



## PS KENYA'S COVID-19 RESPONSE

Coronavirus disease (COVID-19) is an infectious disease caused by a newly discovered coronavirus. Since the first case of COVID-19 was confirmed in Kenya, PS Kenya has put in place a number of initiatives that could be leveraged on to support the fight against the Covid-19 disease.

The Tunza social franchise network, is one great resource, working with over 400 franchised private facilities, where it focuses on building the capacity of providers to offer quality health services.

Additionally, under the UKAID funded project – DESIP, PS Kenya supports both private and public facilities in 19 counties to increase access to quality family planning services. In the wake of COVID-19, PS Kenya has expanded its support to respond to this urgent need through a blended approach targeting both health providers and the consumers. During this reporting period, PS Kenya has worked towards:

- 1) Implementation of Komesha Corona national campaign with an emphasis on Hygiene (handwashing and surface hygiene), social distancing and symptoms. PS Kenya developed radio ads, activation content and phased messaging on 3 selected stations: Citizen Radio, Radio Maisha and Ghetto radio which also pushed for listeners to text the short code (40507) for more interaction with the campaign. Up to 1,219 responses were recorded in 9 days. PS Kenya is further Supporting development of Phase 2 MOH/GoK campaign Komesha Corona, Okoa Maisha (Stop corona, save lives) with content strategies for Mass media (TV, radio and out of home advertising) and Digital media finalized. On provider behavior change, Key gaps identified in the facility assessments including lack of knowledge on PPEs use infection prevention measures, triage process and minimizing transmission of the covid19 Virus; were addressed by adaptation and use of MOH COVID-19 materials for providers.
- 2) Conducting a Needs Assessment among health providers to inform the training curriculum. The qualitative research conducted found most facilities implementing most of the infection control measures, with cost being a major limiting factor. Providers gave COVID-19 related information to clients but they refused to comply with the measures given. Providers rarely attended to Persons Living With Disabilities (PLWDs) so they felt they did not need any extra support to enable them attend to PLWDs with COVID-19 information. There's a reduction in access of services by clients with insurance companies not honoring payments claims with little COVID-19 related support from the government.
- 3) Supporting frontline workers: PS Kenya adopted the MOH training content and summarized it into an easy to use WhatsApp module where providers are able to take these courses at their time. The system integrates the use of video demonstration, text explanations and visual illustrations to drive points home. PS Kenya in conjunction with medical Tech Care for All (TC4A) supported providers with content. PS Kenya got approvals to adopt the MOH-AMREF content which will be used for training and allow providers take up courses and get continuous professional development points.
- 4) Product distribution: The project procured a total of 46,000 pieces of masks which are currently on distribution to different health facilities. Additionally, 6000 pieces of masks were distributed to CHEWs to ensure continuity of community level interventions.
- 5) Partnerships: PS Kenya has been instrumental in shaping the national campaigns through continuous engagement with Ministry of ICT and Ministry of Health through their technical working groups on Health promotion and community engagement. PS Kenya had further initiated partner meetings with HBCC Kenya partners to map out implementation areas and synergize media planning and placement for improved cost efficiencies. PS Kenya has also supported webinars on Embracing the new normal, sustaining behavior change gains in partnership with Unilever East Africa, Ministry of ICT, media and the youth.

### SUPPORT COVID-19 EFFORTS IN KENYA

PS Kenya has been at the forefront in drafting and implementing measures on Prevention of COVID-19 in partnership with the national emergency and response committee. Under the Hygiene and behavior change coalition (HBCC) funded by DFID and Unilever, PS Kenya has supported the second phase of the Komesha corona okoa maisha which addressing personal responsibility, improving livelihoods and saving lives by adhering to Ministry of health guidelines. To support the campaign PS Kenya developed has developed radio ads and activation content for placement in national and local radio stations, TV ads for digital and TV placement and print materials for matatu and community branding. To support social inclusion, PS Kenya has partnered with sign TV to adapt content for the visually impaired.



In support of private providers' capacity to manage COVID-19, PS Kenya conducted a Needs Assessment among health providers to inform the training curriculum whose training content was summarized it into an easy to use WhatsApp. The system integrates the use of video demonstration, text explanations and visual illustrations to drive points home. The training will further allow providers to get continuous professional development points. The HBCC project has further procured 52,000 pieces of masks for distribution in Tunza health facilities.

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## STRENGTHENING PROVISION OF FAMILY PLANNING SERVICES THROUGH DISTRIBUTION OF MEDICAL EQUIPMENT

By Ezra Abaga - Corporate Communications, PS Kenya

Despite the challenges associated with COVID-19. DESIP, a UK Aid funded programme focused on Delivering Sustainable and Equitable Increases in Family Planning in Iow Contraceptive Prevalence Rate (CPR) counties in Kenya is still focused on fulfilling its goal of increasing access to, and use of, modern contraceptives across 19 counties in Kenya.

To achieve this goal, the programme is strengthening provision of Family Planning services in both public and private health facilities through distribution of medical equipment in both public and private health facilities across these counties. This will help in ensuring that quality Family Planning services are available for the targeted group of persons which include: adolescents, persons with disabilities and poor rural women.

While receiving the medical equipment for Narok County, the County Director of Health highlighted that the equipment will play a critical role especially in improving uptake and utilisation of Family planning services.

With respect to COVID 19, the programme has supported these 19 counties through distribution of World Health Organisation (WHO) and Ministry of Health approved materials with messages on how to manage COVID 19, available in both public and private health facilities. The programme has also distributed sanitizers to health facilities across the 19 counties.

The 19 counties include: Wajir, Garissa, Mandera, Samburu, Isiolo, Marsabit, Kilifi, Lamu, Kwale, Tana River, Mombasa, Baringo, Kajiado, Narok, West Pokot, Elgeyo Marakwet, Turkana, Migori and Homa Bay.



"We appreciate the support that we continue to get from DESIP, this medical equipment wi olay a critical role in strengthening provision of health services especially in improving uptak and utilisation of Family Planning services" Dr. Francis Kioo.



Narok County Director of Health, Dr Francis Kioo officially receiving part of the medica. equipment being distributed in the County by DESIP.

### DELIVERING SUSTAINABLE AND EQUITABLE INCREASES IN FAMILY PLANNING (DESIP) PROGRAMME COMMISSIONS COMMUNITY BASED DISTRIBUTORS TO HELP REACH OUT TO CLIENTS WITH FP INFORMATION IN HARD TO REACH AREAS.

#### By Ezra Abaga - Corporate Communications, PS Kenya

Access to reproductive health information and Family Planning services by women and girls not only ensures that they can safely plan their pregnancy, but also contributes to other related issues like better child health, poverty reduction, gender equality and greater education outcomes.

Achieving this remains a pressing challenge that demands combined effort from all stakeholders to have it fully realized. By addressing factors like availability of commodities, access to the right information on Family Planning and availability of enough skilled healthcare workers, these services will see an increased



access to and uptake of FP services in Kenya.

Globally, evidence on community-based distributors shows that trained Community health workers can safely, acceptably and effectively provide injectable contraceptive services within their community. Nationally, a demonstration project to assess the effectiveness of using Community Health Workers to provide injectable contraceptives was successfully carried out in Tharaka district in the former Eastern province by the Ministry of health between August 2009– August 2010 and the same findings adopted in the National Family planning Guidelines 6th Edition.



A Community Health Worker receives her Certificate from the DESIP Programme \ Technical Advisor Gladys Someren.

Informed by such findings, the Delivering Sustainable and Equitable Increases in Family Planning (DESIP) programme saw the need to incorporate CHWs as Community Based Distributors (CBDs) in order to reach out to all intended beneficiaries. In partnership with the Ministry of Health and the County Government of Narok, the Community Based Distributors were taken through a 3 weeks rigorous training that saw them get empowered with the necessary skills to educate, counsel and provide short term FP services to the community.

Community Based Distributors sing during their Graduation Ceremony in Narok County

The community-based distributor's initiative is a high impact, low cost intervention of accelerating progress toward SDGs. This intervention aims to remove barriers that impede access to FP information and services, with major restrictive barriers in the provision of family planning services in Kenya being distance, cost, religion, culture, rumors and misconception, provider bias, and legal and medical regulations.

While officiating the CBDs graduation ceremony (A first one in Narok County), the Head, Division of Community Strategy at the Ministry of Health reiterated on the bigger role the CBDs will do in improving health indicators.

"Focusing on the community is the best way to go if the County wants to improve on Health Indicators, I also request the CBDs not work alone but instead work together with the Community Health Extension Workers (CHEWs) who will be a link between them and the health facility. I also assure of the divisions support to the County in implementation of the Community Strategy" stated Dr Salim.

On his part, Dr. Kaliti, the Head Division of Reproductive and Maternal Health commended the County for the great step they had taken through the graduation. Through its Chief Officer of Health, the County Government of Narok reiterated its commitment in ensuring that the initiative was a success.

Similar trainings will be conducted in other under-served/hard to reach areas of Kenya which include: Baringo, Garissa, Mandera, Marsabit, Narok, Samburu, Tana River, Turkana, Wajir, West Pokot, Kajiado, Kilifi and Isiolo Counties.

1New recommendations WHO for task sharing 2017.

" The community-based distributor's initiative is a high impact, low cost intervention of accelerating progress toward SDGs."

## POWERING NEW PARTNERSHIPS TO FIGHT THE NOVEL CORONAVIRUS

By Sylvia Wamuhu, Director Health Systems - PS Kenya



Representatives from Rotary International District 9212 led by District COVID-19 Response team Dr. Joe Kamau, President of Rotary Alfajiri Kilimani Club president - Mwikali Kivuvani during the handing over of the PPE's.

The role of the private health sector cannot be underestimated at a time when the world is wrestling with a deadly pandemic. When 'Wanjiku' falls sick, her most likely first stop is the nearest small health facility located near her household. With no preparedness nor availability of quality Personal Protective Equipment (PPEs) at the health facilities, the situation can be dire. On the 27th of May 2020, Rotary District 9212, joined hands with Population Services Kenya (PS Kenya) where it donated critical PPEs for the Tunza Family Network - a franchise of over 400 private health facilities that is managed by PS Kenya.

This premier event will see 4 private health facilities located in the COVID-19 hotspot areas in the Coastal region receive PPEs that would serve them for a month. The facilities which are located in Likoni, Mvita, Bamburi, and Kilifi will receive several PPEs including hand washing stations, sanitizers, surgical masks, latex gloves, coveralls, gumboots and protective goggles.

With Mombasa being one of the epicenters of Coronavirus and new infections being registered from the county every day, this donation is timelier than ever. The main beneficiaries of this great initiative will be the Health Care workers in these small health facilities and the community members living around there.

With or without COVID, primary health care continues to be a real need across the communities. There is however a fear that health facilities are risky places at the moment, thereby increasing the chances of people staying at home feeling unwell. This would easily lead to deaths that would have been prevented if the patient had accessed treatment. With high quality PPE made available in these facilities, Wanjiku's concerns about getting the virus from the facility will be adequately addressed.

PS KENYA & INSURANCE FOR ALL (IFA) INSURANCE SIGN PARTNERSHIP DEAL FOR ITS TUNZA SOCIAL FRANCHISE



#### By Ezra Abaga & Justus Odeyo, PS Kenya.

In Kenya, 78% and 22% of outpatient and inpatient household health expenditures respectively are out of pocket, partially because many health facilities within easy access of the population are not contracted by insurers.

For 11 years, PS Kenya has been running the Tunza social franchise - a fractional franchise of small and medium size health clinics. Like any other small and medium sized health clinics, Tunza clinics have missed out on the insurance business. This is partly because of their sizes which makes them have very little bargaining powers over the insurance companies. The ripple effect has been inadequate number of low cost health facilities in the insurance panel making it very difficult to develop micro health insurance products.

To respond to these market gaps, and with support from Africa Health Markets for Equity (AHME), PS Kenya decided to try a new model of contracting where privately owned and run health facilities are aggregated into a structured network and presented to the insurance companies as a unit. The idea was to improve efficiency in provider-payers contracting. Overall, the hypothesized net effect was to widen access to health services to insured persons. IFA Insurance C.E.O John Paul Otieno and PS Kenya C.E.O Joyce Wanderi-Maina

A follow up to this project, the Sustaining Health Outcomes through the Private Sector (SHOPS) Plus project, a project of USAID supported PS Kenya to implement this exercise which did not only see PS Kenya sign up an empanelment contract with Insurance for All (IFA) but also influenced a private insurer (IFA) to fuse ir family planning in their benefits - a first one in the industry in Kenya.

**WEBINARS** 

BEHAVIOUR CHANGE IN THE CONTEST OF COVID 19: Will the tried and tested still hold?

# PS KENYA ANNUAL REPORT IS OUT



https://www.pskenya.org/wp-content/ uploads/2020/05/PS%20\_Kenya\_Annual%20 Report%20\_%20Final%20\_29042020.pdf

### VIDEOS











#### EMBRACING THE NEW NORMAL, how do we sustain behavior change gains? LIVE CHAT. SERIES 2



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