In a significant stride towards addressing gender inequalities in healthcare, the WHO Country Office in Kenya, in collaboration with WHO AFRO/HQ, recently organized a transformative initiative to integrate gender equity and human rights (GER) into health sector responses. In May 2024, a round table addressed gender-related healthcare challenges in Kenya. Following the, a week-long training workshop from May 27-30, in Nyahururu enhanced health professionals' capacities to implement GER principles using WHO tools like the Gender Analysis Matrix and the Health Equity Assessment Toolkit (HEAT).

The workshop produced roadmaps for GER integration, equipping participants to tackle gender-related barriers in health programs. The Ministry of Health and WHO committed to ongoing capacity building and advocacy, advancing inclusive and equitable health systems in Kenya.

Enhancing HIV Diagnosis Accuracy: The Three-Tier HIV Testing Procedure

May



Ministry of Health, WHO

With the new rollout of the three-tier HIV testing procedure currently underway, the Ministry of Health, with support from WHO, conducted a Master Training of Trainers (TOT) workshop in May.

The workshop included comprehensive training on HIV test kit instructions and quality control practices for health workers who will cascade the testing method at lower levels.

This training is a critical step in preparing for the nationwide implementation of the three-tier HIV testing algorithm, aimed at improving the accuracy and reliability of HIV diagnosis throughout the country.



Strengthening One Health in the Horn of Africa



May & June

WHO, FAO, OIE, UNEP
Regional Ministries

One Health is an integrated approach that emphasizes the interconnection between human, animal, and environmental health. In May and June, WHO Kenya advanced this approach through workshops in Nairobi and Laikipia. The Nairobi workshop, held from May 20-22, focused on enhancing cross-sectoral and cross-border cooperation for health security in the Horn of Africa. Participants presented evidence-based priorities, agreed on actionable recommendations for outbreak preparedness, and facilitated policy dialogue among One Health ministries.

In June, in collaboration with FAO Kenya, WHO supported the establishment of the County One Health Unit (COHU) in Laikipia, addressing zoonoses and improving coordination between public and animal health systems. These workshops marked significant progress in fostering a coordinated response to health threats in Kenya.



Promoting Infant Health through the Baby Friendly Hospital Initiative



June

WHO Afro, Irish Aid, MOH,
Children's Oncology Group,
Kenya Paediatric Association

In June, WHO supported a six-day Baby Friendly Hospital Initiative Workshop in Nakuru County, funded by Irish Aid. This comprehensive workshop empowered 39 health workers from nine counties, focusing on supporting mothers with breastfeeding, cup feeding for pre-term infants, and correct breastfeeding positioning.

Practical sessions at the Margaret Kenyatta Mother Baby Wing, Nakuru County Hospital, featured demonstrations of Kangaroo Mother Care, emphasizing breastfeeding as a lifesaving intervention. The training curriculum was adapted from the WHO Baby Friendly Hospital Initiative training manual. Participants, including representatives from WHO AFRO, Irish Aid, MOH Kenya, COG, and Kenyapaeds, committed to strengthening systems and practices within their counties and hospitals to promote infant health.



WHO and PS Kimtai Discuss Sexual and Reproductive Health Program



May



WHO, Ministry of Health

WHO-Kenya Representative Dr. Diallo and team met with Ministry of Health Principal Secretary for Medical Services, Mr. Harry Kimtai, to discuss support for the Sexual and Reproductive Health and Rights program.

WHO-supported activities in Kenya aim to increase access to high-quality, integrated post-abortion care, family planning, and comprehensive sexual and reproductive health services using a primary health care approach. This includes strengthening the health workforce, including community health workers, to enhance service quality and accessibility, and improving capacities for data generation, analysis and communication. Dr. Diallo noted the significant need and limited resources, expressing hope that WHO funding will complement existing investments from the Ministry of Health and other partners. The project is funded by the Susan Thompson Buffett Foundation.

Strengthening Health Systems for Infants



May



WHO, Ministry of Health, USAID, Kemri, the University of Nairobi, the Kenya Pediatrics Association, county representatives & more.

Strengthening health systems for infants is crucial for improving neonatal and child mortality rates. In May, with support from USAID, WHO and the Ministry of Health conducted a workshop in Machakos from May 14-16, aimed at improving health systems for infants under six months at risk of poor growth and development.

During the workshop, stakeholders performed a SWOT analysis to guide local adaptations of WHO's 2023 wasting guidelines. Participants included members from KEMRI, the University of Nairobi, the Kenya Pediatrics Association, partners, UN agencies, and county representatives. This collaborative effort is key to enhancing child health outcomes in Kenya.



WHO Hands over 2.8 million worth of supplies to Laikipia



May



WHO, Laikipia County

In May, WHO representative Dr. Diallo and his team visited Laikipia County, meeting with Governor Joshua W. Irungu in Nanyuki. This visit reciprocated the Governor's courtesy call to WHO in Nairobi last June and highlighted WHO's effort to engage more closely with county governments under Kenya's devolution policy.

The visit included presentations on Laikipia County's health initiatives and a handover of medicines and supplies worth 2.8 million KSH, including cholera and pneumonia kits, malnutrition, and emergency medicines. Discussions centered on the County's health priorities and potential areas of collaboration. Laikipia County invests over 40% of its annual budget in health, significantly higher than Kenya's average of 20-30%. This engagement underscores the importance of adapting WHO's support to both the central Ministry of Health and the sub-national level, aiming for a more integrated approach to health and well-being across Kenya.



Kenya at the World Health Assembly



May

WHO Headquarters,
Kenya Ministry of Health

"Pleased to welcome my sister, Health Secretary Susan Nakhumicha, to WHO today, to discuss Kenya's efforts on universal health coverage, primary health care, and expanding health workforce training," tweeted Dr. Tedros. At the 77th World Health Assembly (WHA77) in Geneva, held from May 27 to June 1, 2024, Kenya's Ministry of Health, led by Susan Nakhumicha, actively engaged in key global health discussions and decisions.

The Assembly adopted a new pandemic agreement and amendments to the International Health Regulations, enhancing global preparedness and response to health emergencies. WHO's Fourteenth General Programme of Work (GPW14) for 2025-2028 was also approved, focusing on climate change, health system strengthening, and emergency preparedness. Additional resolutions targeted reducing maternal, newborn, and child mortality, addressing antimicrobial resistance, and enhancing mental health support during emergencies.





David Rudisha Advocates for Clean Air at WHA77



May



WHO Headquarters

Kenya's 800 meters world record holder, David Rudisha, participated in the 77th World Health Assembly (WHA77) in Geneva, leading a master running class at the Walk the Talk: Health for All Challenge. Rudisha used this platform to urge global action against air pollution, emphasizing the necessity of clean air for athletes and public health.

Highlighting that over 80% of the world's population lives in areas with substandard air quality, Rudisha called for stronger efforts to ensure cleaner air. He stressed that poor air quality affects not only athletes' performance but also the health of spectators and local communities. His advocacy aligns with WHA77's broader focus on climate change and health, underscoring the critical intersection of environmental health and athletic excellence.

HIV Service Delivery Integration Summit, Mombasa

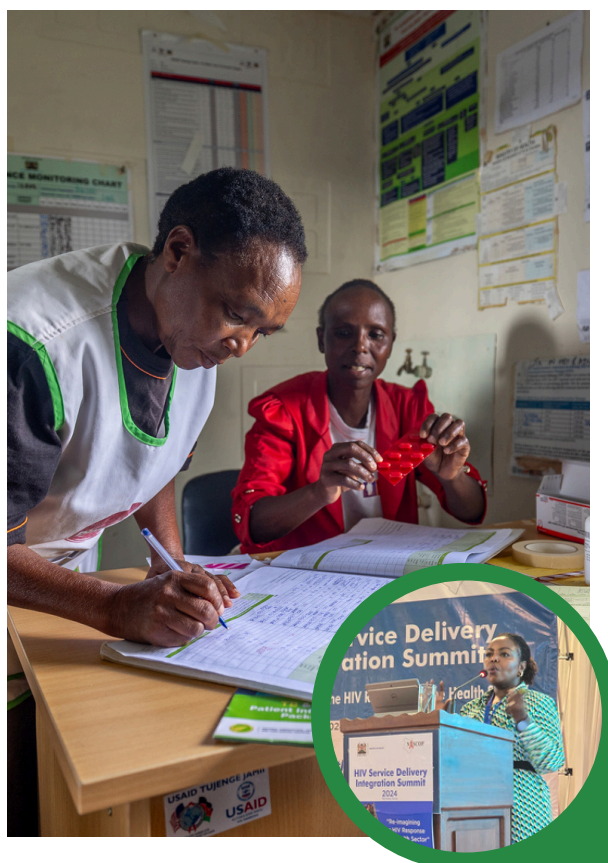


June

WHO, Ministry of Health
& more.

"With the medicines and science available today, we can ensure all babies are born—and remain—HIV-free," said UNAIDS executive director Winnie Byanyima. At the HIV Service Delivery Integration Summit in Mombasa, WHO participated in launching national HIV strategic documents, which were reviewed and updated following WHO guidance.

This summit, the first of its kind globally, attracted over 500 participants and emphasized the urgent need for integrated HIV services and increased domestic funding. Kenya, part of the Global Alliance for Ending AIDS in Children by 2030, showcased significant progress, with 87% of infants born to HIV-positive women receiving timely diagnosis. However, challenges remain, as Kenya's mother-to-child transmission rate averages 8.6%. The Ministry of Health's four-point action plan aims to eliminate AIDS in children by 2027, focusing on preventing mother-to-child transmission and improving access to antiretroviral treatment.



Launch of the Health Labour Market Analysis Report



June

WHO, Ministry of Health,
& more.

On 20th June 2024, Kenya's Ministry of Health launched the Health Labour Market Analysis (HLMA) Report 2023. This comprehensive report, supported by the Working for Health program, aims to optimize health services access and highlight the benefits of investing in health and care workers. Principal Secretary Ms. Mary Muriuki stated, "This report empowers us to make informed health workforce related decisions, driving positive change and enhancing healthcare quality for all."

Kenya has doubled its health workforce over the past decade, adding about 8,200 health workers annually, resulting in an 11% annual staffing improvement. If this trend continues, Kenya could cover 70% of its disease burden by 2032. However, 14% of trained health workers are unemployed, indicating gaps in workforce absorption and distribution. Additionally, many mid-career professionals are considering migrating abroad, with 29% planning to do so within the next two years. The HLMA report provides crucial insights into the current state and future trajectory of Kenya's health labor market.



Kenya Develops Its First Health Workforce Policy



July


WHO, Ministry of Health,
DHSC UK & more.

Building on the Health Labour Market Analysis Report 2023, Kenya is developing its first-ever Health Workforce Policy with funding from the UK Department of Health and Social Care. Supported by WHO, the policy outlines seven policy objectives, including the development of a comprehensive investment and recruitment plan, enhancing collaboration with health training institutions, and improving availability and use of health workforce data. It aims for a 7-11% annual budget increase for health worker employment and aligns training with current health needs. Principal Secretary Ms. Mary Muriuki emphasized sustainable financing and innovative funding mechanisms.

The policy addresses skill mismatch, healthcare professional distribution, and training regulation, with retention strategies to improve job satisfaction and reduce turnover. This framework aims to ensure an adequate, competent, and equitably distributed health workforce to achieve Universal Health Coverage (UHC) in Kenya.

Launch of the Road Safety Report in the African Region

 July

 WHO Kenya, WHO Afro

"Our transport systems open the world to us, but they come with a tragic price," stated Dr. Diallo during the launch of the Status Report on Road Safety in the African Region in Nairobi. "Road crashes are the leading killer of children and youth, and they typically strike during our most productive years, causing huge health, social, and economic harm throughout society." The report revealed that in 2021, road traffic injuries resulted in almost a quarter million deaths across the 47 countries of the WHO African Region, with a 17% increase in fatalities since 2010.

Dr. Diallo commended Kenya for its strides in improving road safety, including the establishment of the National Transport and Safety Authority and the launch of the National Road Safety Action Plan 2024-2030. However, he emphasized that much work remains to be done, particularly in improving road infrastructure, enhancing data collection systems, and ensuring equitable access to post-crash care.



Enhancing Vaccine Safety in East and Southern Africa

 July

 WHO Kenya, WHO Afro & more.


With the rise in vaccines provided by immunization programs, such as COVID-19, HPV, malaria, cholera, and new polio vaccines (nOPV), vaccine safety is crucial. In July, WHO Kenya participated in a Vaccine Safety Training Workshop for East and Southern Africa in Johannesburg, South Africa. The workshop included representatives from 15 countries' national regulatory authorities and immunization programs, including Kenya, Ethiopia, Malawi, Zimbabwe, Zambia, Tanzania, South Africa, Eritrea, Botswana, Comoros, Madagascar, Mauritius, Mozambique, Namibia, and Uganda.

The training aimed to build the capacity to monitor vaccine safety, detect, report, and investigate adverse events, and respond effectively. It also sought to develop a cohort of instructors in the region for ongoing education and vigilance. This initiative is vital for maintaining vaccine quality, safety, and efficacy, contributing to the goal of ending diseases in Africa.



WHO Kenya Initiates **Polio Virus** Investigation in Kamukunji Ward

 July

 WHO, MoH, Unicef & more.

Following the recent detection of a polio virus in a sewage sample from Nairobi, WHO Kenya and partners have commenced a detailed case investigation in Kamukunji Ward. This swift action aims to prevent further spread and protect the community. The detection of the circulating vaccine-derived poliovirus type 2 (cVDPV2) underscores the urgent need for vigilance and prompt response to polio outbreaks.

Given that polio is a highly infectious disease primarily affecting children under five, causing paralysis or even death, the investigation is highly important. The virus, detected in a sewage sample collected on May 15, underscores the necessity of maintaining high vaccination coverage and robust surveillance systems to detect and respond to polio threats.



WHO Support Kenya's **Verbal Autopsy Pilot**

 July

 WHO, Ministry of Health

WHO, in collaboration with the global public health organization Vital Strategies, is supporting Kenya's Ministry of Health in piloting the implementation of Verbal Autopsy in Kakamega and Kitui counties. This initiative aims to understand the causes of deaths outside health facilities by interviewing the deceased's next of kin or caregivers.

Verbal Autopsy employs WHO-standardized tools to gather information on the probable causes of community deaths, including signs, symptoms, medical history, and circumstances leading up to the death. This project leverages Community Health Promoters (CHPs) within Kenya's Primary Health Care Strategy, who conduct interviews with the families or caregivers of the deceased, ensuring comprehensive data collection.

The collaboration between WHO, Vital Strategies, and Kenya's Ministry of Health underscores a significant step towards improving public health surveillance and response. By identifying the causes of deaths outside health facilities, this initiative will enhance understanding of public health challenges and contribute to more effective health policies and interventions.



Thank you! From the WHO Kenya Country Office Team

Our Kenya office is staffed by a diverse team committed to operational excellence, effective policy development and more. Through diligent work across various domains, our team strives to improve health throughout Kenya.

Captured below are images of our WHO emergency team in Tana River engaging in Risk Communication and Community Engagement activities. The goal is to strengthen preparedness to health emergencies linked to heavy rains and flooding. For more information, stay tuned for our next Emergency bulletin.



Ben Adika from the WHO Emergency Team talks to mother, Hadija Bakar, who lives in a temporary housing settlement. She moved here with her family last year after her home next to Tana river was swept away by flooding.

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Acknowledgements

EXTERNAL PARTNERSHIPS

Your support and partnership are crucial to our mission in Kenya, enabling us to save lives and serve the vulnerable. We thank you for empowering our technical staff to deepen government support, accelerate progress towards Sustainable Development

Goals and enable us to plan for longer term approaches to health systems strengthening. A big thank you to our key “thematic funders”. The funds our partners provide give a degree of flexibility that allows WHO to be more effective and efficient in allocating funds for our joint priorities. Your ongoing commitment not only drives our success but also inspires a ripple effect of health improvements across Kenya.

Thank you!





**World Health
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Kenya

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