

# P5 Kenya Overview

Population Services Kenya (PS Kenya) is a locally registered non-governmental organization (NGO) in Kenya with over three decades of experience in social and behavior change (SBC), social marketing and franchising. PS Kenya has been instrumental in supporting the Ministry of Health (MoH) to create sustainable health markets and provide essential services and information to improve the health and well-being of Kenyans. PS Kenya is headquartered in Nairobi, with regional offices in Mombasa and Kisumu. We are active members of various Technical Working Groups (TWGs) at the national and sub-national levels and have programmatic and social marketing operations across all 47 counties in Kenya, delivering essential health services, information, and quality and affordable health commodities.

PS Kenya's impact has been amplified through strategic partnerships with several Development Partners. These include the Foreign, Commonwealth and Development Office (FCDO), Global Fund (GF), United States Agency for International Development (USAID), Bill and Melinda Gates Foundation (BMGF), Child Investment Fund Foundation (CIFF), Ministry of Foreign Affairs of Denmark (DANIDA), AstraZeneca, UNICEF, and Mavericks Collection, among others. These collaborations have been instrumental in our efforts to improve the health outcomes of the public.



### Purpose: Better Health and Wellbeing

### **Vision**

To be the leader in delivering sustainable health impact and private health sector engagement.

### Mission

To accelerate achievement of positive health outcomes for Kenyans by leveraging partnerships, technology and health expertise.

### **Core Values**











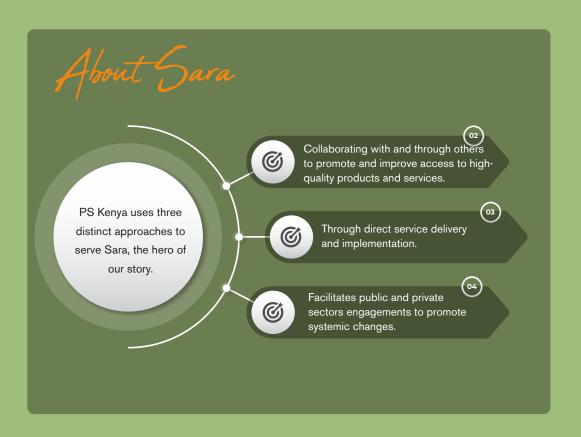


### **PS** Kenya's Unique Positioning:

- We are local national health development NGO with an in-depth understanding of local context and experienced in co-creating people-centered interventions to improve health outcomes.
- With more than 50% of Kenyans accessing health products and services from the private sector, we are experiencing facilitating the public and private sector collaboration ensuring provision of standardized high quality health products and services.
- We understand the target audience (Sara) and use Human Centered Design (HCD) approaches to get relevant insights that inform effective behavior change interventions.
- We have strong relationships and partnerships with a wide range of market actions including governments, manufacturers/ distributors, public and private health providers, and implementing partners (other I/NGOs, FBOs, CBOs, and grassroot organizations).

- We have a national footprint working in all 47 Counties in Kenya.
- We focus on measurable results, exercising discipline around evidence.

We are always ready to enter unchartered waters and disrupt the norm where necessary – e.g. condom communication in Kenya.







### **Impact in Kenya**



**1,594,351**Beneficiaries



1,041
Maternal Deaths
Averted



**5,140**Child Deaths Averted



366,235 Unintended Pregnancies Averted



1,238,594 CYPs Provided



**1,487,981** DALYs Averted



26,487,864 Condoms Distributed





### **Reproductive Health Program**

PS Kenya works closely with the MoH to deliver various Sexual Reproductive Health (SRH) and FP interventions. All our programming adopts the "Total Market Approach (TMA)," which we use to understand barriers to using health products and services and addresses the capacities and incentives of key market players to improve market performance. Our programs include:

## **Delivering Sustainable and Equitable Increases in Family Planning (DESIP)**

PS Kenya, the lead organization, is implementing the DESIP programme to reduce MNC mortality through greater and more equitable access to and uptake of FP in Kenya, targeting the poor and marginalized, including Women of Reproductive Age (WRA), rural adolescents, poor women (<\$1.90/day) and Persons with Disabilities (PWDs) in 12 counties in Kenya (Wajir, Mandera, Samburu, Isiolo, Marsabit, Mombasa, Kilifi, Narok, Homa Bay, Baringo, West Pokot and Elgeyo Marakwet counties).

### **Accelerate Project**

Danish International Development Agency (DANIDA), DKK 50 million program (2021-2025), PS Kenya, is implementing the project to support the provision of SRHR services, prevention and management of Gender-Based Violence (GBV), reduction in Harmful Traditional Practices (HTPs), and strengthened respect for human rights to ensure strengthened learning and adaption through evidence generation and use, focusing on 13 hard-to-reach counties (Baringo, Elgeyo Marakwet, Garissa, Homabay, Kajiado, Kilifi, Kwale, Mandera, Marsabit, Nairobi, Narok, Samburu, West Pokot) with high burden, contributing towards ICPD25's promise of zero unmet need for contraception, zero preventable maternal deaths and zero gender-based violence and harmful practices. The project targets adolescent/youth (girls), women and girl survivors of GBV, boys and men, poor women, marginalized groups (including LGBTIQ+ and PWDs) and those living in hardto-reach (including rural) areas who are often left behind in many SRHR and GBV programs.

### **Binti Shupavu**

Children Investment Fund Foundation (CIFF) and Bill and Melinda Gates Foundation (BMGF) project (2021-2025), PS Kenya, is implementing the ASRH project, working alongside girls, their communities, and governments to support Kenyan girls to access the SRH services they want and need. A360 integrates Adolescent and Youth Sexual and Reproductive Health (AYSRH) with adolescent developmental science, cultural

anthropology, social marketing, and Human-Centered Designs (HCD) to co-design the Binti Shupavu program that increases the demand for and voluntary uptake of modern contraceptives among adolescent girls 15-19-years-old. PS Kenya has replicated and adapted best practices from Nigeria, Tanzania, and Ethiopia for the Kenyan context in Narok, Homa Bay, Migori, Kilifi, and Kajiado.



### **Malaria**

Over the last six years, PS Kenya has been a Global Fund (GF) Sub-Recipient (SR) malaria with remarkable performance in all implementation areas. We are an active member of the Malaria TWG and National Committee of Expert Groups, where we supported the Revision of the Kenya Malaria Strategy (2009 -2014), the Malaria Program Review, and the development of the Kenya Malaria Strategy (2019-2023). Under the GF mechanisms:

#### **GF-SR Malaria**, (2018-2020)

PS Kenya led key interventions in Malaria CCM in Busia County, provided link facility support

supervision for 73 community units (CUs), conducted Malaria prevention and control activities through 440 schools in 6 counties, and conducted HMIS -RDQAs.

### **GF-SR Malaria**, (2021-2024)

PS Kenya led key interventions in Malaria CCM in Busia County, increasing testing at the community from 14% in 2020 to 54% in 2023, while treatment at the community increased from 9% in 2020 to 58% in 2023. We also provided link facility support supervision for 185 community units (CUs) and conducted malaria prevention and control activities through schools in 2 sub-counties.



















































### For More Information

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