ADOLESCENT HEALTH IN KENYA — AN OVERVIEW

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It was 6 men of Indostan, to learning much inclined, who went to see the elephant (though all of them were blind), that each by observation may satisfy his mind......
Vertical health programing

- HIV/AIDS
- ASRH
- Mental health and substance abuse
- NVIP
- School health policy and guidelines
- NCDs including diabetes
- TB
- Malaria
Key stakeholders

• GOK – MOH, MOE, MOGYA, MOL, NHIF
• Development and implementing partners
• County governments
• Civil society
• Religious institutions
• Private sector (corporates and private facilities)
Bringing it all together

• Package of care including but not limited to HIV and ASRH
• Health services
  • Accessibility (geographic and financial)
  • Equity and non discrimination
• Parental and community support
• Health information and communication
• Data -M&E&R
• Adolescent participation
• Human resources for health- HCWs, CHVs, teachers
And so these men of Indostan, disputed loud and long, each in his own opinion, exceeding stiff and strong. Though each was partly in the right, and all were in the wrong........
Adolescent Health - the way forward

- Better coordination of stakeholders through relevant TWGs
- Learn from best practices and successful programs e.g. IMCI
- Learn from local experiences - symposia (biennial AHS), conferences
- Set up AHMIS and conduct local research and surveys (KENPHIA, KDHS, AHS)
- Responsive adolescent health policies and guidelines in coordination with devolved county health systems
- Learn from other countries with successful Adolescent Health Programs
Thank you