

Tracking Implementation of Women, Children and Adolescent Health (WCAH) Commitments by Kenya -An innovative Approach using the Motion Tracker powered by the PMNCH Digital Advocacy Hubs through the CAAP initiative.

By Health NGOS Network (HENNET), Kenya

Problem Statement (100–150 words) – What health or service gap does this address?

Kenya has made strong commitments to improving Reproductive, Maternal, Newborn, Child, and Adolescent Health (RMNCAH), aligning with global goals such as the SDGs, FP2030, and the Global Strategy for Women's, Children's, and Adolescents' Health. However, challenges persist in accountability, progress tracking, and documentation. Mechanisms remain fragmented, underfunded, and often lack real-time responsiveness. Political transitions and devolved governance further disrupt coordination and continuity.

The 2023 PMNCH, HENNET, Aga Khan University, scoping assessment of commitments for women, children, and Adolescent Health (WCAH) revealed delays in translating commitments into measurable outcomes. To address these gaps, Kenya has adopted the Motion Tracker Approach (MTA), a real-time accountability tool implemented in over 10 countries. MTA coordinated by HENNET in 2025, enhances transparency, supports partner coordination, and strengthens monitoring of FP2030 commitments. Its successful pilot in Kenya has yielded promising results, highlighting its potential as a scalable model for tracking implementation of other RMNCAHN commitments.

Innovation or Practice Description (200–300 words) – What was done, by whom, and how? Geographical scope.

The Motion Tracker Approach (MTA) is a real-time, participatory accountability mechanism developed to address critical implementation and coordination gaps in Kenya's FP2030. The MTA builds on global accountability tools to localize and monitor progress using Kenya-specific indicators and frameworks.

Implementation began in 2022 and is ongoing currently under the coordination of HENNET. The MTA is designed to respond to implementation transparency gaps and foster collaboration across all partners implementing FP 2030 commitments. The MTA leverages a Microsoft Forms-based data tool that allows stakeholders to self-report on progress. A multi-sectoral approach mirroring the PMNCH Constituencies is taken to reach different stakeholders such as national and county government, civil society organization including youth serving/led, development partners, faith based organizations, private sector, professional/accredited bodies, academia, media. The tool is compliant with the Kenya Data Protection Act (2019), ensuring confidentiality and ethical data handling. In the most recent cycle (2022), over 60 partners submitted inputs covering policy, programmatic, and financial indicators related to Kenya's FP2030 commitment areas: adolescent health, contraceptive access, equity, and accountability.

The process includes four phases:

- (1) inception and indicator refinement through technical working groups;
- (2) national popularization of the tool and mobilization of partners;
- (3) data collection and validation involving joint review sessions
- (4) dissemination through multi-stakeholder launches and international platforms, including the FP2030 Commitment Tracker and PMNCH Advocacy Hubs.



The MTA has not only enhanced visibility of local efforts but is also being proposed for tracking Every Woman Every Newborn Everywhere (EWENE) and SDG 3 targets. It represents a scalable, cost-effective model for fostering inclusive accountability and informed health governance in Kenya.

Results and Evidence of Impact (150–250 words) – Include quantitative or qualitative data.

The MTA engaged 65 implementing partners, including three government bodies, three donor agencies, 43 local CSOS, 10 international NGOS, and six adolescent/youth-led organizations. The findings guided Kenya's FY 2024/25 FP budget discussions, increasing from Ksh 0.5 billion to Ksh 1 billion. Despite budget cuts the same year, MTA advocacy efforts helped reinstate FP funding, underlining its impact on policy influence. The tool also captured service delivery gaps, highlighting areas for resource allocation, and strengthening data use for decision-making. outcomes, or evaluation results. The MTA also improved data visibility and equity analysis. Findings revealed that only 38% of reporting institutions disaggregated FP data by age or disability status, prompting the need for stronger data systems. The participatory validation process strengthened stakeholder confidence, improved reporting quality, and aligned interventions with national priorities.

The MTA was showcased at the 2022 International Conference on Family Planning (ICFP) in Thailand, raising Kenya's visibility in global accountability discourse. Stakeholders commended its role in minimizing duplication, promoting transparency, and improving coordination. Its success offers a replicable model for other countries pursuing decentralized accountability in the face of donor transition and shifting political contexts.

Scalability & Sustainability (100–150 words) – Is it adaptable for other contexts? What resources or policies support it?

The Motion Tracker (MTA) is a flexible, low-cost digital tool designed to strengthen accountability in complex health governance contexts. Its success in Kenya demonstrates its capacity to engage multiple stakeholders through a collaborative and transparent approach. By aligning with national accountability frameworks and adhering to Kenya's legal data protection laws, MTA ensures sustainability and trust. Stakeholder ownership is embedded via joint validation processes and review committees, fostering long-term engagement.

MTA's design allows easy adaptation to track other commitments, such as the SDGs and EWENE Integration with global platforms like FP2030 and PMNCH further enhances its visibility and influence. Given the growing regional demand for effective accountability tools, the Motion Tracker presents a strong, scalable model for replication in countries facing similar challenges in tracking Reproductive, Maternal, Newborn, Child, and Adolescent Health (RMNCAH) commitments.

Lessons Learned / Key Insights

A strong contextual understanding of Kenya's evolving family planning (FP) landscape specifically the transition from FP2020 to FP2030 was fundamental to the success of the Motion Tracker Approach (MTA). This knowledge allowed implementers to align the initiative with national FP priorities, targets, and coordination structures, thereby ensuring relevance and resonance with stakeholders.

Clearly articulating the value proposition of the MTA, especially its role in strengthening accountability and partner visibility, was instrumental in mobilizing engagement from diverse actors. This strategic framing not only increased participation rates but also enhanced the quality and timeliness of reporting.



The experience highlights the importance of embedding policy fluency, stakeholder alignment, and strategic communication into the design and rollout of similar multi-stakeholder tools. Future FP and RMNCAH initiatives should invest early in landscape analysis and positioning strategies to strengthen stakeholder buy-in and long-term institutional ownership.

Contact us!

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