

# ORGANISATIONAL CAPACITY STATEMENT

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Marie Stopes Kenya



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# 2023 Impact

**858,172** couple years of protection (CYPs) delivered by MSK in 2023.

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**677,894** clients across Kenya visited Marie Stopes Service Deliver point and received a service in 2023.

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**25,767,280** GBP Direct healthcare costs saved by MSK in 2023.

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**418,462** Estimated number of unintended pregnancies averted.

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**191,240** Estimated number of unsafe abortions averted as a result of having accessed services provided by MSK.

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**1,280** Estimated number of maternal deaths averted by MSK services.

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**1,467,169** People in Kenya are using a family planning method provided by MSK (This includes contraceptives provided in past years)



# INTRODUCTION

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Marie Stopes Kenya (MSK), an affiliate of MSI Reproductive Choices, is registered in Kenya as a local Non-Governmental Organization (NGO) operating within the country. MSK has been providing access to high-quality and affordable Sexual and Reproductive Health (SRH) services to all people across Kenya since 1985. its bold 2030 strategy states: “By 2030, no abortion will be unsafe and everyone will have access to contraception”.

In Kenya, there is still a high rate of Maternal Mortality Rate (MMR) of 355 deaths per 100,000 live births and a total demand for family planning of 76% among married women aged 15-49 years and a modern contraceptive prevalence rate of 57%. We believe everyone, from whatever background, should be able to choose whether and when to have children and that services for post abortion care should always be accessible, affordable and safe.

MSK is proud to offer a service delivery approach that is free from stigma, judgement and discrimination, regardless of age, location, background, marital status or economic status. MSK provides all modern methods of contraception and Comprehensive Post-Abortion Care (CPAC), ante and post-natal care, sexual health counselling, gynaecological check-ups, cervical cancer screening ,STI management and Human Immunodeficiency Virus (HIV) prevention services such as testing and Pre-Exposure Prophylaxis (PrEp). With over 200 permanent staff, MSK delivers services in 41 counties. All management and coordination of activities is centralised in the country support office in Nairobi.

MSK's service delivery channels are adapted to fit the different contexts of each county. The goal is to maximise opportunities for building sustainable platforms that can provide lasting impact on the health outcomes of Kenyans. In 2023, 677,894 clients were reached through its service delivery points across the country.

MSI Reproductive Choices' strategy in Kenya was developed to ensure compliance with national strategies around the reach and procurement of Family Planning (FP) supplies from national supply chains and delivery systems. MSK works in collaboration and partnership with the Government of Kenya (GoK) Ministries, Agencies and Departments (MDA's) in Health Systems Strengthening (HSS), including; the Ministry of Health (MoH), the National Council for Population and Development (NCPD), Kenya Medical Supplies Authority (KEMSA), the Council of Governors (CoG) and the County Governments. MSK is a member of the National FP Advocacy Technical Working Group (TWG) led by NCPD, the National Adolescent Sexual Reproductive Health TWG, led by the MoH, the National Reproductive Maternal Newborn Child Adolescent Health (RMNCAH) TWG, also led by the MoH. MSK further works in partnership with various SRH implementing partners, including Clinton Health Access Initiative (CHAI), Reproductive and Maternal Health Consortium Kenya (RMHC-K), Rapid Response Taskforce (RRT), Health NGOs Network (HENNET), Triggerise, Kenya Healthcare Federation (KHF), Ipas Africa Alliance, Reproductive Health Network Kenya (RHN-K), among others.

# Who We Serve

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MSK is committed to leaving no one behind by serving the poorest, most underserved people. It strongly focuses on reaching adolescents, communities living in extreme poverty and other marginalised groups such as people with HIV, people with disability, survivors of gender-based violence and disaster-affected populations.

In Kenya, the unmet need of contraception is 14%.<sup>2</sup> This number goes to 22% amongst adolescents and is even higher at 35% amongst sexually active adolescents. MSK strives to fill gaps in provision and reach those with no alternative access to care. Specifically, its programmes are designed to meet the needs of adolescents whose long-term health and well-being are directly impacted by unmet need for contraception. MSK trains and supports staff to serve adolescents respectfully and without judgement.

MSK's adolescent strategy includes targeted community mobilization and provision of adolescent-friendly services. It supports adolescent and parent SRH awareness creation activities, creates partnerships with schools, engages on social media and expands service delivery, including community pop-up in pitched tents. Community-based events organised by community health volunteers and in collaboration with schools ensure sexually active girls pursuing their education can easily access services. In 2023, 43% of MSK's FP and CPAC services offered were to clients aged 25 or younger with 18% being under 20 years.



*A service provider offering SRH counselling at a PSS site.*



# What We Do



## Contraception

Choice is the cornerstone of our work. MSK aims to ensure universal access to affordable modern contraceptive services as well as the option to choose the most appropriate method that suits one's needs. It provides a full range of contraceptive methods, including short-term contraception, Long-Acting Reversible Contraception (LARCs) and permanent contraception. In 2023, MSK achieved a couples years of protection (CYP) of 858,172 through its family planning services. MSK also offered 2,382 Permanent family planning methods (Vasectomy and Bilateral Tubal Ligation)



## CPAC

The Constitution of Kenya (2010) grants women the right to access abortion services for a range of reasons, including to save the life of the mother in the case of rape and incest or to protect the health of the mother. However, a lack of clinical guidance on how to operationalize this has contributed to stigma, leading to fear from both women and healthcare providers to access and provide abortion services, even in cases that fall within the national regulatory framework. As of 2015, 49% of all pregnancies in Kenya were unintended, with 41% of them ending in abortion.<sup>3</sup>

MSK's CPAC services offer a continuum of care – ranging from managing complications from unsafe abortion to counselling clients. MSK also provides post-abortion family planning services to help clients prevent future unintended pregnancies thus reducing future morbidity and mortality from unsafe abortions.



## Other Services

MSK provides other diversified services to clients through its centres and maternity network. These include ante and postnatal care (ANC/ PNC), delivery, sexual health counselling, gynaecological check-ups, laboratory and pharmaceutical services, ultra-sounds, cervical cancer screenings and STI management and HIV prevention services such as testing and PrEP. These services aim at repositioning MSK as a woman's wellness provider, serving women from menstruation to menopause. They bring in more clients and allow cross-service referrals.

<sup>3</sup><https://www.guttmacher.org/regions/africa/kenya>

# How We Do It

## Six pillars of success



## PUBLIC SECTOR STRENGTHENING (PSS)

MSK, through its (mother company) MSI reproductive choices, has designed a 2030 strategy with three 'Access' pillars ('the how') that ensure we have the funding, partnerships and organisational transformation necessary to deliver not only our goals, but to eliminate systematic gaps.

### Pillar 01: Leave no one behind

MSI Reproductive Choices in Kenya is supporting game-changing shift in national ownership of SRH while filling gaps in provision to reach those with no alternative access to care. We strongly focus on reaching adolescents, those living in extreme poverty and marginalised communities with no effective access to public SRH services. We will achieve this primarily through outreach, public sector health system strengthening and single-service provider models. Increasing choices through provision of all FP methods including permanent methods in government owned facilities.



## OUTREACH

We reach marginalised communities in hard-to-reach areas via our high-quality, client-centred outreach services, ensuring that the proportion of MSK clients served meets or exceeds the national poverty level. In 2023, the outreach team provided services to women, girls and men in rural communities in 9 counties through 2 mobile clinical teams.

Using the infrastructure of public health centres, outreach teams increase contraceptive choices in these communities where the existing public and private health clinics struggle to meet the SRH needs of women and men. In 2023, the MSK outreach channel reached 39,298 clients. The outreach teams delivered a total of 147,801 CYPs. Of the clients served by them 29% were living in severe poverty, 25% were adopters and 13% were under the age of 20 years.

By working directly with Kenya's government through Health System Strengthening (HSS), MSK has increased the service provision in the public sector and improved sexual and reproductive health (SRH) and the general health of women, adolescents, and youth. HSS focuses on strengthening the public healthcare through the health system building blocks for the delivery of high quality comprehensive and non-judgemental Family Planning (FP) and Post Abortion Care (PAC) services.

Through Public Sector Strengthening (PSS), MSK partners with the government at a national, sub-national and facility level with the end goal of ensuring sustainability through total government ownership of SRH services.

MSK is working collaboratively with the MoH in 205 PSS sites to strengthen health systems in 23 countries. The HSS strategy supports access to high impact clients through delivery of quality modern contraceptive and PAC services in government facilities. This strategy is based on three pillars of scale and impact, quality and sustainability.

In 2023, the MSK PSS channel recorded 432,793 client visits and delivered a total of 470,634 CYPs.



## Pillar 02: Strengthen Private Sector Provision

We have significantly contributed to strengthening the private sector, ensuring SRH services and choice are widely available. Our free-paying centre and maternity network endeavour to be fully financially sustainable, operating as the quality “backbone” for diversified SRH service delivery. Key channels for this pillar are our own network of centres and, maternity hospitals and the private sector network.



### CENTRES & MATERNITIES

MSK has 14 Centres of Excellence and 1 maternity nursing homes which provides Comprehensive Emergency Obstetric and Newborn Care (CEmOC) services.

Through the key building blocks of service diversification, client foot fall marketing, accelerating health financing and ensuring a commercial mind set team, the centres have positioned themselves as a woman's wellness provider, serving women from menstruation to menopause.

The centres and maternities network offers quality comprehensive SRH services, including family planning, maternal and child health (ANC, delivery and PNC) and general outpatient services to men and women with special attention to adolescent-friendly services across nine counties.

MSK charges user fees to sustain operating costs and offers subsidised services to those in need.

In 2023, its Centres and Maternities Network delivered 30,880 CYPs with 64,071 clients. Additionally, 365 mothers delivered babies in our maternities.

### PRIVATE SECTOR NETWORK

Established in 2008, MSK's private sector provider network, 'AMUA', engages and unites otherwise fragmented private providers to deliver high quality SRH services. The network leverages accredited private healthcare providers to offer quality SRH services to low and middle-income clients in rural and peri-urban areas with high unmet need for FP through 100 social franchise facilities across 26 counties. Over the years, MSK has evolved its private sector support strategy to address wider provider and market constraints. Its work with private sector is aligned with government priorities such as Universal Health Coverage (UHC), quality assurance and intersection of public financing and

private sector service provision. MSK is also working with the private sector to strengthen data generation and reporting to ensure decision making based on real time data and accurate quantification of the private sector contribution to different health indicators.

Kenya's private sector network (for-profit and non-profit private sector) accounts for over 50% of all health facilities in the country.<sup>4</sup> We aim to leverage our longstanding experience and connections with the public and private sector to reduce rates of teenage pregnancy and unsafe abortion through increased access to high quality, integrated SRH services. In 2023, MSK's Private Sector Network reached 141,732 clients (of which 55% were adolescents) thus delivering a total of 188,703 CYPs.

## Pillar 03: Client Powered SRHR

We provide contraceptives and medical post-abortion care products via social marketing, making essential products available where women need them. The key channel for this pillar is social marketing for product sales. It has helped put control into the hands of women and girls and simultaneously raise standards for the sector.



### COMMERCIAL SALES

MSK is strengthening its own product sales, offering to expand access with an explicit focus on expanding product distribution, client care quality and creating sustainable programmes using commercial sales.

Currently, we have the following products on the catalogue; Lifeguard condoms, Avibella IUS, Misoclear, Mariprist, MS Jelly and Backup. Through the Sales Optimization, Reporting and Tracking (SORT) tool, MSK gets instant, high-quality, standardized data on sales force activities, sales and observations in the market. MSK has been able to push the agenda and think beyond pharmacies and positioning itself to sell to larger outlets such as private hospitals and distributors. Through this channel, it realized a CYP of 19,131.

### DEMAND CREATION AND BEHAVIOUR CHANGE COMMUNICATIONS



### Community-Based Mobilisers (CBM)

At MSK we use a wide range of communication channels to reach our client mass-media, digital, contact centre, and providers, to name a few.

<sup>4</sup>Kenya Master Health Facility List, 2020



While these are all critical to support client, individual and community behaviour change, CBMs have many unique selling points. Working with them is an opportunity to establish community-based champions for MSK, our services and the changes they can bring. MSK uses CBMs to raise awareness and generate demand for SRH services in urban and rural areas. In 2023, MSK worked with 28 CBMs for community mobilisation and provision of SRH information using various strategies including community talks and group meetings across all the service delivery channels in 2023; we rolled out Community Connect (Co'Co) and a mobile application designed to help community-based mobilisers CBMs to perform their work more effectively. CBMs made 12,157 referrals to the centres, 2,549 referrals to PSS and 9,772 referrals to outreach sites.



*A youth meet-up session in Siaya county*



## Contact Centre

The Contact Centre is integral to MSK activities, serving as a key enabler in reaching our potential goals and playing a pivotal role in our ability to support clients through the continuum of care.

By 2030, our aim is for every woman and girl to be only one contact away from a safe provider. We have a fully operational contact centre that helps us increase our reach and impact, connects clients with safe access points and ensures a continuum of care. It also supports improved client experience, driving word of mouth referrals to our service delivery points. Moreover, it is a rich source of actionable insights which we use to drive our operations and become even more efficient.

With the aim of ensuring that every client is a contact away from a safe service, we have a toll-free line:

**0800 720005** and a WhatsApp number **0709 819001** both of which are key in interacting with clients.

Contact centre staff are trained nurses and counsellors who provide information and advice on a range of SRH topics and referrals to MSK's service delivery points. Contact centre agents have been trained to talk about SRH with clients and refer them to MSK service delivery sites, following scripts in both English and Swahili adapted to the local context, based on MSI global guidance and standards. The contact centre also serves as a safety net in cases of post-procedure complication, with clients being able to phone for advice at any point before and after a service is delivered.





# Clinical Quality

MSK provides high-quality clinical services that keep our clients safe and exceeds their expectations. We strive to provide clinical services that are:

- Client-centred: Respectful and responsive to individual client needs, resulting in a positive client experience.
- Safe: Avoiding harm to clients from the care that is intended to help them.
- Effective: Delivering the intended outcome based on the current evidence based on scientific knowledge.
- Efficient: Avoiding waste of equipment, supplies, energy, and time.

We have five pillars in place to ensure clinical quality:

1. Policies and guidelines that ensure the delivery of standardized care that exceeds client expectations.
2. Clinical services in every MSK program are governed by the most recent version of each policy and guidelines as published by WHO.
3. MSK personnel are sufficient in number, competent and caring.
4. MSK clinical services are safe, effective, and delivered by Medical Deployment Team (MDT).
5. Products and supplies used in all MSK services keep client safety and experience at heart. They align with the minimum standards outlined in the MSI policy on product quality. Every service delivery point has a consistent supply of necessary drugs, commodities and equipment.

MSK aims for the “gold standard” in MSI’s quality indices, including the Clinical Quality Score (CQS), MSI Abortion Quality Index (MSAQI), and Client-Centred Care (CCC). Each service delivery team undergoes at least one internal clinical quality audit, and randomly selected facilities undergo external compliance checks by designated supervisors, with agreed action plans developed for quality improvement. All providers across channels undergo competency assessments, ensuring their competence in service provision. On-the-job training, post-training follow-ups, and facilitative supportive supervision are conducted to ensure safety standards are maintained.

Incidence management, product quality audit, client record audits, and capacity building based on training needs are also carried out across all channels to ensure continuous improvement in clinical quality.



*MSK staff at a quality meeting*

# Partnership & Advocacy

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MSK is dedicated to advocating for SRH services and creating an enabling environment for all individuals, leading to increased access to these services. A core strategy involves expanding access by influencing the operating environment and eliminating unnecessary barriers to SRH services. This includes advocating for policies and regulations that support SRHR-friendly legal and policy environments.

MSK also advocates for increased access to contraception for all and for task sharing to remove restrictions on which services can be provided by different cadres of health workers, aligning with WHO's guidance. Our work also includes advocating for increased recognition and prioritization of reproductive health issues, including specific budget lines for SRH, securing government funding decisions, revising and updating national policies, guidelines and implementation plans to align with international standards and best practices.

A key focus of MSK is to build partnerships that enhance advocacy efforts and service delivery. By collaborating with various stakeholders such as government agencies, NGOs, and community-based organizations, MSK is able to broaden its impact and reach to more individuals in need of SRH services.

MSK actively participates in the SRH sector in Kenya by collaborating with various Technical Working Groups (TWGs) and coalitions, including the National FP Advocacy TWG, the National Adolescent SRH TWG, the National RMNCAH TWG, County-level FP TWGs among others. MSK also collaborates with coalitions like the Kenya Health Federation (KHF), Health NGOs Network (HENNET) and the RMHC-K to advocate for improved legal, policy, and regulatory frameworks on SRHR. Additionally, MSK is a member of the National Order Management Team (NOMT), which addresses the shortage of FP commodities by planning, timely ordering and managing FP commodities from the Kenya Medical Supplies Authority (KEMSA) to all county governments. Through these partnerships and advocacy efforts, MSK continues to play a significant role in advancing SRH rights and access in Kenya. MSK also engages with decision-makers both at the national and county levels, including members of parliament and County Health Management Teams (CHMT).

In 2023, Marie Stopes Kenya (MSK) achieved advocacy wins that significantly impacted sexual and reproductive health (SRH) in Kenya including:

1. **Big 5 Clinical Handbook:** MSK collaborated with the Ministry of Health (MoH) to develop a Big 5 Clinical handbook on the prevention and management of the big five causes of maternal morbidity and mortality in Kenya.
2. **Combi-pack Guidelines:** MSK played a crucial role in the development of the national guideline on the combination of mifepristone and misoprostol. The combi-pack was included in the Maternal and Neonatal Health - Kenya Essential Medicine List.
3. **Self-care guidelines:** MSK advocated for the development and signing of self-care guidelines by the MoH. These guidelines provide guidance to healthcare providers and other stakeholders in reproductive health.
4. **UHC Laws:** MSK contributed to the development of laws related to Universal Health Coverage (UHC), including Primary Health Care (PHC), Social Health Insurance, Facility Financing, and Digital Health. These laws aim to improve access to quality healthcare services for all Kenyans, including SRH services.



*MSK Country Director Dr. Oracha presenting a gift to H.E. Gladys Wanga, Governor Homa bay county.*



*MSK Country Director Dr. Oracha at a national stakeholder event.*



*MSK's policy engagement with members of parliament.*





**REPRODUCTIVE  
CHOICES**

## **CONTACT INFORMATION**



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