

HENNET *Biannual* NEWSLETTER

"A healthy Kenyan Society"

November 2008



Introduction

HENNET member organizations have continued to demonstrate support and enthusiasm towards the achievement of HENNET's objectives by actively participating not only in HENNET forums, but also in Ministry of Public Health and Sanitation (MOPHS) and Ministry of Medical Services (MOMS) and other stakeholder meetings. HENNET membership has grown to 65 member organizations up from 57 reported in the last edition.

HENNET has continued to roll out its advocacy agenda for meaningful inclusion and participation of members in the Kenya Health Sector Wide Approaches (SWAs). Preliminary analysis of AOP 4 which excluded Rift Valley districts has shown an incredible increase in the number of CSOs participating in the process and contributing to the district resource envelop as compared to AOP 3. At the national level, the two Ministries of Health continued the preparation for the Health Sector Service Fund (HSSF) which is

envisaged to speedup disbursement of funds for implementation of health service delivery at the district level.

On the International Scene, HENNET participated in an IHP+ CSOs consultation forum in Geneva in May 2008, courtesy of WHO and World Bank as part of its advocacy agenda. The forum was part of the dialogue between CSO and the IHP+ partners in order to further strengthen the engagement of CSOs in the IHP+. HENNET shared its experiences and concerns from the engagement in IHP+ in Kenya so far. As an outcome of this meeting, HENNET will create a platform for further CSOs engagement on the IHP+ in Kenya.

The HENNET board and Steering Committee continue to provide stewardship in the implementation and monitoring of the strategy and convene on a quarterly and monthly basis respectively to guide this process.

Inside

Page 2

Progress on Key Initiatives

- a) CEOs breakfast Meeting
- b) Members' Quarterly Meetings

Page 3

Progress on HENNET TWGs

- i) Community Strategy NTWG (Back on track)
- ii) Best Practices TWG
- e) Health Sector Services Fund

Page 4

Calendar of upcoming events



Progress on Key Initiatives

a) CEOs breakfast Meeting

HENNET held its biannual CEOs breakfast meeting on May 22, 2008. About 35 CEOs participated in this meeting and were updated on progress and strategies towards the implementation of HENNET's work plan for the fiscal year 2007/8. Subsequently, the CEOs deliberated on key issues affecting CSOs in the health sector. These included meaningful participation of HENNET members in: implementation and monitoring of the Health Sector Service Fund (HSSF), Community Health Strategy, Annual Operations Plans and HENNET future engagement with the two Ministries of Health. HENNET has followed up on action points from this CEOs breakfast meeting. Among the outcomes, HENNET was invited to the HSSF workshop and the incorporation into the capacity building committee under the HSSF Technical Working Group.

b) Members' Quarterly Meetings

i) SWAPS

During the last AGM, it was noted that the health SWAPS presents both opportunities and challenges for CSOs. For HENNET members to meaningfully participate in the SWAPS process, HENNET held a one day workshop on June 12, 2008 on SWAPS to enable CSOs gain an in-depth understanding

of SWAPS, current status of SWAPS in the Country and feasible roles of CSOs in the process. The overall goal of the workshop was to strengthen the capacity of HENNET members to better position themselves and to strategize on how to participate in the SWAPS process and advocate for policy issues that affect them. The workshop outcome included key recommendations on how best HENNET members can engage in the SWAPS process. HENNET has facilitated the development of resource material from the workshop proceedings which has been disseminated to member CEOs and the workshop participants.

ii) Private Public Partnership (PPP)

The UN defines Public Private Partnerships as "voluntary and collaborative relationships between various parties both state and non state in which the participants agree to work together to achieve a common purpose and undertake specific tasks and to share risks". PPPs are recognized as a necessary means to effective and efficient healthcare delivery in any health system. PPPs are central to full realizations of the Millennium Development Goals (MDGs) as well as being integral to national economic development initiatives. In Kenya the Ministry of Planning is in the process of developing the PPP policy for Kenya and guidelines for its implementation.

PPPs achieve their objectives through several ways but particularly through:

- Ensuring sustainability of programs by enhancing the skills and capacities of local organizations and by increasing the public access to unique expertise and core competences of the private sector.
- Facilitating scale up of proven cost-effective interventions through private sector networks and associations.
- Expanding the reach of interventions by accessing target populations.
- Sharing program costs and promoting synergy in programs.

In 2007, the then Ministry of Health delegated the responsibility for initiating the development of the public private policy framework to HENNET. HENNET drafted a framework on PPP in health. The framework will further be developed into a PPP policy document by a taskforce led by Ministry of Medical Services and will eventually lead into a PPP policy document. HENNET is in dialogue with the MOMS to establish this taskforce which will engage a consultant to support the process. The taskforce will comprise major public and private players in the health sector.

For NGOs/FBOs to meaningfully participate there is need for HENNET members to be fully conversant with the PPP in Health.

It is with this foregoing that HENNET organized a one-day training for its members on PPPs in Health; concepts, principles; role of CSOs; experiences in Kenya and other Sub Saharan Africa countries and lessons learnt.

Fundamentally, PPP comprises participation of the public and the private sector geared towards a public goal and interests which gives rise to an added value in the Public sphere. It was noted that PPPH have been in existence in Kenya and now require formalisation with an emphasis on community involvement. CSOs are consequently mandated to empower communities to know their rights in PPP and their subsequent inclusion in the structure. HENNET will endeavour to champion this aspect at the National TWG on PPP once it is commissioned. HENNET is also in the process of developing a resource document on PPP for the members.





c) NGOs/FBOs contribution to the MOH AOP 4

Many HENNET members participated in the planning process at the district level and their activities have been reflected in AOP 4. HENNET is finalizing the report which analyses the CSOs participation in the AOP 4 process, however preliminary results show an increased CSO involvement in the process. In addition, based on lessons learnt from AOP 3 and AOP 4, HENNET is working with the two Ministries of Health to ensure the planning formats for AOP 5 are simple and easy to use. HENNET is also in dialogue with the two Ministries to strengthen the District Health Stakeholder Forums (DHSFs) as an avenue through which the AOP process can be better coordinated than at national level. HENNET is also planning to reach out to the CSOs reflected in the District Health Plans and are not HENNET formal members.

d) Progress on HENNET TWGs

i) Community Strategy NTWG (Back on track)

One of the recommendations from the CBHC workshop held in July 2007 was the formation of a National TWG to oversee the rolling out of the national community health strategy.

The NTWG was formed by the MOH and represents all stakeholders with interest in level 1 activities. HENNET is represented in the NTWG by The Aga Khan Foundation, Kenya Red Cross, World Vision, AMREF and Basic Needs - Kenya.

Although the TWG was formed as reported, its performance has been dismal. By September 2008 the TWG had only met once since inception. Through dialogue with the Ministry of Public Health and Sanitation, the division of Community Strategy called a NTWG meeting on October 7, 2008. As the Secretariat to the TWG, HENNET has been tasked with collecting existing monitoring tools from members and together with UNICEF and the MOPHS categorize them into family level indicators and those which are monitored at the health facilities. The TWG is projecting to have draft CBHMIS tools before the end of the year. HENNET also participated at a MOPHS brainstorming meeting in Naivasha aimed at developing a sustainability strategy for the CHWs. After two days of deliberations, the workshop resolved that the community strategy resource materials and training guidelines should be revised after an evaluation of ongoing projects. It was also recommended that the CHWs be reimbursed Kshs. 2,000 every month towards transport and lunch allowance while on duty. With this new arrangement there is need to engage a legal expert to frame the agreement in a way that the CHWs will not misconstrue the payment as an employment. The community strategy will be rolled out in all the provinces by January 2009 and will involve the development of a logo that distinctively identifies the CS. It was agreed that in districts where HENNET members have strong presence, they will take a lead in rolling out the strategy.

ii) Best Practices TWG

A consultant has been identified to facilitate the documentation of best practices amongst HENNET members for information sharing. The documentation will cover 3 key thematic areas which include; Community Based Health Interventions, Integrated Approaches to Health and Advocacy in Health.

e) Health Sector Services Fund

The Health Sector Services Fund was formed by a gazette notice of December 2007 with the aim of providing financial resources for medical supplies, rehabilitation and equipment of health facilities, support capacity building in management of health facilities and improve the quality of health care services in the health facilities amongst other.

According to the HSSF concept, health facilities will be funded directly hence facilitating better service delivery and management. At a recent stakeholders meeting it was agreed that the legal notice that established the HSSF be revised mainly because it was drafted when there was only one Ministry of Health and secondly the CSOs were excluded in the document right from the National level to the dispensary level. As a way forward, it was resolved that all facilities together with their committees be gazetted and that a joint coordination committee that includes CSO's be established.

f) HENNET Fundraising

From the onset, HENNET has enjoyed immense support from Cordaid and GTZ (2 years). However, due to change in strategic focus, Cordaid could no longer fund HENNET activities. GTZ's financial support also comes to an end in February 2009. Subsequently the Secretariat has embarked on fundraising from various donors. AED a program of USAID has agreed in principle to fund HENNET for the period March to September 2009 for both operational and activities costs. We are also happy to inform you that additional funding has been secured from WEMOS, a Dutch based organization. The funds will be used to carry out advocacy and capacity building initiatives for the next two fiscal years. Following the unstable financial situation experienced in the recent past, the Secretariat organized a one day discussion forum which included some board members, HENNET members and a consultant (Poverty Eradication Network) to brainstorm on the development of a fundraising strategy. The strategy would spell out activities over a period of time and the possible sources of funding. The findings will be shared with HENNET members as soon as it is ready.

Calendar of upcoming events

HENNET AGM

- February 17, 2009

CEOs Breakfast meeting

- November 25, 2008

Monthly/Quarterly events

- HENNET Board/Steering Committee meetings.
- Membership meetings (theme and Date TBD).

Key Activities in progress at HENNET

- National Scaling up of the mapping exercise of health care providers in Kenya
- Needs assessment on knowledge utilization of the Health and Human Rights training
- Training of TOTs for Health and Human Rights programming
- Development of a TOTs manual for Health Human Rights
- Advocacy needs assessment and strategy development
- Health and Poverty Portal (HaPP) workshop by Wemos

New CEO in HENNET

In August we said goodbye to Ruth Charo, our first HENNET Coordinator. In September we were happy to welcome Ruth Okowa as the CEO for HENNET.

Captured Moments



HENNET Secretariat, AMREF in Kenya Country Office (Host)

Wilson Airport, off Langata Road

P.O. Box 30125-00100, Nairobi

Phone: +254 20 699 4901/4900/4906

Fax: +254 20 606340

Email: hennet@amref.org

Website: www.hennet.or.ke