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Annual Report 2020
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<td>Active Case Findings</td>
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<td>Acquired Immune Deficiency Syndrome</td>
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<td>AIHRP</td>
<td>Alliance Integrated Harm Reduction Project</td>
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<td>County Integrated Development Plans</td>
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<td>Community Systems Strengthening</td>
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<td>East African Community</td>
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<td>Intensive case Findings</td>
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<td>Injecting Drug Users</td>
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<td>MTP</td>
<td>Medium Term Plan</td>
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<td>NACC</td>
<td>National AIDS Control Council</td>
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<td>National AIDS and STI Control Programme</td>
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<td>PWID</td>
<td>People Who Inject Drugs</td>
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<td>People Who Use Drugs</td>
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<td>Sustainable Development Goals</td>
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<td>Sub-County TB and Leprosy Coordinator</td>
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WHO WE ARE

KANCO is a membership organization established in the early 1990s in Kenya, with operations in the Eastern and Southern Africa Region. Its membership comprises of Non-Governmental organizations (NGOs), Faith Based Organizations (FBOs), and Community Based Organizations (CBOS), Network organizations and learning institutions that have a focus on health advocacy and/or implementing health programs.

KANCO has a strong presence both at the national, regional and global levels. This has been made possible by strong membership at the national level as well as building strong and lasting relationships with regional and international organizations and institutions with whom they share vision.

Vision
Healthy people, Empowered Communities.

Mission
To improve the health and wellbeing among communities through capacity building and promotion of innovative leadership

KANCOs National and Regional Presence Map

The Action Partnership
KANCO Secretariat and Country programming
2020 has been a year of great learning and affirmation that the health response and empowerment of the people remains critical. With the advent of the pandemic, our aspiration for realization of a healthy people and empowered communities was affirmed. The health developments in 2020, as the world came into terms with the pandemic, reminded us of the need for continued push for greater investment in health for both establishments as well as strengthening of existing health systems towards creation of resilient and responsive health care systems. We also learnt that it is only through concerted effort that health equity and equality can be realized.

The health challenges reminded us of our interconnectedness and thus our shared goal and responsibility as well as strengthening of existing health systems towards creation of resilient and responsive health care systems. We also learnt that it is only through concerted effort that health equity and equality can be realized.

As we usher in 2021, we remain firm in our cause and more determined than ever before in our resolve to realize healthy people and empowered communities.

Allan Ragi, Executive Director, KANCO
On behalf of the board, I would like to commend the resilience and responsiveness KANCO has demonstrated in tackling both the existing and emerging health challenges. 2020 was a trying year for all sectors, health, economic and socially. In the context of these challenges our leadership is tested and I am glad to see that KANCO has yet again emerged on top.

We have seen KANCOs efforts and contribution in the Covid-19 response by mainstreaming Covid-19 messaging in all the traditional areas of programming including HIV, TB, Malaria, Child Health and Early Childhood Development.

They are also expanding into new areas with a focus on young women and girls in the context of the pandemic and early childhood development. We also note the expanded scope of partnership that the consortium has cultivated working closely with the county governments to ensure that services are brought closer to the people.

In the last mile of the 2016/2020 strategic plan, the organization has continued to carry on engagements in different areas working with likeminded organizations such as looking at the impact of the pandemic on different disease areas including TB and HIV as well as the impact on different areas such as nutrition, and sexual reproductive health and rights of young women and girls, who have been adversely affected by the pandemic.

These efforts have been critical in the disease redress, and we remain confident that in 2021, KANCO will continue to thrive and lead in the health response. We continue to commend the efforts of the secretariat and the consortium members towards improving the health outcome of our people.

As KANCO looks to usher in a new strategic plan 2021/25, we hope that the learnings from the outgoing strategic plan are going to enrich the next programming phase, by carrying on the best lessons learnt to the next strategic phase as well as incorporating emerging issues and trends to maximize the consortium’s impact. On behalf of the board, I wish to reiterate our confidence in KANCO’s management and leadership and we remain optimistic that 2021, will be a great year.

Fr. Firminus Shirma
Board Chairperson,
KANCO,
OUR PHILOSOPHY

Strengthening KANCO as an Institution and developing a strong unified membership

Strengthened Institutional capacity to Coordinate an effective health response

Evidence based strategic programing

Research, Learning and Innovation

Existence of supportive health policy and legal environment

Knowledgeable and empowered communities leading an effective health response

Improving access to health

Our Milestones:

- More than three decades of health programming
- Strategic and regional Global Partnerships
- Extensive and diverse membership
- Regional Programming and Technical Support

In 2020, KANCO continued to implement programs and conduct business guided by the four pillars of our strategic Plan 2016/2020: **Improving Access to Health, Strengthening KANCO as an Institution and Developing a Strong Unified Membership, Policy Advocacy** and **Improving Access to Health.**
## KANCO 2020 IN NUMBERS

<table>
<thead>
<tr>
<th>Category</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individuals reached with health messages</td>
<td>6,273,842M</td>
</tr>
<tr>
<td>Confirmed malaria cases that received first-line treatment in the community by CHVs</td>
<td>39,373</td>
</tr>
<tr>
<td>Households reached through community outreaches</td>
<td>29,627</td>
</tr>
<tr>
<td>Suspected malaria cases that received a parasitological test in the community</td>
<td>64,869</td>
</tr>
<tr>
<td>Number of schools reached with malaria interventions</td>
<td>200</td>
</tr>
<tr>
<td>FSWs reached with comprehensive care package</td>
<td>5,705</td>
</tr>
<tr>
<td>Number of Quarterly contacts made with FSWs in the provision of comprehensive care package</td>
<td>18,698</td>
</tr>
<tr>
<td>Number of CHWs supported</td>
<td>4,000</td>
</tr>
<tr>
<td>Number of people screened for TB</td>
<td>42,580</td>
</tr>
<tr>
<td>Number of MSMs provided with comprehensive care package</td>
<td>2,084</td>
</tr>
<tr>
<td>Number of Contacts made with MSM in provision of comprehensive care package</td>
<td>3,614</td>
</tr>
<tr>
<td>Number of CHWs supported for TB</td>
<td>4,000</td>
</tr>
<tr>
<td>Number of TB cases linked to treatment</td>
<td>300</td>
</tr>
<tr>
<td>Number of National level policy amplions groomed and engaged</td>
<td>68</td>
</tr>
<tr>
<td>Number of Community grassroots champions supported and engaged</td>
<td>312</td>
</tr>
<tr>
<td>Number of CSOs provided with technical support and capacity building</td>
<td>912</td>
</tr>
<tr>
<td>Number of Policy Maker engaged</td>
<td>417</td>
</tr>
<tr>
<td>Number of Community grassroots champions supported and engaged</td>
<td>312</td>
</tr>
</tbody>
</table>

“Passion provides purpose, but data drive decisions” Andy Dunn
Access to health care is a basic human right and this is emphasized now more than ever with the COVID-19 pandemic. Measures taken to mitigate the spread of the virus have health, social and economic implications. With the onset of the pandemic, the urgency to address the pandemic while ensuring access to health services was not jeopardized became apparent. It was critical to ensure that access to health services for all, remained a priority.

KANCO strategically found ways to implement several COVID 19 interventions through its ongoing programs to ensure that the gains made to accessing health services were not lost.
STRENGTHENING TB RESPONSE

Global Fund TB Project

With the support of the Global Fund through AMREF Health Africa, KANCO has been implementing the Global Fund TB project by conducting contact tracing and screening, screening of the Under 5, tracing of treatment interrupters, sensitizing the communities, capacity building for champions both at the county and national level to advocate for social accountability for health and Domestic Resource allocation for TB and health in general.

In 2020, the project was being implemented in 5 counties; Bungoma, Kitui, Machakos, Mombasa and Kwale. KANCO also worked closely with TB champions towards raising TB awareness across different spheres and advocating for increased resource allocation for TB and health in general, effective service delivery and uptake at the community level and sustainability of the gains made.

With the advent of the pandemic, KANCO with the support of AMREF health Africa also engaged both new and traditional media to create awareness around TB, mostly in the coastal region Mombasa and Kwale County, to promote learning and sharing on TB and contribution to the overall goal to reduction of TB, leprosy and lung disease burden through provision of people centered, universally accessible, acceptable and affordable quality services in Kenya. The activity also sought to amplify the voice of the champions, as relatable community voices, to help impart knowledge and strengthen advocacy for increased funding for health funding at the county level.

Further under the grant, the project introduced and integrated COVID-19 control measures to strengthen the health systems in the communities. The Community Health Volunteers were trained on sputum collection and active case finding at the community level. KANCO strived to ensure all patients continued to access drugs by facilitating the CHVs to deliver drugs at home.
The GFTB KANCO engagements at a glance

<table>
<thead>
<tr>
<th>County</th>
<th>Contacts Traced and Screened</th>
<th>Children Under 5 Reached</th>
<th>Treatment Interrupters Reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mombasa County</td>
<td>1,164</td>
<td>43</td>
<td>88</td>
</tr>
<tr>
<td>kwale County</td>
<td>84</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>Kitui County</td>
<td>874</td>
<td>10</td>
<td>1</td>
</tr>
<tr>
<td>Mombasa Bungoma</td>
<td>885</td>
<td>58</td>
<td>103</td>
</tr>
<tr>
<td>Machakos County</td>
<td>981</td>
<td>13</td>
<td>51</td>
</tr>
</tbody>
</table>

2020 TB Media Engagements Links

https://youtu.be/or8Ljc4YSfk
https://youtu.be/jWhthyn5Q9w
https://youtu.be/vD8FYM_Ya10
https://youtu.be/L0rqHqc6hy8
https://youtu.be/L0rqHqc6hy8
GLOBAL FUND MALARIA

Malaria remains a significant public health problem in Kenya and accounts for an estimated 16% of outpatient consultations, pregnant women and children under age 5 are most at risk because of their weaker immune systems.

Through the support of Amref Health Africa the Principle recipient, KANCO working closely with the Ministry of Health, has been contributing in the Malaria response under the grant in 10 sub counties within Bungoma County, and supporting Support Supervision and Malaria Routine Data Quality Audit in Baringo, Elgeyo Marakwet, Makuene, Nandi and Nyeri counties. Infection Control efforts were integrated in the Malaria infection prevention.

By the end of the year 2020, KANCO had supported 108 Community Health Units, 1,080 Community Health Volunteers in Bungoma County in delivering Malaria Services and best practices, follow up and social behavior change as well as data management and reporting. Further, 35,113 suspected malaria cases received a parasitological test with 21,520 confirmed Malaria cases receiving first-line antimalarial treatment in the community.

CHVs received training, supportive supervision and mentorship for case management of malaria, prevention, Social Behaviour Change Communication, recordkeeping and reporting, training on use of Long-lasting insecticidal nets (LLINs) and referrals for further management

Cementing Harm Reduction for People Who Use Drugs in the Region

Community Units Link Facility Support Supervision (LFSS)

Amid the adverse effect of the pandemic, that saw a rise in Malaria cases, Community Health Volunteers were provided with supportive supervision and feedback key in sharpening their skills on testing and treatment of Uncomplicated Malaria to facilitate continuum of preventive measures. Hosting the First Eastern Africa Harm Reduction Conference

‘By the end of the year 2020, KANCO had supported 108 Community Health Units, 1,080 Community Health Volunteers in Bungoma County in delivering Malaria Services and best practices’
Health Facilities Support Supervision

Health Facility Support Supervision was implemented in Bungoma County, with Fifty-Two (52) Health Facilities supervised by the Sub County Health Management Teams and Twenty (20) Facilities by the County Health Management Team.

HCWs and Sub Counties were provided with mentorship for malaria control activities, monitoring and evaluation (M&E) of program performance indicators and improvement of quality at all levels of the health system by enabling all health care providers to comply with guidelines and policies for effective prevention and management of malaria.

Community Malaria Case Management Trainings

109 CHEWs and 175 CHVs were trained on Community Case Management of Uncomplicated Malaria. The training equipped the CHVs and CHEWs with knowledge and skills of recognizing signs and symptoms of uncomplicated malaria, using mRDTs to test and dispensing malaria drugs (ALs) in relation to the age and weight band of the handled client, referring malaria cases in the Community, identifying the danger signs of malaria, adverse drug reactions (ADRs) infection prevention and control measures in the community and waste management using biosafety kits. Close out of the Regional HIV and Harm Reduction Project

Responding to Malaria in the Community amid the Covid-19 Pandemic, Bungoma County

The Global Fund through Amref Health Africa and KANCO invested in combating malaria while providing protection from Corona Virus at the Community Level for continued Community Case Management of Uncomplicated Malaria by Community Health Volunteers. 1,020 CHVs and 204 CHEWs in Bungoma County were provided with 50 pairs (1,224) packets of gloves and 30,600 pieces of disposable Surgical Masks across all the 10 Sub Counties of Bungoma County for effective health service delivery.
Flagging of the Personal Protective Equipment’s at Bungoma County Referral Hospital

The Event was flagged off by the County Director of Health Dr. Johnstone Akatu and the County Malaria Control Coordinator Mr. Moses Wambusi at Bungoma County Referral hospital on 22nd June 2020. AMREF Health Africa and KANCO staff participated in the Event. This comes a at time when the Global fund has reported a 73% service disruption for malaria services, and WHO calling countries to move quickly and distribute malaria prevention and treatment tools at this stage of the Covid-19 outbreak in Sub-Saharan Africa in effort to keep these essential services for malaria control safe.
Bungoma County Malaria Data Review

Community Unit Data Analysis for decision making is a critical tool in streamlining malaria control efforts in endemic counties. Health Information System helps inform the allocation of resources and supply of commodities not only for Malaria but for other interventions at both the Health Facilities and Community Health Units (CHUs). These systems often face data quality issues that limit their use by service providers and decision makers to better inform health services especially at Community Health Units.

In 2020 KANCO participated in the data review process aimed at identifying and addressing gaps associated with Community Case Management (CCM) implementation and coming up with action plans to improve data quality for decision making at all levels. This was towards supporting the County and Sub County teams responsible in the Malaria implementation mainly Malaria Coordinators, Medical Lab Coordinators, Pharmacists, Health Records and Community strategy at all levels to effectively plan and execute their mandate.
Key populations (KPs)- Female Sex Workers (FSWs) and Men who have sex with men (MSM)- sexual behavior predisposes them to heightened risk for HIV infection and transmission as well as to sexually transmitted infections. KANCO through the Drop-in Centres (DICs) model off

Key populations (KPs)- Female Sex Workers (FSWs) and Men who have sex with men (MSM)- sexual behavior predisposes them to heightened risk for HIV infection and transmission as well as to sexually transmitted infections. KANCO through the Drop-in Centres (DICs) model offers health services to key populations (KP), by providing friendly services through its DICs in Kakamega, Mariakani, and Kajiado.

The DIC model continued to deliver and optimize health service delivery for KPs in a stigma-free environment, including but not limited to: HIV testing and counselling, Post-Exposure Prophylaxis (PEP), Pre-Exposure Prophylaxis (PreP), Sexually Transmitted Infections (STIs) screening and treatment, condom and lubes distribution and referrals, HIV Care and Treatment, Family Planning, Post Gender Based violence Care and Cervical Cancer Screening.

Even with the unforeseen challenges that were brought about by the COVID 19 pandemic, KANCO through its three DICs continued to offer health services to key populations with the understanding that marginalized communities continued to be disproportionately affected by the pandemic.

Through the support of Kenya Red Cross in Mariakani DIC and AMPATH in Kakamega DIC, KANCO sought to enhance the health and wellness of Kenya population icing Female Sex Workers (FSWs), Men who have sex with men (MSMS) and though the DIC Model KANCO seeks to increase the health and wellbeing of Key populations towards the realization of Universal Health Coverage.
<table>
<thead>
<tr>
<th>Kakamega</th>
<th>With the funding of USAID through AMPATH, Kakamega DIC reached out to 1751 FSWs, 2105 MSMs, and 2142 MSW with HIV/AIDS prevention information and healthcare services through a combination of prevention behavioral biomedical, and structural interventions in 184 targeted hotspot areas.</th>
<th></th>
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<tbody>
<tr>
<td></td>
<td>• 5,615 (2,733 FSWs and 2,882 MSMs/MSWs) with HIV prevention services</td>
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<td></td>
<td>• Sixty-Nine (69) integrated outreaches were done reaching; 4,747 KPs (2,648 FSWs and 2,099 MSMs/MSWs) with HIV testing services and clients received their results.</td>
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<td></td>
<td>• Diagnosed 147 KPs (86 FSWs and 61 MSMs) cases with HIV</td>
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<td></td>
<td>• 104 KPLHIVs (60 FSW and 44 MSMs) were linked and initiated to care and treatment</td>
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<tr>
<td></td>
<td>• 43 KPLHIVs (26 FSWs and 17 MSMs) are still being followed up to make sure that they are successfully navigated to care</td>
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</tbody>
</table>
### Mariakani

With the support of Global Fund HIV through Kenya Red Cross, Mariakani DIC reached out to 1238 FSWs, with HIV/AIDS prevention information and healthcare services through a combination of prevention behavioral biomedical, and structural interventions in 41 targeted hotspot areas.

Services Uptake by FSW at Mariakani in 2020 was as follows:

- STI screened - 1205 clients
- STI Treated, 253
- HIV Testing Services - 1025 clients
- Family Planning services provided - 652 clients
- Cervical Cancer - 340 clients
- Condoms distributed - 808,151 pieces
- Legal aid clinic, 8 sessions, reaching 118 clients
- Paralegal support-68 FSWs cases supported
- Advocacy Meetings, 8 meetings conducted Reaching 90 duty bearers and leaders

### Kajiado

The Drop In service Centre does not have any donor funded project running however it has remained focal in service delivery to the both key and general population community.

Biomedical services offered include: HIV testing services; STI screening and treatment; Tuberculosis (TB) screening and referral to treatment; HIV care and treatment; Family planning and Post exposure and pre exposure prophylaxis

Behavioral services offered include: Risk assessment and risk reduction counseling, skills building; Promotion, demonstration and distribution of condoms and water based lubricants
Marking World Hepatitis Day

KANCO joined the world to commemorate World Hepatitis Day 2020. This was done on 28 July 2020 by convening a virtual meeting that brought together global and regional harm reduction players to discuss the drug use Pandemic in the context of the Covid-19 pandemic. During the virtual meeting, People Who Use Drugs (PWUDS) raised concerns over the increased risk of transmission of Hepatitis as well as other blood-borne infections, following the disruptions of services at the Drop-in Centers (DICEs) due to the COVID-19 pandemic.
Marking the Universal Health Coverage Day

To mark UHC day KANCO participated in a domestic resource mobilization training aimed at strengthening UHC and domestic financing advocacy beyond the life of the PITCH project. From the meeting an action plan was developed which included: Capacity development of CSOs with current donor grants on domestic resource mobilization to facilitate a pool of advocates; Advocacy at county and sub-county level sector towards revenue raising; Engagement on budget allocation towards Key Populations (KP) and Adolescents Girls and Young Women (AGYW) programs; Check on the implementation of Medium Term Expenditure Framework (MTEF) target of prevention for KPs; Creating awareness of KP issues that needs to be in budgets and Increased accountability by KEMSA.
KANCO held a series of advocacy engagements incorporating different stakeholders, towards advocating for increased and sustainable domestic financing for health. Despite the disruption brought by the COVID-19 pandemic, KANCO continued with advocacy towards realization of healthy people and empowered communities.
GAVI HSS

KANCO being the primary recipient of the GAVI HSS funding in partnership with the Ministry of Health in seventeen high priority counties in Kenya (Bungoma, Kakamega, Trans-Nzoia, Homabay, Nandi, Baringo, Bomet, Nakuru, Kitui, Wajir, Mandera, Garissa, Tana-River, Meru, Laikipia, Isiolo and the Informal Settlements of Nairobi County) successfully implemented the GAVI HSS program from November 2017 to December 2020. In these engagements KANCO has been working closely with multi stakeholders including; elected leader-Members of Parliament, Senators, the parliamentary health committee, development partners, religious leaders, the civil society and the Ministry of Health through the National Vaccine sand Immunization Programme.

Since 2013, Kenya has been implementing a devolved system of governance with health services largely devolved. Despite devolution of health allowing for a fairly well developed immunization system and recorded increased investment in health hence access with subsequent improved immunization performance in some previously marginalized areas, devolution of health services has inadvertently compounded challenges facing delivery of quality immunization services, evidenced by declining immunization coverage.

H.E the First Lady Margaret Kenyatta congratulates a girl upon receiving the HPV vaccine during the 2020 Beyond Zero Health Safari
This drew focus to the need for civil society led activities to reduce barriers of access to immunization services in seventeen Counties. The implementation of the GAVI-HSS grant was thus envisioned to reduce infant and under-five mortality and morbidity rates in line with the UHC goals.

The project aims at achieving the following objectives that will contribute to improved immunization outcomes:

- To accelerate strong political engagement, improve governance and financial sustainability for immunization outcomes in line with devolution by 2020.
- To achieve equitable access to and utilization of routine immunization services in 17 focus counties and in special populations in Nairobi County by 2020.
KANCO has a proven track record for working in partnership with the Kenyan government to ensure the delivery of vaccines. This is also true in extending healthcare services to marginalized communities, particularly in hard-to-reach areas. The efforts of these CSOs have resulted in improved health outcomes and equity, especially in the marginalized communities, particularly the hard-to-reach areas.

Since the inception of the grant in 2017, the civil societies have been working to reduce barriers to access to immunization services by creating and increasing demand for immunization services in the seventeen focus Counties. Through these efforts there has notable reduction in infant and under-five mortality and morbidity rates in line with the Kenya Vision 2030.

### Summary of Key Performance Indicators

<table>
<thead>
<tr>
<th>PERFORMANCE INDICATORS</th>
<th>RESULTS</th>
</tr>
</thead>
</table>
| Percentage increase in yearly national budget allocation for immunization as proportion of the previous year’s allocation KANCO | 1. In 2019 NVIP got 700 million from the supplementary budget  
2. Baringo got immunization as a subject line in their MTEF template ensuring that the department for immunization  
3. Wajir budget for immunization increased from 24% to 30%  
4. Nakuru County got a 3% increment in their Child health budget that covers immunization services  
5. CHVS in Laikipia County are getting their allowances from the County government as they support immunization services among other community health activities |
<p>| Number of immunization champions engaged in promoting immunization KANCO               | 182 Immunization Champions were engaged in the GAVI HSS CSO Component grant implementation. They supported in creating and increasing demand for immunization as well as review and development of Immunization Policies. |</p>
<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proportion of 17 Focus Counties with at least 1 CSO involved in immunization KANCO (per County)</td>
<td><strong>100%</strong> all the 17 counties (all the 17 counties have more than 10 CSO’s sensitized on immunization advocacy and are supporting the community and county in advocacy for immunization)</td>
</tr>
<tr>
<td>Number of civil society organizations trained to advocated for immunization within health and non-health sector partners and community leadership KANCO (Tally of both health and non-health CSOs who have been trained on immunization advocacy)</td>
<td><strong>748</strong> CSO’s sensitized on immunization. They learnt how to prioritize immunization and were instrumental in ensuring that immunization services were provided and sort after by the communities they serve.</td>
</tr>
<tr>
<td>Number of high-level advocacy and planning meetings held with MOF, MOH, Parliamentarians, County assemblies KANCO</td>
<td><strong>125</strong> High Level meetings held both virtually and physically with members of County Health committees and the CHMT</td>
</tr>
<tr>
<td>Number of community health volunteers engaged for immunization demand generation KANCO</td>
<td><strong>12125</strong> CHVs sensitized and engaged in immunization advocacy. They were empowered on how to carry out immunization Defaulter tracing</td>
</tr>
<tr>
<td>Number of policy makers equipped with skills to address local immunization sector constraints KANCO</td>
<td><strong>326</strong> MCAs, 19 MPs, 5 Senators and 7 Governors (policy makers) sensitized on Immunization matters and through this sensitization supplementary funding was given to NVIP in 2019, CHS bills have been passed in 6 Counties and performance of immunization service delivery has greatly improved.</td>
</tr>
<tr>
<td>Number of Health Care workers engaged for immunization demand generation KANCO</td>
<td><strong>1901</strong> HCW’s sensitized and engaged in immunization advocacy. They were empowered on how to support CHVs to carry out immunization Defaulter tracing</td>
</tr>
<tr>
<td>Number of Religious Leaders engaged for immunization demand generation KANCO</td>
<td><strong>1276</strong> Religious Leaders sensitized and engaged in immunization advocacy and Community mobilization as well as support of defaulter tracing through use of pulpit services.</td>
</tr>
<tr>
<td>Number of Health Media/Journalists engaged for immunization demand generation KANCO</td>
<td><strong>424</strong> Health Media/Journalists sensitized and engaged in immunization advocacy and creation of awareness on importance of immunization and Community mobilization</td>
</tr>
</tbody>
</table>
Number of Immunization Defaulters Traced through the GAVI HSS Grant CSO Component implementation  
104262 defaulters were traced and brought back to care by the active CHVs.

Number of Grassroots Leaders and members engaged for immunization demand generation KANCO  
579 Grassroots Leaders and members sensitized and engaged in immunization advocacy and creation of awareness on importance of immunization as well advocate for review, development and implementation of policies and laws that favour immunization.

Number of Counties that have developed a Community Health Services bill (CHS Bill)  
6 Counties have developed and implemented the CHS Bill (Homabay, Bungoma, Baringo, Laikipia, Nakuru, Nairobi, Kitui).

Development of a Defaulter tracing system  
When the project started there was no activity being carried out on defaulter tracing of immunization defaulters but as the project was being implemented 3 counties were supported to develop an immunization defaulter tracing system with data collecting tools that the counties adopted. These counties are Meru, Laikipia and Isiolo.

**Key Campaign Moments**

**Marking international Overdose Awareness Day, 31st August, 2020**

To mark International Overdose Awareness Day KANCO hosted a webinar that drew expert panelists from across the globe to share and deliberate on the way forward for overdose under the theme ‘**Overdose: The Pandemic within a Pandemic**’. The webinar targeted the East African region of community activists, people who use drugs, policy makers, and other stakeholders. KANCO also organized a PWID community feedback and dialogue webinar forum, as a follow-up event for the main webinar above to discuss overdose matters and decide on the way forward.

The webinars focused on Alcohol and Opioid Overdose Management and Naloxone, sharing practical information as well as discussing the need for policies to enhance the availability of overdose prevention antidotes such as naloxone. There were six panelists for the webinars, including: Hon. Gathoni Wamuchomba, Member of Parliament in Kiambu County; Dr. Michael Katende, East Africa Community Secretariat; Ms. Helgar Musyoki, Head Prevention Unit, Ministry of Health, National AIDS/STI Control Program; Mr. John Kimani, Kenya Network of People who use Drugs (KeNPUD); Mr. John Ryan, Convener, International Overdose Awareness Day; and Mr. Allan Ragi, Executive Director, KANCO.
The Penington Institute afterwards developed an international overdose day Partners’ Report which tells the story of the 20th International Overdose Awareness Day – what it achieved, how people remembered those no longer with us, and how we continue calling for a world free from overdose.

**Universal Health Care Project financed by the World Bank**

2020 brought hardship for millions of people around the world, but it also demonstrated how health workers on the frontlines, governments, CSOs and global partners came together to respond to the pandemic. The GFF under the leadership of the Director, Muhammad Pate envisions 2021 as a window of opportunity to change the trajectory for millions of women, children and adolescents by protecting and promoting essential health services as part of the global COVID-19 response and recovery. KANCO among other CSOs have been keen

‘2020 brought hardship for millions of people around the world, but it also demonstrated how health workers on the frontlines, governments, CSOs and global partners came together to respond to the pandemic.’
on engaging towards ensuring continued dialogue with World Bank and IMF to enhance realization of these goals.

**New GFF Strategy: Doubling Efforts to Protect and Accelerate GFF Progress**

The GFF 2021-2025 strategy was launched at a GFF during the World Health Summit, where global health leaders discussed global partnership and collaboration to accelerate action for the health of women, children and adolescents. The launch came shortly after the endorsement of partners at the GFF’s biannual governance meetings.

The GFF strategy was developed cumulatively with countries, global partners, and CSOs. It set out to strengthen the GFF’s role and impact through the pandemic and beyond, through: *increased focus on bolstering country leadership; advancing equity and gender equality; reimagining frontline service delivery; building more equitable health financing systems; and maintaining a relentless focus on results.*

Following the launch, CSOs engaged in a series of meetings on nutrition and child health underscoring the urgency for action for better health outcomes for women, children, and adolescents. They also stressed the importance of promoting gender equality in health through policies financing and action.

**Counties Sensitization on the Global Finance Facility Mechanism and the Civil Society Engagement Strategy**

KANCO embarked on sensitizing Health CSOs on Global Finance Facility (GFF) mechanism and, *Civil Society Engagement Strategy (CSES).* The discussion focused on understanding of GFF, the Health System Strengthening funding under the GFF mechanism. The engagements also focused on validating the CSEs strategy. The funding aims to improve the delivery, utilization and quality of Public Health Care services (PHC) at the county level with focus on *reproductive maternal newborn, child, and adolescent health services.* (RMNCAH).

GFF mechanism uses a performance-based approach by employing minimum conditions and allocating resources to the counties based on the improved PHC results. The grants focus on Women of reproductive age (WRA), including adolescents and children under five who utilize PHC services most. The CSOs remained instrumental in advocating for full operationalization of the CSES strategy as well as promoting inclusive and transparent engagement at the county levels.

Increased engagement with County stakeholders was impressed upon to enhance effective redress of RMNCH+N issues and towards strengthening inclusive, transparent platforms for each partner to engage. The role of CSOs in the advocacy role for increased sustained funding for RMNCH+N during and beyond GFF support guided by the CSEMS strategy was also underscored. This is also with the understanding that the Kenya CSOs are still pursuing the establishment of a RMNCH+N/GFF MCSP.
Amid the pandemic the teenage pregnancy crisis escalated, seeing a 40% increase in the country’s monthly average. These numbers, from early July, linked the COVID-19 pandemic to unintended pregnancies. KANCO in collaboration with AU-ECOSOCC, UNAIDS and County governments brought together like minded organizations to deliberate on the teenage pregnancy crisis in the view that the ongoing pandemic was delaying an adequate response to a growing sexual reproductive health crisis.

Recommendations going forward

- Policy scan on teenage pregnancies and engage different stakeholders. What we have is not working, we need to get out of the box. Let girls be girls and boys be boys. Tell girls where they come from, let’s not hide our heads in the sand.
- Ministry of Education to allow sex education, to teach sex education, religious leaders, funding of youth led
organs and they are mentored and also through parental guidance and curriculums without limitations. Church to pick up where NACADA has left. The need to instil values and look at how we instill values of respect, love among children and the youth.

- Counselling for schools
- Platforms for engagement should be proactive not reactive.
- Normalize mental health in the country so that those who are sick can seek treatment.
- Establish a multi-sector approach in order to harmonize all laws, policies and charters that protect and empower adolescents and youths.
- Keep our youth and adolescents engaged to alternative forms of leisure not sex and drugs.
- Advocate for peer-to-peer SRHR education and also have an intergenerational mentorship program to offer guidance and counselling in regards to sex and drug abuse. This is to put the best interest of the child and youth at hand.
Research on the impact of COVID-19 on TB programming in Kenya

KANCO in close collaboration with 10 global and regional organizations developed and piloted a survey on the impact of Covid-19 pandemic on TB programming. The survey period was between May 26, 2020 to July 2, 2020. The research tool target population included people with TB, frontline healthcare workers, TB program and policy officers, TB researchers, and TB advocates. Quantitative and qualitative questions were included in the tool.

Research findings and recommendations

- COVID-19 has had an enormous impact on the number of people seeking and receiving healthcare for TB – We need to build back better TB care and prevention
- COVID-19 is driving people with TB into poverty, and social isolation is increasing inequities and human rights related barriers to TB service - We need to provide social protection mechanisms
- Health systems around the world are weak and ill equipped to respond to simultaneous COVID-19 and TB epidemics - We need to strengthen healthcare systems
- People working in the TB field are seeing significant interruptions and diversions of their work and research to COVID-19 - We need to build capacity
- TB funding has decreased significantly since the beginning of the pandemic - We need to invest in TB programs
- Many health facilities and programs have adapted the ways they deliver services and resources in response to COVID-19, which presents an opportunity for the future of TB care and prevention - We need to innovate and adapt

“There is a lot of stigma around COVID. ‘You can not cough in peace’ one said since any cough is mistaken to be COVID and when you become a suspected you are forcefully quarantined. There is need for more education on human rights around COVID.”
Media Engagement on GF support and impact of COVID 19 on Tuberculosis programmes

The country reported its first case of COVID 19 on 13th March 2020 thereafter a raft of measures were put in place to contain the spread of the virus including restriction of movements, closure of learning institutions, lockdowns, curfews among others. Kenya is one of the countries in the world with triple burden of TB, TB/HIV and MDR TB with an estimated incidence of 150,000 as per 2019 WHO Global Report. The country notified an estimated 86000 people with TB in 2019 missing over 40% of patients who have TB, implying that there’s still community transmission going on.

Health care workers deployment

At the beginning, National MOH staff were mobilized to manage quarantine sites and be part of COVID-19 response team. The counties have now taken over most of the roles. By 17th June 2020, there were 4044 confirmed positive cases reported in the country, 107 fatalities and 1353 recoveries.

Accelerating Commitments, Investments, and Actions on addressing TB during and beyond COVID-19

Through the support of the Global Fund and development partners strategic initiatives have been put in place to find more people who have TB, test and put them on treatment. At the Country level, Kenya had received three tranches of additional grants of USD 41,730,224 from GF to support TB during C19 on risk mitigation, health systems strengthening, procurement of PPEs- medical masks for community health workers among other community interventions. The 3rd tranche allocation for COVID 19-TB interventions was USD 4.643M out of USD 19M.

During the country GF consultative meetings for the global Fund allocation 2021-2024, Kenya was allocated USD 451,310,170 for HIV, TB, Malaria and Resilient Systems Strengthening for Health. In addition to catalytic funds of USD 26,000,000 to address finding missing people with TB and human rights. In 2018-2021 Kenya contribution to GF was Ksh 10.2 billion, 20% increase from the previous period.

Engagement in High level advocacy on child health and nutrition investments.

ACTION Global Health Partnership including KANCO engaged in advocacy on the impact of COVID 19 on malnutrition and nutrition related mortality. The unprecedented global social and economic crisis triggered by the COVID-19 pandemic poses grave risks to the nutritional status and survival of young children in low-income and middle-income countries (LMICs).

Of particular concern is an expected increase in child malnutrition, including wasting, due to steep declines in household incomes, changes in the availability and affordability of nutritious foods, and interruptions to health, nutrition, and social protection services.

KANCO also held webinars to discuss on issues of child health and nutrition. It was noted surveys or review show that better results in anaemia reduction were obtained
in countries where programmes were premised on a multisectoral approach, with involvement of all sectors working synergistically. Empowerment of women, and sensitization of the general community and of men on gender equity would contribute to better outcomes in anaemia reduction. Leadership and coordination mechanisms for anaemia reduction are required at global, regional and community level.

This evidence reiterates the critical importance of addressing anaemia from multiple perspectives and through multiple coordinated efforts, including multiple government sectors, nongovernmental, United Nations agencies and the private sector - each with specific and complementary roles to accomplish in reducing anaemia.

A call to action was developed that includes:

- Good nutrition is essential for tackling child morbidity and mortality. Together, these cost-effective interventions prevent millions of deaths each year, create the foundation for health and development, and contribute to a virtuous cycle that lifts individuals, communities, and nations out of poverty.

- Nutrition interventions complement each other, and each amplifies the impact of the other. They should, where appropriate, be delivered together, as a core part of a comprehensive primary health care approach, on the road towards universal health coverage.

- The COVID-19 crisis threatens to roll back progress made on child survival and child health during the past decades due to critical health services being interrupted, while poverty and food insecurity are increasing. We cannot allow COVID-19 to reverse progress on the Sustainable Development Goals and leave a permanent mark on a generation of children.

- Continued investment in nutrition, and other essential health services is crucial to effectively respond to COVID-19, to prevent child mortality and long-term negative effects on child health and development, and to build resilience during the recovery phase.

Running for Health: First Lady Half Marathon 2020

H.E. The First Lady developed a strategy aligned to the Big Four Agenda and the Sustainable Development Goals to support the Beyond Zero Campaign. The strategy’s goal is to improve maternal and child health in Kenya. KANCO as a member of the Beyond Zero Technical Working Group supports in ensuring accountability on child health and nutrition issues.

‘H.E. The First Lady developed a strategy aligned to the Big Four Agenda and the Sustainable Development Goals to support the Beyond Zero Campaign.’
In 2020, KANCO joined likeminded stakeholders in running for zero HIV infections, zero maternal deaths, zero FGM, healthy lifestyle for the elderly, early screening of cancer, inclusion of persons who are differently abled, better nutrition for children, zero child marriages and zero child deaths.
KANCO with the support of Comic Relief is implementing an ECD project- Malezi Bora ya Awali in informal settlements in three counties in Kenya: Kajiado, Nairobi and Kiambu County.

The project seeks to enhance access to quality Early Childhood Development services targeting children aged 0-5 years as they transition to school in the three Counties. KANCO is working closely with the department of Health Services, School Health Program, and Child Protection, Department of Education and ECD stakeholders to enhance ECD outcomes. The project is guided by three objectives;

1. To improve awareness among parents/ caregivers, preschool teachers and health workers in support of children’s holistic (health, nutrition, opportunities for early learning, responsive care-giving, safety and protection) development
2. To increase community engagement in implementing child centred ECD models in target counties

3. To engage ECD stakeholders in policy dialogue, adoption of best practices in ECD/E to create enabling environments for young children to develop holistically

In Nairobi County, KANCO trained 75 CHVs; 35 Health Care Workers and 50 Caregivers in effort to improve their capacity on child development and enhance integration of child care practices in Health facilities.

In Kajiado County, KANCO has trained 30 HCW, 60 CHVs and 96 preschool teachers.

In Nairobi County KANCO is supporting the implementation of free ECDE and the review of the Nairobi County ECDE act (2016).

KANCO is advocating for the operationalization of the Kajiado County Community Health Service Bill (2020) and Kajiado County Health Improvement Fund Bill (2020) appended in December 2020. KANCO is currently working with ECD and Nutrition stakeholders in Kajiado County to develop the daycare bill and nutrition policy.

In Kiambu County, KANCO is partnering with ECDNeK and the county to develop the ECD bill, daycares policies, and Community health service bill.

KANCO also carried out mapping of CSOs implementing ECD programs in all the three counties and having established county ECD chapters, KANCO will be seeking to engage the counties on establishment of the ECD chapters in the three counties. KANCO is seeking to address the presenting gap in the running of daycares which caters for children under the age of 4 years as there are no policies supporting them, operationalization of the CHS bill and development of nutrition bill.
A CHV demonstrating breastfeeding positions during a health camp organized by KANCO
**Successes:**

- Establishment and strengthening of multi-stakeholder platforms for ECD
- Development of ED mapping tool for data driven advocacy, and decision making
- Enhanced multi-stakeholder collaboration for ECD
- Implementation of free ECD and Competency Based Curriculum
- Integration of care for Child Development -CCD in health facilities and child care facilities
- Development of the Integrated Early Childhood Development Policy (IECDP)
- Support in the development and implementation of the county Nutrition Action Plan-CNAP
- ECD support with play books, play materials, Wash stations, mask and sanitizers in Nairobi County

Promoting the Rights for Key Populations
Growing consensus around the world recognizes education for and about human rights as essential. It can contribute to the building of free, just, and peaceful societies. Human rights education is also increasingly recognized as an effective strategy to prevent human rights abuses. In 2020, under the new Global fund HIV New funding model KANCO successfully executed to know your Rights Campaign which empowers female sex workers to know and understand their SRHR rights and reduce their vulnerability to abuse.

Through the project, KANCO two trained paralegal officers who conduct know your rights sessions with female sex workers and were able to conduct sessions with 211 female sex workers in 2020.

**Legal Aid Clinics**

Access to justice is widely recognized as a fundamental human right, Sex workers face a wide range of barriers to accessing justice, both as victims of crime and when charged with crimes. Criminalization of sex work, stigma, discrimination, police corruption and violence limit the reporting of crimes to the police, the successful prosecution and conviction of perpetrators, as well as access to victim compensation and support services.

Since sex work is criminalized, sex workers’ rights to protection from the law and freedom from arbitrary detention are systematically violated by police and the judicial system.

KANCO in partnership with a pro bono Lawyer collaborated to deliver a legal aid clinic and by so doing bring the services closer to the people who ordinarily would not afford to have access to lawyers. The legal aid clinic conducted twice every quarter provide legal aid services for individuals who have experienced the violation of their health and HIV Related human rights. This process also allows the lawyer to identify cases for possible mediation arbitration, mediation and litigation and to promote comprehensive rights of persons living with HIV (PLHIV) and utilize the available redress mechanism.

**Advocacy with Law Enforcers**

KANCO conducts quarterly meetings with Law enforcers to sensitize them on human rights for Sex workers. While sex work is considered illegal and punishable by criminal and municipal council bylaws, sex workers have reported they are particularly vulnerable to abuse by police at the time of arrest or detention, whether on prostitution-related charges or for other alleged infractions. Risks of experiencing further human rights violations include physical and sexual violence, forced HIV and STI testing Police repression can further negatively impact access to treatment in a number of ways. Frequent arrest and detention can represent repeated treatment interruptions for sex workers on ART. Depleted earnings due to fines and extortion can make it difficult to have sufficient money for transportation in order to access care, or to provide oneself with adequate nutrition.

Through these sensitization forums the message that abuse of sex workers will not be tolerated but most importantly that law enforcement officers are able to view sex workers as human beings first thus reducing the incidents of violation.
Under the current COVID-19 context, People Who Use Drugs (PWIDs) are facing unique needs and risks, due to criminalization, stigma, discrimination, underlying health issues, social marginalization and higher economic and social vulnerabilities, including a lack of access to adequate housing and healthcare. In Kenya, The NASCOP Quarterly Report 2020, indicated a sharp rise in the Violence cases against PWUDs for the period between January-March 2020 compared to October –December 2019 standing at 328 and 138 respectively.

Following the highlight of increased violence against PWUDs in Kwale County, KANCO convened a harm reduction webinar facilitating discussion around Harm Reduction and violence amid COVID-19. The meeting drew panelist from NACADA, KANCO, Medecines Du Monde and Harm Reduction Partners from the coastal region, Teenswatch, KwanPUD. Making the opening remarks the Executive Director KANCO, Allan Ragi noted that there has been notable flexibility of service in response pandemic for PWUDs however, more can be done.
‘We have the ability to end violence against PWUDs, leveraging on the government’s commitment, Strengthening the PWIDs voices, adoption and implementation of policies, generate evidence and documenting.’ He stated.

CEO NACADA Víctor Okioma stated that ‘Violence against people who use drugs should be addressed through creation of awareness among communities on drug use as a disease and drug users as people who need help.’ Ahmed Said representing Kenya Network of People Who Use Drugs (KeNPUD) stated that Violence makes us sicker.’ He added that the violence is on the rise fueled by the pandemics negative impact on livelihoods. He however noted that despite reporting these cases to the police, the perpetrators are rarely reprimanded.

https://www.youtube.com/watch?v=W7IxD8DbUNE
INSTITUTIONAL STRENGTHENING AND DEVELOPING OF A STRONG UNIFIED MEMBERSHIP

When institutions are strong, they not only serve their communities but drive meaningful change at the local, national, and international level. However, Capacity constraints at various levels impede institutional and organizational change, implementation of programs and service provision.

Within its Institutional Strengthening framework, KANCO works to develop or improve existing institutional strengthening systems and processes of its secretariat and its membership. These are principles, minimum standards, best practices, business processes, references and tools to ensure effective, efficient and sustainable institutions.

Yearly, KANCO takes stock of the institutional and organizational landscape, to cultivate an in-depth understanding of the needs, and development priorities of its secretariat and the membership, using a framework and tools that allows for a process of learning and adjusting to changing development landscape.

To strengthen the leadership, management, and technical capacity to deliver on its mandate, KANCO recruited and retained
competent human resources at the Secretariat and Board levels, developed and pursued alternative sources of funding and implemented capacity-building programmes for the Secretariat, Membership and the Board.

In 2020, KANCO engaged in developing the capacity of its over 1,267 CSOs and members through its regional networking and learning meetings, on ward granting and training. At the county level, the engagements involved the promotion of institutional and organizational linkages between the Civil Society organizations and the County Governments - Ministries of Health and Finance - to improve governance effectiveness. The strengthening of grassroots institutions and organizations improved accountability on policies and resources at the sub national levels in Kenya.

This promoted information flow and exchange, sharing of material resources and better decision-making. The sharing of information, data, and facts and figures assisted the civil society, key stakeholders and decision-makers in making a stronger case for policies and systems development at national and subnational levels. Organizations need to adapt, change and move towards stronger and deeper alliances that involve all actors to achieve their set objectives. On ward granting, programmatic and financial systems strengthening of CSOs supported in improving the technical and managerial skills of implementing partners.

KANCO continued with engagements with partners, networks and alliances to strengthen the existing finance and accounting systems and processes, issue profiling, advocacy, communications and policy frameworks and ICT systems that are responsive to current and emerging health needs and trends locally, nationally and globally.

For its sustainability and that of its development programs, KANCO will continue to develop and implement organizational policies and strategies that will improve its technical capacity and that of the membership in Health programming.
In 2020, amid the health challenges posed by the pandemic, KANCO’s leadership in the health response continued to be applauded. At the East African Leadership Award, KANCO received two coveted awards; the Innovative Leadership Award 2020 and the Dream Company to Work for award.

In the Dream Company, working for KANCO was recognized for being an organization that is not just people centered but one that strives to achieve excellence in all its areas of engagements. KANCO has a long trail of successful health advocacy engagements, innovations, mentorship programs and youth centered programs, while maintaining multi-partnership engagements, with advocacy and development partners both locally and globally, that continue to influence policy and investments for health.

The innovative Leadership Award was in recognition of KANCO’s leadership role in the CSOs starting from the advent of HIV and AIDS in Kenya, and for being a Voice for the CSO’s in many multinational platforms including the Global Fund. In addition to KANCO being a resilient organization that has continued to evolve for an effective disease response, KANCO has been a leader in establishment and strengthening of health platforms at the national, regional and global levels.

Some of the organizations championing health advocacy that KANCO has supported in establishing include, EANNASO, AFRICASO, WACI Health, the action Global Health Partnership that champions health across continents as well as continued mentorship for the over 1200 member organizations.
KANCO has also been in the forefront of provision of health thought leadership at the National, Regional and Global Space, championing health policy change/redress at these levels and currently sits at the ACTION Global partnership, and Results Educational Think Tanks.

This Leadership has earned recognition with KANCO receiving many awards such as the Head of state commendation award, Commonwealth award in recognition of contribution to policy and advocacy and the Executive director receiving the Lifetime achievers award and the continental achievers award for demonstrated outstanding leadership across sectors in the continent. Further, KANCO has been deliberate on Mentorship for health advocacy towards health platforms development and responsive Policy.

Membership

KANCOs membership continued to grow, with different efforts being undertaken to keep the members updated and engaging for improved health outcomes. Despite the constraints posed by the pandemic, KANCO continued to engage the consortium members through virtual learning and sharing, while impressing upon integration of pandemic control efforts in the health programming and advocacy.

KANCO also expanded its partnership base working closely with the county governments for effective service delivery, strengthening grassroot advocacy movements for sustained advocacy efforts for health financing and accountability.
Under research learning and innovation, KANCO continued to innovate and advance research with likeminded partners for informed health programming.

23rd International AIDS Conference exhibits a poster on harm reduction from KANCO

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<th>Background</th>
<th>Description</th>
<th>Lessons</th>
<th>Conclusions</th>
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<td>East Africa is home to about 150 million people, 260,000 among them being people who inject drugs. This constitutes about a fifth of the population of people who use drugs in Africa and growing. Eastern Africa region is recorded as a drug transit route with use of drugs for recreation. Consequently this has fueled the growth of the HIV epidemic standing at about 18%, arising from the sharing of injecting equipment and related sexual behavior.</td>
<td>In October 2015, KANCO supported by the Global Fund through the Regional HIV and Harm Reduction Project, embarked on a journey to introduce and cement harm reduction in eight Eastern Africa countries. Prohibitive policy environment, irregular capacity of professional service providers and limited information on harm reduction characterized the terrain. KANCO in partnership with the East African Community (EAC) Secretariat and eight country implementing partners embarked on developing a policy to address 5 broad policy areas: Data collection to inform Harm Reduction, Developing national harm reduction policies, Delivering interventions to people who use drugs, strengthening the capacity of PWUDs across EAC as well as creation of a supportive legal environment.</td>
<td>Policy development is a long journey that takes at least two years. The consultative process navigates various stages both at regional and national levels. This includes the literature review and data collection to draft a comprehensive situational analysis; the formulation of the draft policy document; country consultations; experts’ meetings and peer review consideration, regional validation of the final draft and Ministers approval.</td>
<td>On 26th March 2019, EAC council of Ministers approved the attached policy. It gives platform for sensitization, advocacy and access to services and calls to the member countries stakeholders to adopt, sensitize and promote its understanding for effective application to bridge the service gap for people who use drugs in the region.</td>
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**PEF 1786: Strengthening harm reduction in Eastern Africa through Strategic Policy**

Sylvia Ayon, Key Populations Program Manager
Regent Management Court, Block C -C6 and C8, P.O Box 69866 – 00400, Nairobi, www.kanco.org, Facebook, Twitter

**PRESENTED AT THE 23RD INTERNATIONAL AIDS CONFERENCE (AIDS 2020) | 6-10 JULY 2020**
On the 10th July, 2020, KANCO Presented a poster abstract at the 23rd International AIDS Conference! As AIDS 2020: Virtual. The abstract was titled “Strengthening harm reduction in Eastern Africa through strategic policy” and was viewed by a total of 6500 delegates who attended the virtual conference

KANCO shared with the world that on the 26th March 2019, East Africa Community council of Ministers approved the 1st East Africa Community Regional Policy on Prevention, Management and Control of Alcohol, drugs and other substance use. The policy gives platform for sensitization, advocacy and access to services and calls to the member countries stakeholders to adopt, sensitize and promote its understanding for effective application to bridge the service gap for people who use drugs in the region.

The impact of COVID-19 on the TB epidemic: A community perspective-Survey

KANCO has continued to improve her social media platforms including weekly publications of newsletters and posting blogs on the website which has increased visibility and followership on social media.

As the pandemic continues to unfold, its impact on health and programming continues to be felt. The situation continues to adversely affect the progress made in the fight against diseases including HIV, TB and Malaria.
KANCO, together with a few global partners in response to early warnings that COVID-19 was having a devastating impact on people affected by TB and TB programs around the world, 10 global networks came together to take action.

They conducted a civil society-led survey, aimed at enriching the understanding of experiences in various regions and key stakeholder groups. The findings would be critical to informing advocacy among these partners.

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<th>Finding</th>
<th>Call to action</th>
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<td>COVID-19 has had an enormous impact on the number of people seeking and receiving healthcare for TB.</td>
<td>To build back better: There is an urgent need for a recovery plan to get TB responses back on track to reach UN HLM TB targets and SDG commitments to end TB by 2030. COVID-19 has demonstrated the important role that affected communities play in responding to health crises, reporting barriers to access, supporting peers and filling gaps in services. The pandemic is an opportunity for national TB responses to become more people-centered and to involve communities</td>
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<td>COVID-19 is driving people with TB into poverty, and social isolation is increasing inequities and human rights-related barriers to TB services.</td>
<td>Provide social protection: COVID-19 has emphasized the critical importance of social protection systems. There is an urgent need to promote equity and access to financial support, transportation, healthcare and food for all people with TB, free from discrimination.</td>
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<tr>
<td>Health systems everywhere are weak and ill equipped to respond to simultaneous COVID-19 and TB epidemics</td>
<td>Strengthen healthcare: Frontline healthcare workers and health volunteers have been the first line of defense against COVID-19 around the world. Yet, COVID-19 has weakened health systems everywhere, forcing healthcare workers to contend with unsafe working conditions. Healthcare systems need to address TB and COVID-19 in an integrated way. Fever and cough are symptoms of both TB and COVID-19, and simultaneous screening and diagnostic services are needed in both public and private health sectors</td>
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<tr>
<td>People working in the TB field are seeing significant interruptions and diversions in their work and research towards COVID-19.</td>
<td>Build Capacity: Essential TB health services and research should never grind to a halt. The “covidization” of research and the overall health sector (communication, politics, implementation and research) has diverted attention away from TB activities. Interruptions need to be addressed, underscored by real-time data from those on the ground.</td>
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<tr>
<td>TB funding has decreased significantly since the beginning of the pandemic.</td>
<td>Invest: COVID-19 has diverted funding away from TB. To meet the UN HLM TB targets and commitments, TB financing must reach US$13 billion a year by 2022. The US$3.3 billion funding gap posted in 2019 is being amplified by the additional funding required to address pandemic-related disruptions.</td>
</tr>
<tr>
<td>Many health facilities and programs have adapted the ways they deliver services and resources in response to COVID-19, which presents an opportunity for the future of TB care and Prevention.</td>
<td>Innovate and adapt: COVID-19 has made health a priority on the political agenda, and it must remain a priority beyond the pandemic. There are opportunities to draw on this momentum to strengthen the overall TB response by adapting strategies and taking advantage of innovative digital health platforms. A new paradigm is required to effectively meet current challenges and to champion the human rights, empowerment and engagement of people affected by TB.</td>
</tr>
</tbody>
</table>

**Innovation**

After the onset of COVID-19, KANCO had to become innovative so as to ensure continuity of its activities and service provision. This was achieved through several interventions.

1. **Virtual Meetings and Webinars**

   Due to the rules and guidelines from the Government, physical meetings were discouraged or limited to a certain number of individuals. This necessitated the use of virtual meetings where KANCO used the Zoom Video conferencing system. The Virtual meetings came in handy for internal staff meetings and also meeting external stakeholders. More than five Webinars were held for the various projects ranging from immunization to TB awareness and, this saw participation of people from various regions locally and also internationally.

2. **WhatsApp Groups.**

   WhatsApp groups were created for staff and the various departments within the organization to enhance communication and knowledge sharing both in matters related to the Covid-19 pandemic and also organizational communication.

3. **Intranet**

   An internal staff intranet was developed by the ICT department accessible via www.kanco.sharepoint.com where various resources were made available for staff within the organization. The intranet which undergoes continuous development, provides anyone looking for information related to the organization such as Organizational documents, Success stories from various programs among other features. that; existing Needle and Syringe Program (NSP) has had significant impact on HIV and HCV transmission. The study results also show that the Implementation of Full harm reduction services will have more impact in reduction of HIV infections among PWIDs and scaled up Harm reduction may achieve HCV elimination. The countries study specific reports and resources can be found on [www.kanco.org](http://www.kanco.org)
The current situation in the world is precarious for many people. But even more hangs in the balance for most women and girls, with recorded increased gender-based violence meted on women and girls during the pandemic.

The COVID-19 pandemic has brought new visibility and profile to the essential roles that women play in our social, political and economic systems, from frontline healthcare workers, trusted leaders, to household masterminds.

It demonstrated also how many public and private systems depend on women performing multiple and often underpaid roles, and the fragility of that construction.

KANCO’s programming has always been guided by the principles of equality and inclusion for all. Through the various programs we hope to achieve gender equality and disability inclusion. KANCO held several engagements towards improving the welfare and health outcomes of women both in the general and key populations groups including convening a high level multi sectoral dialogue forum to redress sexual reproductive health and rights for women and teenage girls during the pandemic. KANCO also continued to provide a safe haven for female sex workers through the 3 DICs towards ensuring their health and welfare was guarded.
Coronavirus disease (COVID-19) has plunged the world into an unprecedented crisis, with billions confined to their homes worldwide, now relying on information and communication technology (ICT) for continued access to education, healthcare, work and essential goods and services. From teleworking and e-commerce to telemedicine and remote learning, COVID-19 is the first pandemic in human history where ICT and social media are being used on a massive scale, driving the global collective response to the disease and digital transformation across the world.

The COVID-19 further underscored the fundamental importance of ICT to economies and societies everywhere. It also calls for solidarity, as too many people around the country are still unconnected, left to fend for themselves in these very difficult and uncertain times.

The COVID-19 pandemic has made the promise of the 2030 agenda more relevant and vital than ever. The pandemic continues to have profound social, economic and political consequences, and we must do everything possible to find the peace and unity that our world needs.

COVID-19 has made health a priority on the political agenda, and it must remain a priority beyond the pandemic. There are opportunities to draw on this momentum to strengthen the health sector by adapting strategies and taking advantage of innovative digital health platforms.

In the midst of the pandemic, KANCO has adopted several IT solutions to enhance engagements including the use of ICT facilities to enhance meeting and collaboration in efforts to enhance our vision of realization of a healthier people and empowered communities.
## Financial Report

### Kenya AIDS NGOs Consortium (KANCO)

**Financial Statements**

For the year ended 31st December 2020

### Statement of Income and Expenditure for the Year Ended 31st December 2020

<table>
<thead>
<tr>
<th></th>
<th>Note</th>
<th>2020</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INCOME</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income</td>
<td>4</td>
<td>201,524,095</td>
<td>218,298,376</td>
</tr>
<tr>
<td>Other income</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>EXPENDITURE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Improving access to health programs</td>
<td>5</td>
<td>125,847,173</td>
<td>125,750,302</td>
</tr>
<tr>
<td>Policy and advocacy</td>
<td>6</td>
<td>74,177,629</td>
<td>80,791,656</td>
</tr>
<tr>
<td>Strengthening institution systems</td>
<td>7</td>
<td>726,073</td>
<td>6,216,000</td>
</tr>
<tr>
<td>Research, learning and innovation</td>
<td>8</td>
<td></td>
<td>960,000</td>
</tr>
<tr>
<td>Administration</td>
<td>9</td>
<td>773,220</td>
<td>4,580,418</td>
</tr>
<tr>
<td><strong>Total Expenditure</strong></td>
<td></td>
<td>201,524,095</td>
<td>218,298,376</td>
</tr>
</tbody>
</table>

### Surplus

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OUR PARTNERS

Republic of Kenya
Council of Governors

UNAIDS
UNODC
The Global Fund
European Union
Gavi
ACTION
RESULTS
LINKAGES
TB ARC
Stop TB Partnership
USAID
Alliance
IBP
Eastern Africa Regional Council of Ministers of Health
amref health africa
Centre for Health Solutions - Kenya
University of Nairobi
University of Bristol
London School of Hygiene & Tropical Medicine