



# ACCESS TO MEDICINES PLATFORM

"Health Systems Strengthening for Universal Health Coverage"



## Advancing Access to Sexual and Reproductive Health for Women, Girls and Vulnerable Communities



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## Abbreviations and Acronyms

AtMP	Access to Medicines Platform
AYSRH	Adolescents and Youth Sexual and Reproductive Health
CSOs	Civil Society Organizations
CHMT	County Health Management Team
SCHMT	Sub-County Health Management Team
UHC	Universal Health Coverage
SRH	Sexual and Reproductive Health
SRHC	Sexual and Reproductive Health Commodities
SRHR	Sexual and Reproductive Health and Rights
MoH	Ministry of Health
HSAP	Health Systems Strengthening Partnership
MeTA	Medicines Transparency Alliance
MCA	Member of County Assembly
RH	Reproductive Health
TWG	Technical Working Groups
FP	Family Planning
RHMNCAH	Reproductive and Maternal Health Unit Reproductive, Maternal, New-born, Child and Adolescent Health
WHA	World Health Assembly
STIs	Sexually Transmitted Infections
IEC	Information Education and Communication
ODK	Open Data Kit
CSE	Comprehensive Sexuality Education
NGOs	Non-Governmental Organizations
CBOs	Community Based Organizations
R & D	Research and Development



## Forward by CEO



2020 was a year like no other, while the beginning was very positive and we started the year in earnest with two very key outputs. In January we hosted the MeTA Inter-country forum which brought together participants from 5 countries for the first time ever in Kenya. In February we oversaw the successful planning, conduct and finalization of the End Term Evaluation of the 5-year Health Systems Advocacy Partnership that was funded by the Dutch Ministry of Foreign Affairs and Trade and implemented in 5 countries including Kenya.

In March of 2020, everything changed with the reporting and rapid spread of the Corona Virus, first in China, then Europe and America and finally with trickles to Africa and Kenya in particular. These were unprecedented times with the country grappling with this new pandemic that had not only not been anticipated but that had no cure. As was in most countries around the world, Kenya was no exception and rapid measures put in place by the government to contain the spread of COVID-19 which included lock down,

restriction on movement around the country and curfew measures. Other measures included setting country targets to be met by both national and country governments that meant a re-direction of funds for other health programs and priorities to the fight against COVID-19.

Access to Medicines Platform was well represented in the county level COVID-19 response Technical Working Groups and we played our part in ensuring that the messaging around COVID-19 prevention was well circulated and articulated. We also scaled up advocacy to ensure that RMNCAH services still remained a top priority on the national and county stage. We successfully lobbied for the continuation of a number of interventions and provision of essential SRH services in various counties- as shown in this annual report. This pandemic also forced us to innovative and embrace the use of technology for online engagements as evidenced by the numerous and highly successful webinars, live chats and engagements we hosted and that drew participation from across the continent.

We were able to scale up our dissemination interventions and share critical data and evidence that brought to the fore the challenges and proposed solutions to improving access to SRH Commodities for Maternal, Newborn, Child, contraceptives and STI treatment. Our dissemination forums were well received in the counties with tangible commitments made towards implementation of the recommendations contained in the report on availability, affordability and stock out SRH Commodities.

We managed to not only implement but also harvest outcomes in all the programs we implemented and this is despite the COVID-19 measures; we were even able to collect critical data on snakebites in 4 pilot counties with buy-in and support both from the NTD Division of the Ministry of Health and the different county Executives of Health in the respective counties.

We were engaged in a number of strategic engagements and discussions that would ensure the sustainability and continuity of our work beyond the HSAP project, which had been our flagship project and which was ending in December 2020. As we closed the year we were able to bring on board new partners that would continue to support our advocacy work on SRH Commodities and financing for Family Planning. We remain committed to strengthening health systems and ensuring universal access to quality and affordable health services and commodities through evidence based decision making and interventions.

We invite your views, comments, feedback and partnership opportunities as we continue with this important work. I thank my staff for their tireless work in ensuring we fulfill our mandate, our research assistants, Board of Directors, supporters, friends and our MeTA Kenya CSO alliance members from around the country. Without you none of this would have been possible.

**Happy reading!**  
**Dorothy Okemo**

## Word from partners

“

The study on the availability, affordability and stock outs of SRH commodities is welcomed in Kisumu County since it is quite informative and it actually shows us on the areas that we are weak; thus enabling planning and budgeting on them. Moreover, it showed us on which areas we need to exploit more on as well as improve.

**Fredric Oluoch**

**Director, Public Health and Sanitation, Kisumu County**

We have a very close partnership with MeTA Kenya which has actually build our capacity in terms of advocacy skills, the ability to track the budget cycle as well as to participate and influence budgeting towards health issues. As a network, our main focus has been on Sexual and Reproductive Health and Rights. We have impacted much on health matters in Kisumu County; engaging the county government of Kisumu to respond to SRH issues of girls and young women.

**Barack Ojiem**

**Girl to Girl Club**

MeTA Kenya CSOs Alliance was formed after the 2018 CSOs training through coming together of grassroots organizations in the quest of leveraging on our strengths and weaknesses as well as putting into practice what we had learnt in the training. Joining the MeTA Kenya Alliance gave me a support system that catalyzed the process of registering my organization through which I have been able to acquire leadership skills.

**Beryl Moraa**

**She Deserves to Soar**

The most important component of advocacy is data. Not only did MeTA Kenya support us with advocacy training skills but also giving us the data through conducting research in Kisumu County so that we could be able to work with data to push our advocacy efforts forward. All these has made us get the gains as Kisumu County MeTA Kenya CSO Alliance.

**Mike Wanjeng'u**

**COSAPS program coordinator**

We have worked with MeTA Kenya this being our third year. We can attest that we have seen a lot of changes as an institution out of the research they are doing on SRH commodities and the various CSOs trainings. It has built our financial base and enabled us to engage the county government in the increment of budget in the docket of SRH."

**Victone Onyango**

**Inuka Success organization**

Before we didn't have a better way of approaching the challenges in the running of Health programs in Kisumu County. But after the CSOs training organized by MeTA Kenya, we gained skills on how to effectively engage with the County government (Executive and County Assembly) through various collaborations in a friendly manner rather than through antagonism"

**Richard Omondi**

**Women Volunteers for P**

”

# ABOUT US

Access to Medicines Platform (AtMP) is a Kenyan non-governmental organization that seeks to strengthen health systems for the highest attainable standard of for all Kenyans. AtMP works with community based organizations, local civil society organizations, national level partners and policy makers at national and county level as well as like-minded membership organizations, to contribute to achieving the highest attainable Sexual and Reproductive Health and Rights. We do this by creating a strong civil society that engages effectively with the government, the private sector and other stakeholders accountable for health systems, with an aim to deliver equitable, accessible and high quality Sexual and Reproductive Health Rights, access to information and services



## Our Vision

We envision a country where everyone enjoys optimum health and rights, particularly Sexual Reproductive Health and Rights.



## Our Mission

To strengthen policy implementation particularly SRHR through evidence generation, advocacy and empowerment of communities for access to the highest attainable information and services.



## Our Goal

A Kenya where everyone everywhere has access to quality, affordable and effective health services, information and commodities and instruments particularly sexual and reproductive health in attaining the highest quality of health and wellbeing by 2030.

# Our Core values

**T**

## Transparency

At access to medicines Platform we are committed to conducting our work in an honest, transparent and ethical manner and advancing open, transparent and accountable interactions discussions and engagements

**I**

## Integrity

we are committed to holding each other accountable for excellence in all our work, hunting the highest standards from our staff, partners and volunteers and safeguarding our objectivity and integrity by protecting ourselves from conflicts of interest

**I**

## Inclusivity

We work for the attainment of a just and inclusive society where the rights of everyone are protected and upheld

**E**

## Empowerment

We build capacity, share evidenced information & offer our research and advocacy expertise to other members of civil society especially those from marginalized, vulnerable and excluded communities to improve their skills in lobbying and advocacy to improve their access to quality and affordable medicines

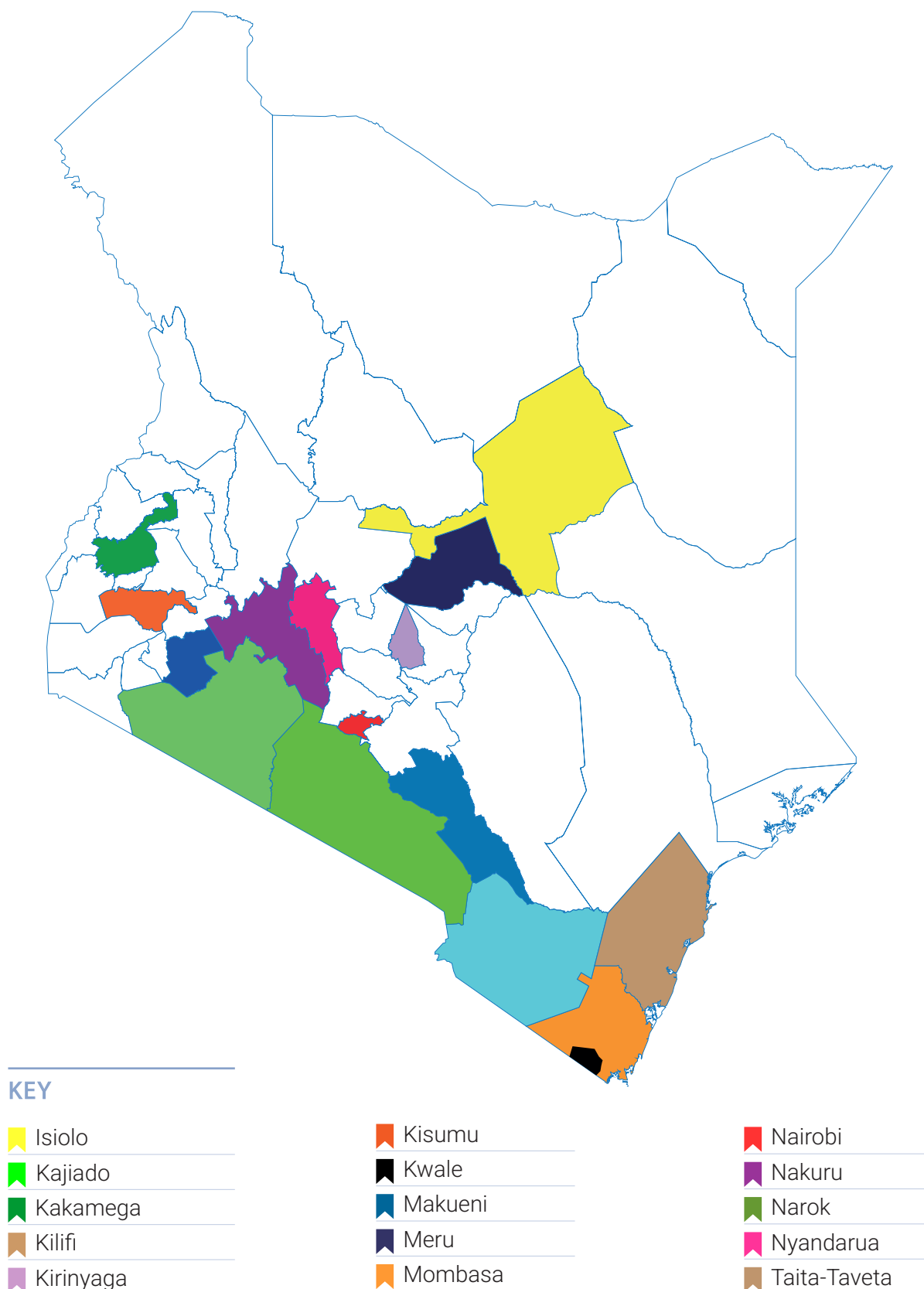
**S**

## Social Justice

We believe that all people, regardless of their socio-economic status or geographic location, gender, sexualorientation or ability, deserve equal economic, political and social rights and opportunities

## Our Counties of Focus

The counties in which Access to Medicines Platform operates include: Narok, Kajiado, Kakamega, Kisumu, Isiolo, Nakuru, Makueni, Kilifi, Kwale, Taita-Taveta, Nyandarua, Kirinyaga, Nairobi, Mombasa and Meru Counties.



# Projects and Activities

## 1. Health Systems Advocacy Partnership(HSAP)

2020 marked the final year of implementation of the Health Systems Advocacy Partnership (HSAP). The goal of the five-year programme, which was officially launched at the beginning of 2016, was to support and strengthen health systems so as people in Sub-Saharan Africa can realize their right to the highest attainable Sexual and Reproductive Health and Rights. The HSA Partnership focused on strengthening human resources for health and access to essential Sexual and Reproductive Health commodities, while advocating for good governance and equitable health financing. Through the Health Systems Advocacy Partnership, many outcomes that have improved access to Sexual and Reproductive health services, information and commodities have been realized.

### Key highlights:

- a. Successful physical dissemination of our research findings on availability, affordability and stockouts of SRH commodities in Narok, Kisumu and Kakamega counties. This saw both policy and decision makers from these counties endorsing our SRH commodities study findings and concurred that they represented the real picture of what was actually on the ground.
- b. Increased media coverage due to interest shown by media on our study findings. Our Executive Officer was invited as a guest speaker on a morning TV show (TV 47) to share the status of maternal and child health in Kenya. She further undertook 3 other TV interviews (Ebru TV, Deutsche Welle and TV 47) as part of the news items on the sidelines of the SRH Commodities dissemination workshops in Kisumu and Kakamega County.
- c. Advocacy for continuity of access to Reproductive, Maternal, Newborn, Child and Adolescent Health during the onset of COVID 19 outbreak. In partnership with the county government of Kakamega conducted a mapping exercise in 5 sub-counties of Kakamega county on the uptake of reproductive health services (RMNCAH) during COVID 19. The reports submitted from these sub-counties showed that COVID 19 not only posed a hindrance in the uptake of RMNCAH services but also in the delivery of the services

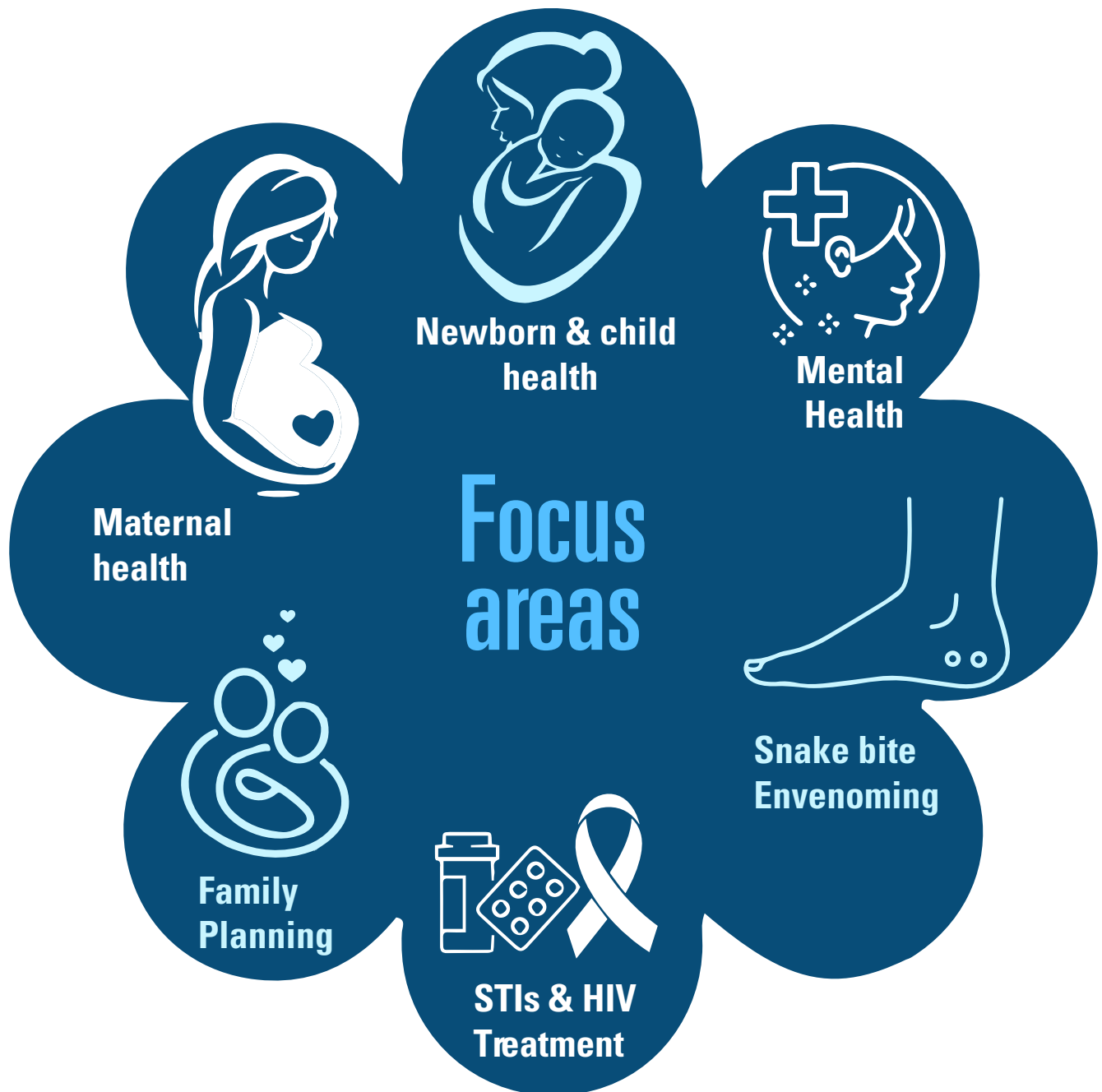
## 2. Snakebite Envenoming

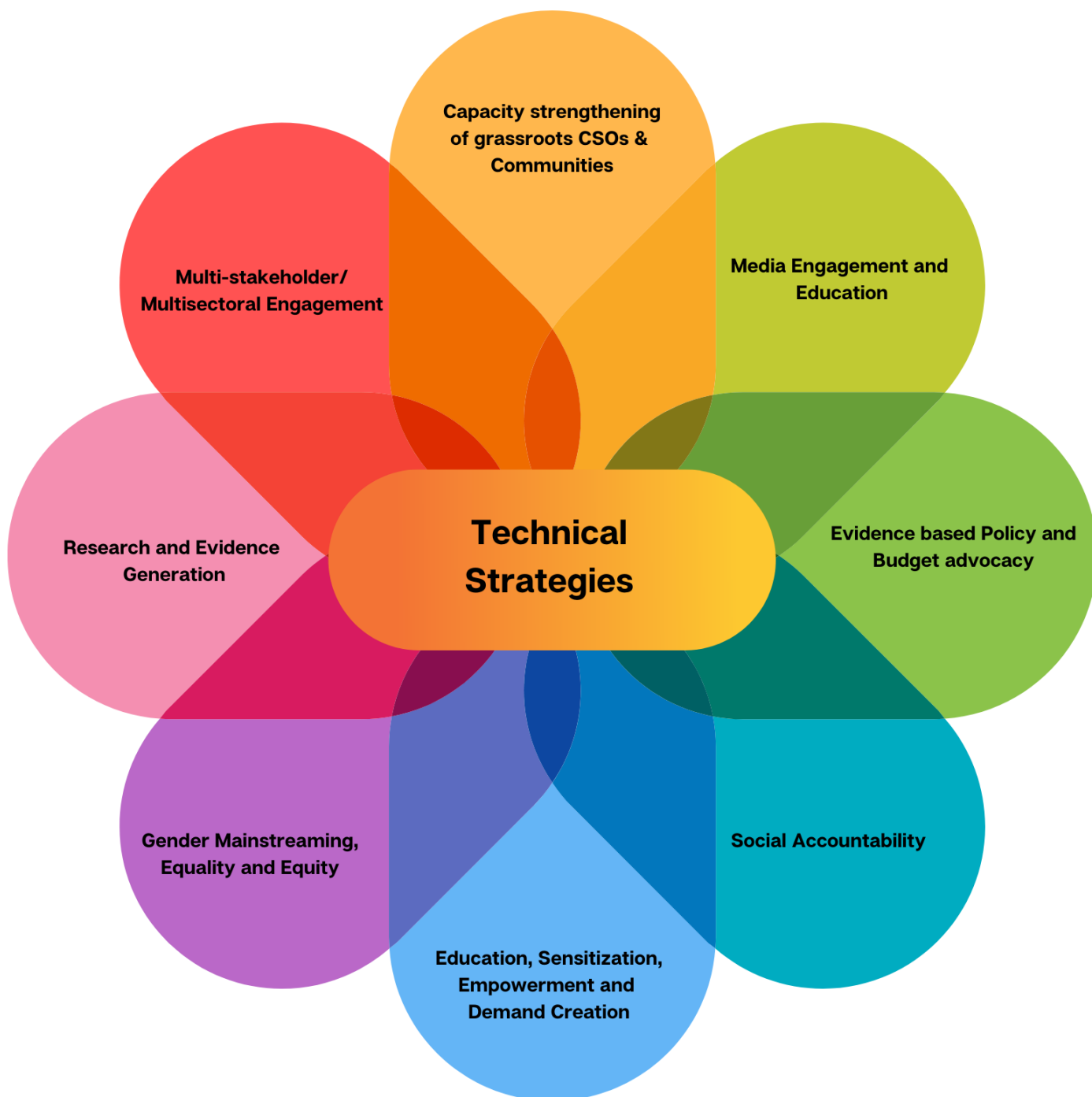
Having just been declared a Neglected Tropical Disease by the World Health Organization in 2017, prioritization of care and commodities to treat snakebites; community knowledge levels and community education; policies that support planning, prioritization and budgeting for management of snakebites and reporting tools for snakebites incidences are very critical. In partnership with Health Action International, Access to Medicines Platform supported:

- Research and evidence generation at both facility and community level on treatment, care, access to commodities and knowledge levels including conducting FGDs on snakebite envenoming.
- In November 2020, AtMP Executive Officer, Ms. Okemo did an abstract presentation on snakebite research findings and shared information around community education at the East African snakebite conference.
- Joint community sensitization programs on snakebite prevention measures, first aid information and access to treatment at health facility.
- In county discussions around prioritization of treatment of snakebites.



## OUR TECHNICAL AREAS AND STRATEGIES





# Our interventions

## Multi-stakeholder Engagements

Inclusive multi-stakeholder platforms are critical in constructive policy engagement, dialogue and dissent as well as consensus building. Our multi-stakeholder approach is different as we go beyond just talking about issues. We facilitate round table discussions between multi-stakeholders from private, public, mission sector, academia and CSOs networks to improve policy formulation, implementation and budget influencing.

We support national and county level multi-stakeholder dialogue space, that strengthens governance and promote rights-based approach. We also provide high level strategic Multi-Stakeholder partnerships to lobby and advocate for strengthened policies and processes that support Reproductive, Maternal, Newborn, Child and Adolescent Health.

### I. The MeTA Inter-Country Forum

The Medicines Transparency Alliance (MeTA) began as a hypothesis, which evolved into a policy and later a project. It was a strategic initiative formed as a response to the United Nation's Millennium Development Goals (MDGs) and MDG 8 in particular back in 2009. This project run between 2008 to 2015 in collaboration with Health Action International and it sought to test the hypothesis that increasing transparency and accountability in the pharmaceutical sector would improve access to medicines by improving decision-making. This alliance brings together all stakeholders in the medicines market to improve access, availability and affordability of medicines and in this instance with specific focus on sexual reproductive health rights (SRHR) and commodities.



As part of the Health Systems Advocacy Partnership work, Health Action International implements the MeTA concept in its focus countries. Every year, MeTA Inter-country forums are held with the aim of presenting sustainability models for multi-stakeholder engagements, learning and sharing of best practices and outcomes amongst member countries and showcasing MeTA inter-country work with demonstrable outcomes on SRH Commodities policy and dialogue.

The 3rd MeTA inter-country forum was organized and hosted by MeTA Kenya (Access to Medicines Platform) on 21st January 2020. The forum brought together MeTA members from Kenya, Uganda, Tanzania and Zambia as well as representatives from Health Action International.

Other participants included MeTA Kenya council members, Amref Health Africa representatives, MeTA Kenya grassroot CSOs partners, a representative from the Council of Governors secretariat, and a representative from the Embassy of the Kingdom of the Netherlands in Nairobi.



**Executive Officer, AtMP - Ms. Dorothy Okemo**



**Executive Director, HAI-Tim Reed**



**MeTA Tanzania representative, Radhia Mamboleo presenting study findings**



**Embassy of Netherlands representative - Johnstone Kuya**

The MeTA Intercountry forum provided a platform for the participants to review the results of the study conducted in 2019 in Kenya, Uganda, Tanzania and Zambia on Availability, Affordability and Stock-out of Sexual and Reproductive Health Commodities covering Maternal, Newborn and Child, Contraceptives and STI treatment. The MeTA member countries also presented the outcomes achieved through the HSAP interventions since inception thus providing an opportunity for scaling up best practices.

The presentations made centered around sharing findings of the study conducted in 2019 by MeTA member countries i.e Kenya, Uganda, Tanzania and Zambia. Additionally, member countries shared achievements and success stories from their advocacy, research and capacity building interventions.

Other key presentations and discussions looked at translating policy into action with representatives from the council of governors and the Embassy of the Kingdom of the Netherlands in Kenya giving insights to the participants. The highlights of the discussions were summarized as follows:

1. Southern ownership, leadership and transformation of power relations are just as important to create sustainable change.
2. Transitional activities in well performing strategic partnerships are key in ensuring sustainability and continuity of successful programs.
3. There is need for synergy in implementation among partners i.e in the context of strategic partnerships
4. Increasing private sector engagement may lead to commitment in SRH and HIV/Aids interventions. CSOs are challenged to innovate and adapt to the changing environment
5. The shrinking/shifting civic space provides opportunity for intercession by the Ministry of Foreign Affairs of Netherlands in defending and expanding civic space.
6. Evidence is key for policy shifts and provision of justification for progressive realization of the health commitments to improve budgetary allocations.



7. Both national and county governments need to look inwards and increase their domestic resource allocations to health and especially SRH to ensure the gains so far are not lost and the upward trend on improvement of maternal and child indicators continues.
8. It is important for CSOs to share evidence and research with key policy and decision makers including the private sector to inform prioritization and legislation



**Group photo - Participants representing 5 countries of the MeTA Intercountry Forum**

## II. SRH Commodities study dissemination Forums

AtMP has undertaken research on availability, affordability and stock-outs of the Sexual and Reproductive Health Commodities (SRHC) over the last three years. The data was collected in 10 counties using the standardized HAI-WHO methodology: Measuring Medicine Prices, Availability, Affordability and Price Components (2nd Edition). The findings from these studies were analyzed and packaged into various knowledge products including full reports, infographics, policy briefs, poster presentations, power point presentations among others which are disseminated to inform policy and decision making processes.

We convened a number of high level dissemination forums to share the findings of these studies. This was done by convening a multi-stakeholder platform in some of the counties of focus to discuss in depth, the county specific findings and develop a way forward on the implementation of the study recommendations. The three counties in which we held these forums include Narok, Kisumu and Kakamega.



**Kakamega RH Coordinator - Ms. Imelda Barasa**



**Hon. John Musilwa - MCA Health Committee**



These forums brought together Members of the County Assembly (MCAs), County and sub-counties Reproductive Health Coordinators, County Health Management Teams (CHMTs) and Civil Society Organizations (CSOs) among other key stakeholders. It also provided a platform for these key stakeholders to develop joint action plans so as to improve access to SRH commodities, to reduce incidences of teenage pregnancies, maternal deaths and STIs.



## Outcomes of the dissemination forums

### Kisumu county

Our study findings were endorsed by all policy and decision makers of the county. The chairs of the Legal, budget and health committees of the county assembly undertook to see the implementation of some of the recommendations from the study in particular community sensitization, male partner involvement and increase of funds for Reproductive and Maternal Health and support for policies that strengthen SRHR.

The dissemination forum also resulted in development of a joint action work plan between the CSOs and County health department of Kisumu County. There was also a lot of media coverage on some of the key findings of the county specific data findings. During the media interview, Executive officer, AtMP, Ms. Okemo highlighted on the need to address the low availability of essential new born and child health commodities in Kisumu county.



Kisumu County Director of Health - Fred Oluoch



Kisumu County Assembly Chair of budget and appropriation - Hon. Steve Owiti

### Narok county

The Sexual and Reproductive Health coordinator, Narok County acknowledged that the findings were a true representation of what was in the ground. He agreed that poor infrastructure was a hindrance to accessing SRH commodities at the facilities-this is due to lack of roads and long distances to the facilities. He further sought to consolidate efforts with CSOs for ring fencing of funds for SRH for instance in terms of poor infrastructure that hinder access to health facilities and frequent stock outs of sexual and reproductive health commodities.



Narok County Commissioner



Narok County SRH Coordinator

## Kakamega county

In Kakamega County, the county pharmacist, Ms. Linet Kanaga endorsed the findings of the SRH Commodities study citing the accuracy of the results. She further indicated that the county had included in the 2020 county workplan training on quantification of commodities including for SRH as per our study recommendations in 2018.



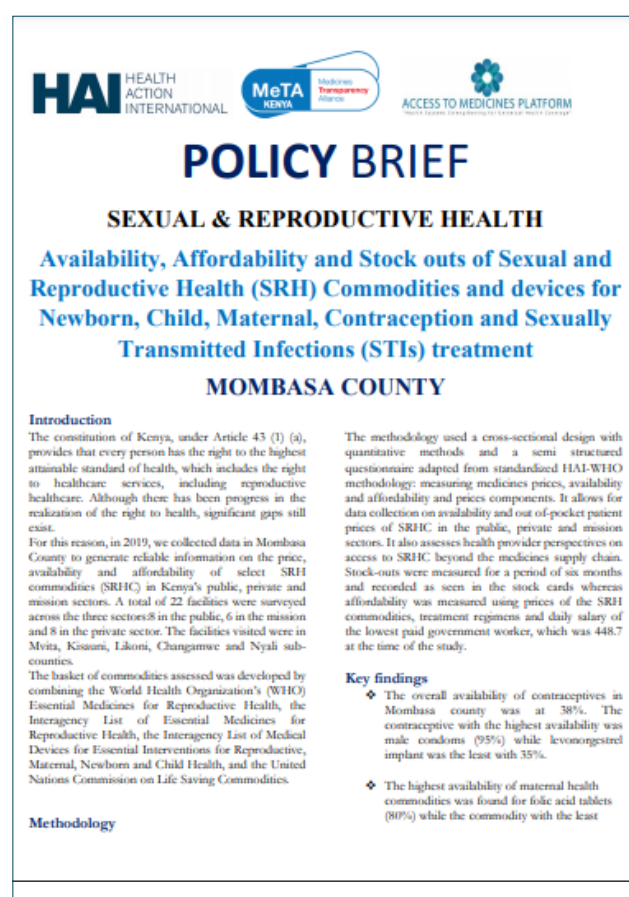
Kakamega county pharmacist concurring with our study findings



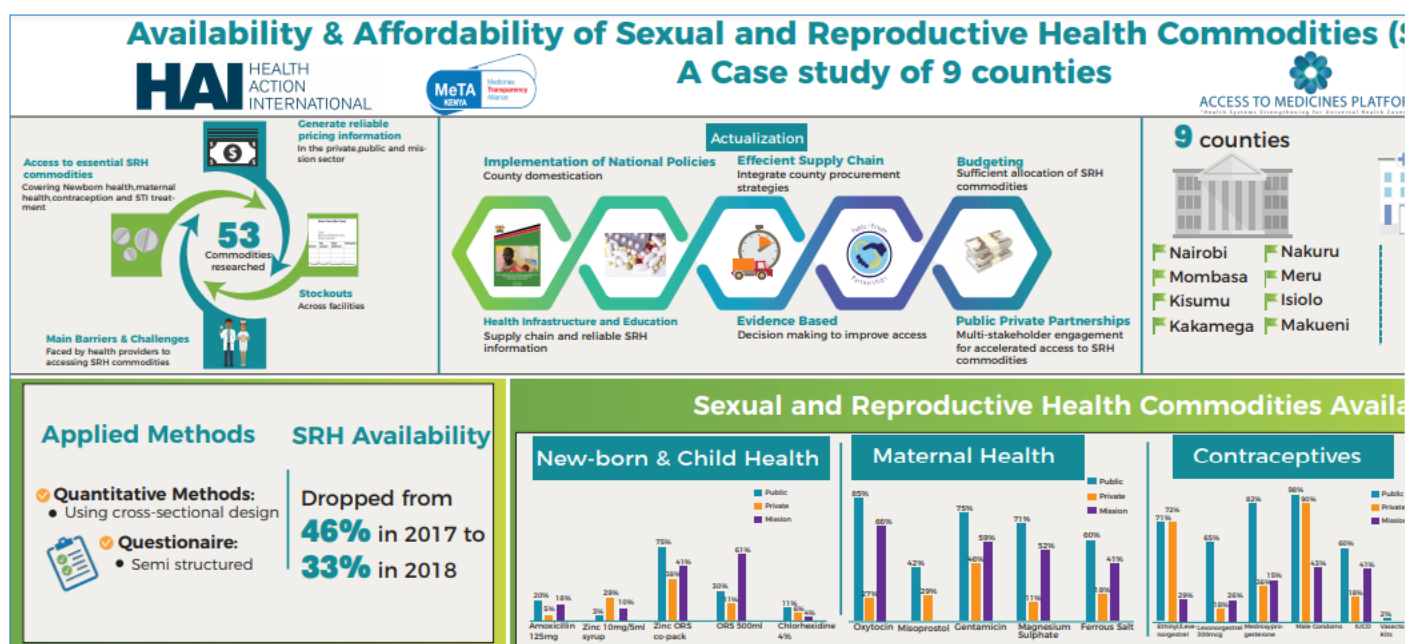
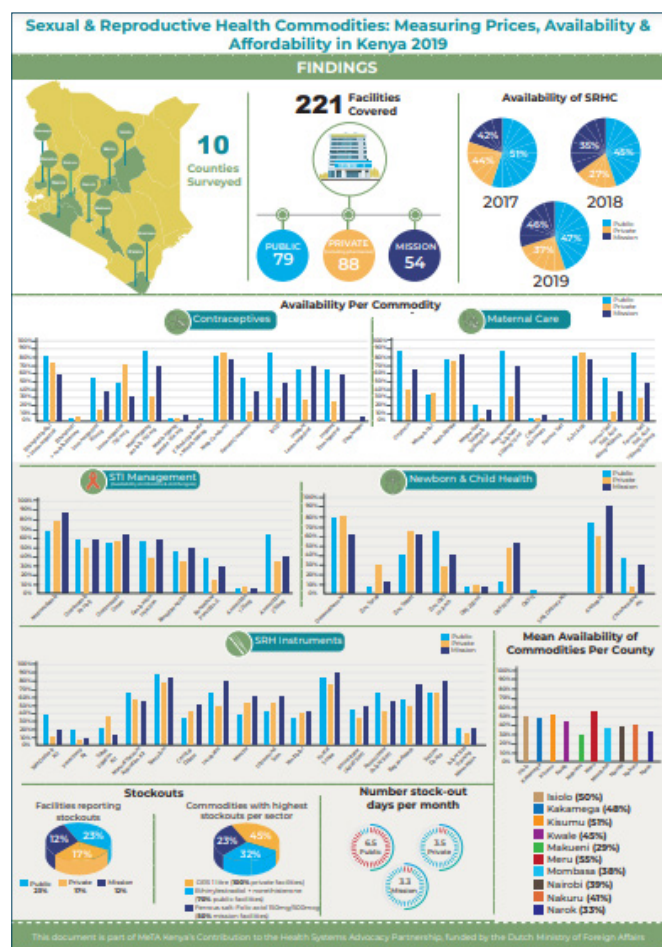
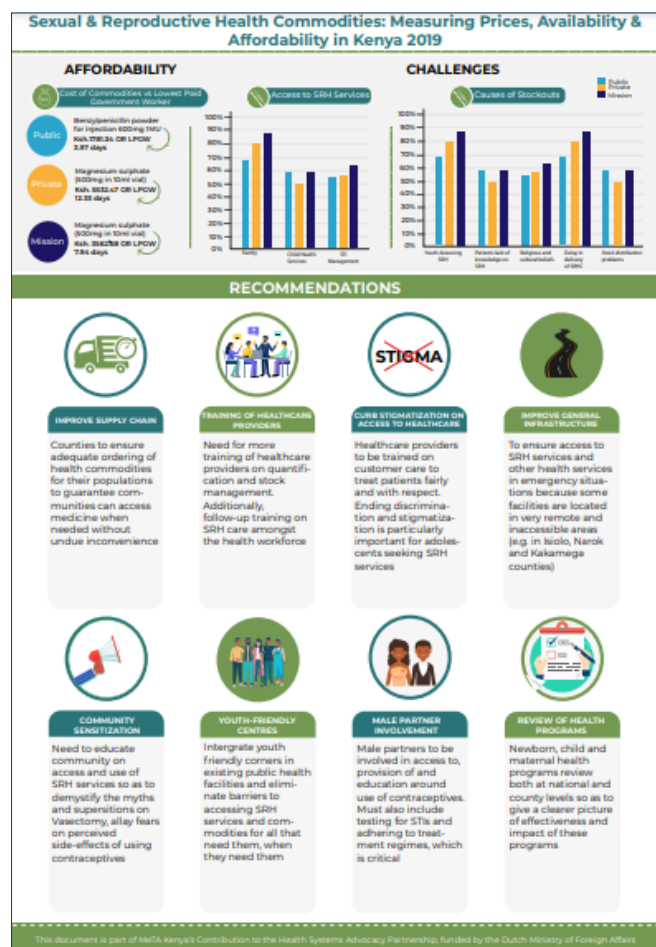
AtMP Executive officer presenting Kakamega findings

## Documentation and Knowledge Products (KPs)

The results and recommendations of our annual studies we conduct on availability, affordability and stock-outs of Sexual and Reproductive Health Commodities in the private, public and mission sectors facilities are packaged and disseminated through reports, infographics, policy briefs and







# Research and Evidence generation

Research remains the cornerstone of the work that we do as an organization. It forms the basis of our evidence based advocacy. Lack of evidence restricts the ability of governments to construct meaningful policies and properly evaluate the impact of any policy interventions.

## Snakebite Research

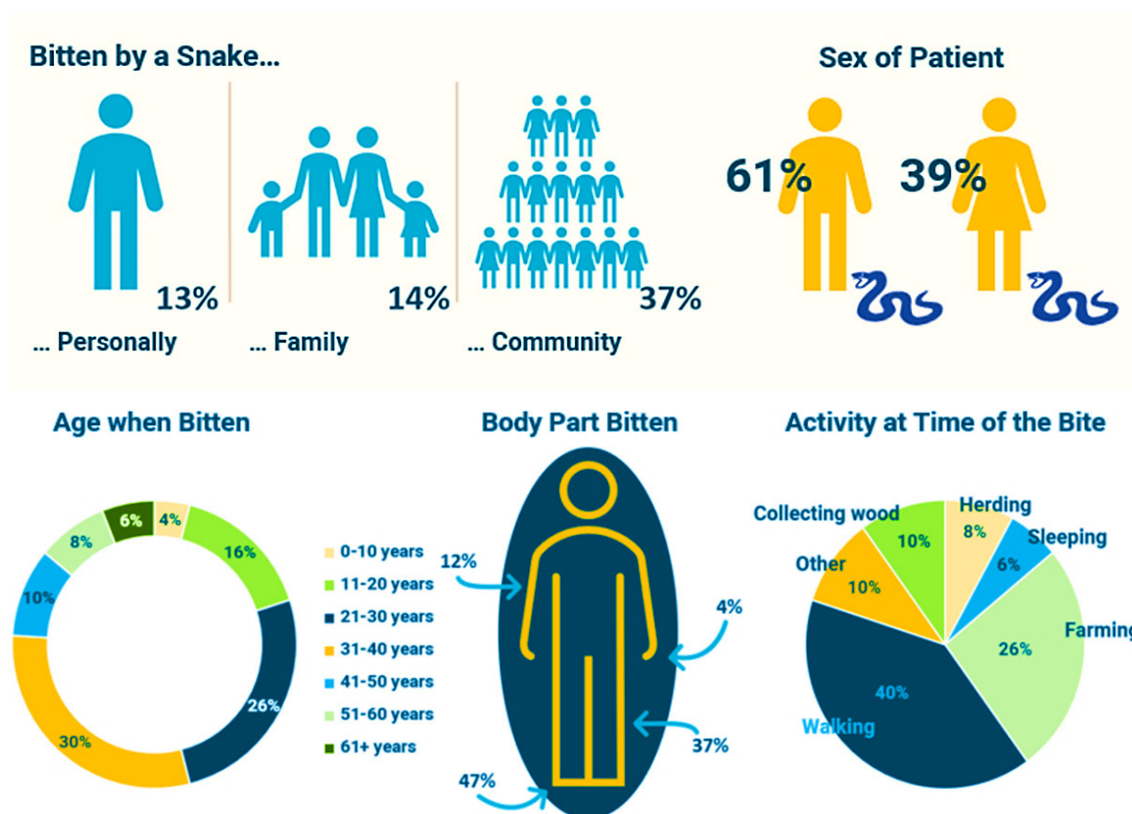
To contribute to the elimination of neglected tropical diseases, AtMP supported Health Action International (HAI) to undertake both household and facility survey to generate evidence on the Kenya specific snakebite burden.

The survey aimed at creating a clearer picture of the beliefs, responses and behaviors which improve strategies in the prevention, treatment and management of snakebites in Kenya.

### a. Community Research

A total of 399 households were surveyed in Kajiado, Kilifi, Kwale and Taita Taveta counties. With an average of 4 children per household surveyed, the average income was KSH 14,342.10. When it came to health seeking behaviors of victims, the study showed that fifteen of 51 (29%) respondents who were snakebite victims went to a traditional healer, thirty (59%) went to a health facility, and six (12%) went to both. When treated by a traditional healer, the methods given were:

- Black stone and healing plants (57%)
- Sucking the venom from the bite (43%)
- Cutting the wound (24%)



## b. Research in Health Facilities

A total of 133 facilities were surveyed in public (85), mission (12) and private (36) sectors. This research was undertaken in Kilifi, Kajiado, Taita Taveta, Nyandarua, Kirinyaga and Kwale counties.

### Results

- Out of 133 health facilities, 108 recorded snakebites.
- 69 health facilities recorded at least one snakebite in the previous 12 months
- In total, 801 snakebites were recorded overall, with the highest number of snakebites recorded in one facility being 76.

In terms of training and capacity of health care workers, the study indicated that 44% of the health care workers refer patients to other facilities. The study also showed that Supportive care offered at 61% of facilities, commonly consisted of pain management, anti-inflammatories and antibiotics.





## Capacity Strengthening



**Group photo with participants after being awarded their certificates of participation**



**Ongoing training session: participants asking questions**

### Increasing the capacity of local Civil Society Organizations(CSOs)

Developing and strengthening skills of Civil Society actors enables them to have the potential to effectively engage, lobby, advocate while enhancing accountability is key. This makes them effective representatives of the voices of the citizens who are unable to demand and realize their right to health.

Access to Medicines Platform through the Health Systems Advocacy Partnership strengthened the capacity of CSOs on proposal writing, resource mobilization, budget advocacy & tracking and gender responsive budgeting. A total of 17 CSOs, 3 research assistants and 2 staff members were trained. The trained CSOs represented organizations that work on Sexual and Reproductive Health, Gender Based Violence, Women empowerment programs, Persons with Disability, Youth and adolescent networks.

Key considerations for effective Budget advocacy includes: indepth understanding of the national and county budgets, sources of revenue, stages involved in budgeting, county planning and budgeting cycle and key documents involved in the county planning cycle.

In budget tracking, public participation through social audits, public expenditure tracking, public hearings and participatory budgeting is a key mechanism. It was pointed out that resource mobilization does not only involve money but incorporates a variety of things including; Passion and Continuous Professional Development, experience (360 degrees' approach to resource mobilization), communication, getting industry perspective, networks, timing and showing up.

In regard to the fundamentals of proposal writing in grants mobilization, emphasis was on telling the story in a compelling manner depending on the donor format; possibly by the use of pie charts and info graphics, involving others while writing proposals and fitting the project with the donor criteria was key for effective proposals.



The participants of the training were also engaged in team building activities that were meant to;

- 1) Illustrate the importance of coordinated team work in an organization.
- 2) Demonstrate critical thinking as applied in most aspects of an organization.
- 3) Aid the participants to learn problem solving skills that they can apply in their work places.
- 4) Serve as a training mechanism.



Participants stating their training expectations



Participants celebrating a win during a breakout session

## Increasing the capacity of data collectors in use of Open Data Kit

To ensure efficacy in data collection process, AtMP trained data collectors on use of Open Data Kit. A total of 12 data collectors participated in the training prior to conducting facility Research. This training increased the knowledge of data collectors in use of open data kit and facilitated generation of data in a timely manner.



Research Assistants after the snakebite research training ready for deployment

## Online training webinars

In partnership with Health Action International, AtMP hosted a series of four online training webinars. The webinars aimed at increasing knowledge of participants in various topics around health. With experts in the field of gender, research, budget advocacy and multi-stakeholder engagements, over 300 participants gained insights and skills to engage in their advocacy interventions.

The topics covered included:

- ❖ Gender mainstreaming in health programs: Equality, Diversity and Inclusion.

The objective of this webinar was to explore how CSOs can effectively mainstream gender in Sexual and Reproductive Health programs. Moreover, the presentations sought to provide the participants with gender contextual background in policy and legal frameworks and to lay foundation for gender mainstreaming in health systems strengthening for non-state actors. This on-line training webinar assembled two experts from Kenya and Zambia with our Executive Officer, Ms. Dorothy Okemo moderating the session.



- ❖ Using evidence for advocacy: How to create your own digital survey on kobo toolbox. In this training webinar, the participants were practically taken through a step by step guide on how to create their own digital surveys. This webinar was facilitated by Research Manager, Health Action International-Ms. Gaby Ooms and moderated by our Executive Officer, Ms. Okemo.

- ❖ Budget cycle tracking, analysis and monitoring for effective advocacy: From policy to action. The aim of the webinar was to equip the participants with knowledge of how to be an active participant in the local or national budget making processes, particularly for SRH especially for Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH).

The participants were also equipped with knowledge on ways, methods and techniques/tools for budget tracking, analysis and monitoring helps ensure effective advocacy. Without tracking the utilization of allocated budgets, it is difficult to ensure there is accountability, prudent use of resources and full implementation of health priorities and work plans.

- ❖ Social accountability and building of effective multi-stakeholder platforms. The aim of this webinar was to take the participants through a practical guide to develop tools for community engagement in advocacy. In addition, participants were equipped on how to build effective multistakeholder platforms so as to improve health policy and implementation. Social accountability means that the Citizens or the Civil Society Organizations engage in different activities that hold their leaders accountable, ensure that governments fulfil its commitments, implement its policies accordingly and press for good governance. The sessions were facilitated by two experts from Kenya and Uganda and moderated by AtMP Executive Officer, Ms. Okemo.



## Training on Policy Advocacy in the context of Sexual and Reproductive Health

The Beijing Declaration and Platform for Action of 1995 remains the world's most progressive scheme for advancing gender equality worldwide. The Beijing Declaration and Platform for Action shines a spotlight on health, education, environment, work and other critical foundations of life as they empower or restrict the rights and well-being of girls and women.

The declaration recognizes and declares that every person has a right to control their sexuality and sexual and reproductive health which is closely linked to their human rights. This makes sexual and reproductive health and rights a pillar of the Beijing strategy: both as an enabler of gender equality, and a vital part of it.



**Beijing cluster champions at the policy advocacy training**

A lot of progress has been recorded in the realization of sexual and reproductive health rights including a reduction in both maternal mortality; rates of female genital mutilation; public awareness on the concepts of sexual and gender-based violence. The Mombasa County Beijing Champions however expressed concerns that progress has been superficial and not fast enough. This is as a result of some critical areas such as comprehensive sexual and reproductive health information, services and rights, menstrual hygiene and gender-based violence.

It is with this background that Access to Medicines Platform/MeTA Kenya in partnership with Uzalendo Africa initiative organized a one day training forum on advocacy on sexual and reproductive health rights as a follow up activity after previously training the Beijing champions on SRHR where they also identified key policy gaps, the advocacy training sought to equip the champions with knowledge, skills and useful linkages to carry out advocacy and lobbying that would consequently ensure the enactment, review or implementation of policies and laws that promote the realization of sexual and reproductive health rights in the Kenya Coastal region .

The training brought together a total of 20 Beijing cluster Champions. The champions are drawn from different organizations working on the 12 different concerns highlighted in the Beijing declaration and platform of action. The champions are classified under 6 clusters including; Health, Environment, governance, peace and cohesion, economic empowerment and education.

As a result of the training the Beijing health cluster champions submitted a joint memorandum on key concerns around Menstrual Health Management policies to Mombasa County Adolescent SRH coordinator, Ms Selina Githinji.

## COVID 19-Response

The year 2020, unlike the rest of the years was one in which a new pandemic befell the world. The outbreak of COVID 19 threatened the stability of health systems not only here in Kenya but the rest of the world. Moreover, it questioned the preparedness of governments on handling public health emergencies. In partnership with our CSOs networks in the Lake basin region and Narok county as well as the county government of Kakamega, AtMP supported a number of interventions in response to COVID 19 pandemic. These interventions included:

### a) Promoting the continuity of access to Reproductive, Maternal, New born, Child and Adolescent Health (RMNCAH) Services

COVID-19 put a strain in the provision and uptake of health services. The containment, lockdown and curfew measures put in place by the government hindered access to health services particularly for pregnant women. In consultation and collaboration with the Kakamega County health department, Access to Medicines Platform conducted a sensitization and mapping exercise in 5 sub-counties to increase uptake of Reproductive, Maternal, Newborn and Child Health(RMNCAH) services reduced by COVID 19 containment measures. Community Health Workers mapped out pregnant women and provided them with information on COVID prevention measures and importance of hospital delivery and continuity of seeking RMNCAH services at the facilities.

In Malava sub-county for instance, the CHVs feared visiting patients in the homes due to lack of sanitizers and protective gears like masks. Ikolomani sub-county reported poor hospital visitation by pregnant women and family planning clients for fear of quarantine in case they tested positive COVID-19 or being infected from the facilities. All the sub-counties reported fear of clients getting infected by COVID 19 being one of the major hindrances to accessing RMNCAH services. As a result of this mapping and the findings the county undertook rapid measures including deploying of community health workers and County SRH Coordinators for a door to door sensitization that saw an increase in the numbers of women visiting health facilities to seek RMNCAH services in spite of the COVID measures and fears identified during the mapping exercise.

Moreover, the sub-county administrators identified and issued special passes to select bodaboda operators allowing them to transport women with medical emergencies to health facilities during curfew hours.

#### Results:

- Line listing of clients due for RMNCAH services done by CHVs for follow up.
- Sharing of relevant information about covid at house hold level and fears allayed.
- Engaging of the local bodaboda riders to escort pregnant mothers and any other cases at hospital.
- Issuing of official notes to expectant mothers to enable them access services at any hour in the hospital in company of the bodaboda.

On the other hand, in partnership with our CSOs partners, Narok Youth SRH network, AtMP supported sensitization and awareness creation on Covid 19 protective measures so as to promote access to and demand for SRH commodities and services including maternal health services. This was done through conducting one on one sessions with the community members in 6 Sub counties. With the help of sub-county SRH coordinators, communities were educated on the need for wearing masks, maintaining social distance as well as regular cleaning of hands. They were also sensitized on the need to continue seeking the essential RMNCAH services from the facilities despite COVID 19 outbreak.

We also provided handwashing buckets that were placed in strategic locations to ensure accessibility and adherence to the ministry of health guidelines by the communities. We also supported our CSOs partners to monitor effects of COVID 19 on service provision for family planning, immunization, safe delivery, teenage pregnancies, pre and post-natal care. For instance, the Narok referral Hospital was closed down on the onset of COVID 19 outbreak and this hindered the provision and access to essential health services. MeTA Kenya through its CSO alliance members in Narok were also part of the COVID-19 emergency response technical teams, and supported some COVID-19 prevention measures and sensitization initiatives on effective use of the masks.



### Handover of Washing Buckets, Sanitizers, masks at the Community and County Commissioner's office to support Narok County in COVID 19 prevention measures

#### b) Sensitization and awareness creation on access to SRH commodities

In Kisumu County through the MeTA Kenya Lake Basin CSOs Alliance on SRHR, the communities were sensitized and educated on the importance of seeking essential sexual and reproductive health services despite COVID 19 outbreak. This was done through road shows and hosting of radio talk shows in vernacular languages and resulted in communities seeking health services during COVID 19 period.

The MeTA Kenya CSOs Alliance also leveraged on social media to engage relevant stakeholders online on different conversations covering sexual and reproductive health topics.



Members of MeTA CSOs Alliance participating in the radio talk show

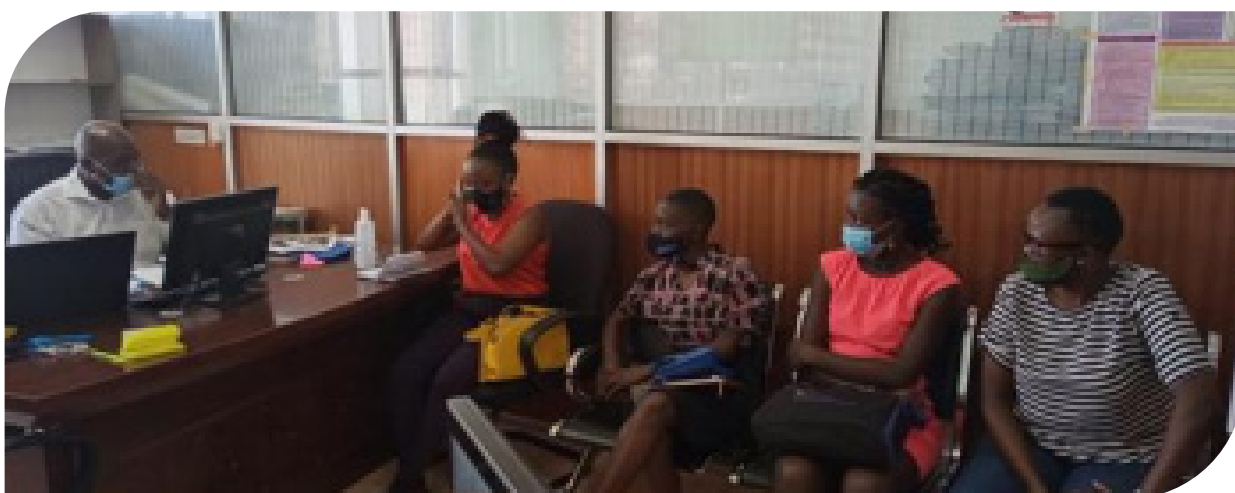


### c) Amplifying the voices of adolescent girls in decision making

Without factual and comprehensive SRHR information, adolescents are less likely to practice healthy and safe sex, establish equal and stable relationships, or make informed decisions about if and when to have children. For this reason, investing in their education and empowerment is a powerful way to effect social change and achieve our mission.

In 2020, AtMP supported convening of writing clinics for adolescent girls and young women to express and highlight their challenges and amplify their voices in decision making. This was very key especially during the COVID 19 period when adolescents were not going to school due to government measures on controlling spread of the virus and cases of gender based violence were escalating.

This intervention contributed to a greater understanding and recognition of the pre-existing myths and misconceptions that perpetuate GBV in various communities. We also gained better insight on the barriers that prevent school going adolescent girls from achieving health and well-being. We also facilitated two educative forums for twenty-eight adolescent girls on menstrual hygiene management and non-sexually transmitted infections. With the closing down of schools following the out-break of the COVID 19 Pandemic, access to quality menstrual hygiene management products had been a challenge for girls as these were being provided in schools.



**Courtesy Call to office of Dir Youth, Women and PWDs, Mr. Omondi Junior, to make follow up on the SGBV Policy Implementation and Construction of Kisumu County Shelter House**



**Ongoing discussion sexual assault at the adolescents writing clinics**



**Girls participating in educative forums on menstrual hygiene**

## Our year in review: The highlights



**AtMP Executive officer, Ms Okemo**

responding to a question at the Narok dissemination forum



**Participants of our annual capacity strengthening workshop**

after receiving their certificates of participation.



**Members of Kisumu county assembly** present at the Multi-stakeholder SRH commodities dissemination forum



**AtMP Executive Officer** presenting Kakamega county study findings



**Our Executive Officer** participating in a TV show highlighting maternal health challenges in Kenya.



**Data collectors in the field** conducting community research on snakebite incidences





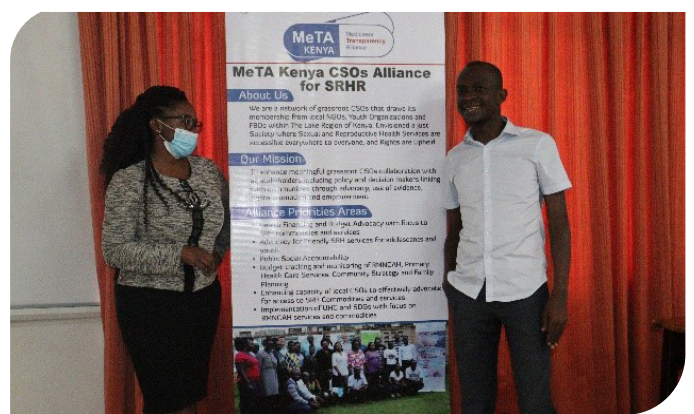
**AtMP Executive Officer** together with the Beijing champions submitting a memorandum on Menstrual Hygiene



**Girls participating in** a dialogue forum to share their experiences and lessons learnt during the teen summit supported by AtMP



**Beneficiaries of the return to school policy in** Narok County



**Executive Officer, AtMP** together with MeTA CSO alliance coordinator



**AtMP Executive Officer** holding a dialogue forum with recipients of the Narok Teen Summit supported by AtMP



**Participants of the MeTA** Intercountry Forum following a presentation



## Media engagement

The work of advancing and strengthening health systems has not been possible without the support of the media. The Media plays a key role in disseminating information, educating the masses and health reporting on emerging issues of human interest. In 2020, Access to Medicines Platform increased its media engagement so as to create more awareness and visibility of a range of health topics including:

- ❖ Maternal, Child and Adolescent Health
- ❖ Snakebite incidences
- ❖ Mental health policy, care and treatment.

### Key highlights on media engagement:

In September 2020, we hosted dissemination forums of our SRH commodities study findings in Kakamega and Kisumu Counties, where the media covered stories on our research interventions. Our Executive Officer, Ms. Okemo, undertook three interviews for Ebru TV, Deutsche Welle and TV 47 as part of the news items on the sidelines of the SRH Commodities dissemination workshops in Kisumu and Kakamega Counties.

In the Ebru TV interview, she was highlighted sharing about the low availability of new born and child health commodities in Kisumu County which according to the study was only at 43%. She reiterated on the need to scale up advocacy for the availability of essential new born and child commodities such as calcium gluconate and those for diarrheal treatment as well as supporting local production of essential life-saving commodities.

For the Deutsche Welle Radio program on general maternal health for women, Ms Okemo shared some of the key findings on the availability of essential maternal, new born and child health commodities such as that of ferrous sulphate which was at 18 % in Kakamega County.



**Baadhi Ya Hospitali Zakosa Dawa Kaunti Ya Kisumu**

217 views · 6 months ago



**Ebru TV Kenya**  
618K subscribers

**SUBSCRIBE**

According to the research findings, safe delivery kits were only available in 17 facilities whereas there were no ventilators in any of the facilities surveyed. In her contribution to the topic, Ms. Okemo urged the county governments of the ten surveyed counties to prioritize implementation of the study recommendations to improve both availability and affordability of essential sexual and reproductive health commodities.

In Kakamega County, the Sexual Reproductive Health coordinator who was also present in the dissemination forum spoke about post-partum hemorrhage being one of the leading causes of maternal deaths and how COVID 19 had affected blood supply that they previously got from universities to aid mothers who bleed heavily during birth.

Our Executive Officer, Ms Okemo was also invited to a TV interview on Maternal Health Status in Kenya and was able to share some of the key findings, related to availability and affordability of Maternal Health commodities and shared her evidence-based perspectives on the topic.





## Online Engagements

We also leveraged on our social media platforms to conduct online engagements and share relevant information on sexual and reproductive health. In partnership with our CSOs partners, we conducted a twitter chat on effect of COVID 19 on provision and access to reproductive health services. The twitter chat gained a total of 11,706 impressions and engagements.



We also engaged in sharing relevant messages during various social media campaigns such as 16 days of activism, International Women's Day and World Health Day campaigns and this brought about a lot of interaction and engagement with key stakeholders and likeminded CSOs. Other online engagements included conducting podcast to discuss the proposed Reproductive bill, live discussion on Comprehensive Sexuality Education as well as sharing of articles on the different International Health days based on their themes and other relevant topic on Sexual and Reproductive Health on our website.



**Participants of the annual scientific conference on adolescents SRH sharing the 16 days of activism messages**

## Some of the topics covered in our articles included:

1. Reversed gains in the advancement of Sexual and Reproductive Health and Rights in Kenya; effects of COVID-19.
2. COVID-19 and the escalation of incidences of Sexual and Gender Based Violence.
3. International Youth Day: Youth Engagement for Global Action
4. World Contraception Day: The state of Kenya's Sexual and Reproductive Health: Access to family Planning Commodities
5. World Mental Health Day: The state of mental health in Kenya: a celebration of World Mental Health day
6. Advancing the rights of women in Kenya: a celebration of the International day of Elimination of Violence against Women 2020.
7. World AIDS Day Combating HIV/AIDS amidst COVID-19: Worlds AIDS Day Celebration
8. 16 Days of Activism against Gender Based Violence campaign. 16 Days of Activism against Gender Based Violence: Abolishing Gender based Violence against Women
9. Human Rights day: Upholding of Human Rights in the wake of COVID-19
10. UHC Day: Accelerating the attainment of universal Health Coverage amidst COVID-19 pandemic



Members of MeTA Kenya CSOs Alliance participating in 16 days Activism including World Aids Day in promotion of SRHR

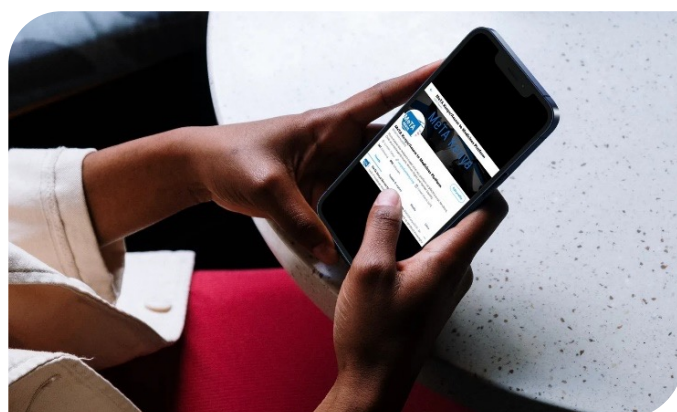


Aside from using our website, facebook and twitter platforms to engage with key stakeholders, we used our YouTube channel to showcase the voices of the CSOs we work with as well as members of the communities. For instance, on World Contraceptive Day, we interacted with the youth just to gauge their knowledge on the different contraceptive methods and their misconceptions. This made it able for us to identify the gaps that exist in regards to knowledge of the youth on contraceptives.

This platform has been crucial for documenting and sharing some of the interactions we have had with the communities we serve and we hope that it will continue serving its purpose of being a learning and sharing platform with our partners and the community at large.



youth engagement and interview on contraceptives knowledge



We were able to meet positive engagement through our regular twitter messaging as evidenced by the impressions, re-sharing and mentions by our partners. Below is a summary of our twitter metrics for the year 2020.

Tweets	387
Impressions	281.7 K
Mentions	1,322
Profile visits	6,599
New Followers	511

<https://twitter.com/MeTAKenya2018>

<https://web.facebook.com/MeTAKenya/>

[www.youtube.com/channel/UCgw92NaV6J5Q7GhypMouUg](https://www.youtube.com/channel/UCgw92NaV6J5Q7GhypMouUg)

<https://www.instagram.com/metakenya2018/>

<https://www.atmplatformkenya.org>

## Community Engagements

Access to Medicines Platform seeks to ensure that community voices are represented in policy formulation and at decision-making level. For communities to hold duty bearers accountable, they need to be aware of their Sexual and Reproductive Health and Rights. Through our CSOs partners, we hold community engagement sessions at the lowest level.

We have supported community dialogues, youth sensitization on Sexual Reproductive Health Rights matters, social accountability and public participation. We have also effectively organized county world health days' including World Contraceptive day, International Day of the Girl child, International Day of the Youth and World Mental health day. In addition to that, we have also supported our community based members to participate in radio talk shows in local dialect so as to reach out even to the most marginalized with information on Reproductive Maternal, child and adolescent health as well as the Ministry of Health messaging around COVID 19 preventive measures.



**World contraception day celebrations in Kisumu**



**International Day of the girl child event in Narok County**

## Supporting Meaningful youth engagement in decision making in Narok County

For the longest time, the youth have been left out in decisions that concern them instead of being made part of coming up with the solutions to the issues they face. In August 2020, Access to Medicines Platform supported the Narok Youth Network on SRHR to convene a consultative meeting with decision makers. The meeting brought together The Director of Youth States Department, The County SRHR Coordinator, The Chief Officer Youth, Gender and Sports and Chief Officer of Medical Services. 20 youth leaders from the network were selected from 6 sub-counties to represent different interests.

The discussions revolved around the need for meaningful youth engagement and inclusion, advocating for fully functioning youth friendly corners and implementation of AYSRH policy and formation of a youth policy. The meeting provided a platform for the youth participants to explore how they can be part of discussions, planning and decision-making on matters that affected them.

Some of the action points from the meeting included:

1. Developing a functioning youth policy that could be customized from the national youth policy to fit the needs of Narok County Youth.
2. Formation of a Youth Technical Sectorial working group to discuss matters pertaining youth development in the County.
3. Setting up Youth Friendly Corners and making the ones available functional.





**Narok Youth meeting with decision-makers**



**Youth representative in the consultative meeting**

## Documentary coverage and photo essay assignment

In 2020, we conducted a field visit to Narok and Kisumu counties. The objective of conducting the field visit was to document the impact of our work in those counties. In addition to that, we supported our partner Health Action International to conduct a photo essay assignment in Narok County.

The assignment entailed taking of high quality photos that were in sequence and could tell a story. These photos were to be used in the creation photo essays that would tell a story on:

- Challenges faced by communities in accessing medicines during the COVID period (reproductive health; access to insulin, immunization, family planning, treatment of STIs.
- The access to medicines situation on the ground: challenges experienced by women and girls in accessing health services
- Teenage pregnancies and how COVID has exasperated or reduced incidences

We were able to interview some of the beneficiaries of our interventions and also get the real picture of the situation on the ground when it came to access to SRH commodities. In Narok County for instance, we were able to speak to some of the beneficiaries of the return to school policy. Advocating for adolescents sexual and reproductive health is at the heart of the work we do. Therefore, ensuring that the youth and adolescents have access to SRH information, commodities and services is a priority.

Upon giving birth, many young girls are condemned to a life of unprepared motherhood; forced to abandon their education. For many of their parents, this is the easiest way to usher them into marriage, regardless of their age.

In partnership with our CSOs partners in Narok County-AfyAfrika and the Narok Youth SRH Network, we have accelerated advocacy efforts for the implementation of the return to school policy and Adolescents and Youth Sexual and Reproductive Health (AYSRH) Policy. The return to school policy provides guidelines on how pregnant girls and those who have delivered can continue with their education, thus giving them an opportunity for a brighter future.

Through presenting findings to the County Education Director on the implementation of the return to school policy in the county, the county director of education issued circulars to School Heads to implement the policy by maintaining the girls in school until they delivered and re-admit them or refer them to other school if they are not comfortable in their previous school after giving birth.

Our field study also showed that there was still more to be done in terms of community sensitization and advocacy for the implementation of this policy to ensure that no girl misses out on the opportunity to complete their education despite getting pregnant at a young age.



### Beneficiaries of the Return to School Policy

Among the proposed recommendations from our study report is integration or establishment of functional youth friendly corners so as to eliminate the barriers to accessing SRH commodities and services to adolescents and youth.

A youth friendly centre should be accessible to young people, offer basic range of services including sexual and reproductive health services, maintain confidentiality and privacy, ensure quality and consistency and be reliable and sustainable. But sadly for the Narok youth empowerment centre, this was not the case. Even though it is a beautiful establishment, it is not functional enough to meet its purpose nor the needs of young people in Narok county. While the facility was meant for youth friendly services, it is today a meeting point for different members of the community. Having functional youth friendly centres would go a long way in growing a well-informed population of young people and creating safe spaces for them to freely access SRH commodities and services without experiencing stigma



**Narok Youth Empowerment Centre**



**Pool tables and conference facilities for meetings at the centre**



Involvement of male partners in access to, provision of and education on the use of contraceptives and treatment of sexually transmitted infections is critical in advancing sexual and reproductive health. To achieve this, it is of importance to identify and engage men who can spearhead and champion for the fulfillment of sexual and reproductive health and rights among women and girls in our communities. The male champions also encourage other men to be involved in matters sexual and reproductive health of their partners including uptake of family planning services. During our field visit to Narok County, we were able to interact with Mr. Mark Letuolo, a community health volunteer and champion for maternal and child health. Mark shared that majority of pregnant mothers preferred giving birth at home and therefore miss out on getting the right supplements until they give birth. As a health volunteer and male champion, Mark has been instrumental in empowering mothers and young people with sexual and reproductive health and rights education, sanitation, and is also actively involved in COVID-19 messaging.



**Mark Letuolo:** A community health volunteer and male champion for maternal health

"I have always loved people. Here in our home, our community is very connected. We do everything as a community. For instance, if a child falls sick, we all have to contribute for the child's medical bills whether you belong to that family or not. This exposed me to the needs of the community at an early age."



# Partnerships and Networking opportunities

## MeTA Kenya CSOs Alliance

The MeTA Kenya Lake Basin SRHR alliance was formed by individual CSO members who participated in our tailor made capacity strengthening training on policy advocacy, use of research and effective communication that was held in June 2018. The alliance which brings together CSOs from the Lake Region draws its membership from Non-Governmental Organization, (NGOs), Community Based Organization (CBOs), Faith-based Organizations (FBOs), and other community groups.

Initially, members of the MeTA Kenya CSOs alliance were based in the lake region covering Kakamega and Kisumu counties but the alliance has since been able to expound its membership and reach to other counties including Mombasa, Kwale, Narok and Kajiado.

This alliance provides a powerful voice with which the CSOs have been able to effectively engage with and enter into official relations with the county governments to work together on Sexual and Reproductive Health and Rights issues. Through our MeTA CSOs Alliance, we have been able to achieve a tremendous amount of traction within the health space in Kenya. We have not only achieved numerous outcomes in our counties of focus but have also built a robust network of community led/focused youth and women led civil society organizations that are part of our team of implementers and collaborators.

## MeTA CSOs ALLIANCE MANDATE

- Strengthening and Influencing policy design and implementation
- Lobbying for participatory and inclusive policy development and implementation processes
- Strengthening citizen-led social accountability mechanisms
- Promoting coordination between CSO platforms and networks working on SRH and health-related issues at the county and national level
- Enabling civil society to have a voice in the SRHR policy development and implementation.
- Maximizing attention for SRHR Advocacy Interventions and their other related priority issues
- Sparking local action and new government commitments on SRH and UHC
- Building relationships with key players to support SRH advocacy efforts for years to come
- Discussing concrete next steps to expand access to SRH health services and financial protection
- Strengthening primary health care systems in SRH programming.



## Achievements:

While Kenya's Constitution 2010 devolved management of the health docket to county governments, a common challenge for health sector planning and budgeting has been the misalignment between policies, technical planning and budgetary allocation and inadequate community involvement in priority setting. The Health Systems Advocacy Partnership (HSAP) has been working with development partners, civil society organizations and key stakeholders to ensure that SRHR becomes a key priority for budgetary allocation. With the support of HSAP, the MeTA Kenya CSOs Alliance has accelerated their advocacy efforts that contributed to the increased budgetary allocations for SRH as well as implementation of key policies such as the Return to School policy in Narok County.

### Below is a summary of MeTA CSOs Alliance achievements since inception:

- ✓ Kakamega county through their Commodities Security TWG used the findings to inform the quantification of SRH commodities;
- ✓ In Kwale county: Through the Pepea Innovation hub, a network on SRH Commodities and budget advocacy, community sensitization on MCH and SRH was established.  
  
The network managed to champion for a 20% increase in the health sector at 5 wards whereby the increment was going to infrastructural of the health department. A few wards would get upgrade of maternity wings and delivery equipment. The overall RMNCAH budget has more than tripled in the financial year 2020/2021 compared to 2019/2020.
- ✓ In Kajiado county: Through advocacy interventions by our CSO partner ADEO, the county designated a one stop youth friendly center at Rongai social hall that would be equipped to offer health services for youth and key populations in Kajiado North. Together with our partners in the HSAP, we further supported the development, review and adoption of the 10-year health bill for Kajiado County.
- ✓ Through evidence based advocacy, there was an increase in Kisumu County Reproductive Maternal, Newborn, Child and Adolescent Health(RMNCAH) budget allocation from 46,167,393 FY 2019/2020 to 60,125,645 FY 2020/2021.
- ✓ Supported the Kisumu County Family Planning Costed Strategy development
- ✓ Formulation of Kisumu County Health Information Management System Bill to provide county specific data for proper budgeting and inform SRH interventions.
- ✓ Formulation of Kisumu County Health Financing Bill to ring-fence funds allocated for health, especially SRHR, from being channeled to other county projects. The SRH Budget has seen an increase over the last 3 years.
- ✓ Kisumu County Youth Empowerment costed Plan developed and adopted by the county Government for implementation (and Adolescent and Youth SRH is part of the costed plan which the county government is going to fund as from the next financial year).
- ✓ Established Kisumu County Quarterly Health Stakeholders planning and Reviews forum (to plan and review health progress) where we are represented by our Lake Basin Network on SRHR.
- ✓ Formation of the Narok county Youth forum and public Participation platform to effectively participate in the county budget process and planning.
- ✓ Supported the successful conduct of the first ever Narok Teen Summit in partnership with the county, office of the county first lady, Kenya Red cross and other key stakeholders.
- ✓ Implementation of the return to school policy for teenage girls who get pregnant while in school.

## Uzalendo Afrika Initiative

Uzalendo Africa Initiative is a local organization that nurture young people to be transformational leaders and active citizens of this country, through enhancing the capacity of local communities to discuss and address issues that concern them; and advocating for progressive policies and programs. Uzalendo Afrika Initiative is part of MeTA Kenya CSOs Alliance implementing partner in Mombasa County.

## Youth Alive Kenya

Youth Alive! Kenya (YAK) is a national youth-led non-governmental organization that exists to promote the wellbeing and inclusion of young people in development through partnerships, capacity building, and advocacy. It aims to create a society where young people are empowered to realize their full potential. Access to Medicines Platform partners with YAK in various interventions through the MeTA Kenya CSOs alliance.

## Jamii Action Centre

Jamii Action Centre, previously known as PEPEA innovation hub is a Community Based Organization(CBO) that works to promote peace and security, support livelihoods of communities, child protection, leadership and governance and advance sexual and reproductive health in Kwale County. Partnering with Jamii Action Centre has contributed to positive outcomes including 20% increment for health infrastructure.

## Coalition for Health Research and Development (CHReaD)

CHReaD was formed as a result of a group of NGOs recognizing the potential of research and development in advocacy and its impact in Kenya's health innovation space. It is a membership coalition and each member organization has a history of advocating for improved health technologies, programs, and services—from HIV and tuberculosis, to non-communicable diseases, to maternal, newborn, and child health. Through coordinated advocacy, CHReaD underscores the importance of health R&D in increasing access to lifesaving technologies across the health spectrum. CHReaD also enables all member organizations to achieve mutually shared goals that support the research and development of high-impact health technologies in Kenya. As a member of CHReaD, Access to Medicines Platform participated in several engagements hosted by coalition including the official handover of CHReaD leadership from PATH to Amref Health Africa. It is in this same event that CHReaD awarded its members for their ongoing commitment and dedication to Health Research and Development in Kenya.



## JANUARY

Hosted the 3rd MeTA intercountry forum

## MARCH

Conducted HSAP annual reflection & End Term Evaluation in Kisumu

Supported HAI to conduct Snakebite Research

## JUNE

Participated Snakebites champions webinar

## SEPTEMBER

Convened a multi-stakeholder SRHC Dissemination forum In Kisumu and Kakamega counties.

## NOVEMBER

Participated in the final HSAP Annual reflection

## FEBRUARY

Participated in GFF consultative meeting on initiation of the Country Co-ordinating Mechanism

## APRIL

Participated in County COVID Response virtual meetings

## JULY

Convened a multi-stakeholder SRHC dissemination forum

## OCTOBER

Hosted online training webinars

## DECEMBER

Participated in the 4th RHNC conference

Participated in CHRead Handover event

Access to Medicines Platform seeks to fill the gaps that exists in the country when it comes to matters concerning reproductive and maternal health. We prioritize on providing an opportunity for community voices to be heard by playing a critical role in ensuring that decision makers are responsive to community needs and that community voices are well represented.

In 2020, we oversaw the successful conduct and finalization of the HSAP project: a project that in many ways impacted health systems strengthening in Kenya. From the lessons drawn and outcomes realized as a result of the various interventions adopted in the implementation of the project, we recognize that there is still more to be done in terms of scaling up advocacy.

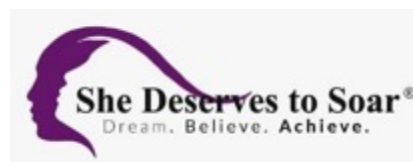
The outbreak of COVID 19 also in many ways demonstrated the need for adopting innovative approaches and multi stakeholder collaboration when addressing health emergencies. In addition, community sensitization to encourage health seeking behaviors even in pandemic situations is fundamental in the attainment of Universal Health Coverage.

We are grateful to our donors and partners for the support, cooperation and commitment they have shown in advancing sexual and reproductive health. We also look forward to further engagements in the coming year so as to realize our objective of health systems strengthening and being the voice of our communities.

### Our International and National partners and donors















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**ACCESS TO MEDICINES PLATFORM**  
"Health Systems Strengthening for Universal Health Coverage"

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# STRENGTHENING HEALTHY SYSTEMS IN KENYA

That enable people in Sub-Saharan Africa to equitably access high-quality sexual and reproductive health services and rights.

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