

Women's Lives Matter

Launch of Unsafe Abortion in Kenya Report

An estimated 465,000 abortions took place in Kenya in 2012, virtually all of them clandestine and unsafe procedures, and most resulting from unintended pregnancies. According to a report launched in August by APHRC through the Population Dynamics and Reproductive Health program and the Ministry of Health, 70 percent of women seeking health care as a result of unsafe abortion procedures reported they had not used any form of contraception prior to becoming pregnant, illustrating a serious lack of family planning access and education services.

The report, titled Incidence and Complications of Unsafe Abortion in Kenya and which was launched at the Hilton Hotel found that nearly 120,000 women sought treatment for complications arising from

unsafe abortions, and three-quarters needed treatment for moderate or severe complications, including high fever, sepsis, shock, or organ failure. Young women suffered disproportionately, of those women seeking post-abortion care, more than half were aged 25 or younger.

"It is clear from the evidence that improving women's access to affordable and effective family planning and contraception is key to preventing unintended pregnancy and unsafe abortion," explained the Director of Medical Services, Dr. Francis Kimani who presided over the launch.

The Ministry of Health underlined its desire to help reduce medical problems and fatalities from unsafe abortions and work within the provisions of the law to help women seeking abortion care as well as implement policies that help to reduce unwanted pregnancies.

Unsafe Abortion Statistics



Key Findings of a National Study

Incidence and Complications of Unsafe Abortions in Kenya

465,000 induced abortions occurred in 2012

120,000 women received care for complications in health facilities ("post-abortion care")

IN THIS ISSUE



P3 APHRC at the Annual Science Journalists Congress

P4 Salma Musa: Going Places

P5 Reducing the Impact of Urbanization on Education Provision

P8 The Fading Fad of Flying Toilets

Plus

- In support of Breastfeeding Mothers
- Working to Reduce Unintended Pregnancy in Kenya
- Calendar of Events
- Staff Updates

NEWS

The study found that the women who sought post abortion care cut across the social-economic spectrum and came from very diverse backgrounds. For example, the report found that 64 percent of the women who sought post abortion care were either married or were in a long term relationship. 90 percent of the women who sought post abortion care also identified themselves as Christians.

The report received an overwhelming reception from the media with all major media houses running the report as the lead news. Coverage in the form of breakfast show discussions; interviews; news and feature stories continued for days after the launch across local and international media houses. APHRC's researchers took the lead, conducting interviews for radio, television and print mediums to explain the findings of the report and the recommendations it made. The report was also downloaded 3,000 times from our website.

Among the key recommendations the study made included the need to address the lack of access to family planning services by making contraceptives accessible; conducting community based activities to dispel harmful myths about contraceptives and to sensitize the public about the dangers of unsafe abortion.

Speaking during a television interview with the South African Broadcasting Corporation, Dr. Chimaraoke Izugbara, a lead researcher for the study and the head of the Population Dynamics and Reproductive Health program at APHRC pointed out that on the basis of the findings of the study, at least 70 percent of the unsafe abortions would not have taken place had the women had access to family planning services.

"This report sheds light on the serious problem of unsafe abortion in Kenya and proposes some solutions that can ultimately save women's lives, said Dr. Chimaraoke "Finally, we know how many women are suffering and we can do something to address this issue."

Other recommendations made by the study included interventions to address the unique needs of young women who were found to be particularly affected by unsafe abortion and adoption of modern methods of post abortion care.

APHRC's senior researcher Dr. Elizabeth Kimani summed it neatly in an interview on the Voice of America radio where she pointed out that people have unintended pregnancies first and then follow that up with an unsafe abortion.

"If we can address unintended pregnancies," said Dr. Kimani, "We can then avoid the need for unsafe abortions, and thus save more lives."



Experts from various organizations lead a panel discussion. (From left), Paul Kuria (National Gender and Equality Commission), Dr. Isaac Mwanzo (Medical Practitioners and Dentists Board), Dr. Joachim Osur (Ipas), Dr. Simon Mueke (Ministry of Health) and Dr. Harriet Birungi (Population Council)



Guests follow proceedings of the report launch at the Hilton Hotel, Nairobi.



Shukri Mohamed (Research Officer, APHRC) makes a presentation during the launch of the report

APHRC at the Annual Science Journalists' Congress

In September, APHRC's Policy Engagement and Communication division took part in the annual Media for Science, Health and Agriculture Association (MESHA) congress that took place at the Kenya Medical Research Institute (KEMRI) campus in Mbagathi, Nairobi.

The congress brought together over 100 science and health journalists from East Africa for a three-day session of oral presentations, panel discussions and video presentations. Our Policy Engagement and Communications team was there because engaging journalists, more so those who report on science and health issue is at the core of what we do.

In a country where science reporting, really, all kind of reporting, gets eclipsed by political news, it is important that science journalists get more and more of their stories out there. This can only be done through developing timely, well researched and engaging stories. In this, APHRC can

play a major role in helping journalists get science stories right by providing them with the evidence, and also working with them to get background research for their stories, interviews and verification mechanisms.

MESHA itself was founded in late 2005 with a view of helping science journalists improve their reporting and to help them get more of their stories out. At the core of their mission is the idea that better science reporting would help create a better society and would improve people's lives. MESHA cuts across media houses and various mediums including radio, television and print mediums.

The congress kicked off with an opening speech from the director of public health Dr. Shahnaz Sharif and soon after, a presentation from Dr. David Gikungu, the assistant director of meteorology services.

Our key highlight at the congress came on the second day when our

Communications Manager Ruthpearl Ngánga made a presentation on 'Barriers to effective evidence-based journalism'. In it, she highlighted the tendency of science journalists to use jargon and industry-speak which put off readers; and the lack of data and statistics that weaken their stories. Ruthpearl challenged them to focus on research first and the researchers second and to also see the bigger issues that they were addressing.

Her presentation triggered a lively debate in the room with journalists arguing that it was researchers who were to blame for confusing, sometimes misleading evidence. They also asked researchers to try and package scientific evidence in a way that was media-friendly and that could be easily understood by journalists.

The three-day congress helped raise APHRC's profile within the world of science and health journalists and further reinforces our work with the media to engage the public with our research evidence.

PROGRAM UPDATE

Kenya's NCD Stakeholders Launch Knowledge Sharing Network

The Kenyan Ministry of Health officially launched the Non-Communicable Disease-Knowledge Sharing Network (NCD-KSN) at a breakfast event held at the Hilton Hotel in Nairobi on August 20, 2013. Nearly 40 NCD stakeholders from varying backgrounds in Kenya participated including Dr. Zipporah Kittony, the Vice Chair of the Senate Health Committee, two Ministry of Health Heads of Division, Dr. Samuel Waihenya – NCD Division and Dr. Ken Maina – Communicable Disease Division (formerly of NCD Division).

The NCD-Knowledge Sharing Network presented the official web-based portal (www.NCDInfo.com), that provides one-stop

access to all available information on NCDs and also, through strategic activities such as policy dialogues and production of evidence-based briefs, facilitates interaction between research institutions, policymakers, the media and other key stakeholders.

The breakfast meeting validated the advocacy priorities outlined in the strategy and acknowledged the tremendous efforts to encourage cross-pollination of ideas and information on NCDs. It also provided an opportunity for interested participants to subscribe into the network and include their research in the web-portal.

Going places

‘I want to Make People’s Lives Better’ says Salma Musa

Salma Musa works at APHRC as a data entry supervisor, a role that sees her supervise APHRC’s data entry work. She is currently pursuing a degree in Development Studies at Mt. Kenya University.



What does a typical day at APHRC look like?

On a day to day basis, I supervise about 10 data entry clerks, monitoring how data from the field in form of questionnaires and other tools is entered into the system. I also ensure that the data entry clerks keep me informed on any challenges that they face while entering data and I try and resolve these challenges

What would you say you are passionate about and how has your career journey been so far?

I ventured into research because I wanted to work with communities and understand the challenges they face. I am passionate about global development and I think it is important for people to try and improve the lives of other people in their communities. My career has taken me on an interesting and exciting journey. Prior to joining APHRC, I worked in many interesting organizations such as the Population Council, the then National Coordinating Agency for Population and Development (NCAPD); now National Council for Population and Development (NCPD) and African Medical and Research Foundation (AMREF).

Working at APHRC has helped me develop my professional skills immensely. I have also really grown intellectually as this is an organization that encourages staff to further their careers by learning and developing new skills.

I have personally benefited from APHRC’s Higher Education Program, initiated by the APHRC-HDSS (Health and Demographic Surveillance System) field and data unit staff with support from the Executive Director, Dr. Alex Ezeh. The program aims to ensure that all field and data entry staff who benefit from the annual bonus are able to advance their education by undertaking their diploma or undergraduate studies. After submitting my application to the selecting committee, I was awarded the scholarship on merit and this has enabled me to further my education.

I have completed my Diploma in Community Development and Social Work, and I am now pursuing a Bachelor’s degree in Development Studies at Mt Kenya University.



“..hard work, focus and staying in tune with change are the most important things in one’s career progression.”



What keeps you going?

My supervisor Boniface inspires me immensely; he always listens to different opinions and is open to suggestions. This has encouraged me to grow and step out of my comfort zone. In addition, his managerial style is very professional and that makes the working environment quite pleasant. I also happen to be a very confident and strong-willed person who wants to be the very best. I am driven by excellence and I want to advance in both my career and personal life. After completing my Bachelor's degree, I want to pursue a Master's degree in Sociology. My work at APHRC contributes to my goal by granting me new opportunities and experiences.

What is the greatest challenge you have faced at work and how did you overcome it?

Technology can sometimes let one down! I remember one incident when we experienced challenges with the computer program managing the Health and Demographic Surveillance System; some forms failed to save and the data had to be re-keyed in addition to new data from the subsequent round of data collection. We had to hire additional data entry clerks who worked over the Christmas holidays to ensure the work was completed on time.

Tell us about the greatest career lesson learned at APHRC?

One of the biggest lessons that I have learnt here is the value of hard work and being able to stay dynamic in your profession. It is easy

to be left behind as technology changes and it is important that one remains at the top of their game. Working at APHRC has taught me that hard work, focus and staying in tune with change are the most important things in one's career progression.

Where do you see yourself 10 years from now?

I want to be an experienced PhD researcher investigating issues affecting women and girls in both rural and urban-poor settings. I am particularly interested in reproductive health issues and child mortality. My desire is to see my research contribute to the improvement of the lives of these communities and reduce suffering.

What general advice can you share with our readers?

I wish I knew that you can never wait for the "right time" to do something in your life. The right time is 'now' for anything I desire in life.

Life is not a straight line; it's full of ups and downs; and for one to succeed, you must persevere and be very resilient. It has been a tough journey for me; juggling family, work and school; but I can say that I have stood strong and my hard work is yielding fruit. I'm not there yet, but I am getting closer to my dream of being an experienced researcher with each passing day.

Reducing the Impact of Rapid Urbanization on Education Provision

Launch of the Book 'Urbanization and Education in East Africa'

APHRC's Education Research Program launched the book 'Urbanization and Education in East Africa' in a glitzy ceremony at Kenyatta University's Business Center in September. The book is a scientific anthology that brought together contributions from researchers, scholars and other experts on the rapid rate of urbanization in East African cities and the impact that it wrought on provision of education services.

Prof. JB. Kungu, Deputy Vice Chancellor Kenyatta University, presides over the launch of the book 'Urbanization and Education in East Africa.' Looking on are the book's editors, Dr. Moses W. Ngware (center) and Prof. Moses Oketch (right).



NEWS

During the launch that was attended by senior academics, government officials and education experts, the researchers pointed out worrying trends such a steady decline in the quality of education offered in urban informal areas compared to what is offered in the formal areas in all five East African countries. If unchecked, they said, it would have a negative impact on the development of the respective countries.

“Although Rwanda, Burundi, Uganda, Tanzania and Kenya have different policy environments, we are seeing the urban poor in all these five countries struggling with the same issues around education; access to universal education and the quality of education offered.” said Dr. Moses Ngware, head of the Education Research Program and one of the editors of the book. Some of the reasons why the urban poor in the region struggle to access universal education include inadequate numbers of public schools and the high opportunity costs of schooling.

Dr. Ngware pointed out that the five countries have an almost identical subsidy system to give poor students access to tertiary education and wondered why a similar system could not be used to give students from poor urban households access to basic education.

Rapid urban growth is a common feature in all East African countries and this uncontrolled growth has led to the rise of urban informal settlements, or slums as they are more commonly known, in the cities. These slums create challenges to policy makers when planning for provision of housing, schools and other basic amenities.

In a speech read on her behalf by the deputy Vice Chancellor of Kenyatta University Prof. JB. Kungu, the Vice Chancellor of

Kenyatta University Professor Olive Mugenda outlined the role that universities such as Kenyatta University and research organizations such as APHRC could play in availing scientific evidence to policy makers for policy formulation.

Professor Mugenda pointed out that Kenyatta University had pioneered education training in Kenya and thus remained committed to helping raise the quality of education in the region.

Also speaking at the same launch, the executive director of APHRC Dr. Alex Ezeh emphasized the need for policy makers to use scientific evidence when formulating policy, something he said would lead to better policies and hence a higher quality of life for people living in the region and Africa as a whole.

The book studied urbanization trends in the five East African countries and the impact it was having on provision of education. The urban population of African countries is expected to reach 1.2 billion people by 2050, up from the current 414 million people.

The book made a series of recommendations on how governments can tackle these challenges of access and quality of education under their respective universal education programs. One such recommendation was for East African governments to use low cost, non-governmental schools in urban slums to extend the reach of universal primary education to urban slum dwellers. Previous studies by the Education Research Program have shown that nearly 60 percent of children in urban slum areas attend low cost, non-governmental schools instead of the free public schools.

The book was compiled and edited by Professor Moses Oketch and Dr. Moses Ngware working through the Education Research Program of APHRC.

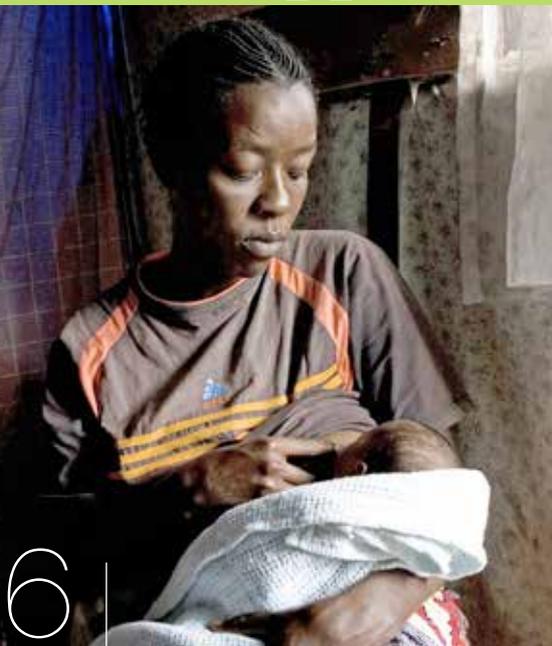
OPINION

In Support of Breastfeeding Mothers

Activities of the World Breastfeeding Week, 2013

Frederick Wekesah, Research Officer
Milka Njeri, Research Assistant

The World Breastfeeding Week (WBW) is a unifying breastfeeding promotion activity that is celebrated annually. It serves as a platform to unify groups within the breastfeeding movement while creating linkages with other issue groups (civil organizations) outside the movement. It is celebrated between the 1st and the 7th of August in many countries; while other countries have adapted other dates in the year to maximize the week's impact. It also highlights the benefits of breastfeeding to both mothers and babies. The goal of the WBW is to “stimulate efforts among all breastfeeding advocates, governments and relevant agencies to generate public awareness and support for breastfeeding”. The activity has its origins back in 1992 and has grown to encompass over 170 countries today.



This year, the theme for the WBW was: 'BREASTFEEDING SUPPORT: CLOSE TO MOTHERS'. It highlighted the important role played by breastfeeding support for mothers from those close to them including the family members and the community at large. Evidence has shown that lack of support from those close to the mother often translates to poor breastfeeding practices, hence the emphasis on continued day-to-day support for the breastfeeding mother within her home and community.

In Kenya, there were a number of activities at both the national and county levels, all aimed at creating public awareness on the importance of optimal breastfeeding practices to the country at large.

At the national level, the former Division of Nutrition at the Ministry of Health with support from USAID/MCHIP, launched the WBW at a media breakfast at the Panafric Hotel with keynote speeches from the cabinet Secretary, Ministry of Health. A number of presentations on some of projects and programs that are happening around the country in the promotion of breastfeeding were also made. This was followed by a walk into the central business district to create public awareness on the World Breastfeeding Week and inform the public on how they could be involved. On the fringes of the awareness campaign, officers from the Division of Nutrition visited retailers of baby foods to determine the extent to which they were adhering to the Breast Milk Substitutes Regulation and Control policy. This policy was made with the intention of supporting and promoting breastfeeding as an ideal food for the healthy growth and development of infants. Other activities included the distribution and dissemination of informational materials including banners, brochures, flyers and factsheets containing messages that encourage breastfeeding support to the public.

Across the country, WBW activities were coordinated by County Nutrition Officers based at their respective counties. Some of the activities conducted at the health facilities included medical education sessions (CMEs) to sensitize the health care workers on the existing maternal, infant and young child nutrition (MIYCN) policy; peer



Dr. Elizabeth Kimani, Associate Research Scientist at APHRC, speaks on the importance of breastfeeding at PAMOJA FM in Nairobi

counseling; health talks by community health workers to sensitize community members on the breastfeeding policy and recommendations; and focus group discussions to consult with the community members on how best to improve their breastfeeding practices. APHRC actively participated in this global activity. Through its researchers working on projects in the 'MIYCN' focus area, the team, led by lead researcher Dr. Elizabeth Kimani contributed to a newsletter published by the Division of Nutrition for the WBW. The article highlighted statistics on breastfeeding practices in Nairobi slums where an intervention that targets expectant women to promote optimal maternal, infant and young child nutrition practices is being implemented. The team also conducted media interviews with a couple of TV and radio shows in mainstream media houses including the Kenya Broadcasting Corporation (KBC), Kenya Television Network (KTN) and a community FM station in Kibera. The team also wrote blogs on topical issues in support of the WBW activities. These efforts were aimed at supporting the breastfeeding agenda and highlighting the challenges and opportunities that exist in the promotion of initiation and sustenance of exclusive breastfeeding; and breastfeeding beyond

two years. APHRC participated in other activities at district level. One such activity in Mathare slums included a conversation around how to support mothers to breastfeed their babies, and the roles that different members of the society could play in this noble cause. Focus group discussions were held with members of the community to understand the challenges and barriers to optimal breastfeeding and how best mothers can be supported to breastfeed their children as recommended.

By any standard, this year's WBW was considered successful as portrayed by the level of effort that went into mobilizing the public for its involvement and high level of creativity in drumming up support for the cause.



The Fading Fad of 'Flying Toilets'

Slum Upgrading Program Seeks to Improve Health in Urban Slums

Dr. Blessing Mberu, Research Scientist

Patricia Elung'ata, Research Officer



Youth walk on a littered alley in Korogocho slum, Nairobi.



A 'Fresh Life' toilet in Viwandani slum, Nairobi.

For decades, the improper human waste disposal method known as 'flying toilets' has been a predominant feature of urban slums. Answering a 'call of nature' meant using a plastic bag which was then tied up and hurled out to land wherever it would; be it on a walkway, roof top or someone's head!

Today, the 'flying toilet' phenomenon is fading. Government ministries, development agencies and members of the civil society have invested considerably in initiatives to improve sanitation in urban slums. One such initiative is the Kenya Slum Upgrading Program (KENSUP), a joint venture between the Ministry of Housing and UN-HABITAT that has constructed public toilets in various slums in Kenya since 2003. When the project began, UN-HABITAT estimated that 60 to 80 percent of Kenya's urban population living in slums lacked access to solid waste disposal and sewerage facilities.

"Walking along the railway line that crosses the Viwandani slum, an adolescent girl, without prompting, observed the disappearing 'flying toilet' phenomenon in the area. "Not so long ago, it was impossible to walk along this railway line without coming across numerous packets of human feces wrapped in polythene bags thrown from these houses (pointing to slum households on both sides of the rail line) onto the railway line". "We have come a long way ..."

In those days, poor waste disposal contaminated drinking water and food supplies and thus significantly contributed to water-borne diseases in urban slums. Research showed that the death rate of children below the age of five years in slum settlements was four times more than in the rest of the population, with diarrhea being among the leading causes of death. Unsuspecting children playing outside their homes were exposed to fecal matter leading to diseases such as dysentery.

APHRC's Verbal Autopsy data that sought to establish causes of death over a ten year period (2003 -2011) showed that 8.34 percent of all deaths recorded in Korogocho and Viwandani were linked to diarrheal diseases. There has been a significant decline in diarrheal related deaths in the last ten years; dropping from 12.7 percent in 2003 to 10.6 percent in 2011, with the biggest drop to 4.6 percent recorded in 2008.

Improved Health Indicators?

The improvement in sanitation facilities over the last six years may explain the reduction in deaths resulting from diarrhea between 2003 and 2011.

APHRC researchers have found a positive link between child health and the changing state of human waste disposal facilities available to residents living in Viwandani between 2006 and 2012. Data from APHRC's Nairobi Urban Health and Demographic Surveillance System (NUHDSS) showed consistent improvement in sanitation facilities relating to human waste disposal.

- The use of shared flush toilets increased from 1.8 percent of households in 2006 to 4.3 percent in 2012.
- The use of flush trench toilets has increased from 17.7 percent to 44.6 percent of households over the same period.
- Households that use shared traditional pit toilets decreased from 52.6 percent in 2006 to 31.1 percent in 2012.
- There has been an 86 percent decline in households who have no facility and have to use 'flying toilets', the bush or the field; from 6,763 households in 2006 to 923 households in 2012.
- Improvement in the state of toilet facilities available to children was also observed. Over the period 2006-2012, the proportion of households where children below the age of five years used shared traditional pit toilets declined from 8.6 percent in 2006 to 0.9 percent in 2012. Similarly, the proportion of households in which children below the age of five years had no toilet facility declined from 2.6 percent in 2006 to 0.7 percent in 2012.

Progress Calls for Review and Renewed Initiatives

The notable improvements in sanitation in urban slums have been driven by concerted efforts between slum dwellers, government and organizations like APHRC that work in these settlements. However, we would caution against any early celebration over the imminent disappearance of 'flying toilets'. Large sections of the slums remain without ablution blocks. In addition, the cost of using available facilities amidst ubiquitous poverty may also confine a significant number of residents to poor waste disposal practices when the need arises. This is more so for children whose waste is disposed in all manner of ways including the flying toilet alternative, instead of incurring a cost. Sustained efforts are needed to maintain the momentum of change, win the sanitation war and ultimately reduce the illness and deaths linked to poor sanitation among the most vulnerable segment of urban populations.

“Stepping Up” Policy and Programs

Working to Reduce Unintended Pregnancy in Kenya

Over 40 percent of pregnancies in Kenya are unintended, either mistimed or unwanted. The high number of unplanned pregnancies stems largely from an inability to access family planning services; something that affects one in four married women in Kenya. The national modern contraceptive prevalence rate is estimated at 39 percent.

Unintended pregnancies have significant implications for the health and wellbeing of women and children. Approximately 14 percent of pregnancies in Kenya end in abortion. Most of these abortions are performed by unskilled persons, often in conditions that do not meet minimal medical standards, or are not followed with appropriate post-abortion care. These unsafe abortions result in the deaths of many women every year.

These findings are an early sample of some of the critical information being released in the new Kenya Country Profile Report, which is a result of nearly two years of research work that APHRC has done as part of the Strengthening Evidence for Programming on Unintended Pregnancy (STEP UP) consortium who are working together on family planning issues, with funding support from DFID. Apart from APHRC, the consortium includes the Population Council Kenya office and Partners in Population Development (PPD).

The new Country Profile pulls together a wealth of information on policy, trends and data on unintended pregnancy and related subjects in Kenya. APHRC hopes that this information will be used both for policy and programmatic improvements in Kenya, and also across the region. At this phase in the process, the report is being shared with critical stakeholders

who can not only validate the contents of the report, but perhaps more importantly, ensure that the report is relevant and useful to the range of stakeholders working on SRH issues in Kenya and throughout sub-Saharan Africa.

To that end, APHRC and STEP UP held a Policy Validation Workshop from September 12 through to September 14, 2013 in Naivasha, Kenya to convene the key policy and programmatic people who would be able to provide that background information; and to help with the development of the report's policy recommendations. The recommendations should provide a specific way forward for key stakeholders involved in improving sexual and reproductive health services for adolescents living in the poor urban areas of Nairobi, Kenya.

The workshop participants included key reproductive health representatives from the Ministry of Health, donors (DFID), service delivery organizations (Marie Stopes, FHOK), partners (Population Council) and policy organizations (like PPD). One key policy organization, The National Council for Population and Development (NCPD) was unfortunately unable to attend.

Day one of the workshop included an overview of each of the draft Country Profile Report chapters led by Caroline Kabiru and Joyce Mumah of APHRC; and Harriet Birungi of the Population Council as well as a detailed discussion of the research work. The discussion allowed the group to identify gaps in the current report and to begin to develop ideas for both policy recommendations and future research needs.

Day two of the workshop began by reviewing the policy conceptual ideas from the day before, and adding to the discussion

OPINION

with changes or additions that are needed for the Country Profile research sections. Following the recap, Ian Askew of the Population Council also presented relevant research from the London School of Tropical Medicine on unmet need for family planning in Kenya and then APHRC policy staff member, Jessica Brinton presented briefly on the policy recommendation development process and provided policy recommendation examples.

In breakout groups, the experts then worked to develop the policy recommendations based on their discussions. After the break-out group discussions, the plenary then discussed each recommendation in detail, contributing new information and valuable criticisms about each idea. This was extremely useful as major issues and concerns came up about several of the recommendations which were then revised. In the end, the group was able to agree upon 9 policy/programmatic recommendations.

All participants left Naivasha with a sense of accomplishment and a better understanding of how to develop policy recommendations that are targeted and time bound. The final policy recommendations will be unveiled in Chapter 6 of the Country Profile Report, to be released in the coming months. Chapter 6 will provide valuable contextual information, and history surrounding the problem each recommendation is trying to fix as well as a detailed explanation of our policy recommendations and who are the key stakeholders who will be able to take each recommendation forward. As a way forward, the participants at the validation meeting also developed a set of action items for each of the recommendation items that will be available as a tool for advocacy, policymaking, and implementation in the future as they work to see these recommendations actualized.

PROGRAM UPDATE

The Education Team Meets the Kenya Institute of Curriculum Development

August 30, 2013 – Research findings from the study on *Quality and Access to Education in Urban Informal Settlements in Kenya* were presented to the Kenya Institute of Curriculum Development (formerly Kenya Institute of Education) by our Education Research Program team. 15 senior education officers from

KICD's Basic Education department; and the Monitoring and Evaluation department attended the meeting. The presentation by Dr. Moses Ngware, Head of the Education Research Program, was followed by useful discussions on teacher and pupil subject-knowledge and a suggestion to also consider future studies on digital curriculum and after-school tuition. The research findings shall be officially launched in November 2013.

KICD is a state corporation mandated with curriculum development for all levels of education below university. The Institute also develops print and electronic curriculum support materials; initiates and conducts curriculum-based research; and conducting in-service and orientation programs for curriculum implementers.

2013 Calendar of Events: October - December

Date	Event
October 28-31, 2013	International Inter-Ministerial Conference on "South-South Cooperation in the Post-ICPD and MDGs", Beijing, China
October 28-31, 2013	12th INDEPTH Scientific Conference, University of Witwatersrand, in Johannesburg, South Africa
October 29, 2013	CARTA meeting with INDEPTH, Johannesburg, South Africa
November 1, 2013	ERP team building, Fish Eagle, Naivasha
November 5-7, 2013	Training workshop on Leading and Managing Research & Development, Hilton Hotel
November 14-15, 2013	SSU Team building, Maanzoni Lodge
November 18-20, 2013	MIYCN PEC policy engagement training, Lenana House Conference Centre
November 18-23, 2013	Conference and workshop on "Health Research Methods and Evidence Based Medicine, St. John's Research Institute in Bangalore, India

Date	Event
November 18-December 12, 2013	The second Joint Advanced Seminar for CARTA cohort 2, Johannesburg, South Africa
November 18-20, 2013	The Summit of the Global Agenda organized by the World Economic Forum, Abu Dhabi, United Arab Emirates
November 21-22, 2013	UWB/PEC and Aging team building, Lake Elementaita
November 26, 2013	Launch of the "Quality and Access to Education in Urban Informal Settlements in Kenya Report", Hilton Hotel
November 27-29, 2013	CARTA Cohort 3 supervisor's workshop, Johannesburg, South Africa
December 13, 2013	Conference on Training Programs and Labor Markets in Africa organized by Institute for the Study of Labor (IZA), the Department for International Development (DFID) and African Economic Research Consortium (AERC), Nairobi, Kenya

List of Publications

Peer-reviewed Journal Articles

1. **Aboderin, I.** (2013). African gerontology and geriatrics: strides and crucial next steps. *Journal of Nutrition, Health and Ageing*, 17: Suppl. 1, 5
2. **Abuya, B.A., Oketch, M., Ngware, M., Mutisya, M., & Musyoka, P.K.** (2013). Experiences of parents with the Reading to Learn (RtL) approach: A randomized control trial initiative to improve literacy and numeracy in Kenya and Uganda. *Education 3-13*, DOI:10.1080/03004279.2013.829859
3. **Bakibinga, P., Vinje, H. F., & Mittelmark, M.** (2013). The role of religion in the work lives and coping strategies of Ugandan nurses. *Journal of Religion and Health*. doi: 10.1007/s10943-013-9728-8
4. Di Cesare, M., Khang, Y., Asaria, P., Blakely, T., Cowan, M.J., Farzadfar, F., Guerrero, R., Ikeda, N., **Kyobutungi, C.** Msyamboza, K.P., Oum, S., Lynch, J.W., Marmot, M.G., & Ezzati, M. on behalf of the Lancet NCD Action. (2013). Group Inequalities in non-communicable diseases: challenges and opportunities for action. *The Lancet*. 381(9866), 585 – 97
5. Fotso, J.C., Speizer, I., **Mukiira, C.**, Kizito, P., & Lumumba, V. (2013). Closing the poor-rich gap in contraceptive use in urban Kenya: are family planning programs increasingly reaching the urban poor? *Journal for Equity in Health* 2013, 12:71
6. Hirve, S., Gómez-Olivé, X., **Oti, S.**, Debpuur, C., Juvekar, S., Tollman, S., Blomstedt, Y., Wall, S., Ng, N. (2013). Use of anchoring vignettes to evaluate health reporting behavior amongst adults aged 50 years and above in Africa and Asia - testing assumptions. *Global Health Action*, 2013, 6: 21064. <http://dx.doi.org/10.3402/gha.v6i0.21064>
7. **Izugbara, C., & Egesa, C.** (2013). The management of unwanted pregnancy among women in Nairobi, Kenya. *International Journal of Sexual Health*. doi:10.1080/19317611.2013.831965
8. McMahon, W.W. & **Oketch, M.** (2013). Education's effects on individual's life chances and development: an overview. *British Journal of Educational Studies*, 61(1), 79-107
9. Onsomu, E.O., DaKysha Moore, D., **Abuya, B.A.**, Valentine, P., & Duren-Winfield, V. (2013). Importance of the Media in Scaling-Up HIV Testing in Kenya. *Sage Open* 2013:3(1-12). DOI: 10.1177/2158244013497721
10. Onsomu, E.O., Kimani, J.K., **Abuya, B. A.**, Arif, A.A., Moore, D., Duren-Winfield, V., & Harwell, G. (2013). Delaying sexual debut as a strategy for reducing HIV epidemic in Kenya. *African Journal of Reproductive Health*, 17(2), 46-57.

11. **Sidze, E.M.** and Kuate Defo, B. (2013). Influences of family structure experiences on the risk of premarital sexual initiation during adolescence in Cameroon. *Advances in Life Course Research*, 18(4), 270-287.
12. **Sidze, E.M.**, & Kuate Defo, B. (2013). Effects of parenting practices on sexual risk-taking among young people in Cameroon. *BMC Public Health*, 13: 616. doi:10.1186/1471-2458-13-616
13. **Van de Vijver, S., Akinyi, H, Oti, S.O.**, Olajide, A., Agyemang, C., **Aboderin, I., & Kyobutungi, C.** (2013). Status report on hypertension in Africa: consultative review for the 6th Session of the African Union Conference of Ministers of Health on NCD's. *The Pan African Medical Journal*. 2013;16:38 doi: 10.11604/pamj.2013.16.38.3100.

Research Reports

1. **Izugbara, C., Kimani, E., Mutua, M., Mohamed, S., Ziraba, A., Egesa, C.**, Gebreselassie, H., Levandowski, B.A., Singh, S., Bankole, A., & Moore, A.M. (2013). Incidence and complications of unsafe abortion in Kenya: key findings of a national study. Nairobi, Kenya: African Population and Health Research Center, Ministry of Health, Kenya, Ipas and Guttmacher Institute.
2. **Beguy, D., Mumah, J., Wawire, S., Muindi, K., Gottschalk, L., & Kabiru, CW.** (In press). Status report on the sexual and reproductive health of adolescents living in urban slums in Kenya.

Policy Briefs

1. Women's lives matter: preventing unsafe abortion in Kenya. *Key findings of a national study: Incidence and complications of unsafe abortion in Kenya.* (Nairobi, Kenya: African Population and Health Research Center, Ministry of Health, Kenya, Ipas, and Guttmacher Institute). August 2013.

Fact Sheets

1. Women's lives matter: preventing unsafe abortion in Kenya. *Key findings of a national study: Incidence and complications of unsafe abortion in Kenya.* (Nairobi, Kenya: African Population and Health Research Center, Ministry of Health, Kenya, Ipas, and Guttmacher Institute). August 2013.

Combating Heart Diseases in Urban Slums

Cardiovascular disease (CVD) is a leading cause of death in the world, claiming more lives than HIV, TB and malaria combined. In Africa, cardiovascular disease claims 1.3 million lives per year. To combat CVD in urban slums, APHRC is undertaking implementation research aimed at reducing the risk among residents within a continuum of care framework. These components include mass screening of all adults older than 35 years, CVD risk assessment, individual counseling for those with low risk, referral for those with moderate and high risk, and care and treatment at a specially established clinic, with incentives to enhance adherence to the care regime.



The cardiovascular disease (CVD) intervention leverages on the Community Health Strategy by ensuring that community health workers (CHWs) are the grass-root ambassadors in the fight against cardiovascular diseases in urban slums. Training them is the first step towards ensuring they are well prepared to engage community members.



Once trained, the CHWs embark on awareness creation on the importance of a healthy lifestyle characterized by a healthy diet; avoiding tobacco use and excessive alcohol consumption, exercising regularly and avoiding stress. CHWs are at the fore of this campaign as they engage with community members at household level.



Those found at risk of hypertension or diabetes are referred to the health clinic for further diagnosis and treatment. APHRC, in liaison with the Kenya Ministry of Health and Nairobi County Government has set up a clinic in Korogocho slum where those found at risk can get further treatment and advice.



Follow-up support groups hosted at the clinic help encourage beneficiaries to adhere to undertaking regular checkups and taking their medicine as prescribed.

Staff Updates

New Staff

Eric Mbugua - Web and Graphics Designer
Gerald Mahuro - Research Officer
Joseph Chogo - Database Programmer
Martin Njaga - Communications Manager
Mercy Machiya - CARTA Program Manager
Milka Nyariro - Research Officer
Rose Njeri - Communications Officer

Departures

Acqueline Atieno Onyango
 Gwendolyn Morgan