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

NEWSLETTER

JUNE 2026 EDITION

A DEFINING MOMENT FOR GENDER JUSTICE

This June marked a significant shift in how we approach Gender-Based Violence (GBV) in Kenya. For too long, powerful national reports and well-crafted policies have gathered dust, while survivors continued to face barriers to justice and care. This month, we moved beyond rhetoric. In Kakamega and Vihiga Counties, stakeholders did not just talk about the problem—they rolled up their sleeves and co-created concrete, time-bound action plans to tackle it head-on.

Stephen Wndei, Director of Health, Medical Services-Kakamega County giving his opening remarksat the GBV multi-stakeholder engagement

The message was clear: the era of waiting is over. With six months having passed since the release of the Presidential Taskforce Report on GBV and Femicide, counties are now stepping up to localize these recommendations, secure political commitment, and deliver tangible results within 90 days. The question is no longer "what should be done" but "who will do what, by when, and how will we know it's working?"

This shift represents a fundamental change in how accountability is understood and operationalized. It recognizes that national recommendations, no matter how well-crafted, remain abstract until they are translated into county-specific actions that reflect local realities, resources and priorities. It acknowledges that meaningful change requires not just policy frameworks but political will, sustained financing and multi-sectoral coordination. Additiionally, it affirms that survivors cannot wait, every day of delay represents another day of suffering, another opportunity for perpetrators to evade justice and another failure of the systems meant to protect the most vulnerable.

KAKAMEGA: A COUNTY READY TO LEAD

The data presented painted a stark picture. Out of 1,184 survivors recorded between September 2025 and April 2026, only 677 (57.2%) sought care within the critical 72-hour window, and a mere 6 survivors completed the full PEP regimen, a near-total collapse in adherence. Sub-county disparities were equally troubling, with Matungu recording a dismal 21.9% of survivors accessing timely care, compared to 75.9% in Khwisero. These numbers represented real women, children, and men falling through the cracks of a fragmented system.

Participants engaged in robust plenary discussions, identifying key barriers and priority actions:

- Weak justice coordination: Delays in investigations, poor evidence management, and low conviction rates continue to undermine survivor trust in the system.
- Harmful cultural norms: Myths and misconceptions that normalize sexual violence, beliefs around male dominance, and discrimination against persons with disabilities were identified as significant drivers of violence.
- Parenting gaps and family-related drivers: Neglect of children, failure to provide basic needs, and cases where family members perpetrate violence were flagged as critical concerns requiring stronger child protection awareness and community-based prevention approaches.
- Rising GBV in learning institutions: Participants expressed alarm over increasing reports of GBV within schools, calling for strengthened safeguarding mechanisms and accountability among education stakeholders.

1) Multi-stakeholder dissemination and GBV action planning meeting

Kakamega County emerged as a beacon of accountability this month, hosting two pivotal back-to-back engagements that brought together the full spectrum of stakeholders from health, justice, security, education, and civil society.

The journey began with a multi-stakeholder forum on June 15th, where the County Director of Health, Dr. Stephen Wandei, delivered a sobering reality check. Despite the existence of the SGBV Control and Management Act, implementation gaps remain glaring. He posed a critical question that set the tone for the entire meeting:

"We have the policies—what is stopping us from implementing them?"

The objective was clear: translate the national GBV Taskforce recommendations into county-specific actions.

Key outcomes of the forum

- A shared understanding of the national GBV Taskforce recommendations and their implications for Kakamega County.
- Validation of county SGBV performance data, highlighting critical gaps in the care cascade.
- Identification of priority advocacy asks to be presented to the County Executive for accelerated implementation.
- Consensus on the need for a 90-Day GBV Rapid Results Initiative (RRI) with clear targets and accountability mechanisms.

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The High-Level Executive Meeting – Securing Political Commitment

The multi-stakeholder forum laid the groundwork, but meaningful change requires political will. On June 16th, just one day later, the Access to Medicines Platform convened a High-Level County Executive Follow-Up Meeting, a platform where key decisions would be made.

The meeting brought together Kakamega County's most senior leadership: County Executive Committee Members (CECMs) for Health and Gender, Chief Officers, the County Police Commander, the County Attorney, the County Criminal Investigations Officer, and a representative from the Office of the County Commissioner. The agenda was straightforward: review the advocacy asks, secure commitment, and chart a path forward.

The meeting opened with remarks from CECM for Health, CPA Livingstone Imbayi, and CECM for Gender, Jackline Masicha. Both leaders acknowledged that GBV continues to have profound social, psychological, and health impacts on survivors, particularly women, children, and adolescents. They noted that despite the existence of the GBV Act (2024) and policy frameworks, implementation gaps persist and require strengthened coordination and accountability.

The discussion that followed was frank and productive. The County Attorney noted that most of the proposed recommendations are already provided for within the county legal framework, particularly under the SGBV Control and Management Act. He emphasized that the primary gap lies not in the absence of laws or policy provisions, but in their enforcement—a reality that requires strengthened coordination and accountability across sectors. He committed to strengthening access to justice through provision of pro-bono legal support services for GBV survivors.

Pic 1: CECM Health-Livingstone Imbayi
Pic 2: CECM Gender and Social services-Jackline Masicha
Pic 3: County Attorney-Vivian Mmbaka

Key Commitments Secured:

1. Adoption of the 90-Day GBV Rapid Results Initiative (RRI) with clear targets and accountability mechanisms.
2. Reactivation of the multisectoral GBV Technical Working Group, to be chaired by the County Commissioner before the end of June 2026.
3. Development of a Forensic Centre of Excellence at Kakamega County Referral Hospital, with CECM Health initiating discussions with the Governor.
4. Allocation of resources for a GBV response vehicle and activation of a 24/7 Emergency Operations Center with a toll-free GBV response line.
5. Operationalization of GBV rescue centres in Shinyalu, Chekalini, and Khwisero.
6. Issuance of a county-wide circular enforcing free GBV services in all public health facilities, with immediate effect.

"*The primary gap is not the absence of laws, but their enforcement,*" noted the County Attorney, underscoring the collective responsibility to move from policy to practice.

Vihiga County: Localizing National Commitments into County Action

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On June 18th, the momentum for accountability shifted to Vihiga County, where over 20 stakeholders from government departments, civil society, faith-based organizations, the justice sector, health sector, education sector, and child protection gathered with the main objective of: translating the national GBV Taskforce recommendations into a concrete, county-specific action plan that would leave no survivor behind.

Ms. Dorothy from Access to Medicines Platform presented key findings from the National GBV/Femicide Report, making a compelling case for localization. The national findings painted a sobering picture that resonated deeply with the county stakeholders:

- Increasing cases of sexual violence, domestic violence, incest, and femicide across the country.
- Existence of GBV hotspots, particularly during Disco Matanga events—a cultural practice that has become a flashpoint for violence.
- High prevalence of violence against women and girls, with hidden incidences of incest and family-based violence that often go unreported.
- Low confidence among survivors in justice systems due to delays, weak investigations, and perceptions of impunity.

Systemic barriers identified at the national level mirrored those experienced in Vihiga:

- Weak enforcement of existing GBV laws.
- Informal settlement of GBV cases through community-level negotiations that often undermine justice.
- Inadequate funding for GBV programmes.
- Fragmented service delivery that forces survivors to navigate multiple systems.
- Capacity gaps among frontline responders who are often the first point of contact for survivors

Community perspectives shared by Haki mashinani champion reinforced a critical truth: even when policies exist and services are available, barriers rooted in poverty, culture, and power dynamics can make justice inaccessible for the most vulnerable. Addressing GBV requires not just strengthening systems, but transforming the social and economic conditions that perpetuate violence.

The forum culminated in intensive group work where participants translated discussions into concrete actions. The resulting action plan represented a comprehensive roadmap for strengthening GBV prevention and response in Vihiga County, with clear responsibilities and timelines.

Group discussions to develop 90-day accountability action plans

The 90-Day Action Plans are designed to address the root causes of GBV and the systemic barriers survivors face. If implemented effectively, survivors in Vihiga County can expect:

- Faster access to justice through standardized case classification, expedited investigations, and stronger witness protection.
- Improved health outcomes through timely care, PEP completion, and comprehensive survivor-centered services.
- Reduced barriers to reporting through free services, community awareness, and engagement of religious and cultural leaders.
- Stronger coordination among health, justice, security, and social services, reducing the burden on survivors navigating multiple systems.
- Greater accountability through data-driven decision-making and multi-sectoral oversight.

PRACTICAL NEXT STEPS (WHAT TO PRIORITIZE NOW)

Access to Medicines Platform and partners will continue to support county governments in tracking progress, addressing emerging challenges, and ensuring accountability. Key follow-up actions will include:

- Regular progress reviews with county leadership and GBV TWGs.
- Documentation of best practices and lessons learned.
- Advocacy for sustained financing and institutionalization of GBV interventions.
- Continued community engagement to ensure accountability at all levels.

Amplifying Voices: Community Engagement on GBV

Aside from strengthening institutional accountability, Vihiga County placed communities at the centre of the conversation. Access to Medicines Platform hosted a live radio talk show on Vihiga FM (105.0 FM) under the theme, "Strengthening Community Accountability in Addressing Gender-Based Violence." The one-hour programme reached an estimated 451,531 listeners, creating a county-wide platform for open dialogue on gender-based violence (GBV), survivor protection, and access to justice.

What made the programme particularly impactful was the overwhelming public participation. Throughout the broadcast, listeners called and texted with deeply personal experiences and thought-provoking questions, demonstrating both the prevalence of GBV and the growing demand for accurate information and responsive support systems.

Beyond answering questions, the programme served as a safe space for learning, reflection and collective problem-solving. It challenged harmful misconceptions, clarified legal processes, and reinforced the importance of reporting cases through formal justice mechanisms while encouraging communities to play an active role in preventing violence and supporting survivors.

The radio dialogue demonstrated the power of community engagement in advancing GBV accountability. By giving citizens a platform to ask questions, share experiences, and hold systems accountable, the programme strengthened public understanding of survivor rights, expanded awareness of the many forms of gender-based violence—including emotional, psychological, physical, sexual, and economic abuse and reinforced the shared responsibility of families, community leaders, service providers, and justice actors in creating safer communities for all.

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