

# WHO KENYA NEWSLETTER



**Image**

A young boy at the Kenya-Uganda-South Sudan border is among 5 million children vaccinated against polio in Kenya's recent campaigns.

*Page 09*



**World Health  
Organization**

**Kenya**



VISIT WHO.INT

# This Month

MARCH 2025 | VOL 16

## ii CONTENTS

### FORWARD

#### 02 Message from the WHO Kenya Representative

---

#### 03 DIGITAL HEALTH | NTDs

##### First Digital Health Campaign

Kenya digitizes data for the first time in a public health campaign, reaching 13 million children with NTD medicines.

#### 05 TOBACCO FREE FARMS

##### 8,500 Farmers Convert to Beans

WHO celebrates milestone as over 8,500 ex-tobacco farmers now transition to growing beans instead.

#### 09 POLIO

##### Polio Vaccination Campaign Reaches Over 5 Million Children

Kenya conducts four rounds of a polio vaccination campaign across 13 high-risk counties.

#### 13 SEXUAL REPRODUCTIVE HEALTH

##### Improving Access to Sexual & Reproductive Health Services

"I received a 5-year family planning method for free. Now, I can go back to school without the fear of another pregnancy."

#### 15 NEGLECTED TROPICAL DISEASES

##### Kenya on Track to Eliminate Lymphatic Filariasis by 2027

A three-drug mass distribution treatment strategy supports Kenya to decrease prevalence of LF.



#### 15 CANCER

##### Kenya Strengthens Cancer Screening Efforts

In October 2024, Kenya launches the second edition of the National Cancer Screening Guidelines

#### 16 DEAFNESS AND HEARING LOSS

##### New Report Highlights Kenya's Hearing Loss Burden

New WHO report reveals 0.9% of Kenya's population lives with disabling hearing loss

#### 16 HEALTH FINANCING

##### 1,000+ Participants Discuss SHA

Colombia, Brazil, Philippines, Indonesia and Ghana join talks on Kenya's new Social Health Insurance.

#### 17 NUTRITION

##### Launch of Joint Nutrition Programme in Kenya

A new initiative is launched to combat malnutrition by addressing food security, hygiene, safe water, health and education.

#### OTHER STORIES

#### 17 New Tools for Malaria Prevention

#### 18 Digital Health Summit

#### 18 The Big Immunisation Catch Up

#### 19 Gender Equity & Human Rights

#### 19 New Health Workforce Planning Tool

#### 20 Improving Health Workforce Distribution

---

#### 21 Thank you! From the WHO Kenya

#### 23 Acknowledgements



**We champion  
health and a better  
future for all.**



# Message from the WHO Kenya Representative

Dear Partners and Colleagues,

I am pleased to present the latest updates from WHO Kenya in our newsletter.

In December 2024, Kenya piloted its first digital health campaign, marking a significant milestone in health data management. During a five-day mass drug distribution for neglected tropical diseases, 4,250 community health promoters reached 13 million children across the Western, Nyanza, and Coastal regions. Among them, 110 community health promoters piloted digital data collection, replacing traditional handwritten records. (Page 3).

Over the past six months, Kenya vaccinated over 5 million children against polio in a WHO-supported campaign, following poliovirus detection in refugee camps (Kakuma, Dadaab), Nairobi sewage waste water, and a case near the Kenya-Ethiopia border, prompting an urgent regional response. (Page 9)

In six counties—Kajiado, Samburu, Laikipia, Siaya, Marsabit, and Tana River—WHO is strengthening sexual and reproductive health services by providing \$100,000 in health kits, training healthcare workers, setting up post-abortion care rooms in health facilities and more. (Page 13).

Other stories of interest include Kenya's progress toward eliminating lymphatic filariasis by 2027 (page 15), WHO's role in facilitating global discussions on Kenya's new Social Health Authority (page 16), and the launch of Kenya's new malaria policy and guidelines (page 19).

We hope you find these updates informative and insightful. Thank you for your continued support and collaboration as we work towards achieving health for all in Kenya.

Best regards,  
Dr. Abdourahmane Diallo



**“Through innovation and collaboration, Kenya is making significant strides toward universal health coverage, from digital health solutions to strengthening disease prevention and reproductive health.”**

- Dr. Abdourahmane Diallo



# Kenya Breaks New Ground: Digital Health Campaign Pilot



Read Full Article

“The ability to see live results allowed us to monitor progress during the campaign and respond immediately to challenges.”

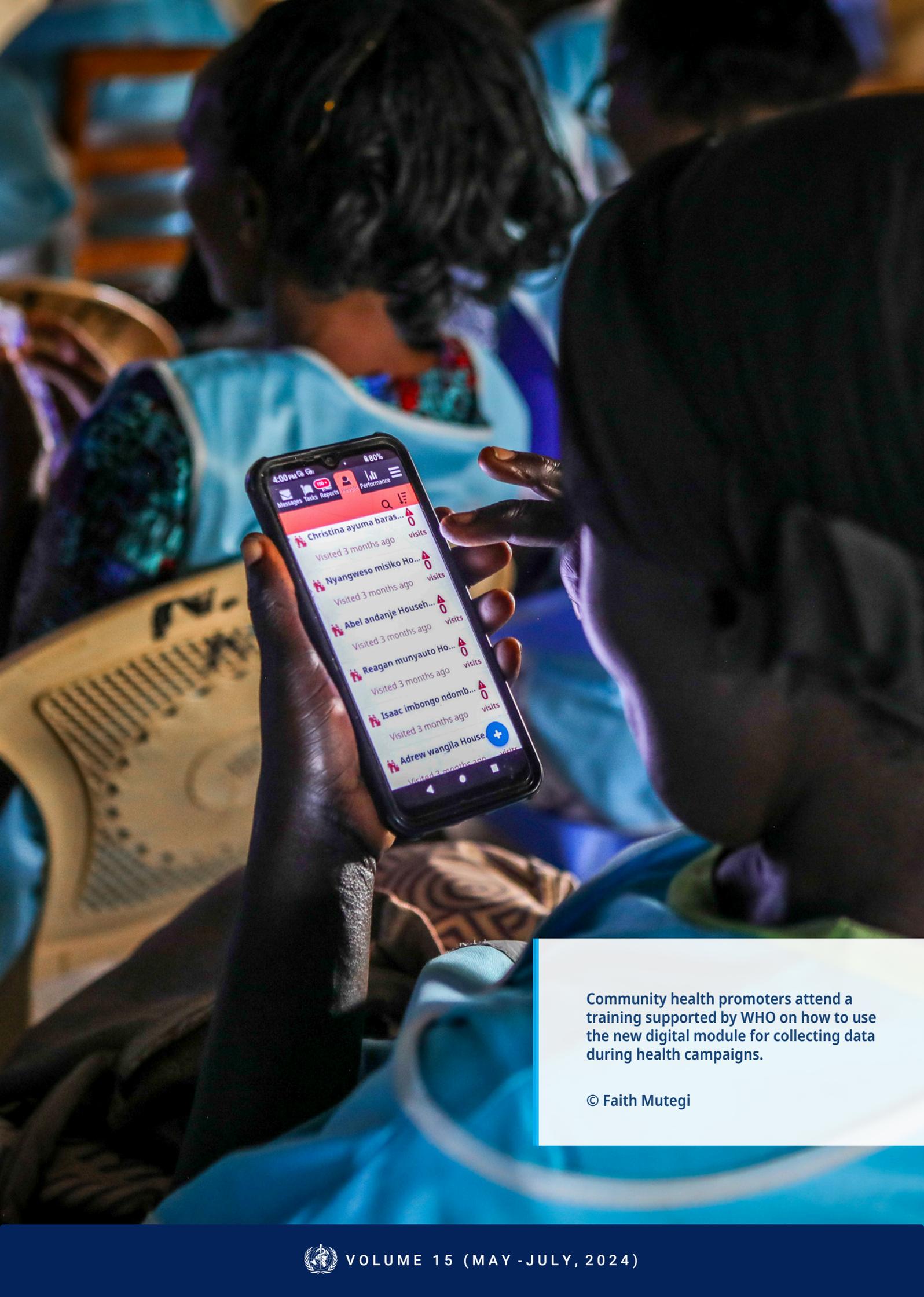
WHO, Kenya Country  
Digital Health

Eric Maira

**Kakamega, Kenya** - Margaret sits on a rock searching for signal as she enters data on the children she gave medicines to that day. She is **1 of 4,250 health workers** who spent 5-days in December 2024 visiting homes, churches, and community gatherings to ensure that **13 million children** across Kenya's Western, Nyanza, and Coastal regions received medicines for neglected tropical diseases.

While Margaret had participated in similar campaigns before, this was her first time using her mobile phone to record data. Traditionally, she would have relied on handwritten data collection—a slow process that requires manually filling out registers. On a national scale, this typically means counting millions of paper records to assess campaign progress and results.

Recognizing this limitation, a new WHO-supported initiative introduced a digital feature in a community health promoter app, allowing **110 community health promoters** in Kakamega County to record real-time campaign data on their phones. The impact of the pilot was immediate. Digital data submission allowed national-level teams to track daily progress in real time, enabling quicker responses to challenges and seamless data sharing. For health promoters like Margaret, the new system made work easier. Without the burden of carrying registers or worrying about transcription errors, they could **focus on reaching as many children as possible.**



Community health promoters attend a training supported by WHO on how to use the new digital module for collecting data during health campaigns.

© Faith Mutegi



# Over 8,500 Ex-Tobacco Farmers Now Growing Alternative Crops



**“I bought a bull in 2023 after dropping tobacco farming for the high-yielding beans, something I am really happy about,” said Bernard Imoh.**

Benard Imoh, a farmer from Otubokin, Busia, has been growing high-iron beans since 2022 after switching from tobacco farming. Imoh is one of over 8,500 farmers in Western Kenya who have switched from tobacco growing since 2021 when WHO and partners introduced the Tobacco Free Farms project.

Imoh, 56, says that he had grown tobacco for six years but was unable to count the benefits from it apart from feeding his family.

He says that besides buying a bull, he now has a stable income that enables him to pay his children's college fees. He is also able to provide food for his family daily unlike before.

“I don't regret abandoning tobacco for 'Nyota' beans. It is one decision that I have never regretted because I have seen success after success in my life and that of my family,”

Through the WHO led Tobacco Free Farms initiative, 5,615 acres of land in Kenya have been converted from tobacco farming to the cultivation of food crops amounting to 1,348,500 kilograms of Nyota beans harvested since 2021.

The initiative has not only boosted household incomes but also enhanced the health of individuals and communities, improved land sustainability, empowered women through financial independence, and increased school attendance among children.

Ex-tobacco farmer, Gerald Eroto of Ataba village in Busia observes that the growing beans have remained the cornerstone of his children's education. For the first time, he pays school fees with ease. “I pay fees using money from the high-yielding beans that I sometimes deliver to schools in exchange for school fees where my children learn. It has also enabled me to pay college fees for my son who is a student at a university in Embu,” he adds.

[Read Full Article](#)



### Media Engagement

Busia County tobacco farmers, featured on Citizen TV and Radio, pledge to transition to bean farming after a sensitization meeting with WHO and partners on the health and economic benefits of growing beans. Through media, the goal is to inspire more farmers from Busia county to transition to growing sustainable food crops.



### "Nyota" Beans

The cultivation of high-iron beans, known as 'Nyota' beans, is transforming agriculture in Busia County, boosting the local economy, enhancing food security, and combating malnutrition and anemia, particularly among women and children.



### Sensitisation Meeting

Farmers pictured while attending a sensitisation meeting at Ataba village in Busia County looking at posters which demonstrate highlight the negative health impacts of growing tobacco on the body.

Sensitisation meetings in Bungoma County **in Images****EX-TOBACCO FARMERS GERALD AND JANET**

Gerald Eroto with his wife Janet captured on their bean farm, Busia. Nyota beans have remained the cornerstone of their children's education, since for the first time, he pays school fees with ease.

**TOBACCO FARM - READY TO HARVEST**

Gerald Silas, a tobacco farmer from Apokor, Busia, discusses tobacco farming and the risks of nicotine poisoning from handling the leaves with WHO Kenya Representative Dr. Diallo.



**PESTICIDES**

Dr. Diallo holds a Tobacco Barn Thermometer, used to regulate the temperature of curing barns where workers face toxic fumes, respiratory issues, and other health risks.

**“NO MORE TOBACCO.”**

Joseph Imeli from Changara, Busia, stands outside of his old tobacco curing house which he no longer uses. He shares with WR Dr. Diallo his plans to repurpose it for mushroom cultivation.



# Polio Vaccination Drive Reaches 5.05 Million Children Across Kenya



## In the Turkana heat, Aregae Regetot carries a cool box of polio vaccines, reaching children along the Uganda-South Sudan-Kenya border.

She is one of many frontline health workers who walked several kilometers each day to ensure that children in remote and high-risk areas receive the necessary immunization to prevent the spread of poliovirus.

As a regional hub, Kenya provides safety and shelter to large refugee populations from across Sub-Saharan Africa. With frequent cross-border movement, communities remain at risk of disease transmission, making ongoing vaccination and disease surveillance efforts essential to prevent the spread of poliovirus and other health risks.

In 2024, confirmation of polioviruses through sampling of healthy children in Kakuma and Dadaab refugee camps, environmental testing of untreated sewage waste water in Nairobi and a healthy child in neighboring Ethiopia near the Kenya-Moyale-Ethiopia border, triggered an urgent regionalized outbreak response.

In a swift and strategic effort, Kenya launched four rounds of vaccination campaigns using the novel oral polio vaccine type 2 across 13 high-risk counties, reaching 5,054,673 children with the lifesaving vaccine. An additional 921,087 children are targeted for vaccination in Garissa, Wajir, Mandera, and Marsabit in April 2025.



## VACCINE CHECK

After vaccination, a child's finger is marked to confirm they have received the polio vaccine.

In Kakuma Refugee Camp, Abdiwahid Noor from WHO Kenya inspects a young girl's finger, ensuring she has been vaccinated.



**By reaching zero-dose children, we have closed critical immunization gaps and taken a major step toward eradication.**

CHARLES KORIR, WHO KENYA

Among them, 11,505 children had never received a polio vaccine before, making this campaign a crucial step in closing immunity gaps and preventing future outbreaks.

In Turkana's refugee camps of Kakuma and Kalobeyei and Garissa's refugee camps of Ifo, Dagahaley, and Hagadera 255,969 children were vaccinated, ensuring protection in vulnerable communities.

The children targeted were aged less than 10 years in Marsabit, Turkana, Busia, Bungoma, Trans Nzoia, and West Pokot, and less than 5 years in Nairobi, Kiambu, Kajiado, Machakos, Mandera, Wajir, and Garissa. The campaign left no stone unturned. In response to the Ethiopia- Moyale virus, a rapid round took place in December 2024 in



Marsabit County to quickly contain the spread of the virus. Kenya's strong disease surveillance system, including community reporting and environmental testing, helped detect the outbreak early, allowing for a swift response.

With neighbouring countries battling type 2 poliovirus outbreaks and frequent cross-border imports, Kenya is considering a nationwide polio immunization drive in 2025. However, this ambitious plan hinges on securing the necessary resources and vaccines. Kenya's fight against polio is relentless.

With every 2 drops of vaccine, the country moves closer to a polio-free future!



Community Health Care Workers in Laikipia **in Images****No Child Left Behind**

Mariam Noor vaccinates a young boy in Kakuma Refugee Camp, ensuring no child is left behind.

**Door Marking**

Margaret Osumdwa goes door-to-door in Kakuma marking each door with chalk to confirm that all children in the household have been vaccinated against polio.

**Community Gatherings**

Mariam Noor and Hussein Mohamed stand outside a madrasa in Kakuma Refugee Camp, where they vaccinated all the children attending the religious class.



### Nomadic Communities

Close to the South Sudanese border, Abdiwahid Noor from WHO Kenya inspects a mobile homestay to see if all children have been vaccinated.



### Transport in Remote Areas

A vaccination team navigates hard terrains to reach families in Northern Kenya. In such arid regions children can live over 20 km apart.



### #EndPolio

Lukega Beno, a Ugandan refugee and polio survivor, raises awareness during the vaccination campaign at Kakuma Refugee Camp.

# Giving Women Second Chances by Improving Access to Sexual and Reproductive Health Services

At just 20, Esther Wamuhu from Laikipia West is determined to rewrite her future. A few years ago, she had to put her education on hold after an unplanned teenage pregnancy. Now, she is ready to return to school, finish her secondary education, and pursue her dream of going to university.

But there was one major hurdle—access to affordable family planning.

*"I wanted a good family planning method, but I just couldn't afford it,"* Esther recalls. Then, one day, she heard an announcement on her local radio station about a free health outreach happening in her village. She didn't hesitate to go, and the visit turned out to be life-changing.

*"I received a five-year family planning method for free. Now, I can go back to school without the fear of another pregnancy,"* she says with relief.

For countless women like Esther, access to quality sexual and reproductive health services remains a challenge in Kenya—especially in informal settlements and far-flung arid regions where high rates of maternal mortality, teenage pregnancies and gender-based violence are common.

*"We bridge the gap by taking these services directly to the communities,"* explains Dr. Timothy Panga, Chief Officer for Health in Laikipia County. "Many women might never visit a health facility unless they are facing a critical condition, so outreach programs like these are essential."

Recognising the urgency of these needs, the World Health Organisation is making significant strides by providing sexual and reproductive health kits worth USD 100 000 to six priority counties —Kajiado, Samburu, Laikipia, Siaya, Marsabit, and Tana River. These kits contain essential supplies for family planning, post-miscarriage and post-abortion care, obstetric emergencies, and support for survivors of gender-based violence.

This initiative is rooted in a comprehensive 2024 needs assessment conducted by the WHO and Ministry of Health that identified critical gaps in training, essential sexual and reproductive health supplies, and community engagement. By strategically addressing these challenges, WHO Kenya is enabling more women and families to access life-saving reproductive health care services.

For instance, in Samburu, a pressing shortage of Oxytocin—a crucial medication for preventing postpartum hemorrhage—was swiftly resolved, ensuring timely and effective care. Additionally, the establishment of designated post-abortion care rooms in the county health facilities ensures women receive care in a safe and confidential environment with the highest standard of support with dignity and respect. As of February 2025, 6 post-abortion care rooms have been set up in the 6 counties which were equipped with essential supplies and medicines by the WHO.



[Read Full Article](#)





© WHO / Genna Print





## Kenya on Track to Eliminate Lymphatic Filariasis by 2027

 January

 Ministry of Health, WHO, Global Pharma, the END FUND & more.

Kenya is making remarkable progress in eliminating lymphatic filariasis, a painful disease that causes severe swelling of the limbs and other body parts, often leading to stigma and loss of income for those affected. The disease has long been a problem in Kenya's coastal areas, putting nearly 3.9 million people at risk.

Efforts to eliminate the disease began in 2002, but challenges stalled progress until 2018 when Kenya, with support from the WHO, introduced a more effective three-drug treatment. In two years, this approach reduced infection rates in Lamu from 0.5% to 0.2% and in Mombasa's Jomvu sub-county from 1.4% to 0.7%, surpassing WHO's targets for stopping mass drug distribution.

"Kenya took a bold step by introducing mass drug distributions and is now on track to eliminate lymphatic filariasis by 2027," said Dr Joyce Onsongo from WHO. Ongoing monitoring and community engagement remain key to success.

## Kenya Strengthens Cancer Screening Efforts

 October

 Ministry of Health, WHO

For many Kenyan women, a cancer diagnosis comes too late. But a new initiative aims to change that. In October 2024, Kenya's Ministry of Health launched the second edition of the National Cancer Screening Guidelines, developed with support from the WHO. These guidelines set standardized recommendations to improve early detection and treatment of major cancers.

At the same event in Bungoma County, Cabinet Secretary for Health, Dr. Deborah Barasa, introduced the Women's Integrated Cancer Services project, designed to enhance breast and cervical cancer screening across the country. Backed by the WHO and Roche, the initiative will first roll out in Nyandarua and Bungoma counties before expanding nationwide. Dr. Barasa stressed the urgency of early detection, urging women to prioritize screenings. Breast and cervical cancers remain leading causes of death in Kenya, but early screening and treatment can save lives.



## New Report Highlights Kenya's Hearing Loss Burden

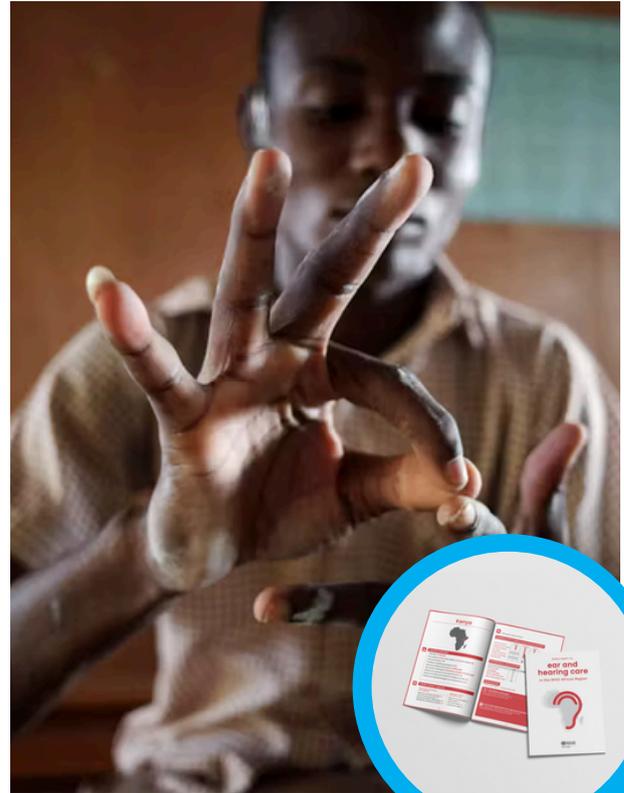
 October

 WHO

Hearing loss is a silent challenge affecting millions, yet it often goes unnoticed until it significantly impacts lives. In Kenya, 0.9% of the population lives with disabling hearing loss, with early childhood hearing loss affecting 3 in every 1,000 children. The leading causes include ototoxicity, meningitis, and low birth weight.

A new status report on ear and hearing care in the WHO African Region sheds light on the growing burden of hearing impairment. With projections indicating that 54 million people in Africa will have disabling hearing loss by 2030, the report underscores the urgent need for early detection, better treatment, and stronger health systems.

Despite the increasing demand for services, Kenya faces major challenges, including a shortage of specialists and limited facilities offering ear and hearing care. Strengthening policies, increasing trained professionals, and expanding access to services will be crucial in reducing the impact of hearing loss and improving lives across the country.



## 1,000+ Participants Discuss SHA

 January

 Kenya's Ministry of Health, WHO and more.

"The SHA Inconvenience!" "Doctors, civil servants announce nationwide protest over SHA crisis."

For months, Kenya's headlines have been filled with stories about SHA, the new Social Health Authority replacing the National Health Insurance Fund. This major shift is meant to ensure all Kenyans can access affordable healthcare, but many challenges have emerged. Currently, only 50% of Kenyans are registered under SHA, and many are struggling to afford the required payments. For the informal sector, contributions based on income estimates have raised concerns on fairness and accuracy.

To help address these challenges, WHO Kenya leveraged its global network, hosting five webinars with participants from Colombia, Brazil, the Philippines, Indonesia, and Ghana – countries that have implemented various approaches to social health insurance. With over 1,000 participants per session, Kenya addressed its challenges and gained valuable insights from global best practices. With SHA in the spotlight, Kenya is striving for a system that works for everyone.



## Launch of Joint Nutrition Programme in Kenya

December

Ministry of Health, WHO, UNICEF, WFP, FAO & more.

WHO, alongside other UN agencies, has partnered with the Kenyan government to launch a joint nutrition program under the United Nations Sustainable Development Cooperation Framework (UNSDCF). Running from 2023 to 2026, the \$52.6 million initiative aims to combat malnutrition by addressing food security, hygiene, safe water, health, and education.

WHO and its partners will support Kenya in scaling up high-impact, low-cost nutrition interventions, strengthening governance, and building resilience against climate-related shocks. UNICEF Kenya Representative Shaheen Nilofer emphasized the program's focus on tackling the root causes of malnutrition—stunting, wasting, and obesity—rather than just treating symptoms.

Principal Secretary Mary Muriuki highlighted Kenya's progress, including a decline in child stunting rates from 40% in 1993 to 18% in 2022. By prioritizing vulnerable populations, the program aims to ensure equitable access to essential nutrition services.

## New Tools for Malaria Prevention in Kenya

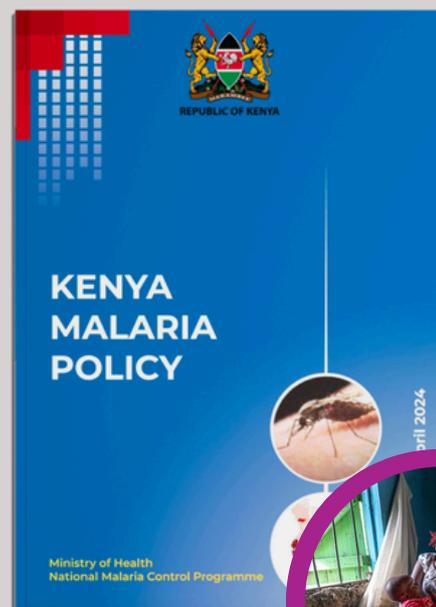
April

Kenya's Ministry of Health, WHO

Kenya has finalized the 2024 Kenya Malaria Policy and the 2023–2027 National Malaria Strategy, with WHO providing critical support in their development. These frameworks, set for launch in 2025, outline Kenya's approach to malaria prevention, treatment, and elimination.

With 70% of Kenya's population at risk, the strategy addresses emerging threats like drug resistance and the spread of *Anopheles stephensi*, a newly detected invasive mosquito species. It promotes new WHO-recommended dual active insecticide nets, equitable healthcare access, and innovations in malaria control within Kenya's devolved health system.

Kenya has made strides in malaria reduction, but challenges remain. The new policy aligns with universal health coverage goals and prioritizes equity, gender, and human rights, ensuring vulnerable populations are not left behind. As the country works toward implementation, the focus will now be on turning policy into action and delivering real impact on the ground.



## 300 participate in Open Digital Health Summit in Kenya



December



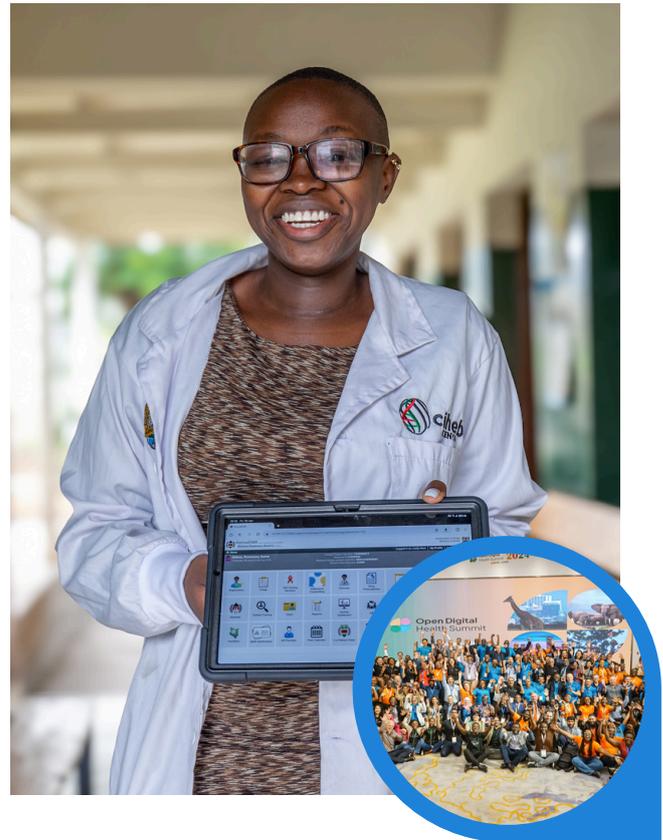
Kenya's Ministry of Health, WHO &amp; more.

Kenya hosted the inaugural Open Digital Health Summit, bringing together 300 participants from 50 countries to discuss digital health innovations and challenges.

Opening the summit, the Cabinet Secretary for Health emphasized the government's commitment to leveraging digital solutions to improve healthcare delivery. "Digital health is not just a tool; it is essential to transforming healthcare," she stated.

The Ministry of Health presented the Digital Health Strategy (2024-2027) and highlighted the Digital Health Act (2023), aimed at strengthening data governance and digital health adoption.

The WHO participated in the summit alongside other key stakeholders, engaging in discussions on interoperability, AI, and health data governance to support Kenya's digital health transformation.



## The Big Catch-Up: Kenya's Immunisation Recovery Plan



November



Kenya's Ministry of Health, WHO &amp; more.

Kenya has intensified efforts to close immunization gaps after identifying children aged 1 to 5 years who missed routine vaccinations since 2020.

Between November and December 2024, WHO supported county health facilities in assessing the reasons for missed vaccinations and identifying strategies to boost uptake. A key intervention was the development of a digital data collection tool, used by Ministry of Health staff and county health officers for real-time monitoring during supportive supervision visits.

Since December, all 47 counties have reported increased vaccine uptake, covering BCG, OPV, IPV, MR, Penta, HPV, yellow fever, malaria, and rotavirus vaccines. This initiative aligns with The Big Catch-Up, ensuring more children receive essential immunizations for long-term health protection.



## Integrating Gender, Equity & Human Rights in Kenya's Healthcare



October



Kenya's Ministry of Health and WHO

From October 1-4, 2024, WHO Kenya, in partnership with the Ministry of Health, trained health officials from 22 counties on making healthcare more fair, inclusive, and accessible.

The training focused on gender, equity and human rights, touching on topics such as gender-based violence, challenges women and marginalized groups face in accessing healthcare, and the importance of collecting gender-specific data to improve services. Participants also learned how to use WHO tools including Health Equity Assessment Tool and Innov8 framework to make health programs more equitable and effective.

As a result, health officials developed action plans to integrate these approaches into county and national health strategies. This initiative aims to strengthen Kenya's health system by addressing barriers to care and promoting equal access to health services.

## Kenya Hosts Launch of Health Workforce Planning Tool



October



Kenya's Ministry of Health, WHO Afro and WHO Kenya

As countries strive to build stronger health systems, Kenya took a major step forward by hosting the launch of the Health Labour Market Analysis Support Tool and a capacity-building workshop from October 7-11, 2024. Led by the WHO, the event brought together 50 international experts and marked a major milestone in supporting countries to assess their health workforce education capacity, supply, demand, and needs while integrating workforce planning into health labour market analysis.

Building on the WHO's 2021 Health Labour Market Analysis Guidebook and previous training of 75 experts from 25 African countries, the Support Tool introduces an innovative, epidemiology-based approach to estimating health worker needs based on disease burden, essential service packages, and professional standards of care. Speaking at the launch, WHO Representative in Kenya, Dr. Abdourahmane Diallo, emphasizing that the tool—already implemented in 12 countries—would be instrumental in shaping sustainable workforce strategies across Africa.



## Ensuring Equitable Health Workforce Distribution in Kenya



December

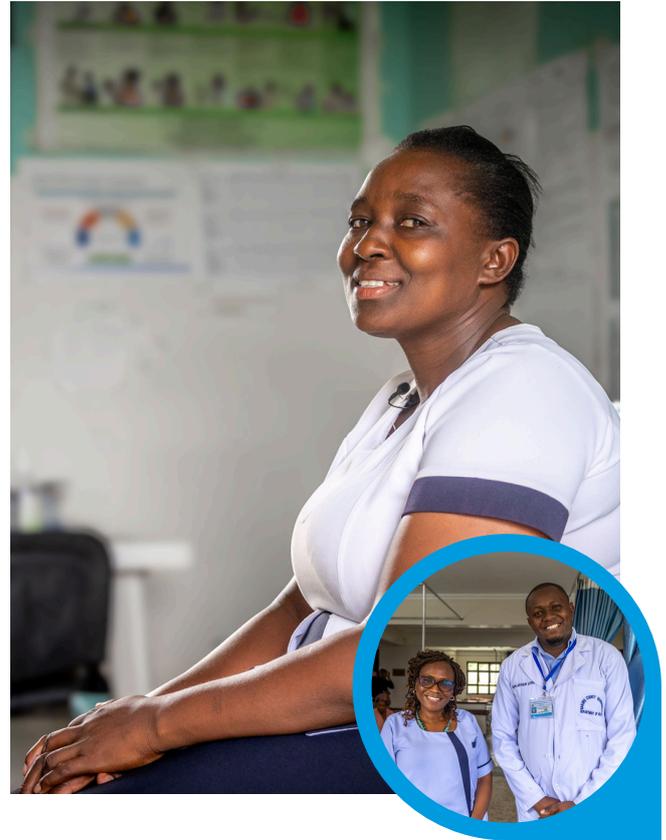


Kenya's Ministry of Health and WHO

How do we ensure hospitals have the right number of staff to meet patient needs? From December 2-4, 2024, WHO Kenya and the Ministry of Health trained key health sector stakeholders on the Workload Indicators of Staffing Needs (WISN) method—a tool that helps determine staffing levels based on actual workload.

Participants, including representatives from major health institutions, practiced using a digital WISN tool piloted at Kayole Level 4 and Mbagathi Hospitals. The training highlighted key workforce challenges, such as data inconsistencies and record misalignment, while equipping planners with data-driven solutions for equitable staffing distribution.

By strengthening workforce planning and supporting policy improvements, this initiative ensures better staffing decisions, enhances service delivery, and moves Kenya closer to achieving Universal Health Coverage through efficient resource allocation.



# Thank you! From the WHO Kenya Country Office Team

Our Kenya office is staffed by a diverse team committed to operational excellence, effective policy development and more. Through diligent work across various domains, our team strives to improve health throughout Kenya.

Captured below is Abdiwahid Noor, a member of the WHO emergency team, monitoring the reach of a polio vaccination campaign in Turkana County, Kenya, in November 2024. He is part of a team assessing immunization coverage in hard-to-reach communities along the Uganda-Kenya-South Sudan border.



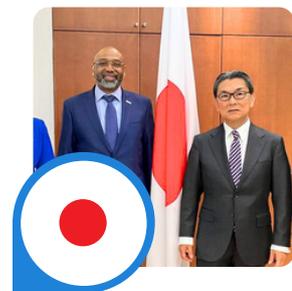


# Acknowledgements

## EXTERNAL PARTNERSHIPS

Your support and partnership are crucial to our mission in Kenya, enabling us to save lives and serve the vulnerable. We thank you for empowering our technical staff to deepen government support, accelerate progress towards Sustainable Development Goals and enable us to plan for longer term approaches to health systems strengthening. A big thank you to our key “thematic funders”. The funds our partners provide give a degree of flexibility that allows WHO to be more effective and efficient in allocating funds for our joint priorities. Your ongoing commitment not only drives our success but also inspires a ripple effect of health improvements across Kenya.

**Thank you!**





Susan, a mother of quadruplets, smiles as she breastfeeds one child. Encouraged by health workers supported by WHO, she practiced exclusive breastfeeding for six months, giving her children a strong foundation for good health.

© Genna Print



**World Health  
Organization**

**Kenya**

#### **EDITORIAL TEAM**

Genna Print  
George Ndahendekire  
Dr. Abdourahmane Diallo  
John Kismir  
Maryanne Gachari  
Evalyne Chagina



**World Health  
Organization**

---

Kenya

**Contact Us:**



afkeninfo@who.int



twitter.com/whokenya



+254 20 7620300  
+254 20 5120300  
+254 722-509 403 (Cell)



United Nations Complex in Gigiri  
Block-P Ground Floor  
P.O. Box 45335 – 00100, Nairobi