



## **REPUBLIC OF KENYA**

### **MINISTRY OF GENDER, CULTURE, THE ARTS AND HERITAGE**

#### **CONCEPT NOTE ON KENYA'S SIDE EVENT AT THE 68<sup>th</sup> SESSION OF THE COMMISSION ON THE STATUS OF WOMEN (CSW)**

**Date :** 20<sup>TH</sup> March 2024  
**Time :** 10:00am-11:15am  
**Venue:** Conference Room 6, GA Building  
**Pax:** 123

**EVENT TOPIC: LEVERAGING ON HEALTH INVESTMENTS FOR POVERTY  
ALLEVIATION AND IMPROVED MATERNAL OUTCOMES**

#### **1.0 Introduction**

Poor health is linked to poverty. Over 1.2 billion people live on less than \$1 a day, with 70% of them being women or girls. Global health is crucial to provide basic healthcare to millions who lack access to health services, as poverty disproportionately affects women. Gender gaps in healthcare hinder women's progress out of poverty. To improve health, we must address disparities in education, housing, employment, environment, sanitation and malnutrition. Educated and healthy girls can become future leaders. Kenya has made significant investments resulting in improved health indicators. Countries like Rwanda and South Africa have passed gender-sensitive legislation, including on reproductive health issues and land rights.

#### **2.0 Justification of the Side Event**

Women use health services and preventive care more than men. Disease and ill health lead to poverty, pushing almost 100 million people annually into extreme poverty globally and around 1 million people in Kenya. Ill health also negatively affects productivity, driving people into poverty and conversely, poverty can be a major cause of ill health. Health disparities also have an impact on gender equality. Maternal mortality affects women's productive years and harms human development. Most young children, whose mothers die early in life, are likely to receive less education, nutrition, and healthcare. The health sector has, therefore, multifaceted interventions, which align with the Commission on the Status of Women's (CSW) priority theme. This offers a holistic approach to addressing the feminization of poverty in health and promoting gender equality.

### **3.0 Kenya's Adoption of a Gender Lens in Health Systems Strengthening**

The government has allocated US\$882.5 million to the health sector. The current Government administration has prioritized gender and poverty reduction through the Universal Health Coverage (UHC) programme. The government has also enacted three laws to ensure access to high quality healthcare for women and girls irrespective of their location or financial status. Initiatives under these laws include the free 'Linda Mama' maternity policy and Gender-Based Violence Recovery centers in selected health facilities. Innovations for Maternal and Newborn Health programme aims to reduce maternal and perinatal deaths by improving healthcare and monitoring impacts. Garissa County, one of 15 counties in Kenya with high maternal mortality rates, has received healthcare worker training and knowledge-sharing events to enhance sustainability. The increased number of Community Health Promoters (CHPs) from 88,000 to 108,000 will enhance access of health services to women. The CHP's are provided with work tools and access to health services for mothers, an initiative that has also created jobs for women, who make up a majority of the CHPs.

Telemedicine is also being deployed to improve UHC by providing reliable healthcare services to remote areas, reduce cross-infection risks, and improve access to healthcare for vulnerable communities. The government linked County Teaching and Referral Hospitals, Kenyatta National Hospital, and sub-county facilities.

The Government is also promoting hospital-based childbirth to reduce complications and maternal/infant mortality. Maternal shelters have been adopted to accommodate high-risk pregnant women from remote areas in their final days of pregnancy for skilled birth attendance. Mothers who give birth in health facilities receive a MAMA Kit, including a mosquito net, powder, soap, basin, and toiletries. The practice was borrowed from Karamoja, Uganda. Traditional birth Attendants (TBAs) have also been on hospital-based childbirth, incentivized referral to health facilities, and built eco-manyattas for communities that are inclined towards (i.e. Maasai women). These efforts have increased facility-based births by healthcare workers.

To combat effects of climate change that disproportionately affects and poses serious health risks for women and children, County Governments provide support to vulnerable households. For example, Homa Bay rebuilds homes after floods, Garissa provides food, immunization, and clean water, and Makueni constructs water collection ponds and trains women to cultivate drought-resistant foods. These interventions have had a positive impact on affected families.

### **4.0 Guest Speakers from Africa**

#### **4.1 Lessons from Rwanda:**

Gender equality, good governance, and women's empowerment are necessary to reduce poverty sustainably. Gender-responsive budgeting in Rwanda has led to better maternal health indicators, and the Gender Monitoring Office ensures poverty reduction objectives are met.

#### 4.2 Lessons from Sub-Saharan Africa:

South Africa reduced maternal and newborn deaths with UNICEF support. These replicable lessons could enhance programming and maternal health outcomes in other Sub-Saharan African Countries.

#### 5.0 Objectives of the Side Event

To showcase how the Kenyan Government has explored strategies that address poverty among women and girls by strengthening health institutions for sustainable poverty alleviation. The specific objectives of the side-event are therefore to:

- i. To demonstrate how subnational governments can advance gender-sensitive poverty alleviation strategies to improve maternal and child health outcomes.
- ii. Explore potential partnerships with other like-minded countries, donors and partners with a focus on poverty eradication among women and girls.

#### Programme Methodology

The session will include discussion panels, a keynote address, and participant comments to achieve specific objectives. The panel discussion will be led by the moderator and will focus on the Kenyan Government's efforts to strengthen institutional health systems. All participants will participate in the plenary discussions.

#### 6.0 Expected Results

The event aims to highlight how gender-responsive policy formulation and institutional strengthening can positively impact the well-being of women and girls.

**7.0 Proposed Programme:** Kenya Side Event at the 68<sup>th</sup> Session of the Commission of the Status of Women

**Event Topic: Leveraging on health investments for poverty alleviation and improved maternal outcomes.**

**Time :** 75 mins

TIME	ACTIVITY/TOPIC	RESPONSIBILITY
	Arrival and Registration	Secretariat
2 mins	Introduction of the Side Event	<b>H.E Anne Waiguru – Chair of the Council of Governors</b>
6 mins	Documentary on Women's Health Innovations and Interventions	<b>Secretariat</b>
5 mins	<b>Key Note Speech</b>	<b>H.E Gladys Wanga - Vice Chair Health Committee, Council of Governors, Kenya</b>  (Hand over to the moderator)

TIME	ACTIVITY/TOPIC	RESPONSIBILITY
<b>PANEL DISCUSSION</b> <b><u>Moderator: Jacqueline Mogeni</u></b>		
5 mins	Health investments to combat poverty and significantly improve maternal health outcomes	<b>Mercy Wanjau</b> - Secretary to the Cabinet of the Republic of Kenya
5 mins	Elimination of Mother-to-Child Transmission: Lessons from South Africa	<b>Anurita Bains</b> - <b>UNICEF Associate Director, HIV/AIDS</b>
5 mins	<b>Gender and Universal Health Coverage: Prioritizing Legislation for Equitable and Resilient Health Systems</b>	<b>Ms. Millie Odhiambo</b> – MP, Suba North
5 mins	Innovative approaches for governments, private sector, and development partners to improve maternal health outcomes and reduce maternal mortality	<b>Dr. Vandana Tripathi</b> , Director, MOMENTUM Safe Surgery in Family Planning and Obstetrics Project at EngenderHealth
5 Minutes	<b>Socio-technical Innovations:</b> Experiences and Best Practices in Kenya has devolved health system.	<b>Mr. Kenneth Macharia</b> - Country Director , Option consultancy Limited
25 Minutes	Plenary Discussions & Way forward	<b>Moderator: Jacqueline Mogeni</b>