



Vincent Katana, a Afya Pwani Male Champion and his family outside their home in Kilifi County. Katana encourages men in the region to be involved in family planning. His wife is his biggest supporter.

KENYA

USAID AFYA PWANI

Afya Pwani is an integrated health project that works cohesively with all relevant government agencies, development and implementing partners, as well as key stakeholders at the community, sub-county and county levels to increase access to and utilization of quality HIV, Maternal, Neonatal and Child Health (MNCH), Reproductive Health/Family Planning (RH/FP), Water, Sanitation and Hygiene (WASH), Nutrition services as well as gender and Adolescent Girls, Youth and Young women (AGYW) services to communities living in the five coastal Counties of Kenya (Mombasa, Kilifi, Kwale, Taita Taveta and Lamu). The project is implemented through Pathfinder International-(Prime), Plan International and Palladium Group.

OUR WORK

Afya Pwani works to build equitable and sustainable health care services through continuous technical capacity enhancement of health facilities, local CSOs and communities for improved accountability, leadership, healthcare financing, collaboration and management of quality health care service delivery in the five supported counties. Going forward, the project will continue to invest in activities geared towards *aggressive scale up to saturation*, with a greater focus on reaching men, pregnant women and children as well as a special focus on youths particularly adolescent girls and young women through the Determined, Resilient, Empowered, AIDS-free, Mentored and Safe (DREAMS) package of interventions.

ACHIEVEMENTS

Since 2016, *Afya Pwani* has contributed the following results in line with the project goals:

Sub-purpose 1: Increased Access and Utilization of Quality HIV Services

- Supported provision of quality HTS services to 872,597 people.
- 18,468 people who tested positive for HIV
- Linked 15,553 people (84%) to treatment
- 48,074, people currently on treatment as at September 2018.
- Proportion of virally suppressed individuals in Y1-79% Y2-85%
- PMTCT testing uptake of 99% in Y1 99.7% in Y2-99.7% respectively
- PMTCT HAART uptake in Y1-96% Y2-98%
- Early Infant Diagnosis (EID) test under one year of age 3149 in Y1 3218 in FY2 respectively
- HIV Exposed Infant (HEI) Positivity 3.8% (Target is <5% for eMTCT)

Sub-purpose 2: Increased Access and Utilization of focused Maternal, New-born, and Child Health (MNCH), Family Planning (FP), Water, Sanitation and Hygiene (WASH), and Nutrition Services

- 77,849 pregnant women who accessed 1st ANC services
- 34,063 pregnant women who completed 4 ANC visits
- 53,169 pregnant accessed skilled delivery
- 61,846 infants fully immunized
- PNC within 2-3 days 56,557
- 198,678 Couple Years of Protection (CYP).
- 4763 households accessing safe drinking water in Kilifi County
- 19 villages certified Open Defecation Free (ODF)
- Supported provision of Vitamin A supplementation to 450,118 Children

Sub-purpose 3: Strengthened and Functional County Health Systems

- **Governance for leadership and strategic planning:** Established effective self-sustaining structures and mechanisms for planning, budgeting and stakeholder engagements at the departments of health in all the five targeted counties.
- **Human resources for Health:** Institutionalized development and use of HRH structures, instruments as well as mechanisms for effective and efficient HRH management. These include HRH plans, MoUs, HRH staffing gaps and HRH stakeholders' dialogue platforms.
- **Health products and commodity security:** Established and operationalized HPT oversight mechanisms to ensure effective HPT management as well as development of an android phone-based stock status reporting tracking tools for prompt decision making.
- **Strategic information:** Strengthened Electronic Medical Records (EMR) with improvement in HIV/AIDS client general management at county and facility levels and specifically ART drug/stock management, HIV testing data collection and treatment defaulter management and improvement in retention of HIV patients on care and treatment.
- **Quality improvement:** Progressive institutionalization of quality improvement into service delivery because of the establishment, mainstreaming and operationalization of Quality Improvement Teams (QITs) and Work Improvement Teams (WITs) within the health sector management structures.

BUDGET [\$ 53,643,416]

DURATION

2016 – 2021

ACTIVITY LOCATIONS

Kilifi, Kwale, Lamu, Mombasa, Taita Taveta Counties

IMPLEMENTING PARTNERS

[Pathfinder International](#)- Prime
Palladium Group
Plan International.

KEY PARTNERS

Ministry of Health, County Health Management Teams, Health Facilities and Community Based Organizations

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