



COMMUNITIES HEALTH AFRICA TRUST

Qtr.2 Progress Report

April to June 2022

Program name	HEALTHY PEOPLE FOR A HEALTHY ENVIRONMENT
Location	<p>CHAT is currently reaching 12 Ecosystems – in 16 Counties</p> <ul style="list-style-type: none"> • Northern Kenya Rangelands Ecosystem • Ewaso Nyiro Ecosystem • Mt. Kenya Ecosystem • Mt. Kilimanjaro (Amboseli) Ecosystem • Mid-Great Rift Valley Ecosystem • Aberdares Range Ecosystem • The Tana River Ecosystem • The Mau Forest Ecosystem • The Mara Ecosystem • Slum ecosystem • The Lake Victoria Basin Ecosystem • The Lake Turkana Ecosystem (Suguta Valley)
Reporting period	April 2022 to June 2022
Report compiled by	Rose Kimanzi - Projects Manager, Violet Otieno - Data & M&E officer, Paula Murira - Field Monitor, Justus Kioko – Projects Admin, Lucy Kananu - Finance & Procurement Officer, Sharon Wreford Smith - Program Coordinator.
Date submitted	27 th July 2022

CHAT's Problem Statement:

A lack of access to family planning (FP) information and services contributes to poverty, suffering, and environmental degradation, negatively impacting communities and their surrounding ecosystems.

Therefore **CHAT's mission** is to support underserved individuals and communities in fragile ecosystems across Kenya to access FP information and services.

CHAT has three goals for this project – these are:

- 1: Increase access and use of family planning (contraception)
- 2: Enable positive behaviour change (bcc) for increased family planning (FP) and environmental sustainability uptake.
- 3: Increase empowerment and resilience of communities through self-sustaining community-based structures.

To meet the health and environmental needs of the communities, CHAT uses its innovative Population, Health, and Environment (PHE) approach that clearly shows the interplay between people, their health, and the natural resources on which they depend.

This approach provides a holistic manner to understanding and addressing these issues comprehensively. It has shown that integrating human welfare with environmental concerns yields more positively remarkable outcomes than when managed independently.

Communities reached this quarter (Apr – June 2022) per Ecosystem:

• **MOTOR MOBILE STRATEGY**

The CHAT motor mobile team reaches these communities with integrated health services focusing on Family Planning (FP) and includes basic curative treatment, where patients, clients and community members are sensitised using behaviour change communication and one-to-one services. In the last three months, CHAT managed to reach the following communities with integrated health services in the respective counties:

- *The Ewaso Nyiro Ecosystem:*
- **Laikipia County:** *Nosrai & Nkiroriti.*
- **Isiolo County:** *Lower Lpusi Lenantodo, Longopito, Mlima Tatu & Parkishon.*

- *The Mt. Kenya Ecosystem:*
- **Nyeri County:** *Naibor market, Solio IDP Village 2, Solio IDP village 3, Solio Village 6, Kiawara market & Nairutia market.*

• **BACKPACK STRATEGY**

Community Own Resource Persons (CORPs) are identified by their own communities to partner with CHAT. They are engaged by CHAT, who have a performance-based MoU with them. They go door-to-door in their own and surrounding communities with the aim of providing behaviour change communication (bcc) whilst integrating intensive sensitisation to enable access to family planning, providing HIV/AIDS and C-19 prevention, strengthening and building efficient referral systems; in Laikipia and Isiolo they include TB contact tracing. These services are provided using CHAT's innovative Population Health & Environment (PHE) approach, i.e. CORPs will integrate a strong component of ecological awareness into their behaviour change communication.

Communities reached by CORPs using CHAT's Backpacking strategy in the below ecosystems:

Northern Kenya Rangelands Ecosystem:

- **Samburu County:** Kisima, Ledero, Lpaani, Lodokejek, Baawa, Naibor Keju, Longewan, Mbarigon, Lonkaitolia, Loltulelei, Lemisigiyo, Lkiroriti, Lekuru market, Nkejumuny, Lemisigiyo, Longewan, Baawa, Naibor Keju, Noontoto, Yare, Nomotio, Lokuto Lolmoolong, Loosuk, Puura, Noontoto, Sirata, Lporoo, Lpartuk, Seketet, Kirimun, Loikumkum, Latakweny, Leilei, Lbendera, Baragoi, Ngilai, Lesirkan, Tangar market, Loudwa, Lchoro, Ntil, Opiroi, Nachola, Marti, Sereolipi, Shapulo, Ntabas, Kinya, Kirbartare, Ntilntil, Ndume, Martie lepareu, Ndonyo Wasin, Ngusoroni, Losesia, Sordo, Tree top, Dalapo, Wamba town, Tree top, KMC, Sumuruai, Jija, Ndikir, Soweto, Nteremka, Soit Nyiro, Nkwesere, Charda, Marti Manyatta, Soko Mjinga Ntamiyo, Yare, Milimani, Maralal Town, Mtaro, Lporos, Ngari, Nkutoto, Noontoto & Ledero.
- **Marsabit County:** Logologo, Laisamis, Korr, Ngurunit, Kargi, Sagante, Jaldesa, Karare, Marsabit town, D' akabarricha, Dirib, Gombo, Mlima Tatu, Merille, Manyatta Jillo, D-Kambi, G-Quresa, Namarei, Mpagas, W-Duba, Sikawai, Lependera, Siang'an, Shori Yako, Majengo, Ginda, Old Town, Atatisa, A-Hidaya, Kambi Ndege, AP Line & M-Otte.

The Lake Turkana Ecosystem (Suguta Valley)

- **Turkana County:** Naturkana, Suguta valley, Nataruk & Kamuge in the Suguta Valley

The Ewaso Nyiro Ecosystem:

- **Laikipia County:** Rumrum, Ngeyei, Muwarak, Naibor, Ranch, Kariunga, Sukutan, Lekiji, Ilmotiok, Mugandura, Ndikir, Olgirgir, Lorubae, Mara Moja, Soinarack, Daraja, Jua Kali, Corner, Lorien, Container, Melwa, Gatundia, Kihato, Kijito, Supukia, Mukima, Chumvi, Lositati, Gatero, Nkando, Upper Mukima, Lokusero, Lotasha, Makurian, Munishoi, Naserian, Pilili, Ndonyo, Koija, Nosirai, Mtaro, Segera, Powys, Lpingwan, Posta & Center.
- **Isiolo:** Ntepess, Matundai, Lobarsherek, Lpusi Nantedo, Labarsherek, Ngare Ntare, Noloroi, Kipsing, Wayama, 78, Chechelesi, M-Gari, Isiolo town, Prison, Manyatta Demo, Garbatulla, Manyatta Jillo, Loturo, Matundai, Lekiji, Ltingai, Lenguruma, Equator, Merti, Basa, Malka Galla, Milimani & Koropu.
- **Samburu County:** Lerata 'A', Treetop, West gate, Kiltamany, Archers Post market, Laresoro, Lerata B, Umoja, Kamanga, Waso, Lpus & Lbaa.

Mid-Great Rift Valley Ecosystem:

- **Baringo County:** Muchongoi, Kabel, Arabal, Keon, Waseges, Kasiela, Tandare, Ng'arua & Koimugul.

Mt. Kenya Ecosystem:

- **Nyeri County:** Shalom IDP camp, Gakawa, Kiawara & Karemno.
- **Meru County:** Kalalu, Gundua, Ngushishi, Gundua, Maritati, Batian, River side, Nyambatu, Go down, Kisima, Timau slums, Migingo slums, Kwa Ng'ang'a, Baselast, Mia Moja & Sirimun
- **Laikipia County:** Makutano, Katheri, Thingithu, Ichuga, Baraka, Kiawara market, Nairutia market & Solio villages 2, 3 & 6.

The Aberdares Ecosystem

- **Nyandarua County:** Ndaragwa, Shamata & Leshau.

The Tana River Ecosystem:

- **Kitui County:** Katse, Masiri, Kaase, Wikitinki, Wikithuki, Kyumbe, Tyaa Kamuthale, Tyaa, market, Kyuso market, Ngaai, Mikwa, Kwa somo, Kalani, Kamusiliu, Kakongo, Kalole, Kamuongo market, Kalatine, Tseikuru market, Tharaka, Kamula, Twikolo, Ngomeni, Waita market & Marisi.
- **Tharaka Nithi County:** Kathanje, Kibuka, Mwerera, Mutunguni, Murere, Kathwana, Kamungaru, Chiakariga market, Kamatungu, Karunguaru, Gakuru, Kithingiti, Kirangare, Marimanti, Karugaru Kereria, Rukurini, Ntenderuni, Karimani, Kiorimba & Tunyai

The Slum Ecosystems:

- **Laikipia County: In Nanyuki town:** Mugetho, Kwa Cecilia, Kabiru, Kanyoni, Kangaita, Makutano, Majengo, Kilimo, Blue Gum, Likii A', Likii 'B', Rwai, Majengo, Gathanji, Kambi Panya slum, & Kambi ya Mbuji slum.
- **Samburu County: in Maralal town:** Rangau, Loikas, Mtaro, Milimani, KWS, Lporro, Allamano, Shangaa & Shabaa slum.
- **Nairobi County:** Dagoretti market, Kandutu, Kareru, Githarani, Kaburi, Kinja, Mutege, Kanguku, Ruthimitu, Thogoto, Dagoretti centre, Gachui, Gikumbura & Waithaka slum.

The Mau Ecosystem

- **Nakuru County:** Mariashoni, Kiribwet, Kambi Bili, Mchorwe, Olassland, K.K, Sasumwa, Kiambereria, Molo South, Kasarani, Satewa, & Eastleigh slums surrounding Elburgon town, Marishoni, Mathuke, Mwato, Green estate, Kapsita, New creation area, Elburgon town & Kuresoi.

The Mara Ecosystem:

- **Narok South Sub County:** Emarti, Enkutoto, Emburkutia, Enkobilata, Ngoswani, Olkintare, Empurputia, Ololulung'a, Sogoo, Kimogoro market, Talek, Kirok, Oloogolin, Olesakwana, Chelemei, Emanyatta, Olchoro, Ntulele, Kiribwet, Olmeoshi, Olesakwana & Oleguruoni.

Lake Victoria Basin Ecosystem:

- **Kisii County:** Enchoro, Ramasha, Sosera, Kenyeny, Bogonta, Getengera, Gekonge, Ramasha, Enchoro & Ikorongo.
- **Homabay County:** Obarier beach, Simbi Nyahima, Chula, Winam, Kanjira, Ayub Okoko, Ochot Odon'g, Old town, Kendu Junction, Lwala, Oriang market, Awach, Gendia, Kogembo, Gumba, Konyango Jieri, Alego beach, Dera, Wang adonji, Karabondi, Kochia, Nyaola, Seka, Komollo, Dindi & Wange dongo.

Mt. Kilimanjaro (Amboseli) Ecosystem:

- **Kajiado County:** Meshenani Center, Enkiito, Naunoppir, Normayianat, Emuruai Loibor, Oldume, Empari, Oltiyani, Inchurra, Oltume, Olasuti, Kankere, E/Narok Oloshaiki & Murua Loibor.

The below table **covers overall output achievements for the last three months** using CHAT's two innovative strategies - backpacking & motor mobiles – all building on sustainability at the community level.

OUTCOME

Indicator	Target (Apr.-Jun. 2022)	Quarterly Results (Apr.-Jun. 2022)	Cumulative Results (Jan 2022 to June 2022)
Number of CORPs	0	0	45
Number of individuals reached with bcc information using CHAT's PHE approach integrating components of family planning, ecology, HIV/AIDS & COVID 19 awareness	23,163	29,685	58,711
Number of men accompanying their women to FP		8,251	17,079
Number of women who chose different FP contraception methods	18,550	20,341	40,112
Number of women choosing longer-term , 3 & 5 yrs. Implants & IUCD pregnancy protection methods		14,733	27,647
Number of women choosing short-term contraceptive methods daily & 3 months pregnancy protection (pills & the injectable, depo)		5,608	12,465
Number of women referred for ANC services – these include revisits.		302	729
Number of children immunised, these include revisits and referrals (follow-up referrals done by CORPs)		494	1,123

Indicator	Target (Apr.-Jun. 2022)	Quarterly Results (Apr.-Jun. 2022)	Cumulative Results (Jan 2022 to June 2022)
The number of patients who received essential basic curative treatment		247	2,850
Number of CORPs supervision & networking meetings held	1	1	1
Number of bacteriologically confirmed TB patients & under 5yrs. Households whose contacts were visited for contact tracing (<i>Laikipia & Isiolo counties</i>)	157	246	355

Expected outcomes

- Improved family planning/ reproductive health services thus strengthened economies that contributed to sustainable development by empowering women & girls to complete their education, join the paid labour force, and be more productive in their jobs, thus possibly earning higher incomes and increase savings and investments.
- Increased people's knowledge of family planning thus helped them to have the desired number of children, which, as a result, improves the health of mothers and contributes to the nation's social and economic development.
(As a consequence, the population size of the country has grown dramatically, but economic growth has not kept in parallel with it).
- Family planning interventions have helped individuals & families to build up coordination between the family members and economic resources. It also helped to build up the condition of income and expenditure and their proper utilisation. It helps to take care of mother and child.
- Increased number of girls completing their school
- Reduced maternal & child mortality rates
- Increased TB/HIV services uptake, providing quality care and prevention services for communities in the larger Laikipia & Isiolo counties with TB, Leprosy and Lung diseases.

Though the project realised significant deliverables, improving the country's priority indicators and contributing to intended Sustainable Development Goals, it was not achieved without substantial challenges (see below).

Monitoring & Evaluation (M&E) Activity

CHAT allocates 10% of its budget to undertake this imperative activity which:

- ensures transparency and accountability,
- fosters improvement in project performance by identifying respective gaps and offering direction for action points.
- Provides for data-driven decision-making such as enhancing effectiveness in allocating resources and creating the basis for learning.
- Improves and strengthens systematic management of the organisation, including helping the management team make informed technical & financial decisions

CHAT undertakes M&E exercises daily, monthly, and quarterly - and when deemed necessary - to ensure that the anticipated project deliverables are achieved in good time and desirably. The M&E activity informs of the project's outputs, outcomes & possible impact and implies the sustainability of the strategies and the effectiveness of the approaches used.

As a result, the findings of the M&E undertaking enable CHAT to make informed decisions and develop relevant plans for consistent and gradual improvement of the project's goals & objectives.

Within the period under review, the CHAT team conducted M&E activities within all ecosystems, and the following were the findings:

- 94.3% (19,182) of the 20,341 women who received family planning services during the quarter were first-time users resulting from the intensive door-to-door sensitisation undertaken by the CORPs in their respective communities.
- Out of the 29,685 people reached with behaviour change communication, 28% (8,251) were men who positively responded to the FP intervention, accompanying their wives to the facilities to receive services. This indicates participative male involvement in the FP discussions and decision-making and the effectiveness of CHAT's innovative PHE approach.
- The outcome showed that out of the total number of women sensitised, 95% (20,341) embraced different FP methods, with 72.4% (14,733) choosing and receiving long-term contraception methods (implants protecting for 3yrs and 5yrs). At the same time, the remaining 27.6% opted for short-term methods. This implies significant progress in the effectiveness of the FP messaging and thorough sensitisation by the CORPs.

- 96.5% (19,629) of the 20,341 women embracing different FP methods of their choice were from new communities identified by the CORPs (in liaison with other community leaders) as “needy” in terms of FP access. This shows progress in building a sustainability aspect within the communities and the responsiveness of local leadership structures in enhancing FP information and access in the communities.
- Between Q1 2022 & Q2 2022, the total ‘couple of years’ protection’ (CYP) has increased by 55.1% (213); -from 46,060 to 46,273 respectively.
- FP uptake in Q2 has increased from 19,771 to 20,341 (570), translating to a 50.71% increment. For the most part, the success is attributed to the CORPs using CHAT’s integrated innovative door-to-door Backpacking strategy, which has proven to be the most effective community-based strategy for FP service delivery.

Challenges

There are many challenges still out there – as indicated in previous quarterly reports; however, the following are the main challenges this quarter - detailed below:

- **Unwanted and mistimed pregnancies**, the teenage pregnancy and motherhood ‘official’ rate in Kenya stands at **18%**. This implies that about 1 in every five teenage girls between the ages of 15-19 years have either had a live birth or are pregnant with their first child. These girls did not want to have a child then (CHAT's experience is that this rate is higher). Married older women too experience mistimed pregnancies, especially those who have had children in close succession and unwanted pregnancies for those who do not want more children. These pregnancies are highly attributed to a lack of knowledge and access to contraception.
- **Overwhelming unmet needs for family planning-**. The current birth rate for Kenya in 2022 is **27.667** births per 1000 people. While it has reduced from 2021, this means that demand has gone up, thus an overwhelming need for FP. More support is needed from both governmental and non-governmental agencies to fulfil the need.
- **Unreliable chain supply system of FP commodities** unforeseen stock-outs or shortage of family planning supplies leads to dire consequences for women's health, including unintended pregnancies, death and disability related to complications of pregnancy and childbirth – and infanticides and abortions.
- **Illiteracy, social-cultural myths, and misconceptions** A mixture of biological and social misconceptions of people who use contraceptives end up with health problems, believing that contraceptives are dangerous to women’s health and contraceptives can harm your womb and more - this tends to create a barrier to people who lack the right information thus end up not using contraception. CHAT is working to dispel these to ensure informed and timely decision-making.

- **Continued rapid population growth** Family planning plays a pivotal role in population growth, poverty reduction, and human development. Lack of it leads to increased population growth and poorer health, especially among the poor. However, robust family planning services have a range of benefits, including maternal and infant survival, nutrition, educational attainment, the status of girls and women at home and in society, human immunodeficiency virus (HIV) prevention, and environmental conservation efforts.
- **Community apathy** and unresponsiveness to information delivered to them.
- **Ego** at all levels of society.

Case story

My Choice

**Not their real names*

"Stock-outs of FP commodities, especially long-term methods, not only affect our work but also affects the livelihoods of our FP clients", Lucy- CHAT's CORP based in Kyuso explained when asked what challenges she undergoes in the field. She gave an example of her client who refused to take an alternative method available at the facility, choosing to wait for the supply of her favourite contraception method.

*Nzangi, who Lucy had referred some years ago for FP services, was comfortable using the 5-year protection implant. When she returned to the facility for removal and insertion, she realised that three days earlier, the facility had run out of the 5-year and 3-year protection contraception methods. The nurse had advised her to alternatively use the 3-month depo, which was there as they await supplies from the county government, which they were expecting in a week. Cautious of possible side-effects of short-term methods, Nzangi opted to wait until her choice was made available.

"When I met her in the market, she was three months expectant, and it deeply touched my heart that the shortage had already affected her", stated Lucy bitterly as her client had become a victim of the situation. She would regret why the nurse hadn't informed her of the client's decision as she would have followed up with her and counselled her on why she should alternatively embrace an alternative method as they await supply. She was left with no choice but to advise the lady that if their methods of choice were not available, it would be wise to embrace alternatives available as the supply problems wouldn't take forever before they were addressed. Lucy would admit that she had learnt from Nzangi's instance that from now on, she would ensure that her clients understood to choose an alternative method for the short term to prevent unwanted pregnancies.

FOR MORE INFORMATION:

Meanwhile, for quick visual information, the following 4-minute video clip provides a CHAT Profile <https://youtu.be/K9nRTKcVoTE>

Also, for more understanding of the environments CHAT works in, go to CHAT's webpage, <http://www.chatafrica.org/where.html>, and take a glimpse at our short 'overview' video clips (maximum 2 minutes).

Instagram: <http://instagram.com/communitieshealthafricatrust/>

Facebook: <https://www.facebook.com/communitieshealthafrica/>

YouTube:

<https://www.youtube.com/channel/UCpDosuvs5gUqvAsM4Be7NAA/featured>

Photo Gallery



Photo 1 CHATs' CORP partner, Joseph, in the Mau Ecosystem during door-to-door sensitisation in Kalyet village.



Photo 2 CHAT CORP partner, Jackeline, in Kisii, referring Nyakerario, who is 24 yrs and a mother of 3. She is jobless and depends on her mostly absent partner. This small room is all she has to her name & it is rented.*



Photo 3 CHAT M&E Officer, Violet, handing over a flip chart to newly identified CORP, Sportman, in Leangata, Kalepo conservancy- Northern Rangelands Ecosystem.



Photo 4 Ongoing service provision during a motor mobile clinic in Mwingi, Tana River Ecosystem