



East African Civil Society Organizations' Forum

Strengthening Civil Society in the Intergration Process

THE GENDER LENS



More partnership to enhance support to cross border women traders

PAGE 6-7

In this issue

Localized County Action Plan 2022-2024 PAGE 3-4 EAC Regional Gender Based Violence Working Group Meeting PAGE 14-16 GENDER RESPONSIVE BUDGETING IN KENYA PAGE 8

A Centre for Policy Advocacy on Gender Equality and Non-Discrimination

ABOUT CCGD

Collaborative Centre for Gender and Development (CCGD) is a Non-Governmental Organization that does policy advocacy for gender equality. The organization was founded in 1996 by a small group of academics, researchers, and development experts to build capacity in gender-responsive planning, advocacy, and programming. The organization has grown into staunch and dependable policy research and advocacy resource center with programs present at the county.

What we do

The Collaborative Centre for Gender and Development (CCGD) is a gender equality and non-discrimination policy advocacy organization. CCGD has a long history of conducting research, policy/legal advocacy and practical engagement in policy and law analysis, advocacy and formulation processes. It contributes to supporting processes that lead to the enactment of laws and policies that promote gender equality and non-discrimination.

CCGD contributes to supporting Sectoral and Multi-sectoral Committees, Working Groups and Task Forces that work collaboratively with government departments to coordinate policy review and implementation. In this capacity, CCGD Co-chairs the Gender GBV sub-Sector Working Group as well as being a member of the umbrella Gender Sector Working Group that is convened by the Ministry of Public Service and Gender.

CCGD also works with selected county and national government ministries, departments and agencies to support the implementation of core policies and laws that contribute significantly towards reducing the gender gap. Recognizing that public accountability to the achievement of gender equality is critical to closing the gender gap, CCGD engages in strategic partnerships and collaboration with the National Gender and Equality Commission (NGEC) to contribute towards evidence-based advocacy that promotes collection and analysis of sex-disaggregated data and utilization of findings to inform advocacy.

Further, CCGD supports coalition-building among CSOs on national and regional platforms that collectively push advocacy agenda among others rights, equality, participation and protection of civic space. In this regard, CCGD currently hosts the Kenya Gender Budget Network (KGBN), East African Civil Society Organizations Forum (EACSOF) and Innovations for Change (14C), Africa Hub.

CONTENTS



Use of artivism to address during the 16 Days of Activism against GBV

PAGE 3



Effects of GBV on Informal trade PAGE 9



I woke up and everything was dark

PAGE 10 -11



Delivering quality and affordable health services: Kenya's road to Universal Health Coverage (UHC) PAGE 11-13

Use of artivism to address during the 16 Days of Activism against GBV

BY AUDREY ADHIAMBO AND OLOO ADHIAMBO



CCGD Youth Coordinator, Audrey Adhiambo(far right), CCGD Youth Program Assistant, Jecinter Kagai in company of GBV and Artivism winners, Vincent Ochieng (second left) Dennis Isogol (centre) and Russell Obwaka (third-left) and other youth from The Border Hub during the GBV and Artivism in Busia County. [File, CCGD]

Annually, the world comes together to mark the 16 Days of Activism against Gender-Based Violence, an annual International campaign that kicks off 25 November, the International Day for the Elimination of Violence against Women, and runs until 10 December, Human Rights Day. The campaign dubbed 16 Days rallies both state and non-state actors to call for prevention of violence against women and girls. Further, it also seeks to raise awareness on the plight of women and girls, hold governments and other decision-makers accountable, and celebrate progress toward gender equality. According to data from World Health Organization (WHO), one in every three, around 736 million women and girls are subjected to physical or sexual violence by an intimate partner or from a non-partner over their lives. The COVID-19 pandemic already underway can best be described by Haroon Rashid's quote, we fell asleep in one world and woke up in another. With countries imposing new laws such as curfews, lock downs, restricted gatherings, and cessation of movement in a bid to curb the spread of the virus. The measures have resulted into a "shadow pandemic" reports show that the measures have led to a spike of GBV.

This has made it extremely hard for Civil Society Organizations to do their work thereby calling for more innovative ways to address the spike of GBV during the pandemic.

With the world shifting from physical to virtual platforms, the youth are leading efforts and solutions to build a better, safer world for us all, as they have done with many of the world's most serious crises, including GBV. Around the world, there is a vast network of young advocates who are employing novel strategies to tackle GBV such as Artivism which is a portmanteau word combining art and activism. With the rising popularity of virtual platforms and social media campaigns, the youth are using culture jamming, subverting, street art and murals, paintings, spoken word, plays, satire, fashion, and short videos to reach wider audiences.

These innovative techniques aim to address the core causes of GBV, such as altering attitudes and actions that contribute to gender-based violence and inequity. As a global language that transcends all frontiers, artivism has a broad and international appeal and maybe a strong tool for raising awareness and encouraging action.

Localized County Action Plan 2022-2024

BY MAURICE GOGA



at CCGD, Ms. Grace Muysoka leads Baringo County Officials in launching the Baringo County Action Plan in Baringo County [Image: CCGD]

In collaboration with State Department for Gender (SDfG) and the County governments of Baringo Samburu and Mandera, Collaborative Centre for Gender and Development (CCGD) launched the County Action Plan (CAP) for localized Kenya National Action Plan II on Women, Peace and Security for the Advancement of the United Nations Security Council 1325 (UNSCR Chief Administrative Secretary for Gender Hon. Linah 1325) in the three counties.

and security, which was adopted by the Security Council in 2000, presented a comprehensive political framework within which women's protection and

their role in peace processes can be addressed. UNSCR 1325 is central in supporting women engage in peace processes in meaningful ways.



Jebii (seating centre) and Women Peace and Security Program Lead at CCGD, Ms. Grace Muysoka (standing second left) leads Baringo County Gender Sector The UNSCR 1325 on women, peace Working Group in launching the Baringo County Action Plan in Baringo County [Image: CCGD]

The development of the Kenya National Action Plan (KNAP) I and II sought to operationalize the implementation of the UNSCR 1325 which is a key milestone that will contribute to the conflict, early warning and peace processes in Kenya.

The KNAP calls for increased participation of women in peace processes and peace building. The KNAP I (2016-2018) sought to contextualize the bases for socio-economic and political inequalities in peace and security issues. After the implementation KNAP I, there was a need for review thus resulting to KNAP II (2020-2024) which is a strategic plan to address the gaps and challenges as well as emphasize on the best shared practices on women, peace and security in Kenya.

> While speaking during the launch of Baringo CAP, the Chief Administrative Secretary for Gender, Hon. Dr. Jebii Kilimo praised the commitment CCGD had put in place in localizing the KNAP II which seeks to increase women participation in peace processes.

> "I am very pleased today, because I am living my dream of seeing women being included in the peace processes," said Hon. Jebii.

She said the document would create a platform through which the community can shun the retrogressive cultures as well as the rapid conflict witnessed in Baringo County.

She noted that the document has clearly pointed out the role of women in peace building and conflict resolutions processes. Adding that the document will also be vital tool in the campaign against outlawed cultural -

practices such as FGM which has been labelled as the root cause to all retrogressive cultures in Baringo County and other counties where the vice is practiced.

She urged CCGD to extend the project to other warring counties as she pledged support for resource mobilization through SDfG.

In Samburu County the launch was presided over by Hon. Julius Leseeto, Deputy Governor Samburu County while in Mandera County in the presence of County Gender Sector Working Group (CGSWG) members, CSOs, Women Champions, Youth, Morans, PWDs and local community in the area.

The localized Samburu CAP will be form part of policy on Samburu County accountability on the WPS agenda on matters women and girl's meaningful participation and leadership in peace processes within the county. Additionally, it will promote women and girls' rights while shunning violence meted against them, sexual and gender-based violence (SGBV) and traditional practices that oppress them.

In Mandera County the launch was presided over by Issadin Adawa, the County Executive Committee Member Youth, Gender and Social Services.



Mandera County Executive Committee Member Youth, Gender and Social Services Issadin Adawa (centre) and CGGD Monitoring and Evaluation Officer, Josiah Karie (in blue) leads Mandera County Gender Sector Working Group in launching the Mandera County Action Plan in Mandera County [Image: CCGD]



Samburu County Assistant County Commissioner, Mr. Daniel Murage (centre) Samburu County Deputy Director Gender, Daniel Lempushuna (front row second left) CCGD Women Peace and Security Program Lead at CCGD, Ms. Grace Muysoka (front row third-left) and Catherine Chegero from SDfG leads Samburu County Gender Sector Working Group in launching the Samburu County Action Plan in Kisima Town in Samburu County [Image: CCGD]



November - December 2021 | The Gender Lens

More partnership to enhance support to women cross border traders



PS. State Department for East African Community, Dr. Kevit Desai (centre), University of Nairobi Vice Chancellor, Prof. Stephen Kiama (left) and Collaborative Centre for Gender and Development Executive Director, Mr. Masheti Masinjila displaying the MOU agreement signed among the three organizations on Tuesday, 7th December 2021. [Getrude Angela: CCGD]

Collaborative Centre for Gender and Development (CCGD) on Tuesday, December 7, 2021 signed a Memorandum of Understanding (MOU) with Ministry of East African Community and Regional Development and the University of Nairobi through the Women Economic Empowerment Hub (UON WEE Hub) an agreement that will see the three partners work jointly to support cross border traders along the border points.

The agreement will provide a room for collaboration on evidence-based policy advocacy to inform policy implementation, upscaling and graduating of best practices for women, youth, children and persons with Disability (PWDs) economic empowerment in Kenya with focus on cross-border trade.

Speaking during the ceremony, PS. State Department for East African Community, Dr. Kevit Desai said the overall goal of the initiative is to comprehend President Uhuru Kenyatta's goals of ensuring that there is inter-connectivity with the EAC partner states. This he said will result into improvement of intra-trade that currently stands at 15%. "This initiative brings about the Ministry of East African Community and Regional Development, University of Nairobi and Collaborative Centre for Gender and Development and it recognizes the need of facilitating the capacity of women cross border traders through incentives, creation of relationships and building of markets," said the PS.

The PS added that the partnership will provide the government, private sector organizations, the civil society organizations and the academia with an opportunity to work together and transform the overall development of women, youth, PDWs in the cross-border trade.

Adding that the entry of the University of Nairobi will an added value in the partnership as they will be able to amplify trade through research and education.

Collaborative Centre for Gender and Development Executive Director, Masheti Masinjila, lauded the new partnership, saying that the MOU agreement is an extremely important meeting point between the policies that are made and the women who have suffered traditional kind of disadvantages.

"This kind of collaboration is going to enhance what these women will practically see an improvement from the policies the government has put in place, the research the University is doing and regional kind of efforts," said Masheti.

Adding, "The agreement will also look into increasing the accountability of stakeholders who are the people of the East Africa Community."

He pointed out that the Treaty establishing EAC, the Common Market Protocols, the Simplified Trade Regime are all very people centered, people friendly and they have huge ambition in terms of participation but stakeholders are the reference points in terms successful implementation.



PS. State Department for East African Community, Dr. Kevit Desai (centre), University of Nairobi Vice Chancellor, Prof. Stephen Kiama (right) and Collaborative Centre for Gender and Development Executive Director, Mr. Masheti Masinjila sharing signs the MOU agreement on Tuesday, 7th December 2021. [Getrude Angela: CCGD]

The University of Nairobi Vice-chancellor, Prof. Stephen Kiama, said the University will work through the Women Economic Empowerment Hub will work with the government and CCGD in addressing the barriers witnessed in trade within the EAC partners states with focus on women cross border traders.

"The Ministry, CCGD and the University are ready to work together to ensure that there is acceleration of trade in the EAC region," said Prof. Kiama.

He added, "The University of Nairobi will bring the data decision making approach on table."

The tripartite agreement which will implemented within a span of three years will see the three institution collaborate in area of research, policy and monitoring and evaluation.



PS. State Department for East African Community, Dr. Kevit Desai (centre), University of Nairobi Vice Chancellor, Prof. Stephen Kiama (right) and Collaborative Centre for Gender and Development Executive Director, Mr. Masheti Masinjila sharing a light moment after signing the MOU agreement on Tuesday, 7th December 2021. [Getrude Angela: CCGD]

GENDER RESPONSIVE BUDGETING IN KENYA

BY SHARON MACHARIA



Kenya Gender Budgeting Network which is hosted by Collaborative Centre for Gender and Development with its partners organized the Gender Responsive Budgeting in Kenya Webinar on 9th December 2021 themed; "Implications of national GRB analysis and advocacy activities on the county budget process."

The overall is to document the implications of National Budget GRB analysis and advocacy activities on the county budgeting process. With specific objectives being to identify actionable areas of county level GRB advocacy in the 2022/23 budget process and to initiate a coordinated Gender Responsive Budget advocacy at the county level.

Kenya Gender Budget Network (KGBN) is an open membership of stakeholders engaged in gender-focused advocacy work to inform programming and budgeting. The network aims to ensure better coordination, voice, and coherence of the civil society and other actors in engaging government and advocating for and monitoring the adoption and practice of Gender Responsive Budgeting (GRB). KGBN aims to harness and synchronize the work of research institutions, academia, international and national partners interested in GRB as well as policy and grassroots Civil society Organizations (CSOs) at the national and county level for effective GRB advocacy.

KGBN's interest in coordinating Gender Responsive Budget actors at the national and county level is to enhance voice, coherence and action with regards to findings on the analysis of 2021/22 budget 2022-23 Sector Working Group reports, and the 2022 BPS. The webinars expected is to development of an action plan for county level GRB advocacy in 2022/23 budget process with the expected outputs being to enhanced gender responsiveness in county budgets as well as to Increased GRB knowledge, awareness and coordination among civil society and the public.

During the forum the budget preparations procedures which begin in July and takes 28 months for the entire budget process to be finalized were discussed.



Participants of Gender Responsive Budgeting in Kenya Webinar held on 9th December 2021

A presentation on the budget cycle calendar at county level was presented as well as the budget process.

According to Darmi Jattani, Gender Responsive Budgeting is about ensuring the existing framework puts in place the different needs of people in the county. She added that GRB is a constitutional mandate and should be heavily focused on since the opportunity cost of women missing in contribution to the economy is high.

"Among the gaps that exist at the National level in regards to Gender Responsive Budget is the time spent on unpaid care work which is disproportionately high among women," highlighted Darmi Jattani. "

Effects of GBV on informal trade

BY SHARON MACHARIA

In culminating the 16 Days of Activism against Gender Based Violence (GBV) Collaborative Centre for Gender and Development (CCGD) East Africa Civil Society Organizations' Forum (EAC-SOF) in partnership with International Center for Research on Women (ICRW) hosted a session with women in informal employment in Kibra on Wednesday, 08 November 2021.

The session was to find out the factors affecting young women economic empowerment and GBV including the effects of COVID-19, the response and referral pathways of GBV if any and identify areas of need/information/skill gaps which we can fill through capacity building, awareness creation

The women were also sensitized on the different referral pathways especially in the Kibra context from different perspectives being as a child, young girl/boy as well as women. The women were encouraged to work with their area chiefs, Community Health Volunteers (CHVs), Nyumba Kumi officials, local Community Based Organizations (CBOs), police and health care centres.

Cryspin Afifu of ICRW called for consideration of women in informal trade when it comes to policy formulation.

"In Kenya 83% of women are in the informal sector and these women need to be considered when it comes to policy formulations," he said.

Adding that women should earn their income and livelihoods decently despite their choice of career/job.

The women were also accorded an opportunity to share their experience and the challenges they experience in their business. They pointed out that COVID-19 had a negative effect to their business-



Women in informal trade in group photo with officials from CCGD and ICRW after an engagemen session on GBV and informal trade.

The women traders of Kibra get their income from informal businesses such as hawking, hair dressing, mutumba selling, groceries and bodaboda riding among others.

The women were also accorded an opportunity to share their experience and the challenges they experience in their business. They pointed out that COVID-19 had a negative effect to their businesses, leading to reduction in clientele base which resulted to them shutting down their businesses.

In regards to SGBV, the women requested for more sensitization around evidence preservation and witness protection, matrimonial and property Acts, men participation towards ending GBV among other topics.

"We would appreciate if Civil Society Organizations worked towards increasing shelters in Kibra, said Christine who is a business woman in Kibra selling products online. According to Christine the increase of shelter will come in handy to ensure the survivors of SGBV are safe and close to where they are getting justice from.

The women were also sensitized about Jasiri Fund which is a survivor centred fund that facilitates GBV women survivors to rebuild their businesses after the traumatic experience.

BY SHARON MACHARIA

"Imagine going to sleep at night only wake up to find out that you can no longer see anything," remarked Evelyne Ogolla.

Evelyne Ogolla is a Regional Social Integration Officer at Ministry of East African Community and Regional Development has been visually impaired for past six years. The first born in family of four siblings says her condition started with severe migraines, persistent headaches,

very high blood pressure, mild sinuses, pain in the eyes and blurry vision. With no her condition, she was forced to undergo a magnetic renounce imaging (MRI).

The MRI revealed that she had excess spinal cord fluid that affected her optical nerves. The doctors then advised her undergo a procedure called tapping which helps reduce the spinal cord fluid. This did not work so well which led to a surgery called shunting but in the end her condition did not change.

"October 27 2015 was the darkest day of my life, both physically and emotionally, I woke up that morning and everything was dark," she told CCGD.

The graduand of Development Studies from Accra University narrates that her life then took a turn around at this point and she has to adjust accordingly to adapt into her new normal. She decided quit her job at that time because she could not perform her duties anymore and had to stay home for a year.



She went through myriad of rejections and stigmatizations from friends and family which affected her psychologically. However, in 2017, she made a move that drastically changed her life as she decided to join the Kenya Society for the Blind. "In 2017, I decided to join Kenya Society for the Blind where I learnt how to use the brail, the assistive technology and

> mobility such as the white cane and there is where I met people like me and in fact people who were even worse than me. My life just changed completely and joined the Persons with Disabilities club," she said.

After applying for so many jobs in 2019, Evelyne managed to secure two internships with the State Department for Transport and Public Works and In September 2021, she beat all odds to secure a job as the Regional Social Integration Officer.

"You can imagine the post only wanted two people and I was among the two who successfully landed the job," she said.

Adding that the government is really trying on the 5% allocation for Persons With Disabilities (PWDs) and it through that allocation she able to work as an intern at the state Department of Transport and Public Works.

October 27 2015 was the darkest day of my life, both physically and emotionally, I woke up that morning and everything was dark.

Evelyne Ogolla Regional Social Integration Officer Ministry of East African Community and Regional Development Despite securing the job at the Ministry, she faced a challenge of not having assistive devices to facilitate accessing and inputting on official documents which totally incapacitated her. But through the help of Collaborative Centre for Gender and Development (CCGD), the Regional Integration Officer was able acquire the assistive devices which included a laptop fitted jaws- a screen reader office duties the Digital Accessible Player Information System (DAISY) a talking book for the visual impaired persons.

She says through her work at the ministry, she purposes to change the lives of young women to be economically empowered as she believes that women are the backbone of the society and nation at large.

She urged the government to continue including PWDs in everything that concerns the nation as they have in the recent past. However, she called on women who are visually impaired to stand and speak out and knock-on doors in search for help.

"Do not give up, keep pushing because nothing comes on a silver platter and do not forget to get relevant skills and perfect them," she reiterated.

Delivering quality and affordable health services: Kenya's road to Universal Health Coverage (UHC)

BY JOSIAH KARIE

NOINId



Image courtesy: Universal Health Coverage Partnership

Currently, ranked third in Africa in the Global Health Security (GHS) index 2021, Kenya is reported to have the best healthcare system in East Africa. However, this has not been achieved without a fair share of highs and lows over the years. Starting from 1965 after gaining independence from the British, Kenya's healthcare services were centralized but it was not until the 1980s that actionable health strategies emerged resulting in a proliferation of health facilities (WHO 2017). Nevertheless, Kenya was still plagued by declining health outcomes signaled by worsening maternal and child health in the '90s. During this period, an infant mortality rate (IMR) of 62 in 1993 increased by 12 percentage points to 74 in 1998 (Ministry of Health of Kenya 2019). **3.2M** The number of Kenyans

IN NUMBERS

The number of Kenyans who were supported by UHC program between the year 2018 and 2019.



17.7 PC The number of informal workers covered by NHIF as at 2019.

In 2010, Kenya promulgated a new constitution that shepherded a new dawn in governance and other aspects of society such as health. The Kenyan Constitution from 2010 gave prominence to health and guaranteed the citizens the right to the highest, attainable standards of health. The constitution has since contributed to the development of various health policies and programs that have resulted in improved health outcomes for citizens. For instance, maternal mortality reduced from 698 in 1990 to 510 in 2015 while under 5 years old mortality rate reduced from 74 to 42 in the same period (Ministry of Health of Kenya 2019).

The design and success of the UHC Program in Kenya

Universal Health Coverage (UHC) refers to a situation where individuals and communities access quality health services at a cost that does not lead to financial hardship. The Kenyan UHC program began in 2018 as a pilot program in four of Kenya's 47 sub-national governments (Ministry of Health of Kenya 2018). The four were chosen because of high incidences of communicable diseases, non-communicable diseases, maternal and child deaths as well as road accident-related injuries (Shano et al. 2020). The Program is coordinated through the Ministry of Health of Kenya (MOH) which established a department to oversight, plan, monitor, and report on progress made on the UHC pilot. The department is also tasked with engaging stakeholders at the national level to identify key services and strategies for the improvement of the national UHC package.

The UHC model adopted a two-phase medium-term approach. The first phase was expected to abolish all user fees at the primary level (local health centres) and the secondary level (county referral) hospitals. The second phase is the roll out of a social health insurance scheme through the National Health Insurance Fund NHIF. In this second phase, contributions will be mandatory for all Kenyans above the age of 18 years while the government will complement the scheme by paying for the poor. By 2020, the program had enlisted more than 200 community health units, with 7,700 community health volunteers and over 700 health workers. Between 2018 and 2019, the project had supported 3.2 million Kenyans to access critical health care services (Ministry of Health of Kenya 2019).

Challenges facing the UHC Program in Kenya

Financing is the biggest hurdle facing the universal health coverage program in Kenya. Given the erratic projection of government revenue, the Kenyan government financing of UHC through taxes is not sufficient to guarantee sustainability. Notably, Kenya's budget to UHC has reduced from 50 billion Kenyan shillings in the 2019/2020 financial year to 47.7 billion Kenyan shillings in 2020/2021 (The Star 2021). Health is also an underfunded government function evidenced by historical funding levels which have been below 6% of total government spending. Additionally, Kenya's public debt is at an all-time high which has reduced the fiscal space for social programmes. The other challenge is the low coverage of the population under the National Health Insurance Fund (NHIF). NHIF is a contributory health insurance scheme and the proposed vehicle for delivering UHC across the entire population. It is mandatory for formal workers but voluntary for informal workers.

The scheme's coverage among informal workers who form 83% of the Kenyan workforce remains low, only 17.7% of the population is estimated to be covered by the NHIF out of 2.9 million persons (Institute for Global Health Sciences, 2019). Health workers have also noted a lack of sufficient human resource and hospital equipment, this has resulted in citizens paying out of pocket to cover costs of medicine and laboratory procedures. Under resourcing of health care has been attributed to the constrained relationship between the national and the subnational governments which has affected the deployment of healthcare personnel and disbursement of funds from the national government to the subnational governments.

Recommendations for improving UHC in Kenya

The solution towards advancing UHC in Kenya is threefold; increasing the number of Kenyans covered by the NHIF, scaling up of human and structural requirements, reducing the cost of doing business to enhance employers' contribution for employees, and addressing the intergovernmental inefficiencies that result in delayed remittances to the subnational governments.

To increase NHIF coverage, the government should roll out a strategy to reach the informal sector through their organized formations to increase their contribution to the scheme. Kenya has a large population of informal workers registered in welfare associations which provide opportunities for savings, and loaning and acquisition of assets. These are commonly known as Savings and Credit Cooperatives (SACCOs). One of the most popular SACCO is the boda boda SACCO formed by youth engaged in the transport business with an estimated number of 1.2 million to 1.9 million operators (The Star 2020). Incidentally, the boda boda transport business contributes to a high number of traffic injuries and fatalities. Strategic engagement with such a group shall not only increase money to purchase services for the general population but also intervene in a sector which increases health care costs and spending of the country's health budget.

Secondly, the government should increase allocation to the health ministry to 13% of government spending in line with the Kenya Health Strategic Plan 2018-2023. The increased fund should be utilized to pay premiums for Kenya's poor estimated at 10 million persons and in supporting the material and human resource capacity required for primary health care services.

Lastly, the passing of the NHIF amendment bill by parliament is a positive development that will increase NHIF's financial stability. One of the requirements of the proposed law requires employers to match their employees' NHIF contributions. This has the potential to greatly increase the premiums received by NHIF from the formal sector but has the potential to increase labour costs.

For this to be successful, buy-in is required from employers who need to be supported in fulfilling this requirement by government reduction of the cost of doing business. Failure to do this means increasing the cost of doing business and making Kenya unattractive to investors.

Conclusion

The right to health is indeed an inalienable right for every person as espoused in Kenya's 2010 constitution. Reduction of maternal and child deaths coupled with a reduced country disease burden greatly spurs economic growth and contributes to poverty reduction. Increasing UHC in Kenya will therefore unlock many economic benefits to the country and improve the quality of life for its citizens.

> Josiah Karie is a Monitoring and Evaluation Officer at Collaborative Centre for Gender and Development. <j.kiarie@ccgdcentre.org>

EAC Regional GBV Working Group Meeting

BY MAURICE GOGA

The East African Community Secretariat in partnership with the East Africa Civil Society Organizations' Forum Kenya Chapter (EACSOF-K), Collaborative Centre for Gender and Development (CCGD) and Forum for Women Educationalists (FAWE) convened a two-day regional forum for the EAC GBV Working Group on 9th and 10th December 2021 at Continental Hotel in Shanzu.

The two-day forum under the topic – "Are we doing enough? Ending Gender-Based Violence in East Africa" brought together state and non-state GBV actors across the EAC region to dialogue on country specific situations, interventions and identify best practices towards the elimination of GBV in the region.

While addressing the stakeholders drawn from the six partner states, the EAC Principal Gender and Community Development Officer, Mrs. Generose Minani noted that the stakeholders are meeting with sole purpose of developing implementable work plan following the commitment by the partner states to implement the EAC Gender Policy with key priority on GBV and harmful cultural practices. She added that during the Fourth Sectoral Council meeting, a technical working group on gender, women and development among other technical working groups



Delegates of the EAC member state during the EAC Regional GBV Working Group held in Shanzu, Mombasa Kenya between 9th and 10th December 2021. [Maurice Goga: CCGD]

was adopted by the council of ministers. In addition, the GBV Technical Working Group was adopted during the Fifth Sectoral Council meeting.

The EAC Principal Gender and Community Development Officer further said that the GBV Technical Working Group came in as response towards the spike of GBV following the measures put in place to curb the spread of COVID-19. She, however, decried of lack of support the technical working group is experiencing.

"The technical working group do have a synergy but they can't reach the desired goal if they are not supported – together as experts we need to also involve other stakeholders such as the government," she said. Adding, "Our governments needs to know what is happening. I know in this era of COVID-19, some categories of people were affected. So, we need to continuously inform our governments that something is wrong."

She called for facilitation of the EAC Regional GBV technical working group in terms of the network budget allocations as well as collaboration with other government departments, civil society organizations (CSOs) and private sector organizations (PSOs). Mrs. Minani also noted that the EAC has developed a data collection tool for the EAC GBV technical group that will be utilized in collection and sharing of GBV information. However, she said if there is no implementable working plan nothing much can be achieved by the group.

"For this workshop, we are here to develop a implementable work plan for the GBV Working Group which will respond to the cases of GBV witnessed in the EAC region," she added.

The East African Civil Society Organizations' Forum board member, Ms. Lilian Muchoki said that the convention by the EAC regional CSOs, PSOs and the government is an indication of a start of journey that has a very long way to go.

She added that it is always a good start when people begin talking about GBV issues and also thinking of how to respond to such issues.

"I believe by the end of this meeting we will have a progress in this journey that began last following formation of a regional GBV working group which will energized to do more in the coming days, months and years," said Ms. Muchoki.

The Chair of EAC Regional GBV Committee, Mr. Masheti Masinjila called on the state and non-state GBV actors from the partner states to generate the knowledge on GBV which has to be synthesized and used in identifying what are the issues locally and within the member states.

Mr. Masheti noted that GBV cases have been on the rise recently, however, there were some progress that had been made before the break out of COVID-19 but the measures that were taken by the government to contain the spread of the deadly virus particularly locking people reversed some of the progress.

Kenya to end all forms of GBV by 2026

Mr. George Barasa, Assistant Director Social Affairs in the Ministry of East African Community and Regional Development noted that Kenya is committed to end all forms of GBV in the country by 2026.



Mr. George Barasa, the Assistant Director Social Affairs in the Ministry East African Community and Regional Development speaking during the EAC Regional GBV Working Group held in Shanzu, Mombasa Kenya between 9th and 10th December 2021. [Maurice Goga: CCGD]

"The President made commitment to end all form of GBV by 2026 and it is not just a statement he has made but he has followed it up with resources, "he said.

Mr. Barasa went on to say that Kenya has committed 1.9 million USD to fight GBV which he said rose to 80% during the spike of COVID-19 pandemic.

Within the EAC region, Mr. Barasa pointed out that Kenya was doing much better compared to other partner states, this he attached to the president's commitment of ending all forms of GBV by 2026. "I say this because there is no member state who has had commitment to fight GBV at a very high level like what we have in this country," said Mr. Barasa.

He added, "Kenya is the only country which has put timelines to end, not just fight but to end GBV and I think that is a bold step in the region and we hope that others can also take the mantle and do the same."

"Generally compared to the past years, there has been progress in terms of legislation and facilities, but if you look at the data, the numbers are going up," he said.

Kenya is the only country which has put timelines to end, not just fight but to end GBV and I think that is a bold step in the region and we hope that others can also take the mantle and do the same.

George Barasa, Assistant Director Social Affairs Ministry of East African Community and Regional Development



Delegates of the EAC member state during the EAC Regional GBV Working Group held in Shanzu, Mombasa Kenya between 9th and 10th December 2021. [Maurice Goga: CCGD]

Burundi records lower GBV cases in 2021

Ms. Aisha Kiye, the Director of Women Empowerment and Girls Promotion in the Ministry of National Solidarity Social Affairs Human Rights and Gender in government of Burundi said Burundi was not past the worst in the rise of sexual and gender-based violence cases during the spike of COVID-19. Nonetheless, the country has witnessed a major reduction in the cases in 2021 as compared to 2020 when the pandemic broke out in the EAC region.

"The cases of GBV recorded this year are not too many compared to last year, this is ascribed to the efforts by all stakeholders in the fight against SGBV in Burundi," she said.

She added, "For Burundi, we have a department which has been put in place to by the government to address issues of SGBV in the country."

17,000 GBV cases recorded in Uganda

Akumu Christine, the Principal Gender Officer in the Ministry of Gender, Labour and Social Development in the government of Uganda noted that in the wake of COVID-19 pandemic, Uganda recorded 17,000 GBV cases. "If you look at sexual violence within the first six month of this year, we have recorded 8,000 cases while the overall statistics of GBV from January to June is 17,000 cases in Uganda," she said.

She attributed the rise of the cases to the fact that in Uganda the children are at home thus increasing the vulnerability to experience violence. "Issues of teenage pregnancies have risen, in fact during the time of lock down. Just within three months, over 3000 cases of teenage pregnancies were registered within a single district," she lamented. "However, as country we are developing a mechanism of taking these girls back to school come January next year" added Ms. Akumu.

The Treaty for the establishment of the East African Community provides the overall legal framework for the EAC Gender Policy. The Treaty recognizes the importance of Gender Equality as well as enhancing of the role of women in socio-economic development and women in business towards achieving the community's broad objectives. Articles 5,3 (e); 6 (d); 121 and 122 of the Treaty emphasize gender mainstreaming and respect for women's rights as one of the fundamental principles that will govern the EAC integration process.



MANAGEMENT AND STAFF OF CCGD

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COUNTY GOVERNMENT OF KAJIADO DEPARTMENT OF GENDER, SOCIAL SERVICES, CULTURE, **TOURISM AND WILD LIFE**



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East African Civil Society Organizations' Forum

Strengthening Civil Society in the Intergration Process

Editorial

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