

# LESSONS FROM KENYA

## NATIONAL SELF-CARE GUIDELINES ON THE FAST TRACK

Self-care for health and well-being is increasingly being recognized as a key component of a strong health system. A growing number of countries are taking strides to adapt, adopt, and implement national self-care guidelines, following the launch of the WHO Consolidated Guideline on Self-Care Interventions for Health in 2019. Guideline development and policy development in general can often be a lengthy process. But it doesn't have to be when the conditions are right, and the commitment is there.

Such is the case with Kenya. In a matter of just 15 months, from March 2022 to June 2023, a national Self-Care Guideline for Kenya transitioned from idea to implementation—one of the fastest, most efficient timelines for guideline development. This resulted from the collective efforts of a multisectoral group of self-care stakeholders in Kenya, spearheaded by the government and further supported by Reproductive Health Network Kenya (RHNK), the Self-Care Trailblazer Group advocacy focal point in the country. What are factors that contributed to this “fast tracking?”

**1. COVID-19 as a catalyst.** With all the havoc created by the pandemic on people's lives and the delivery of healthcare, including shuttering of facilities, lockdowns, and police-enforced curfews, COVID-19 also created a political environment hungry for innovative strategies to improve access to healthcare. Drawing on evidence from the 2022 report “The Impact of COVID-19 on SRH Service”, RHNK presented the Ministry of Health (MOH) with data advocating for decentralized interventions from the central health system, specifically calling for investments in telemedicine and developing self-care guidelines. Quick to see the alignments of self-care to meet post COVID-19 needs, the MOH swiftly came to see the value of developing a wider self-care strategy for the country.

**2. Government leadership and championship.**

In addition to COVID-19 putting wind in the sails for self-care in Kenya, so too did the country's focus on Universal Health Coverage (UHC) help advance self-care. Kenya is a significant leader in UHC efforts, and the government was quick to appreciate the role of self-care in supporting UHC goals including expanding coverage of health care and enhancing equity. With such a conducive environment, the Kenya MOH went on to create and chair a multi-stakeholder technical working group to develop the guideline. The MOH regularly convened experts from public, private, civil society, and faith-based sectors to ensure a strong guideline contextualized to Kenya and its UHC landscape. Then, after the guideline was approved, the MOH, with support from RHNK, established a Self-Care Core Group to consolidate self-care efforts among partner organizations and develop a powerful network to institutionalize self-care policies, practices, and programs outlined in the new guidelines. This multifaceted governmental leadership not only highlights the integral role of self-care in achieving UHC but also reflects Kenya's proactive stance in championing comprehensive healthcare solutions in a sustainable way.

**3. Learning and leveraging from frontrunner countries.**

**a. Creating a diverse, multisectoral coordination group**

To gain insights on how to develop a strong Self-Care Core Group, RHNK conducted learning exchange visits to the Center for Health, Human Rights and Development (CEHURD) and PATH

Senegal, the Self-Care Trailblazer Group advocacy focal points in Uganda and Senegal respectively. Two key learnings converged that pivotally shaped RHNK's approach – 1) developing a multisectoral core group with the MOH at the helm to foster stewardship and sustainability and 2) having clear Terms of Reference (TOR) for the group. In navigating Kenya's nascent self-care landscape, forging partnerships across diverse sectors proved essential for both building community demand and ensuring effective delivery. Leveraging key insights from Uganda, RHNK centered the MOH to lead the core group to mitigate competition among actors and gain buy in among numerous actors. To foster a collaborative environment, RHNK conducted meticulous onboarding with clear partner roles outlined in the TOR to prevent overlap and competition, inspired by the Senegal experience. The incorporation of technical working groups allowed core group members to deepen their engagement in specific thematic areas. Leveraging these insights, the Kenya Self-Care Core Group now boasts 21 actively involved partners, including regulatory bodies, Ministry departments, academia, and implementing organizations.

### **b. Piloting the guideline at the subnational level**

With the guidelines in place and core group established, RHNK once again turned to its peers in Uganda to gather insights on how to pilot the guidelines. Drawing from the learnings, RHNK identified Bungoma county for the pilot, strategically leveraging existing collaborative agreements to ensure supportive leadership – RHNK had already signed an MOU with the county for strengthening Reproductive, Maternal, Newborn, Child, and Adolescent Health (RMNCAH). Leveraging the strong connection, RHNK tapped county MOH leadership to mobilize health facilities, calling on the County Health Management Team (CHMT) to marshal public and private health facilities. RHNK conducted

sensitization sessions for healthcare providers, the County Health Management Team, and policymakers to raise awareness and ensure understanding of self-care interventions while simultaneously garnering their support to advocate for self-care in the region. Drawing on the Ugandan example, healthcare providers were encouraged to use innovative strategies to drive awareness creation at facilities, employing strategies that included utilizing Community Health Volunteers (CHVs) as self-care champions and employing platforms like community dialogues, micro-learnings (health talks), and medical camps. Bolstering these efforts, RHNK proactively reached over 500 community members to drive demand and spark dialogue on self-care as essential in Bungoma county. In late 2023, the pilot project was expanded to Taita Taveta county, marking the beginning of national implementation efforts.

Kenya's fast-track launch and implementation of National Self-Care Guidelines serves as a valuable case study for nations aspiring to integrate self-care into their healthcare systems, underscoring the importance of leveraging ripe political climates and motivation, gaining government buy in, and strategically employing learnings from peers to catalyze self-care.

The Reproductive Health Network Kenya (RHNK) is a network of health professionals in private and public facilities, committed to comprehensive sexual and reproductive health and rights (SRHR) through advocacy and service provision. The network was formed in 2010 to provide evidence-based information and quality SRHR services in Kenya. RHNK is a dynamic national organization that provides technical assistance on reproductive health policy, legislation, advocacy, training, and service delivery and serves as the SCTG National Self-Care Network in Kenya.

