

OCTOBER, 2020

# THE MOTION TRACKER: FP2020 COMMITMENTS ACTIVITY REPORT

November 2019-April 2020

**THE *m*OTION TRACKER**

Voluntary, high-quality family planning (FP) can help curb rapid population growth and drive development. In recognition of these links, the Kenyan government commits to improve access to family planning services with specific commitments to (i) finalise and disseminate the family planning national Costed Implementation Plan (CIP) (2017-2020); (ii) strengthening national family planning programme by making a commitment to increase domestic financing for family planning at both levels of government and (iii) Strengthen partnership with the private sector through a total market approach to enable an increase in private sector FP delivery contributions. The government will work with partners to expand uptake of long-acting reversible methods (LARMs), improve commodities security, expand youth friendly services with a focus on adolescent girls and to scale up delivery of services for the hardest to reach groups.

### Anticipated Impact

- I. Increased modern contraceptive prevalence rate (mCPR) from 61% to 66% by the year 2030
- II. Increase CPR for any contraceptive method. among adolescent women (15-19 years) from 40% to 50% by 2020 and to 55% by 2025.
- III. Reduce teenage pregnancy among adolescent women 15-19 years from 18% to 12% by 2020 and 10% by 2025.

## 1.1 The Motion Tracker

Amref Health Africa in Kenya is working in partnership with Population Action International (PAI), and Samasha to adapt, implement and scale up the Motion Tracker. The Motion Tracker was developed by Samasha to effectively translate global commitments into local action by fostering partner participation and engagement to realize these global commitments. The Motion Tracker currently is used to track FP2020 commitments in Kenya. Amref Health Africa in Kenya is serving as a neutral convener, bringing together CSOs implementing family planning programs and will galvanize efforts of other stakeholders towards using the Motion tracker in Kenya.

The Motion Tracker is a customized, dynamic framework for strengthening accountability and driving action by keeping commitments visible, highlighting progress and fostering partner participation, engagement and ownership to address bottlenecks. This framework is based on a six-steps approach and ensures universal understanding of commitments through purposeful concurrent partner engagement and participation at national and subnational level.

### 1.1 Objectives

Specific objectives of the Motion Tracker are;

- I. To create an enabling environment to ensure that global commitments are translated into local action,
- II. To harness the collective power of civil society, development partners and government to address the country commitments with enhanced strategic response, and
- III. To create a systematic approach to realizing the global commitments made by individual countries

## 2.1 Development of process indicators

The Motion Tracker relies on 6 steps, of which Steps 1-5 focus on the deconstruction of the FP2020 commitments. These steps are centered around getting a clear understanding of the rationale that informed the commitments and developing commitment process indicators. These commitment process indicators are validated and agreed upon by FP partners at the first Motion Tracker validation meeting.

It is during Step 6-Implementation where the partners report their contributions made towards the agreed upon commitment process indicators. Progress reached is recorded using the following criteria;

<b>Color</b>	<b>Status</b>
GREEN 	Achieved, available information indicates that process indicator has been achieved
YELLOW 	On track, available information indicates that process indicator is not yet achieved, but on track to be achieved
RED 	Not on Track, available information indicates that process indicator is not yet achieved, and is not on track to be achieved

## 2.2 Sampling technique

We utilized purposive and snowballing techniques to select organizations from which information was collected. Purposive selection of organizations was based on a stakeholder mapping matrix developed during a partners' validation meeting on 10th September 2019. In addition, based on the recommendations of organizations listed on the stakeholders' matrix, a snowballing technique was employed to reach out to other organizations that conduct similar work. The selection methods employed ensured most organizations contributing to the FP2020 commitments were reached to gather their contribution to the same. A total of 45 organizations were visited and 18 responded to the KIIs during a 5 months period from November 2019 to April 2020.

## 2.3 Types of Data utilize

Both primary and secondary data sources were utilised. Primary data was collected using a Partner Contribution Questionnaire. Secondary data was collected through desk review of various documents including the project documents, sector reviews, policy statements, and project dissemination meeting minutes.

## 2.4 Data collection techniques

The following data collection techniques were utilized:

Key informant interviews: A structured questionnaire was administered to key informants amongst donors, international NGOs, local CSOs and Ministry of Health.

Desk review: A list of relevant documents was reviewed. The list of documents reviewed included Project Documents, Organization annual reports, Newspaper Articles, Health sector review papers, MoH Status reports etc.

The data collection modalities included one-on-one meetings, phone calls and email correspondences. Data collected from partners is first reviewed, analyzed then validated during the stakeholder validation meetings.

### 3.1 Description of reporting partners

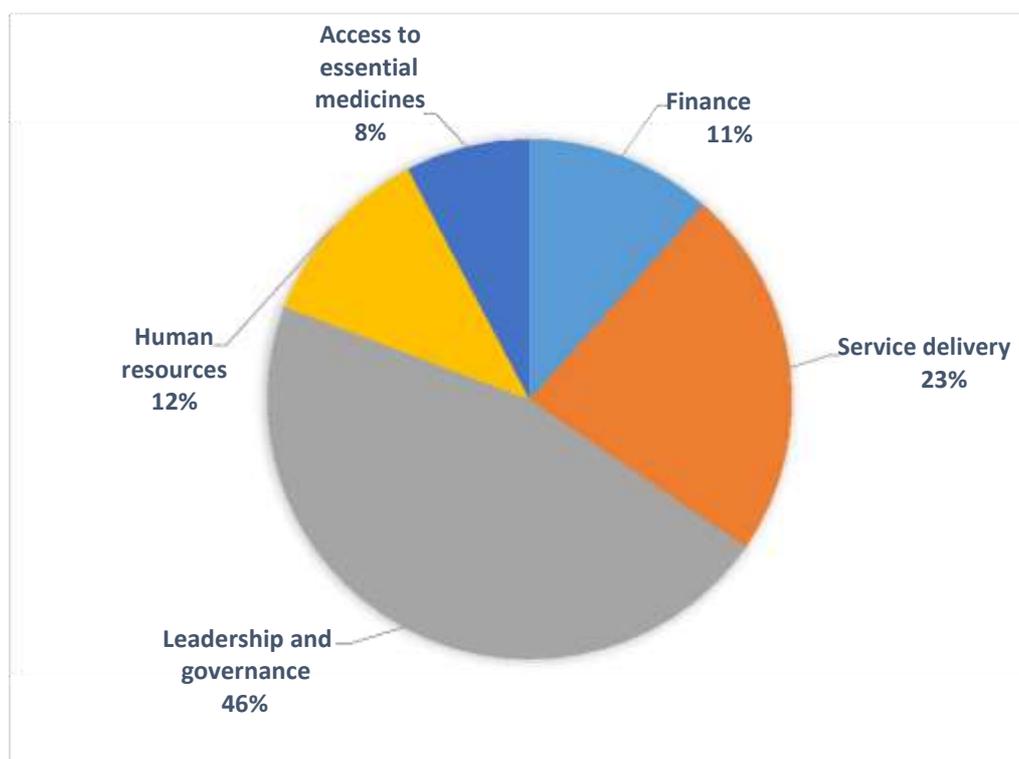
A total of 18 partners contributed to this report .

Category	Institutions
Government	<input type="checkbox"/> Ministry of Health, Ministry of Health Manderu County, National Council for Population and Development, Kenya Medical Supply Authority (KEMSA).
Donors/UN Agency	<input type="checkbox"/> UNFPA
International NGO	<input type="checkbox"/> Voluntary Service Overseas, Population Services Kenya, InSupply, Marie stopes Kenya, Amref Health Africa, Options Consultancy, IPAS, DSWKenya,,PSk
Local NGOs	<input type="checkbox"/> Ugunja Youth Development, Matibabu foundation, Omega foundation, United Champions Advancing Humanitarian Actions Empowerment Center, Christian Health Association of Kenya, Stipa Kenya,
Private (for profit) Company	<input type="checkbox"/>

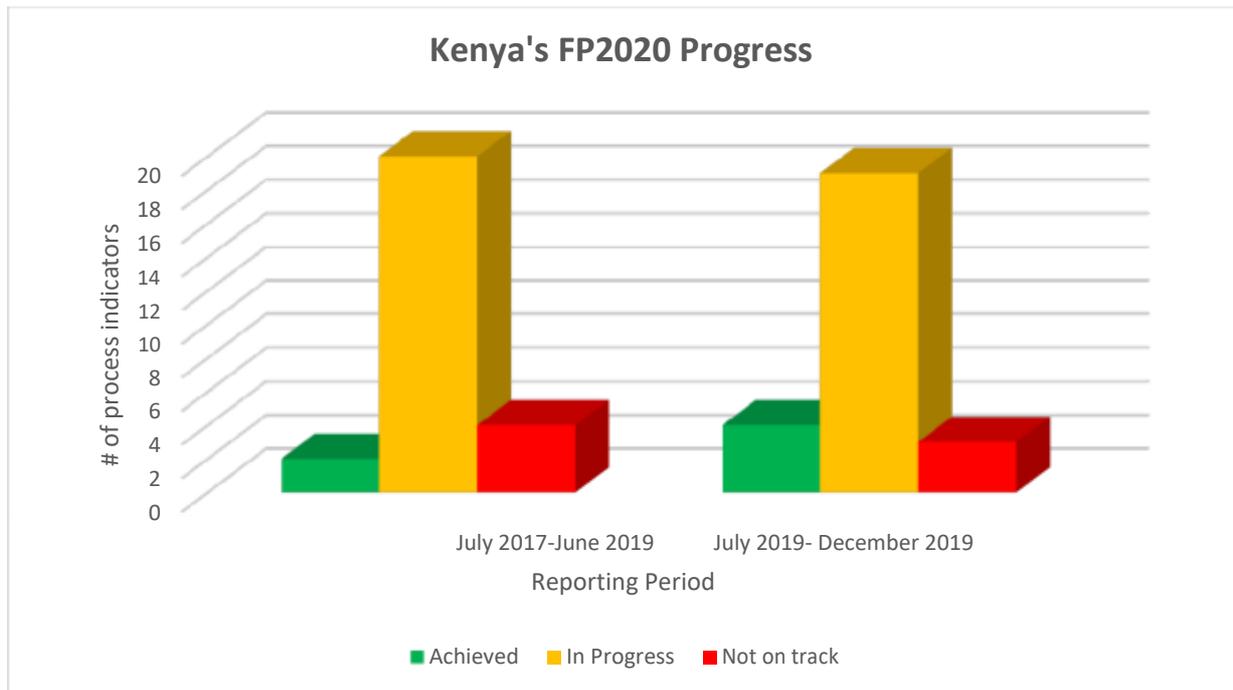
### 3.2 Description of process indicators by World Health Organization (WHO) Health system blocks

Kenya’s FP2020 commitment process indicators can be categorized into thematic areas—service delivery, Health financing, Leadership and governance, Access to essential medicines, Health Workforce and Health Information Systems—based on the World Health Organization (WHO) health systems (HS) building blocks. A total of 26 process indicators were developed to track Kenya’s FP2020 commitments.

Figure 1 below is the detailed process by HS blocks.



## PARTNER CONTRIBUTIONS BY PROCESS INDICATORS



The section below details contributions of organizations towards the FP2020 commitment organized by process indicator. The status of each process indicator is denoted as followed:

On Track:

Achieved:

Not on Track:

## COMMITMENT 1

The government of Kenya commits to increase the portion of the national budget for family planning services, specifically through a budget line allocated to the family planning. It is noted that contraceptives are not included in the National Health Insurance Fund (NHIF) funded free maternity programme, for example. Inclusion of contraceptives in the existing health insurance schemes will increase access to FP for insured individuals, bolstering equitable access to Family Planning. The government will ensure post-partum family planning services are included as part of its Free Maternity policy (Linda Mama programme) which the Government invest 3 billion Ksh annually to ensure mothers access free care at the point of delivery.

### 1.1 Total amount allocated for procurement of FP commodities in the National Budget annually since 2016-2017

#### PROGRESS :

Government of Kenya (GoK) committed to increase budgetary support to procurement of FP commodities. GoK commitment to allocate USD 7 million in 2016/17 and 2017/18 and to double this amount to USD 14.0 million in 2018/19 and 2019/20. In FY 2016/17, only 4.2 Million was allocated. In with FY 2017/18, US \$ 7.2 million was allocated. Therefore, this commitment was met in 2017/18.

In 2018/19 US \$ 3.0 million was allocated, and in 2019/20 US \$ 11.8 million was respectively allocated to procurement of FP. These figures indicate that this commitment hasn't been met for these years.

No	Partners	Activities Contributing to the indicators
1	Ministry Of Health	MOH allocated 245 million KES for FY19/20
2	UNFPA	UNFPA in FY 19/20 procured RH commodities worth \$ 9.759,939. The commodities procured were male and female condoms, IUDs, Implants and injectable.
3	Global Financing Facility (GFF)	GFF through World Bank has allocated 2 US\$ million towards procurement of FP commodities
4	Options Consultancy	Through its advocacy efforts under the Commodity Security TWG mobilized an additional 785 million in 2019/20

### 1.2 National Budget line for FP established

#### PROGRESS :

Different FP partners have been advocating for establishment of a national budget line for FP and submitted a memorandum to Ministry of Finance for the increment of domestic financing for FP.

No	Partners	Activities Contributing to the indicators
1	DSW	Participated at national and county budget making process through submission of memorandum to advocate for increased investment on FP with support from IBP Kenya and IPFK.
2	PSK	Advocated for creation of FP budget at national level and operationalization of County CIPs
3	Options Consultancy	Advocated for creation of FP budget at national level and operationalization of County CIPs

### 1.3. County budget lines for FP created

**PROGRESS :**

Combined advocacy efforts of different Implementing Partners have been made to create the Family Planning Budget line for Homabay county.

No	Partners	Activities Contributing to the indicators
1	DSW	DSW in collaboration with HENNET, OPTIONS KENYA, MARIES STOPES, PRB, FHOK supported the development of county health annual development plans and health sector budgets where the FP annual quantification workplans are costed.
2	Options Consultancy	In collaboration with PSK advocated for operationalization of County CIPs South West- Migori, Homabay, Kajiado and Narok o Coastal Region – Kwale, Mombasa, Kilifi, Lamu and Tana river o Upper Eastern – Marsabit, Isiolo and Samburu o North Rift- West Pokot, Baringo, Elgeyo Marakwet and Turkana o North Eastern- Mandera, Wajir and Garissa
4	Amref Health Africa	Supported FP budget advocacy meetings in Siaya and Homabay counties with support from Matibabu and Ugunja Youth Development.

**1.4. FP included fully in existing NHIF and Private Insurance funds/schemes**

**PROGRESS :**

UDI participated in sensitization/ awareness activities in communities on importance of NHIF which includes FP and thus recruitment to NHIF cover, this was done in partnership with World Vision, NHIF Siaya and Amref. Also, UDI intensified mobilization and recruitment to NHIF scheme in Siaya County Through integrated outreaches.

No	Partners	Activities Contributing to the indicators
1	Ugunja Development Initiative	In partnership with World Vision, NHIF Siaya and Amref, UDI participated in sensitization/ awareness activities in communities on importance of NHIF which includes FP and thus recruitment to NHIF cover. Through integrated outreaches, UDI intensified mobilization and recruitment to NHIF scheme in Siaya County.

**1.5. Revise Family Planning Costed Implementation**

**Plan PROGRESS :**

The Kenya national Family Planning Costed Implementation plan (2017-2020) for FP was revised and launched in March 2018.

**Contributors :** Ministry Of Health Division of Reproductive and Maternal Health Services Kenya; World Vision Kenya.

**1.6. Disseminate the Kenya National Family Planning Costed Implementation Plan at the County Level (2017-2018)**

**PROGRESS :**

Representatives from all the 47 counties attended the national launch of the FP Costed Implementation plan in March 2018

**Contributors:** National Council Population and Development and Reproductive Maternal Health Services Unit; UNFPA.

## 1.7. Counties develop Family planning costed Implementation

### Plans PROGRESS :

During this reporting period 6 more counties have developed CIPs increasing the number from 17 to 23. The additional Counties with CIPs are: Nandi, Transzoia, Laikipia, Elgeyo Marakwet, Baringo and west Pokot.

No	Partners	Activities Contributing to the indicators
1	Matibabu Foundation	Provided technical expertise in development of Siaya CIPs. Participated in the launch of Siaya CIP in collaboration with Siaya SRHR alliance
2	Amref Health Africa	Supported Siaya county in the development of FP CIP through financing, meetings, validation and launch, printing of the document for dissemination
4	DSW	Supported FPCIP developed and implementation in 9 Counties: Nandi, Laikipia, Meru, West Pokot, Bungoma, Trans Nzoia, Mombasa, Kilifi, Nakuru
5	Options Consultancy	Supported the review and finalization of CIPs for Elgeyo Marakwet and Baringo Counties.

## 1.8. Regional / Cluster County Family Planning meetings held

### PROGRESS :

Currently Ministry of health officials at the National and County offices usually coordinate the FP technical working groups meetings at the cluster levels that are supported by partners. During these meetings the partners discuss different matters in relation to FP.

No	Partners	Activities Contributing to the indicators
1	CHAK	CHAK participated in regional county FP meetings for Narok and Kajiado.
2	PSK	Facilitated the regional County FP quarterly meeting at South West- Migori, Homabay, Kajiado and Narok o Coastal Region – Kwale, Mombasa, Kilifi, Lamu and Tana river o Upper Eastern – Marsabit, Isiolo and Samburu o North Rift- West Pokot, Baringo, Elgeyo Marakwet and Turkana o North Eastern- Mandera, Wajir and Garissa
3	Matibabu Foundation	Participated in the Nyanza regional meeting on FP commodities in collaboration with KMET and Omega Foundation
4	DSW	DSW in partnership with Mariestopes, FHOK, KYMNDU, NCPD, HENNET, OPTIONS Kenya, Health Now supported SRH/FPTWG meetings in Meru, Nakuru, Nyandarua, Nandi, West Pokot, Trans Nzoia, Mombasa, Kilifi, Laikipia Counties with partners.

## 1.9. Private health workers' capacity to provide FP services assessed

### PROGRESS :

Different implementing partners conducted the training needs assessment and identified health care providers in the Counties who have been sensitized on FP and recruited them as Trainers of trainers.

No	Partners	Activities Contributing to the indicators
----	----------	---

1	Marie Stopes Kenya	Trained private provider's on training needs assessment
2	PSK	Conducted quarterly support supervision visits for all DESIP private facilities.
3	Options Consultancy	Trained Counties on FP dash board through Service Availability Readiness Assessment (SARA)for public and private health care workers .

### 1.10. Bi-annual field visits to private health facilities Conducted

#### PROGRESS :

The Bi-annual field visits to health facilities in Counties were conducted with support from Partners such as Matibabu Foundation, KMNET and Omega foundation. During such visits the challenges were identified and priorities to overcome them were put in place. Also, the supervision trips were conducted in 19 counties.

No	Partners	Activities Contributing to the indicators
1	Matibabu Foundation	With support from KMET, Omega Foundation supported bi-annual meeting on challenges experienced in regards to FP services and actions plans for the prioritized challenges.
	PSK	Conducted supervision trips in all 19 counties JSS is done quarterly and this has happened in all the counties <b>South West</b> - Migori, Homabay, Kajiado and Narok o <b>Coastal Region</b> – Kwale, Mombasa, Kilifi, Lamu and Tana river o <b>Upper Eastern</b> – Marsabit, Isiolo and Samburu o <b>North Rift</b> - West Pokot, Baringo, Elgeyo Marakwet and Turkana o <b>North Eastern</b> - Mandera, Wajir and Garissa

### 1.11. Health Facilities supported to provide youth friendly services

#### PROGRESS :

Omega Foundation has established and operationalised youth friendly centers in health facilities (3 in Homabay, 2 in Kisumu and 1 in Siaya), where it has trained Health Care Providers on provision of youth friendly service. It has also provided a continuous mentorship and engaged youth peer providers as agents for change and information sharing using youth friendly ICE materials. Other Implementing Partners have conducted community outreaches on referrals to youth friendly centers, including rapid assessment on the impact of the youth friendly centers such as rapid assessment on the impact of the youth friendly centers on people reached by FP information and accessed FP services at youth friendly centers. UCAHAEC and Marie Stopes trained Health Care workers on youth friendly services.

No	Partners	Activities Contributing to the indicators
1	UCAHAEC(United Champions Advancing Humanitarian Actions Empowerment Center Omega Foundation	Trained 30 health care workers from ten facilities across Ugenya sub-county on youth friendly services
2		Established and operationalised youth friendly centers in health facilities (3 in Homabay, 2 in Kisumu and 1 in Siaya),where it trained

		Health Care Providers on provision of youth friendly service, Continuous mentorship and engaged youth peer providers as agents for change and information sharing using youth friendly ICE materials.
3	Ugunja Development Initiative	UDI with support from World Vision, Matibabu Foundation , Amref Health Africa conducted community outreaches on referrals to youth friendly centers , including rapid assessment on the impact of the youth friendly centers on people reached by FP information and accessed FP services at youth friendly centers.
4	Marie Stopes Kenya	Trained nurses in public facilities in the counties with youth related projects

### 1.12. National Family Planning conference held( Replaced by International FP conference)

#### PROGRESS :

Government of Kenya in partnership with development partners convened the international conference for Population and Development in Nairobi (November, 2019) that brought member state from different Countries.

**Contributors: VSO; Government of Kenya.**

### 1.13. Parental/community support structures/systems for pregnant adolescents Established

#### PROGRESS:

Omega Foundation has been engaging the youth Peer providers who give health education at the community level and link clients to the facility for further management and support. It also, supports Community Health Volunteers who act as linkages between community and the facility in Siaya and Homabay counties.

No	Partners	Activities Contributing to the indicators
1	Omega Foundation	Engaged youth Peer providers who give health education at the community level and link cclients to the facility for further management and support. Support Community Health Volunteers who also act as linkages between community and the facility in Siaya and Homabay.

### 1.14. Effective referral systems for pregnant and lactating adolescents Strengthened

#### PROGRESS :

Community Health Volunteers (CHVs) and Youth Peer Providers have been trained by Implementing partners such as MSK and Omega Foundation on how to refer clients including lactating and pregnant adolescents to health facilities to receive the required health services and they also ensure that the trained Youth Peer Providers are at the Health Facilities.

No	Partners	Activities Contributing to the indicators
1	MSK	Supported community health volunteers (CHVs) and trained mobilizers to refer clients including lactating and pregnant adolescents to health facilities.
2	Omega Foundation	Working with CHV and Youth peer providers refer clients for RH education including nutrition support amongst the lactating adolescents, ensures presence of a trained youth peer provider at the health facility to receive all the adolescents and link them with the required services.

### 1.15. Age-disaggregated data on maternal and perinatal deaths reported annually

#### PROGRESS :

Ministry of Health with support from the implementing partners have been providing technical assistance to the County and sub county health management teams on how to use DHIS-2 to conduct maternal and perinatal deaths audits and reviews.

No	Partners	Activities Contributing to the indicators
1	MOH	With the support from partners MOH coordinated meetings on FP dash board.
3	PSK	Trained CHMT's on FP reporting using the dash board in the following Counties: South West- Migori, Homabay, Kajiado and Narok o Coastal Region – Kwale, Mombasa, Kilifi, Lamu and Tana river o Upper Eastern – Marsabit, Isiolo and Samburu o North Rift- West Pokot, Baringo, Elgeyo Marakwet and Turkana o North Eastern- Mandera, Wajir and Garissa
4	Options Consultancy	Prepared and disseminated FP Factsheets on maternal and perinatal deaths to inform programing for 5 counties (Garissa, Isiolo, Elgeyo Marakwet, Kilifi and Narok).

### 1.16. County Health Management Teams trained in quantification and forecasting

#### PROGRESS :

The different Implementing Partners have been training representatives from the different Counties on quantification and forecasting to ensure availability of FP commodities at the facilities.

No	Partners	Activities Contributing to the indicators
1	IPAS	Trained county health management teams from Kiambu, Kajiado and Nakuru on quantification and forecasting for FP commodities
2	DSW	In collaboration HENNET, OPTIONS KENYA, MARIES STOPES, PRB, supported county RHTWG where sub-county RH leads reviewed annual FP commodity uptake and developed strategies to improve commodity uptake to ensure commodity security.
3	PSK	Trained Garissa, Isiolo, Elgeyo Marakwet, Kilifi and Narok Counties on Fforecasting & quantification with support from Options Consultancy.
4	InSupply	Collaborated with Turkana county and supported them in conducting their F&Q for Essential medicines including FP.
8	Options Consultancy	Trained County pharmacists, pharmtechs and Reproductive health coordinators from 16 counties namely Garissa, Kwale, Lamu, Homa Bay,

Migori, Isiolo, Tana River, Turkana, Mandera, Marsabit, Baringo, Kajiado, Narok, Elgeyo Marakwet, West Pokot, Wajir on forecasting and quantification.

### 1.17. Annual quantification and forecasting report of FP commodities for the public, private for-profit FP-CIP produced

**Contributors:** InSupply, MOH, CHAI, Jhpiego, UNFPA, PATH, Marie Stopes. Pathfinder International.

#### PROGRESS :

Implenting Partners in Kenya supported the organization of the annual forecasting and quantification workshops for family planning commodities. For the financial year 2019/20, different partners supported different activities to ensure that the health care providers are able to participate in quantification and forecasting at their facilities and the annual report was produced.

No	Partners	Activities Contributing to the indicators
1	KEMSA	Convened annual forecasting and quantification activities, Providing demand driven data and prices for quantification and budgeting and carries actual procurement, warehousing and distribution of FP commodities
2	DSW	In partnership with HENNET, Options Kenya, MARIES STOPES and PRB supported development of county health annual development plans and health sector budgets where the FP annual quantification workplans are costed.
3	Insupply	Provided logistical support towards the workshop as well as technical guidance in the workshop to inform the annual report.
4	PSK	Supported the annual assessment of FP commodities status in 19 Counties South West- Migori, Homabay, Kajiado and Narok o Coastal Region – Kwale, Mombasa, Kilifi, Lamu and Tana river o Upper Eastern – Marsabit, Isiolo and Samburu o North Rift- West Pokot, Baringo, Elgeyo Marakwet and Turkana o North Eastern- Mandera, Wajir and Garissa

### 1.18. County SBCC strategy developed for Northern Arid Land (NAL) counties

#### PROGRESS :

PSK with other consortium members and through UKAID funded Delivering Sustainable and Equitable increase in Family Planning in Kenya (DESIP) project, developed a Human Centered Design FP SBCC strategy that is being implemented in different locations including the NAL counties. The strategy is customized to each of the implementing Counties(Turkana, Elgeyo Marakwet, West Pokot and Baringo).

No	Partners	Activities Contributing to the indicators
1	PSK	PSK with other consortium members (Amref Health Africa, Options Consultancy, Faith 2action, Health Rights International and VSO) through UKAID funded Delivering Sustainable and Equitable increase in Family Planning in Kenya (DESIP) project, developed a Human Centered Design FP SBCC strategy that is being implemented in locations including the NAL counties. The strategy is customized to each of the implementing Counties(Turkana, Elgeyo Marakwet, West Pokot and Baringo).

### 1.19. SBCC strategy monitored bi-annually



#### PROGRESS :

The Social Behavior Change Communication strategy has been developed at the County that will be cascaded at the National level. Partners are currently implementing activities on the SBCC that will later be evaluated using the Monitoring and implementation plan.

No	Partners	Activities Contributing to the indicators
		<i>No contributions reported during this reporting period</i>

### 1.20. FP champions trained and deployed in counties



#### PROGRESS :

PSK trained 1197 Health Community Workers and facilitated over 981 outreaches.

No	Partners	Activities Contributing to the indicators
1	PSK	The project trained 1197 HCWs and facilitated over 981 outreaches.

### 1.21. Impact of messaging on myths and misconceptions evaluated



**PROGRESS :** No impact evaluation studies have been conducted.

No	Partners	Activities Contributing to the indicators
		<i>No contributions reported during this reporting period</i>

### 1.22. Community Health Volunteers (CHVs) supporting use of modern contraceptives in villages



#### PROGRESS :

Various Implementing partners have been supporting the Community Health Volunteers to continue providing the family planning services in their communities including carrying out interpersonal communication through market activities, health talks and community dialogues for FP. The CHV's also participate in community meetings organized by the county administration and they create mass awareness through megaphones.

No	Partners	Activities Contributing to the indicators
1	Omega Foundation	Supported 35 CHV's in Homabay,16 Kisumu and 16 in Siaya in providing modern FP choices.
2	PSK	1183 CHV's trained on FP module for engagement.
3	MSK	CHVs carry out interpersonal communication through market activities, health talks and community dialogues for FP. They also participate in chief

barazas (community meetings organized by the county administration).  
CHVs also create mass awareness through megaphones

### 1.23. Prominent personalities identified and engaged as FP champions

**PROGRESS :**

Amref Health Africa sensitized the Homabay County first lady on the importance and rationale of investing in FP.

No	Partners	Activities Contributing to the indicators
1	Amref Health Africa	Sensitized the Homabay County first lady on the importance and rationale of investing in FP.

### 1.24. FP demand generation activities supported in NAL counties

**PROGRESS:**

Different Implementing Partners have carried out various FP demand creation efforts and supported outreaches activities such as one on one engagement, group visits, male forums, referrals to nearby health facilities and active follow ups by the CHVs in counties such as Siaya, Kisumu and Homabay. The CHV's are also being engaged to participate in activities for creating demand for FP.

No	Partners	Activities Contributing to the indicators
1	PSK	Supported Service delivery, HSS and Demand creation by facilitating outreaches in the NAL communities with support from- PS Kenya, F2A ,Amref & Health Rights International
2	Options Consultancy	Supported FP demand creation activities by our sister organization Health Rights International, AMREF, Faith 2 Action, PSK, VSO and PSI
4	Ministry Of Health Mander	Conducted FP outreaches that were supported by DESIP, Save the children, World bank , UNFPA and Mander County Government
6	CHAK	Supported DESIP projects to generate demand in Turkana county through community outreaches.
7	Omega Foundation	Conducted community sensitization and education through one on one engagement, group visits, male forums, referrals to nearby health facilities and active follow ups by the CHVs in Siaya, Kisumu and Homabay

**Key Issues identified:**

- Minimal advocacy efforts for government allocation and the establishment of FP budget line.
- No FP budget tracking undertaken to follow up on the Government allocations and disbursement.
- Additional mobilization required in development of the CIP's in the remaining counties.
- Operationalization of the youth friendly centers/spaces at health facility level.
- Mobilization of partners to support the bi-annual monitoring of the SBCC for FP Strategy

## COMMITMENT 2

The government of Kenya commits to strengthening partnership with the private sector (including the for-profit sector) through a total market approach to optimize the use FP funding, differentiating population segments according to ability to pay and which market players are best placed to effectively reach the different population groups which the most appropriate services and products. An all-sector strategy, using the total market approach, to recommend the service delivery split among the public and non-public sectors and a robust plan to improve market conditions and to support the implementation of the selected approaches. Palladium led DFID funded project carried out a diagnostic study of Kenya's FP market and has recently concluded a study on Kenya's FP supply chain. Willingness to pay studies; TMA cost-benefit analyses and scenario planning are also being carried out by Palladium and will be finalised before the end of 2017. This will provide information to support efforts of segmentation and improving efficiencies in FP service delivery. Most critically, the Palladium analyses will provide sufficient analysis and evidence on what is needed to move towards the implementation of a TMA for FP in Kenya.

### 2.1. Approved RH policy that incorporates TMA for FP

#### PROGRESS :

The national and county policies that promote FP/RH uptake were reviewed and there was also the review of Senate reproductive health Bill 2019.

No	Partners	Activities Contributing to the indicators
1	DSW	Participated in the review of national and county policies that promote FP/RH uptake including review of Senate reproductive health Bill 2019.

### 2.2. A Comprehensive Total Market Approach (TMA) Plan for FP developed and supported

#### PROGRESS:

The Kenya Total Market Approach plan for FP at National level was drafted by Options Consultancy and is awaiting the validation and launch.

No	Partners	Activities Contributing to the indicators
1.	Option Consultancy	Options supported drafting the Kenya TMA plan for FP at National level that is awaiting validation and launch.

#### Key Issues identified:

- Stalled Validation and launch of TMA plan for FP.

---

## DISCLAIMER

---

*The information contained in this Report has been prepared by Amref Health Africa Kenya from publicly available material and from discussions held with stakeholders. Amref Health Africa Kenya does not express an opinion as to the accuracy or completeness of the information provided or any conclusions reached by those parties. Amref Health Africa Kenya has based this Report on information received or obtained, on the basis that such information is accurate and, where it is represented to Amref Health Africa Kenya as such, complete.*

---

## MORE INFORMATION

---

For more information, please contact us:

**Dorcus Indalo**

Email: [Dorcus.Indalo@Amref.org](mailto:Dorcus.Indalo@Amref.org)

Tel: +254722551968