



Strengthening Capacity of Health Professionals to Address Kenya’s Rising Burden of Cardiometabolic Diseases

Executive Summary

Limited faculty capacity, outdated curricula, inadequate research infrastructure, and weak knowledge translation mechanisms are undermining the ability of Kenya’s medical training colleges (MTCs) to prepare health professionals to manage the growing burden of cardiometabolic diseases (CMDs). This challenge threatens the country’s capacity to deliver effective, evidence-based care, especially in underserved areas.

The Partnership for Education of Health Professionals (PEP) program seeks to address these gaps by strengthening institutional capacity within MTCs. Through curriculum reform, interdisciplinary training, faculty development, and strategic research support, PEP aims to build a responsive and well-equipped health workforce to tackle the rising CMD crisis.

This brief highlights the urgent need to revise pre-service training curricula, invest in faculty capacity, and establish mechanisms for knowledge translation. It calls for sustained policy support and investment to drive long-term reforms in health professional education and strengthen Kenya’s broader health system.

Background

Cardiometabolic diseases (CMDs) such as cardiovascular diseases, obesity, metabolic associated steatosis liver diseases, renal diseases,

diabetes, and dyslipidemia are rapidly becoming leading causes of morbidity and mortality in Kenya. Yet, MTCs in the country face critical challenges in equipping healthcare providers with the necessary competencies to manage this rising burden. Limited institutional capacity in pre-service training, inadequate research capacity in medical training institutions, infrastructure, and fragmented knowledge translation mechanisms have hindered effective prevention and care of CMDs, particularly in underserved and rural areas.

Without strategic investment in the education pipeline for health professionals, Kenya’s healthcare system will remain unprepared to manage the growing crisis of non-communicable diseases. To address this gap, there is an urgent need to build and harmonize institutional capacity in MTCs by embedding evidence-informed, interdisciplinary training and strengthening the research ecosystem to drive curriculum reform and sustainable health system improvements.

The PEP program seeks to build institutional capacity within Kenya’s medical training colleges (MTCs) to sustainably generate evidence and enhance training programs that improve management of CMDs, especially in underserved areas.

Policy Context

Kenya's health system is experiencing an alarming rise in non-communicable diseases (NCDs), especially CMDs. While national strategies such as the Kenya National NCD Strategic Plan (2021–2025) emphasize the importance of capacity building and prevention, implementation at the preservice training level remains limited. Medical training institutions continue to face challenges in research capacity, evidence use, and curricula that are responsive to the growing NCD burden.

To address these gaps, the PEP program is currently geared towards:

- 1. Curriculum Revision and Implementation:** Reviewing and embedding CMD-specific content (prevention, diagnosis, management) into preservice health training programs.
- 2. Capacity Strengthening:** Investing in faculty development, mentorship, and research training to foster evidence-based education and practice.
- 3. Knowledge Translation Mechanisms:** Establishing formal systems to translate research into policy and practice within training institutions and the broader health system.
- 4. Partnerships:** Strengthening institutional linkages with academic, research, and policy stakeholders to enhance responsiveness to Kenya's evolving NCD landscape.

To realize these priorities, the program calls for increased policy attention and sustained investment in health professional education reforms, research capacity, and systems that support implementation and scale.

Recommendations

To strengthen the capacity of medical training colleges in Kenya to address CMDs, the following actions are recommended:



Invest in institutional capacity for preservice education on NCDs, with a focus on CMDs.



Support curriculum reform to integrate evidence-based, interdisciplinary CMD content.



Enhance faculty development through mentorship, research training, and peer learning.



Establish sustainable knowledge translation systems that connect evidence to policy and practice.



Foster long-term partnerships across academia, government, and health systems to sustain reform and scale impact.

Key Stakeholders

- African Population and Health Research Center (APHRC)
- Amref Health Africa
- Christian Health Association of Kenya (CHAK)
- County Health Departments
- Council of Governors
- Kenya Conference of Catholic Bishops (KCCB)
- Kenya Medical Training College (KMTTC)
- Ministry of Health, Kenya
- National Commission for Science, Technology and Innovation (NACOSTI), Kenya
- Non-Communicable Disease Alliance of Kenya (NCD Alliance Kenya)
- Nursing Council of Kenya

References

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- World Health Organization (2018). HEARTS Technical Package for Cardiovascular Disease Management in Primary Health Care.