

# Weekly Newsletter

April Issue 1

## *Upcoming....*

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- **24<sup>th</sup>-20<sup>th</sup> April : World Immunization Week**

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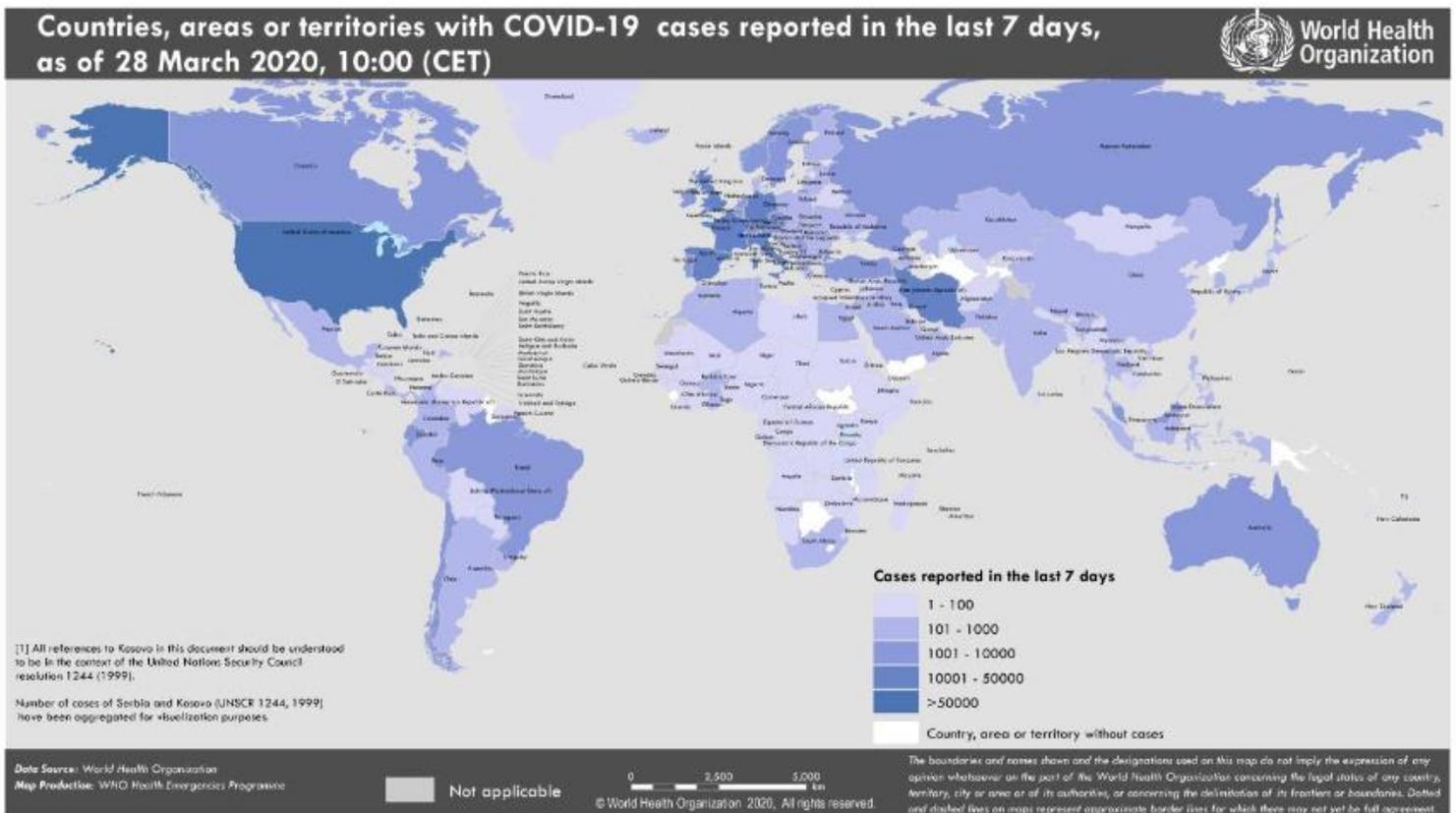
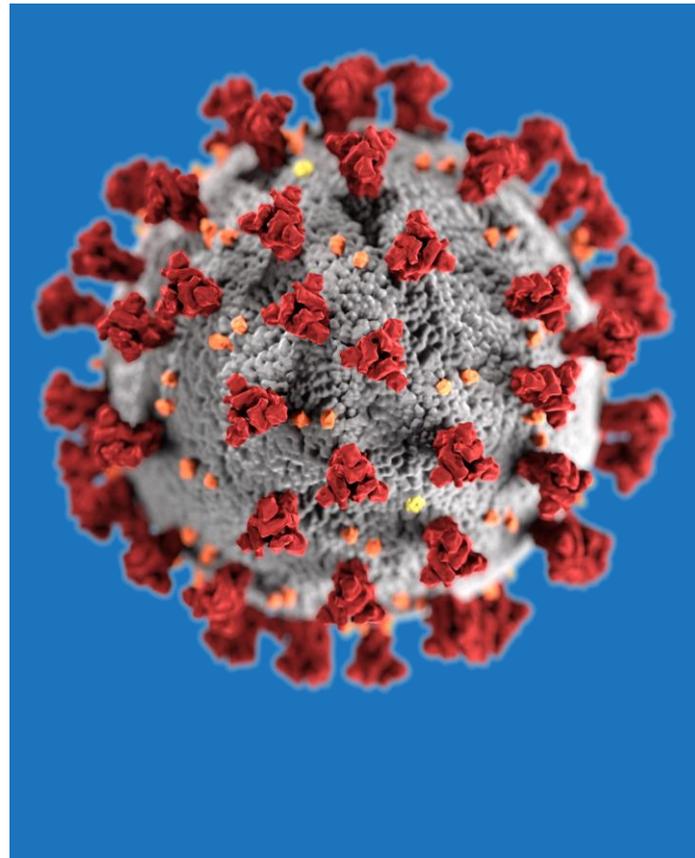
**PG.7 Resources for COVID-19**

## COVID-19 National and Global Response

The global community is gradually slowing down in a bid to halt the spread of COVID-19, a pandemic that has claimed thousands of lives and thousands of other taking ill every passing day In Africa, the virus has spread to dozens of countries within weeks. Governments and health authorities across the continent are striving to limit widespread infections.

In response to the outbreak health stakeholders are also making their contributions towards addressing the epidemic. The need for social distancing to slow the spread has seen transformation in business operation with new changes like working remotely becoming the new norm.

With these changes, KANCO as health advocacy organization is panning out a response through engagement in advocacy as well as programming. While drawing key lessons from the covid-19 response to enrich programming and or integrate the new changes to enhance programming.





As we watch the COVID-19 Pandemic unravel, as a health focused organization we are drawing key lessons in the response:

- ❖ **We are always one Minute from the next disease out-break.** At the onset of COVID-19 outbreak, it appeared as distant news and statistics until countries across the globe including Kenya announced their first case. This speaks to the interconnectedness of our health as a global community
- ❖ **Multifaceted/multiagency engagement in the disease Response.** The COVID-19 fight is making apparent the need for every stakeholder and individual responsibility in ensuring a healthy nation. Most importantly, political will becomes crucial in allocating resources to deal with the disease.
- ❖ **Universal health coverage:** There is need for all countries; rich or poor, to invest in UHC..
- ❖ **Health systems;** As the pandemics gets worse characterized by the soaring number of infections, there is increased priority to curb the spread, in turn disrupting other routine health interventions such as child health, TB patient care leading to MDR-TB, increased poverty among other detrimental effects. This calls for greater investment in health resources and infrastructure for effective and sustainable health responses.
- ❖ **Communities' participation in managing a disease outbreak critical:** COVID-19 has necessitated behavior change to combat the spread. Without the cooperation of the communities efforts to stop the disease would be futile.
- ❖ **Emergency preparedness;** In every outbreak its critical to: Understanding the Formulate a response team; Making critical information accessible; Update your alert response procedures; Test the plan; Implement

## In Harm Reduction Programming;

Kenya currently has over 6,000 Kenyans on Methadone treatment and another 13,000 Kenyans on Needle Syringe Program and other harm reduction interventions around the country. Those who are on Methadone Treatment travel every day to the facilities for the Daily Observed Treatment (DOT).

The concerns include:

- I. That the lives of 6, 000 Kenyan who use methadone are at risk of COVID-19 as they commute daily to attend the Daily Observed Treatment (DOT) at Methadone facilities across the country against their wish to STAY HOME during this period.
- II. That people who use drugs are at risk of RELAPSE since public transport vehicles have increased fares hence may not afford to travel far for (DOT) across the country.
- III. That the anxiety of possible total lockdown is a death sentence for many people who use drugs since they may not walk long distance for the DOT.

**COVID-19  
Guidance for  
People Who  
Use Drugs and  
Harm Reduction  
Programs**

- IV. That the anxiety of possible total lockdown is a death sentence for many people who use drugs since they may not walk long distance for the DOT.

We (KANCO) recommend:

- i. That the Ministry of Health urgently and immediately activates mobile methadone dispensing across the country.
- ii. That the Ministry of Health urgently and immediately activates take home dose methadone dispensing across the country.
- iii. That government to Decentralize Needle and Syringe Program and other harm reduction interventions dispensation units to nearest health facilities as per client preference (this will address crowding issues at Drop in Centres and minimize use of public service vehicles in the interim.

In this unprecedented extraordinary times, we call upon the government of Kenya to take extraordinary measures to save and protect lives of more than 6, 000 Kenyans on Methadone and another 13,000 Kenyans on Needle Syringe Program and other harm reduction interventions around the country.

## Child Health and Immunization



Immunization remains a life-saving health intervention. Children under the age of 5 years get immunization to prevent the vaccine preventable diseases and reduce mortalities due to childhood illnesses. GAVI through different Programs has continued to support and strengthen the immunization/EPI program in Kenya.

Kenya recently became one of the Countries to get active COVID 19 cases. This COVID-19 pandemic is overstressing health services as health workers are diverted to support the response. There is also a lot of trainings going on due to COVID 19 response. This has greatly affected delivery of immunization services. The supply side for immunization services heavily depends on Healthcare workers who currently on a panic mode on how to protect themselves from COVID 19 infection.

It is worrisome that the COVID 19 pandemic progresses in Kenya, critical life-saving services, including immunization, will likely be affected or disrupted, especially in areas where they are desperately needed. Those that are at a greatest risk are children from the poorest families in affected counties.

There is also a major concern about counties that tend to have outbreaks of measles, cholera or polio outbreaks especially with the heavy rains the country is experiencing. These counties besides the outbreaks burden and inadequate human resource still have to respond to COVID-19 cases. Not only will these outbreaks heavily burden an overstretched health system/service they might also lead to additional loss of lives and suffering.

It is great that as a Country we acknowledge how important it is to deal with COVID 19 however we must not allow lifesaving health interventions to fall victim to our efforts to address COVID-19 by neglecting them as this would undo all the positive results they have given us over time.

### **Impact on Implementation**

- Health workers may not be available to offer immunization services hence affect supply of quality immunization services
- Parents out of fear and in adherence to social distancing will defer seeking immunization services and this will decrease the demand for immunization services
- This will holistically affect the immunization coverage thus reduce the coverage
- Advocacy activities have all been halted as there no public gatherings or meetings taking place and this will affect the GAVI HSS deliverables as well set back already progressing advocacy actions.

## **Reaching Key Populations with COVID-19 Messages through the DIC Model**

As the COVID -19 spreads there is the potential to overwhelm health systems, while the pandemic disrupts health systems and impacts human health globally, it's crucial to protect the most affected. One of the most important priority is to sustain the gains towards HIV epidemic control and ensure continuity of treatment and support for viral load suppression among people living with HIV (PLHIV) and including members of KEY POPULATIONS.

As most other health program implementation drastically slowdown in light of the covid-19 Pandemic, KANCOs three DICS; Mariakani, Rongai and Kakamega Have remained open offering routine care and service to key populations and integrating COVID-19 messaging in their care packages.

Members of key populations including female sex workers ,men who have sex with men(MSM),People who inject drugs(PWIDs) among others are particularly vulnerable to COVID-19.factors that place the KPs at a higher risk of contracting HIV ,such as high mobility, close physical contact with others during sexual practices ,risks associated with closed settings ,issues of KPs individuals living with HIV, who are not on ART and virally suppressed may have compromised their immune system therefore placing them at a higher risk of COVID -19 acquisition.

Stigma and discrimination experienced by KPs limit access to and uptake of HIV services which will also affect access to services related to COVID-19.Further the advent of COVID -19 has led to interruptions of services and other essential treatments for KPs living with HIV .In addition, HIV negative individuals may reduce uptake of PREP and other prevention services.

Further the Social distancing measures by the government to prevent the spread of COVID-19 may affect the safety of the key populations, through having fewer clients predisposing them to higher risk.

***Service provision in the face of COVID-19, the safety of the service providers and the client are a top priority and some of the measures established to enhance safety have been:***

- Establishing procedures for the program to track and remain in contact with all the clients including the newly diagnosed HIV positive and those that are newly initiated on ART to monitor and support their uninterrupted access to ART.
- Encourage issuing of treatment for longer periods (multi months) for ART and PREP for clients
- Ensure continued capacity to perform confirmatory HIV testing
- Maintain delivery of all essential HIV prevention services/commodities but have in mind social distancing.
- Ensure availability of alcohol based hand sanitizers, face masks, gloves, thermometer, and other relevant materials to staff working at the health facilities.
- Screening of the clients for symptoms of acute respiratory illness (fever, cough difficulties in breathing before offering other ART services.
- Have a list of nearby COVID-19 testing locations for referral

***COVID -19 Messaging in the Key Population Packaging***

- Avoid crowded and closed areas
- Washing hands frequently
- Adopt social and behavior change materials to support prevention of COVID
- Sanitize and where possible wear face masks
- Encourage self-testing thus reducing walk-in and physical contact
- Encourage clients on ART to access treatment from the nearby health facilities ,in case they have problems accessing the DICs
- Encourage the clients who are on ART not to default treatment
- If possible stay at home.

## **Policy Engagements for the COVID 19 Response**

As a premier advocacy organization KANCO has been engaging in policy discussion and causes towards enhancing a people centered covid-19 response.

KANCO has been part of the CSOs in Kenya that developed and issued an advisory Note on ensuring a right based response to curb the spread of COVID-19. The Advisory Note was issued to Cabinet Secretaries Health and Interior and Coordination of National Government.

Through the office of the president a national taskforce for COVID 19 was formed. Subsequently KANCO sits in a number of committees that are responding to the COVID 19 pandemic in Kenya sharing insights with the taskforce.

Further KANCO has been working closely with the government and other partners in the development for the COVID-19 response. One document developed has been the Policy Proposals on addressing the gendered impacts of COVID 19. The recommendations have been forwarded to Ms. Faith Kasiva, Gender Secretary in Ministry of Public Service.

Going forward KANCO will be continue working closely with partners towards the review of the review of the Public Health ACT Cap 242.

## National and Global Resources for COVID- 19

- COVID-19 control in low-income settings and displaced populations: what can realistically be done? | LSHTM: <https://www.lshtm.ac.uk/research/centres/health-humanitarian-crises-centre/news/102976#.XoSZrnUR-Ko.twitter>
- Short video about what people affected by TB need to know about Covid-19  
<https://www.facebook.com/1836495306598132/posts/2590912407823081/?vh=e&d=n>
- Coronavirus Crisis: AMREF Boss Reveals What Awaits Kenyans in May,  
<https://newsaf.feednews.com/news/detail/2a5bf83203239e4da1d0dc8f80872152?client=news>
- To wear or not to wear a mask? <https://www.facebook.com/1836495306598132/posts/2590912407823081/?vh=e&d=n>
- Quick Tips on How to make a homemade mask  
<https://twitter.com/TSubtext/status/1245426206297579520?s=20>
- **Coronavirus (259) Lessons learned from Italy – WHO- podcast link**  
<https://www.projectpatientcare.org/podcasts/>
- **Mounting Effective TB Responses: Lessons from COVID-19 Pandemic- KANCO**  
<https://kanco.org/mounting-effective-tb-responses/>
- **Africa’s Race Against COVID-19-**  
<https://www.project-syndicate.org/commentary/africa-race-against-covid-19-by-kevin-watkins-2020-03>
- **Coronavirus Threatens Catastrophe in India: A Vulnerable Population Braces for the Pandemic**  
<https://www.foreignaffairs.com/articles/india/2020-03-25/coronavirus-threatens-catastrophe-india>
- **Opinion: Spend what it takes to fight COVID-19 in poor countries, too**  
<https://www.devex.com/news/opinion-spend-what-it-takes-to-fight-covid-19-in-poor-countries-too-96852#.XnvSAW7H8IQ.twitter>



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