Strengthening the Community Strategy in Kenya:
Empowered CHV’s for improved and effective
immunization services

Health is a major component in the socio-economic development of any community. It is a right for every human as it is a responsibility. It is therefore imperative that all play a role in the Promotion of good health at different levels from the individuals, families, households and communities’ levels. Over the years, CHVs have become increasingly important in the provision of health care services being the first point of contact with the community. The crucial role of CHVs is recognized in Kenya under the Community Health Strategy (CHS), whose goal is to enhance community access to health care. Despite the CHV’s utmost importance in the health service delivery structure, they have often been faced with a myriad of challenges including insufficient knowledge, lack of basic equipment’s to guide their work, and lack of legislation in most counties and limited support for their remunerations.

In acknowledgment of the role of CHVs and the challenges that CHVs face, and in recognition of their contribution and their potential towards the realization of Universal Health Coverage including reaching the national immunization targets, through strategic pro-immunization actions like defaulter tracing, community sensitization, and referrals. KANCO has been advocating for the legislation of the CHVs to facilitate their remuneration for a more effective disease response in the communities. Through advocacy using the grassroots model, the Nairobi County Government allocated Kshs.100Million to facilitate CHVs remuneration that has seen subsequent engagements with policy makers and legislators in the county such as a recently held MCAs breakfast forum to advocate for the legislation to facilitate the use of the resources with the promise to keep increasing the funds.

In addition, KANCO through the GAVI-HSS supported the development of content for training of CHVs on immunization through the M-Learning platform with collaboration with Amref Health Africa and National Immunization Programme.
Immunization has been proven to be the most effective strategy for the prevention of infectious diseases. Since 2018, KANCO has been working with Kenyan CSOs under the GAVI-HSS grant and over 1100 community health volunteers (CHVs) in 17 focus counties to improve equitable access to and utilization of immunisation services.

The 2019 African Immunisation Week highlighted the need for a strong CHV response. KANCO under the GAVI HSS Grant supported an integrated outreach service in partnership with Nairobi County Government at Ngando chief's Camp in Ngando ward. One of the people reached through the outreach was Mama Joseph, a 39 years old mother of three aged 13, 7 and 6, whose all three children had not received any vaccine. Through the CHVs efforts, Mama Joseph and her children were brought to the outreach facility where during an interview, she opened up about having never taken any of her three children for immunization. She is a resident of Gando, one of the informal settlements in Nairobi that has no public health facility. All her three children were born at home, a major contributor to her children not being immunized, further compounded by poverty and the competing needs, making visiting the health facility for immunization services challenging coupled with the distance to the nearest free facility. This is despite Kenyatta national hospital, the largest referral hospital in the region being only a 40 minutes drive away.

The case of Mama Joseph’s children is a representative of over 6,457 children in the 17 Counties in Kenya who have been tracked and referred for immunisation services under the GAVI HSS CSO component so far.

Mama Joseph’s Children are just a few of those contributing to the huge numbers of unvaccinated children in the informal settlements, with Nairobi county registering over 7,272 unimmunized children in 2019. Ngando ward in particular recorded 36% merger immunisation coverage, and is a representative of several other informal settlements in Kenya’s urban set-up with poor immunization coverage. This highlights the need for customized urban immunization strategies, especially for the informal settlements. Through the Ngando outreach, over 700 children received immunisations services, with over 49% of 10,157 households reached through CHVs with health/Immunisation education and referrals.

The health system in Kenya, like many African Countries is static in nature; more build to wait for people rather than reach out to them. This is one critical aspect that needs to be deliberated and reflected strongly in the Immunization Agenda 2030. The Ngando outreach heavily invested in the use of CHVs to mobilize. It recorded tremendous success due to the shift from the static approach to a proactive demand creation approach that saw the community respond positively by turning out to take up services. Thus, advocacy and linking up communities with health services are critical in the context where the health
To meet the Addis Declaration on Immunisation, Global vaccine Action plan, UHC and countries’ immunisation targets, there is need to accelerate strong political engagements, commitments and improve governance with the end goal of improving access to and utilization of immunisation services at community levels.

Through advocacy and sharing the Ngando experiences with Nairobi County government, the County government developed a ‘Community Health Bill 2019’ and allocated USD 1 Million in the FY 2019/2020 to support linking communities to health care services through the Community Health Strategy.

Also, Ngando chief’s camp was officially ‘launched’ as an immunizing facility to provide outreach services twice a week. The area MP promised to mobilize for a container (as a facility) to be used in future while Nairobi County government promised to provide health personnel, vaccines and medical commodities once the container is provided.

The role of CSOs in advocacy and community health care system cannot be over emphasized. CSOs actions aimed at improving equitable access to and utilization of immunization services are critical in informing advocacy work on investing in immunizations, enhancing accountability, building political will as well as strengthening our community’s disease responses.

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