KENYA FACT SHEET March 2023

Since 2015, Living Goods has worked closely with Kenya's Ministry of Health (MOH), county-level governments, and their partners to strengthen community-based primary health care. We support and advocate for more robust community health programs through various systemwide strengthening approaches that help accelerate the attainment of universal health coverage (UHC).



The Problem

In Kenya, there is just one doctor for every 5,000 people. Many families still lack access to quality and affordable essential health services close to them. Vulnerable populations like pregnant mothers and children under five years are often disproportionately affected, given fewer than 62 percent of births are managed in a health facility, and 52 out of every 1,000 children die before their fifth birthday.

Decentralization of the health system in Kenya is enabling greater access to health services with a growing national focus on achieving <u>UHC by 2030</u>. However, each of the 47 counties faces various challenges in designing and implementing robust and sustainable health systems that have adequate and effective health workforces. In addition, limited international funding and domestic investments for health; reliance on manual, disparate health data systems; and the absence of comprehensive primary health legislations has further compounded existing challenges within Kenya's public health sector.

The Solution

Community health provides a low-cost and high-impact solution to these challenges and is globally recognized as a key pillar for UHC attainment. By leveraging well-equipped and enabled community health workers, known in Kenya as community health volunteers (CHVs), community health ensures a continuum of care for vulnerable populations and that every household has access to a range of promotive, preventive, and curative health services.

2022 Impact (January - December)





33,614
NEW PREGNANCIES
REGISTERED



409,275 SICK CHILDREN UNDE





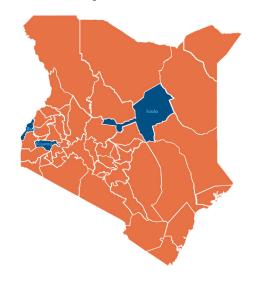
1,810,452
PEOPLE SERVED



55,731 SICK CHILDREN UNDER ONE TREATMENTS AND

Every shilling invested in community health yields a return of up to KES 9.4 in socio-economic benefits.

- Kenya MOH Community Health Investment Case



Supporting Sustainable and Government-Led Digitized Community **Health Systems in Kenya**

We are doubling down on efforts to drive system-level change by supporting the Kenyan government to sustainably operationalize, digitize and finance its community health systems at scale. We provide implementation support to governments at national and county levels and advocate to influence government policy and action to prioritize community health investments and broad adoption of the DESC approach to effectively support community health workforces. We are partnering with the Kenyan government in the following ways:

Strengthening delivery through learning sites:

Working with the Busia County government, we are implementing high-quality, cost-effective community health care using the DESC approach to bolster innovation and showcase the best of what's possible in community health. Busia remains the one Kenyan county where Living Goods will continue directly investing in community health to strengthen service delivery and generate local evidence for broader adoption of best practices in community health.

Strengthening the enabling environment:

We partner with national and county governments to accelerate the enabling environment for DESCenabled community health by supporting the development and operationalization of foundational policies, practices, costing, and financing needed to sustain effective community health services at the national and county levels.

Providing implementation support to government to operationalize its Community Health **System**

Digitizing community health through the development of a robust, interoperable and comprehensive electronic community health information system (eCHIS) is one of government's priorities as part of farreaching health sector reforms to achieve UHC and enhance data use at all levels. Working alongside other partners, we contributed to the development of a costed strategy for eCHIS, curricular and the co-design and enhancement of the eCHIS prototype that was modelled off of the Living Goods Smart Health app. Living Goods was a lead partner in providing technical support for the government-led pilot of eCHIS in Kisumu County, which will inform phased scale up nationally.

Beyond the eCHIS pilot, we are supporting government to implement and scale DESC enabled community health which will ensure all CHWs are Digitally enabled, Equipped with medicines and training, adequately Supervised and Compensated. This follows the pilot in Kisumu and Isiolo where we have an existing cofinance partnership where government leads and we support. So far, we have 2,465 government CHWs serving more that 1.2 million people in Kisumu. In 2022, the government contributed nearly 60% of the total program costs up form 30% in 2021. Other counties have expressed interest in co-financing commitments demonstrating that this is not a one off engagement. We will expand the model to Vihiga County where 1 child in 20 does not reach their 5th birthday compared to 1in 25 in Kisumu.

