

AFYA MAKUENI

FIRST EDITION

For The Latest Health News, Insights & Analysis



Up-close With County
First Lady Anita Mutula

Opinion: Finding
the Forgotten Woman

New Drug Saving Women
from Hemorrhage

Makueni's Proximie Technology
Sets a National Benchmark

EVOLUTION OF THE MAKUENI HEALTH SECTOR



EDITOR'S NOTE



Evelyn Mutanu,
Senior Public
Communication Officer

Welcome to the latest edition of Afya Makueni, your go-to source for updates on the relentless work being done in the Department of Health. In this issue, we are excited to share the incredible strides taken by Governor Mutula Kilonzo Jr. and the department in actualizing the promises made in the County Integrated Development Plan (CIDP 2022-2027).

The Department of Health Services continues to prioritize the well-being of Makueni residents with unwavering commitment, ensuring steady supply of health commodities, state-of-the-art medical equipment, and quality healthcare services. Governor Mutula's vision of a healthy Makueni is being realized daily, with tangible development that reflect his dedication to serving the people with integrity.

As we journey towards a healthier future, this magazine highlights the ongoing efforts, success stories, and the continuous push to make Makueni a beacon of health excellence. We invite you to read, engage, and be inspired by the progress we've made and the path ahead.

Thank you for joining us in this journey towards better health for all.

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FREE MEDICAL CAMP SAVES WOTE TAILOR FROM 13-YEAR BATTLE WITH GOITER



For over a decade, Carol Mbithe, a gifted tailor in Wote town, wore more than just Ankara, a scarf around her neck, not for fashion, but to hide a stubborn goiter that had slowly taken over her life since 2010.

“It started as a small lump,” she recalls, “and before I knew it, it was a full-blown goiter sitting on my neck line.”

The growth brought with it more than physical discomfort. Mbithe lost her voice, battled constant migraines, and struggled with the fear that she simply couldn't afford the medical attention she needed. Her doctor had advised her to travel to Machakos for tests, but with tight finances and no health insurance, even keeping up with clinic visits became a luxury she couldn't afford.

“To be honest,” she says with a chuckle, “if migraines had loyalty points, I'd have hit platinum status.”

At one point, a doctor gave her a quotation of Ksh. 200,000 for

surgery, a figure that felt like asking for the moon. As the sole breadwinner for both her nuclear family and elderly parents, Mbithe couldn't even entertain the idea.

“Where was I going to get that kind of money?” she asks. “I had mouths to feed, rent to pay, and stitches to make. I just put it all in God's hands and carried on.”

She masked her condition with scarves, but the self-esteem scars ran deeper. Social events became uncomfortable. Clients at her tailoring shop would ask awkward questions. Some assumed she had a chest condition, others just stared too long.

“I even avoided weddings and chammas. I felt like I didn't belong anymore,” she says.

Then came October 2024, and with it, a turning point. The Makueni County Government, in partnership with the Kenya Surgical Society, Rotary Club Magharibi, and other partners, hosted a six-day free medical camp. Mbithe, skeptical at first, didn't believe something this good

could come without a price tag, until a friend working for the county government convinced her to give it a shot.

What happened next was nothing short of life-changing.

She met Professor Paul Odula, a surgeon and the President Surgical Society of Kenya, whose calm demeanor and professionalism gave her confidence. In just three days, Mbithe had undergone all the necessary tests and was prepped for surgery.

“Five hours in theatre,” she says, eyes lighting up. “When I woke up, I felt like I had been reborn. That one-kilo goiter was finally gone. I couldn't stop looking in the mirror at my 'new' neck!”

Fast forward to a sunny Monday morning, Afya Makueni finds Mbithe at her Wote shop, busy stitching vibrant Ankara dresses for an upcoming wedding. Her face beams with joy, no scarf in sight.

“I can finally wear whatever I want, go to church, weddings, and even dance at parties without hiding my neck. And yes,” she laughs, “my voice is back too!”

Now an active member of various county Project Management Committees (PMCs), Mbithe is more involved in her community than ever. She's advocating for more medical camps, stressing how crucial they are for residents who can't afford specialized care.

“Many people are silently suffering,” she says. “These camps are lifesavers, literally.”

The camp Mbithe attended was part of a major medical outreach that screened 899 patients. Of these, 125 major surgeries, 97 minor operations, and 178 eye surgeries were successfully carried out, adding up to over 400 life-transforming procedures.

According to Chief Officer Health, Dr. Harvey Mulei, goiter cases were the most common during the camp. He emphasized that Makueni County Referral Hospital is quickly becoming a center of surgical excellence, with skilled surgeons on standby to serve residents.

“Medical camps help us reach people who would otherwise fall through the cracks,” says Dr. Mulei. “We are committed to making healthcare accessible to all.”

Dr. Mulei says medical camps not only provide essential health services but also create valuable opportunities for skills transfer, empowering local healthcare workers with new knowledge and techniques.

As for Mbithe? Her hands are still busy stitching clothes, but her story now stitches hope across Makueni.



Hospital's Farm, A Bounty of Health & Savings



On a sunny Monday morning, when Afya Makueni walks into the precincts of Makindu Sub-county Hospital, we are greeted by an expanse of a 3-acre farm teeming with leafy vegetables, a welcome diversion from the buzz of medical activities.

With the clock ticking towards lunch hour, Julius Matee, the farm manager hurriedly dashes through rows of vibrant green kales and eggplants as he skillfully gathers the day's produce for the hospital kitchen.

For years, this shamba has provided not only kales and eggplants but also a bounty of other vegetables like tomatoes, maize, and even watermelons, all destined to nourish the patients within the hospital walls.

“I usually harvest about 16 kilos of kales and 10 kilos of spinach each day,” Matee shared, wiping sweat from his brow. “Tomatoes and maize each yield about 15 kilos, while eggplants can reach up to 20 kilos, depending on demand. It's a lot of work, but it's worth it when I see the results.”

Dr. Patrick Musyoki, Kibwezi West MOH, describes the farm as a lifeline to the hospital which hosts a bed capacity of 200. “This farm saves us around 200,000 shillings each month, which is reinvested into essential pharmaceuticals and supplies to supplement what the county government procures,” he explains.

Surplus from the farm is shared with the neighboring community, reflecting the spirit of good neighborliness the farm has fostered. Quality veggies are scarce in the weather-beaten region and the available ones cost an arm and a leg!

Thanks to the farm's success, the hospital has also been able to purchase a desalination machine, purifying water for essential uses such as cleaning surgical instruments and running the hospital's incinerator.

The farm relies on a borehole sunk to provide clean, reliable water to the hospital.

A new **DAWN** for women suffering from **obstetric fistula** in Makueni

Imagine a life where every day is lived in the shadow of embarrassment, isolation, and fear. For countless women in Kenya, this is their reality. A reality thrust upon them by obstetric fistula.

Obstetric Fistula is a serious childbirth injury where an abnormal opening or hole forms between the birth canal and the bladder or rectum, causing uncontrolled passage of either stool or urine.

Women like Jeniffer Mutheu from Makindu carry the heavy burden of this condition, which robs them of their dignity, their community, and sometimes even their hope.

In 2003, Mutheu's life was irrevocably changed the moment she welcomed her firstborn into the world. The joy of motherhood was quickly overshadowed by fecal incontinence.

"I couldn't even attend a simple church service," Mutheu recalls, her voice trembling. "I stopped going to my women's 'chama,' after one of the women told me to stay at home to avoid embarrassing myself. I wonder why she couldn't just let me sit with the others. I felt like a ghost in my own community."

Over time, she had four more children, yet the silence around her affliction never broke. It wasn't until 2024, when Makueni County announced a screening and treatment program for obstetric fistula at the Mother and Child Hospital, that Mutheu found a glimmer of hope.



Despite the fear that gripped her, Mutheu summoned the courage to walk into the hospital, unsure if she could share the secret she had hidden for so long. But when the doctors confirmed that her condition was treatable, the weight she had carried for over two decades lifted.

Mutheu's story is far from unique. It mirrors the painful journey of Juliana Mwende, who has battled obstetric fistula since 2018. In 2020, her life took another cruel turn when a stroke left her with only one side of her body functioning. Yet, even in the face of such adversity, Juliana's spirit never wavered.

"I wouldn't wish the pain I endured on any woman," Juliana says, her voice thick with emotion. "It was hell. I thought I would die, but the thought of leaving my young children without a mother kept me going. They gave me the strength to fight."

When Afya Makueni met Juliana, she was recovering from a successful corrective surgery at the Mother and Child Hospital in Wote. The relief in her voice was palpable as she expressed her eagerness to return to her family,

her community, and the simple pleasures of life.

"I can't wait to get back to my life," she says, her face lighting up at the thought. "I just want to be whole again. I want to be there for my children and be a part of my community once more."

Dr. Doris Mbithi, an obstetric fistula surgeon, works tirelessly to restore hope to women like Mutheu and Juliana. As of March 2024, Dr. Mbithi reports that 424 people have been screened for fistula, with 123 successful repairs, including 37 cases of vesicovaginal fistula (urinary incontinence) and two cases of rectovaginal fistula (fecal incontinence).

Chief Officer for Health Dr. Harvey Mulei quips that the county government of Makueni, in partnership with Jhpiego, has been working hard to provide comprehensive care for fistula survivors.

"We are also focusing on reintegration, with counselors providing essential psychological support to help survivors regain their sense of self-worth and reintegrate into society," says Dr. Mulei.

SULTAN HAMUD SUB-COUNTY HOSPITAL STRETCHES TO **SERVE BEYOND BORDERS**



Sultan Hamud Sub-County Hospital continues to serve as a critical lifeline for mothers not only in Makueni County but also from neighboring Kajiado County, particularly in the overstretched maternity ward.

During a recent visit by Afya Makueni, it was evident that the facility is struggling to keep up with the high demand for health services. In the maternity wing, two mothers and their newborns were seen sharing a single hospital bed due to space constraints.

Hellen Kilalta, 39, a mother of seven from Kajiado County, delivered her youngest child at the hospital on March 10. Despite the crowded conditions, she speaks highly of the care received.

“All my previous deliveries were at Sultan Hamud, and I choose this facility for its quality services,” she says. “Sometimes, we have to squeeze two mothers and two newborns into one bed. Other times, one of us stays seated

all night so the babies can sleep comfortably.”

Long distances to the available health facilities owing to the nomadic way of life in Kajiado county leaves the Sultan Hamud facility to shoulder the health services burden of those from across the border.

Sharing the bed with Hellen was Catherine Kavwele, 27, from Emali town, a mother of three who had been admitted since March 8. Both women expressed gratitude for the compassionate care provided despite the tough conditions.

Dr. Charles Mulwa, the Sub-county Medical Officer of Health, attributes the overcrowding to the hospital's strategic location and its role as a referral center.

“Sultan Hamud Sub-county Hospital is the only Level 4 facility in the area with a functional theatre,” he explains. “With 25 government-run facilities, eight faith-based, and eight private institutions in the sub-county, most complicated cases are

referred to here. This has overwhelmed our current 13-bed maternity unit.”

In response to the dire need, Governor Mutula Kilonzo Jr., in fulfillment of his campaign promise, has partnered with the M- PESA Foundation to construct a new Sh 60M state-of-the-art maternity wing. The expanded facility will increase bed capacity from 13 to 47.

According to Chief Officer Health, Dr. Harvey Mulei, the new maternity complex will comprise two floors and include a reception area, newborn unit, neonatal intensive care unit (NICU), observation rooms, prenatal and postnatal wards, doctors' lounge, and a modern operating theatre, among other amenities.

Governor Mutula's administration remains steadfast in its commitment to transform healthcare delivery in Makueni. The new maternity wing is expected not only to ease congestion but also to position the county as a destination for quality maternal healthcare and medical tourism.



LIFE-SAVING DRUG BRINGS HOPE TO DELIVERY ROOMS IN MAKUENI FOR HEMORRHAGING MOTHERS

On Saturday 21st September 2024, a heavily pregnant Faith Mumbe traveled from Mbiuni in Machakos County to attend a friend's funeral at Muvau village in Makueni County.

Before the event was over, the 28-year-old was unexpectedly struck by early labor pains, three weeks before her due delivery date.

With her mother by her side, Faith was rushed to a nearby medical center anticipating to welcome her fourth child through cesarean section. Staff at the local facility however referred her to the Mother and Child Hospital in Wote.

Arriving at the facility, Faith's excitement quickly turned to panic as the healthcare team scrambled to prepare her for surgery occasioned by excessive bleeding.

In an astonishing twist of fate, the bouncing baby girl made her debut to the world before even the surgical team could wheel her mother into the operating room. "I remember holding my 2.7 kilogram bundle of joy in my arms before it all went dark!," Faith said, her eyes lighting up.

Faith blacked out from post partum hemorrhage (PPH), a leading cause of maternal mortality worldwide.

Christine Muteria, the nursing services coordinator at the hospital explains PPH as a blood loss of 500 mL or more within 24 hours of childbirth

Within just 15 minutes, Faith was stabilized using Heat Stable Carbetocin, a World Health Organization-recommended drug for PPH. cleaners at the facility have nicknamed the drug Kausha, meaning dry up in swahili, reflecting the drug's ability to keep both the hospital floors and linen clean.

Carbetocin helps reduce bleeding after childbirth by causing the uterus to contract. Its heat stability eliminates the need for refrigeration meaning that healthcare providers can have a reliable tool at hand to improve maternal health outcomes even in



the remotest areas.

If Faith hadn't been rushed to the Mother and Child facility for quick treatment, her condition could have led to a ruptured uterus, significant blood loss and possibly loss of life, says Christine Muteria the nursing coordinator at the facility.

Previously, oxytocin was the go-to treatment for PPH, but it required refrigeration, making it challenging to maintain potency in facilities with unreliable power.

In January 2024, Makueni partnered with Jhpiego to procure this life-saving drug for 36 health facilities, including the referral hospital and numerous busy health centers. The plan is to ensure a steady supply of the drug until 2026.

Makueni has not recorded a single case of maternal mortality related to PPH for two years since the adoption of the Heat Stable Carbetocin drug. This is a huge leap from the 8 cases recorded at the Mother and Child Hospital in 2022 before its adoption. In 2023 two cases were recorded at the same facility.

"I held my baby before everything went dark"

Faith Mumbe, PPH survivor saved by Heat Stable Carbetocin.



The County, supported by Jhpiego, International Federation of Gynecology and Obstetrics (FIGO), and the Kenya Obstetric and Gynecological Society is rolling out training initiatives for 456 healthcare providers on PPH prevention and treatment, targeting over 13,000 community members through awareness programs.

Before the introduction of Heat Stable Carbetocin, there was a critical knowledge gap among skilled birth attendants in the county regarding PPH prevention and treatment. “We relied on visual estimates to gauge blood loss, which often led to underestimation,” Muteria explained.

Now, the facility employs calibrated blood-collection drapes for precise measurement and the use of Carbetocin to effectively manage PPH.

Health Chief Officer Dr. Mulei confirmed that the County will continue to procure Heat Stable Carbetocin and related supplies beyond 2026. In the Financial Year 2024/2025 Makueni County Government procured 11,000 calibrated blood

collection drapes. “We are transitioning to this new drug, ensuring Makueni remains at the forefront of maternal health,” he stated, noting that prices are expected to decrease as production scales up.

Deputy Governor Lucy Mulili passionately advocates for women to deliver in health facilities, emphasizing the risks of home births. “You cannot imagine experiencing PPH far from a hospital,” she cautioned. “You don't want to complicate your life or that of your baby.”

“This drug is a game-changer. We haven’t lost a single mother to PPH since its introduction.”

Christine Muteria.

Makindu Sub-County Hospital: **Innovative Liquid Oxygen Plant**



Makindu Sub-County Hospital is making a leap forward in healthcare technology with the installation of a liquid oxygen tank, the first of its kind in the county.

With a capacity of 3,000 liters, this advanced system connects to underground pipes that efficiently transport oxygen directly to hospital beds across all units, allowing healthcare workers to conveniently provide oxygen to patients in need.

Dr. Patrick Musyoki, Kibwezi West MOH, explains that when fully filled, the tank can supply oxygen for up to two months. “Previously, we relied on oxygen cylinders, which cost between Ksh. 900,000 and Ksh. 1.2 million,” he shared. “Now, with the liquid oxygen plant, our monthly expenses have plummeted to just Ksh. 350,000.”

“This plant has reduced our oxygen costs by more than two-thirds,” Dr. Musyoki continued. “It’s not only economical, but also eliminates the transportation costs associated with cylinder deliveries.”

The establishment of the liquid oxygen plant is the result of a partnership between the county government and the Global Fund, aimed at enhancing healthcare delivery in the region.



Battling Stigma & Finding Hope in Clubfoot Treatment

When Faith Mumbere welcomed her daughter into the world in January 2024, the joy of being a first time mother quickly turned to apprehension.

Her baby was born with clubfoot, a birth defect that causes a baby's feet to turn inward and downward, with the sole of the feet facing backward. This condition affects one in every 1,000 births.

The baby's rare condition would change their lives and, tragically, their community's perception of them. "In that moment, I felt the world close in around me," Faith recalls. "It was as if my daughter was marked, and I was left to carry that burden alone."

Clubfoot, for many, carries not only physical challenges but social stigma as well. Faith's partner abandoned her and their child upon learning of the condition. He and the family accused Faith of witchcraft, which they blamed for the baby's unusual condition. The partner fled their lives leaving her to navigate this new reality alone. "I

wept daily," she admits, her voice trembling. "But I knew I had to put on a brave face for my daughter."

Supported by her mother, Faith began her quest for help, first seeking treatment at a hospital in Nairobi. However, after facing obstacles there, she turned to Makueni County Referral Hospital, which was beginning to offer specialized clinics for clubfoot treatment.

In March 2024, the county government entered into a partnership with Clinical Clubfoot Care for Kenya to establish a program for children born with this condition. Patrick Kimomu, the clubfoot coordinator in Makueni, emphasizes the importance of this initiative. "Makueni is now the only hospital in the South Eastern region with clubfoot clinics," he explains. "We also treat children from neighboring Kitui and Kajiado counties, with nearly 40 cases monthly coming from each area."

Despite the program's promise, Patrick points out that awareness remains a hurdle. "Many families

don't realize that clubfoot is treatable. I urge parents with affected children to seek help." He says. "I am grateful for the clinics because, at the end of the day, I see results," he adds.

Victoria Kimathi, the head of Clinical Clubfoot Care for Kenya, says most cases are idiopathic, meaning we don't know the cause. She adds that interestingly, baby boys are twice as likely to be affected compared to girls.

The treatment protocol employs Ponseti serial casting, a method that involves carefully stretching and manipulating the foot, followed by a cast to maintain the correction. "Without proper bracing, the clubfoot can recur," Victoria warns. Children typically wear braces for 23 hours a day for two months and then for 12 hours daily until they reach kindergarten age.

For Faith, the journey has been one of hope amidst hardship, hoping that her daughter would grow up without facing stigma in the society. "Every time I see her progress, I feel a wave of relief. She deserves a chance at a normal life." Faith notes.

75-year-old Farmer 'Sees the World Again'



Joseph Nzioki, a 75-year-old from Kiu Village in Makindu Ward, was on his way to the Makindu Eye Unit for a routine check-up when he crossed paths with "Afya Makueni." A broad smile lit up his face as he greeted us eagerly, sending warm regards to Governor Mutula Kilonzo Jr., whom he credits for restoring his eyesight.

Last October, Nzioki was one of the 200 individuals who received cataract surgery during a collaborative eye camp held at

Makindu Sub County Hospital, organized by the County along with the Nairobi and Machakos Rotary Clubs. So far, the County government has in conjunction with partners, undertaken over 700 free cataract surgeries, while others received necessary medication.

"Five years ago, I had to stop farming when my vision faded away," Nzioki recounted, his voice filled with gratitude. "Now, I can tend to my small farm again, even though age is catching up with me. I can make my own way to the hospital instead of relying on my daughter-in-law to guide me."

Cataract, a condition often associated with aging, occurs when the eye's lens becomes cloudy, leading to blurred vision or even blindness. Thanks to the eye camp, many like Nzioki have regained their sight and



independence.

During the camp, the county provided essential equipment such as autokeratometers, trial sets, operation beds, and various medical supplies to enhance the eye care services at the facility.

Governor Kilonzo Jr. reaffirms his administration's commitment to combating preventable blindness, stating, "We will continue investing in ophthalmic equipment to bring hope to our residents."

Meet Makindu's Orthopedic Lifesaver



Meet Dr. James Muoki, one of the only two orthopedic surgeons in the county restoring hope to patients with broken bones at Makindu Sub-county Hospital.

Each week, Dr. Muoki sees up to 24 patients for surgery, a testament to the high number of accidents reported along the stretch from Mtito Andei to Sultan Hamud. "It's a challenging area," he noted. "Many of the victims end up here for emergency care, and a significant number require surgeries."

During our interview with him, he struggles to accord us the 10 minutes requested as a medical team prepares a 38-year-old woman with a

dislocated hip from a recent accident for surgery. This is the 10th surgery of the day in Dr. Muoki's schedule.

"I can spare just ten minutes," he said, glancing at the patient being prepped nearby. "I don't want to keep her waiting. This operation will take about three hours, and I need to focus." says Dr. Muoki.

In 2023 the hospital treated 696 victims of road traffic accidents with about 500 undergoing surgical procedures, including complex implant fixtures to stabilize them.

Part of these patients are from neighboring counties of Kajiado, Taita Taveta, and Kitui.

Dr. Patrick Musyoki, Kibwezi West Sub-County MOH, notes the pressing need for resources. "In the past year alone, accidents have consumed 144 units of blood," he explained. "We hope to establish a blood satellite here soon to better support our surgical needs."

Dr. Musyoki says the hospital's success in surgical procedures is bolstered by a ray of advanced medical technology and state-of-the-art equipment.

The hospital boasts one of the best equipped theatres, with an ultra-modern CT scan machine, advanced digital X-rays processors among other high-tech digital equipment.

Dr. Paul Musila, County Executive-Health Services, reiterates the important role this equipment has played in alleviating the burden of accidents along the Mombasa-Nairobi highway corridor.

These have also made it easy to detect Non Communicable Diseases such as cancers at their earliest stages, which is a game changer for early intervention.

From Wote to the World

Makueni's Proximie Theatre sets National Benchmark

At the Mother and Child Hospital in Wote, Governor Mutula Kilonzo Jr. observes a subdural hematoma surgery (cleaning blood leakage around the brain from head injuries) through an advanced digital technology known as Proximie.

The Governor, together with a coterie of medical personnel and Proximie officials follow this surgery on a screen mounted in one of the conference rooms for the entire one hour as the procedure takes place in the theatre downstairs.

The patient, a 51-year-old man who had suffered head injuries from a fall, consented to have his procedure screened live in a bid to document his recovery journey.

Proximie is a cutting edge technology that remotely connects an operating theatre through use of cameras, speakers and computers through the internet.

This technology allows specialists from any part of the world to follow surgical procedures and consult in real time.

“Instead of traveling to Mbooni Sub-County Hospital I can log in and provide guidance during surgeries from wherever I am,” says Dr. Mbithi, a consultant obstetrician gynaecologist, highlighting the convenience and efficiency that Proximie offers.

Dr. Mutiso, a neurosurgeon at the county, says this technology has brought a new level of sophistication to our operations

mentorship where interns gain valuable insights without overcrowding the theatre.

This technology has successfully been implemented at the Mother and Child Hospital for management of obstetric fistula, obstetric safe surgeries, neurosurgeries and other complicated operations.

This facility is now home to the first Proximie-powered operating theatre in the country, showcasing how digital innovation can transform surgical care and resource management.

Makueni County, the first in the country to implement this technology, has since connected five sub-county hospitals, allowing specialists to collaborate seamlessly. “As a large county with diverse medical needs, this technology alleviates pressure on our healthcare providers and enhances patient care,” Governor Kilonzo states. “We can train our interns, monitor procedures, and consult with specialists, ensuring safe and effective surgeries,” says Mutula Kilonzo.

“Telemedicine should become the new normal in our country,” he emphasized, envisioning a future where even remote patients can access life-saving surgeries.

Jhpiego has collaborated with the county to support safe deliveries, investing an average of Ksh. 400,000 per theatre for training and monitoring in the five facilities connected.

Charmed by the success of this technology in Makueni, governors

from Nakuru, Murang'a, and Mombasa have expressed their intent to replicate the same in their respective counties. Health officials from the said counties have been trooping to Makueni on benchmarking expeditions on this technology.

Dr. Shannon Shibarta, head of Global Proximie says counties must embrace and domesticate this technology as it is crucial for sustainable healthcare in the country.

Deputy Governor Lucy Mulili feels that the technology has more advantages for women, stating, “We want every mother to leave the hospital safe after delivery, whether it's a normal birth or a C-section.” She noted that complications like fistulas can also be addressed more effectively with specialist support during surgeries.



MAKUENI INTENSIFIES EFFORTS TO COMBAT RUNAWAY TB INFECTIONS



Makueni County recorded 2,197 cases of tuberculosis (TB) in 2024, a 5% increase from 2,093 cases reported in 2023. The rise in cases underscores the county's heightened battle against the disease and the need for sustained intervention.

Joseph Mulei, the County TB and Leprosy Coordinator (CTLC), highlights that children have been disproportionately affected, with 60% of cases in this group going undiagnosed. He stressed that the lack of diagnosis in children poses significant health risks and points to the ongoing challenges in reaching vulnerable populations.

Makueni Sub-County recorded the highest number of infections, reporting 615 new diagnoses in 2024. It was followed by Kibwezi West with 449 cases, Mbooni with 374, Kibwezi East with 334, and Kilome with 230. Kaiti Sub-

County recorded 195 cases, bringing attention to the widespread nature of TB in the region.

Mulei noted that men are more affected by TB than women, attributing this trend to their higher involvement in economic activities, working in environments that may expose them to TB, and lifestyle factors such as alcohol and drug abuse, which are compounded by poor health-seeking behavior. According to the Kenya National Prevalence Survey (2015-2016), TB prevalence among men stands at 809 per 100,000 people.

Last year, the male-to-female ratio for TB diagnoses was 70-30%, with only 7% of children diagnosed, far below the expected 12-15%. These figures indicate a need for further outreach and awareness, particularly in ensuring

that children are properly diagnosed.

Despite these challenges, the county government, in collaboration with partners such as the Catholic Mission Medical Board (CMMB) and community health promoters, has made significant strides in improving TB diagnosis and treatment. Community health promoters have been trained to conduct TB contact tracing, household visits, and health education, while also referring presumptive TB cases to health facilities for diagnosis and treatment.

Dr. Harvey Mulei, the Chief Officer for Health, noted that the county has made progress in reducing the distance between health facilities, making it easier for TB patients to access services. The improvement in infrastructure has reduced travel distances by an average of 2 kilometers, ensuring that more people can reach health services in a timely manner.

To enhance TB diagnostics, the county has invested in state-of-the-art equipment, including two new biosafety cabinets at Makindu and Mbooni Sub-County Hospitals. The Global Fund and CIHEB have also supported the initiative by providing additional biosafety cabinets for Sultan Hamud and Kilungu Sub-County Hospitals, bringing the total to five. Furthermore, the procurement of eight high-quality bright field microscopes and TB microscopy reagents will strengthen diagnostic capabilities.

The department has also focused on building capacity by conducting refresher training for 25 laboratory officers who had not previously received formal training in TB diagnosis. These efforts are aimed at improving the accuracy of TB diagnosis and the overall quality of health services.

One of the biggest challenges in TB management remains patient adherence to treatment. Mulei emphasized that failure to adhere to the prescribed medication regimen can lead to the development of drug-resistant TB, a form of the disease that is much harder and more costly to treat. While drug-sensitive TB can typically be treated in 6 months, drug-resistant TB requires treatment over 18 to 24 months.

County health promoters Martin Mutisya and Kioko Mulatya, both serving at the County Referral Hospital, highlighted the difficulties they face when engaging with TB patients. Many patients, especially in rural areas, initially seek alternative forms of treatment, including traditional

medicine, before turning to medical help. By the time they seek professional care, the disease has often advanced, resulting in wasted time and sometimes even loss of life.

“We’ve been advocating for TB patients to seek medical services from our hospitals, but unfortunately, some are misled into trying traditional herbal remedies. By the time they come to us, their condition has worsened,” said Kioko. “This delay in seeking proper care often leads to complications, and sadly, some do not make it.”

Stigma surrounding TB remains another significant challenge. Kioko and Mutisya have been working tirelessly to educate communities about TB, especially during their home visits. They emphasize the importance of integrating TB patients back into their families and communities to reduce stigma and encourage timely treatment.

“Over the years, we’ve gained

more confidence and now collect sputum samples during our awareness sessions, which we take back to the referral hospital for testing,” Kioko explained. “We carry a vaccine carrier with us during visits and ensure we protect ourselves, as we interact with many people suspected of having TB.”

Both Mutisya and Kioko have personal experience with TB. Each of them was diagnosed with the disease at different times but was able to receive treatment and recover. Their personal journeys with TB fuel their passion for helping others, and they continue to serve with dedication, knowing firsthand the importance of early diagnosis and adherence to treatment.

As Makueni County continues its efforts to combat TB, the collective work of healthcare providers, community health promoters, and local partners is crucial in reducing the burden of the disease and ensuring better health outcomes for all.



Going Green on Energy Brings Big Savings for MCRH

Burdened with high power bills and rampant power outages, Makueni County Referral Hospital has made a big step towards cutting its dependence on electricity by embracing solar energy. The referral hospital is now making savings of about Ksh.600,000 monthly in electricity bills.

Before the installation of the solar system, the hospital's monthly electricity bills exceeded Ksh. 1.8 million. Following the upgrade, the bills for June and July 2024 were Ksh. 1.1 million and Ksh. 1.2 million, respectively, marking a significant decrease in costs.

The solar initiative not only supplements the often-unreliable grid electricity but also ensures a consistent power supply, which is crucial for the provision of medical services. Dr. Paul Musila, the County Executive Committee Member for Health Services, emphasized the environmental benefits of solar energy, stating that it reduces the hospital's carbon footprint while promoting sustainability.

This project aligns with Governor Mutula's long-term vision for sustainable economic growth in Makueni County. By harnessing the region's abundant sunshine, the administration aims to enhance various sectors, including agriculture, healthcare, manufacturing, and water provision.

Martha Munyao, the hospital's CEO, notes that the savings generated from reduced electricity bills are being reinvested into improving patient care through the procurement of pharmaceuticals and non-pharmaceutical supplies. "We are committed to providing quality services, and the turnaround times have improved significantly thanks to the solarization project," she says.

Governor Mutula, highlights the importance of transitioning to renewable energy as a key strategy in addressing climate change. The project is a collaborative effort involving partnerships with the UK government, Strathmore University, and the World Resources Institute.



MAKUENI SET TO REVOLUTIONIZE WOMEN'S HEALTH WITH CUTTING-EDGE LAPAROSCOPIC SURGERIES

In a move to transform maternal healthcare, Makueni County has partnered with the Laparoscopy Mashinani Program and the International Federation of Gynecology and Obstetrics (FIGO) to introduce laparoscopic surgeries, an innovative medical technique also known as keyhole surgery.

This minimally invasive procedure involves the use of a laparoscope, a device equipped with a camera and light, that is inserted into the body for diagnosis or treatment of various conditions.

Some of the key advantages of laparoscopic surgery include; smaller incisions resulting in reduced pain, minimal scarring, less blood loss, and a lower risk of infection among other benefits

Situations such as endometriosis, fibroids, ovarian cysts, ectopic pregnancies, and even tubal ligation or hysterectomies can now be managed with greater precision.

This partnership aims to bring life-saving and minimally invasive surgical services to rural areas, improving access to specialized care in underserved regions.

Governor Mutula Kilonzo Jr. notes that modern technological advancements in surgery are revolutionizing the medical field. He assures the residents of Makueni that the County will not be left behind in this exciting new chapter.

Gynecological conditions are a leading cause of death worldwide, with women in resource-limited countries bearing the brunt of these challenges.

The county government has already purchased one laparoscopy tower for conducting these procedures.



MPOX



REPUBLIC OF KENYA

MINISTRY OF HEALTH
State Department for Public Health
and Professional Standards



WHAT YOU NEED TO KNOW

Mpox (previously called Monkeypox) is a viral zoonotic disease (a virus transmitted to humans from animals) that occurs primarily in tropical rainforest areas of Central and West Africa and is occasionally exported to other regions.

Mpox is caused by a virus. Its symptoms are like those seen in smallpox patients, though less severe.

Signs and symptoms

- ◆ Skin rash
- ◆ Fever
- ◆ Sore throat
- ◆ Headache
- ◆ Body aches
- ◆ Backpain
- ◆ Low energy
- ◆ Swollen lymph nodes



How is it spread?

◆ Person-to-person contact:

- Close contact with skin lesions and body fluids.
- Inhaling contaminated particles or viruses.
- The most reported mode of transmission is sexual intercourse.
- Contaminated materials, e.g., needles, tattoos, bedding, linens, clothing, eating utensils, and sex toys, among others.

- ◆ **Mpox is transmitted to humans through close contact with an infected person or animal or with contaminated material.**

Who is at risk of Mpox?

- People in close interaction with Mpox, patients, e.g., household members and sexual partners (including commercial sex workers).
- People taking care of Mpox patients without the correct use of personal protective equipment.
- People who hunt, kill, handle, butcher, and prepare animals such as squirrels, rats, mice, and monkeys.
- People who work in laboratories without the correct use of personal protective equipment.
- Children, pregnant women, and those who may be weak due to other health conditions.
- People who have many sexual partners and/or frequent anonymous sexual partners.
- Even though some people may be more at risk than others, it is important to remember that anyone, anywhere, can get Mpox.

How do you prevent yourself from infection?

- ◆ Avoid close (face-to-face, skin-to-skin, mouth-to-skin, and mouth-to-mouth) contact with people who have been confirmed to have monkeypox or who have signs and symptoms of monkeypox.
- ◆ Avoid touching or sharing personal items like bedding, eating utensils, clothes, phones, or other belongings of a person who has the signs and symptoms of monkeypox.
- ◆ Avoid contact with all wild animals (alive or dead), especially those known to carry the virus, such as rodents or monkeys, and those that appear sick or have been found dead.
- ◆ Avoid eating wild animals (squirrels, rats, mice and monkeys).

For further information, contact the Ministry of Health Hotline
on: 719 or 0729471414 / 0732353535

MAKUENI LEADS IN FAMILY PLANNING UPTAKE AMONG NEW MOTHERS



Makueni County has emerged as the top performer in family planning uptake among women delivering in healthcare facilities, recording an impressive 25% uptake of postpartum family planning within 48 hours of delivery.

This was revealed by JHPIEGO's Family Planning Advisor in Makueni, Jane Wausi, who points out

that the organization is implementing the Accelerating Post-Pregnancy Family Planning Program in four counties; Makueni, Kwale, Kakamega, and Isiolo with Makueni leading in the initiative's success.

Christine Muindi, the County Coordinator for Reproductive, Maternal, Newborn, and Child Health, affirmed that the program aims to further scale up the uptake of post-pregnancy family planning services, ensuring more women can make informed reproductive health choices.

According to Muindi, postpartum family planning uptake within 48 hours of delivery has significantly improved, rising from 6.9% in 2022 to 12.1% in 2023.

Additionally, the uptake of postpartum family planning services at four to six weeks after delivery increased from 24.4% in 2022 to 33.7% in 2023, while the uptake of post-abortion family

planning rose from 8.9% in 2022 to an impressive 26.5% in 2023.

The increased uptake according to Wausi is propelled by the Jhpiego's collaboration with the Anita Mbinya Foundation and strengthening the capacity of Community Health Promoters (CHPs). These trained CHPs have been equipped to serve as family planning champions, advocating for increased awareness and accessibility of contraceptive options within local communities.

Progressively, Makueni continues to set the pace in advancing maternal health and reproductive rights, ensuring more women have access to timely and effective family planning services.

Register today for the
**NEW SOCIAL HEALTH
AUTHORITY (SHA)**
Available in all county Hospitals

For USSD Self registration
Dial *147#



MAKUENI REVOLUTIONIZES LAB SERVICES

WITH INTEGRATED SAMPLE NETWORKING AND ISO COMPLIANCE

The Department of Health Services in Makueni County has introduced an integrated sample networking system, an initiative aimed at optimizing diagnostics and enhancing efficiency in healthcare services.

Instead of requiring patients to travel to other facilities for laboratory tests, samples are collected at their respective health centers and transported via departmental motorbikes to referral hospitals. Once analyzed, patients receive their results via SMS, eliminating delays and reducing logistical burdens.

According to Jacinta Kasyoki, the County Medical Lab Coordinator, this approach improves diagnostic optimization while remaining cost-effective.

“Patients no longer have to make unnecessary trips. Instead, we ensure samples reach the necessary facilities swiftly, allowing for faster diagnosis and timely treatment,” she explained.

As part of efforts to strengthen laboratory services, Eni-Kenya has donated a centrifuge, a -20°C deep freezer, and a blood bank (2-8°C) to the Makueni Blood Satellite Center, enhancing blood storage and component management.

In a bid to streamline supply chains, the department also initiated the last-mile delivery of laboratory commodities directly to primary health facilities

from suppliers. This strategy, implemented in the FY 2023/2024, has greatly reduced stock-outs and improved commodity management at the facility level.

Makueni Referral Hospital's laboratory's commitment to quality healthcare has also been demonstrated by its achievements in ISO 15189 compliance, a globally recognized standard for medical laboratories. The facility attained this prestigious accreditation in December 2023, marking a major milestone in its journey toward excellence.

Additionally, Makindu Sub-County Hospital's lab, which received its ISO 15189 compliance certification in 2019, has consistently maintained its accreditation, further solidifying the county's reputation for high laboratory standards.

Makueni Referral Hospital Chief Executive Officer Martha Munyao emphasized the significance of these certifications, stating that they ensure the quality and reliability of test results, enhance patient safety, improve efficiency, and foster staff development.

“Patients can now have complete confidence in the accuracy of their diagnoses,” she noted.



MAKUENI, ILARA HEALTH PARTNER TO ENHANCE ULTRASOUND SERVICES



In January 2025, Governor Mutula Kilonzo Jr. inked a Memorandum of Understanding (MoU) with Ilara Health Limited to improve access to critical ultrasound services, particularly for pregnant women in Makueni.

Under the agreement, Ilara Health will provide Butterfly (mobile) ultrasound machines, advanced, handheld point-of-care devices capable of performing a wide range of scans that were previously carried out only at the hospitals.

Dr. Eric Mbuthia, Chief Medical Officer at Ilara Health, notes that these devices are designed to enhance healthcare delivery by making ultrasound services more accessible at the primary care level. He highlights that the machines can conduct up to 300 scans per month, helping to address the healthcare needs of Makueni residents.

Dr. Mbuthia demonstrates how the ultrasound devices function, emphasizing their ability to connect radiographers in Level 2 and Level 3 health facilities with specialists at the referral hospital through telemedicine for consultations on complex cases.

Governor Mutula welcomes the initiative, stating that the county plans to integrate the technology into its medical outreach programs, aiming to reach as many patients as possible. He also encourages other counties to leverage such innovations to improve healthcare services for their populations.

This partnership is expected to greatly enhance the quality of care in Makueni, particularly for pregnant women, and strengthen the county's healthcare infrastructure.



AI-POWERED SMS PLATFORM TRANSFORMS MATERNAL & CHILD HEALTH

Makueni County Government, in partnership with Jacaranda Health and Think well, is implementing the Kenya Quality Ecosystem Project, an innovative AI technology, enabling personalized communication with mothers.

The SMS platform is designed to empower mothers with essential knowledge on pregnancy and breastfeeding.

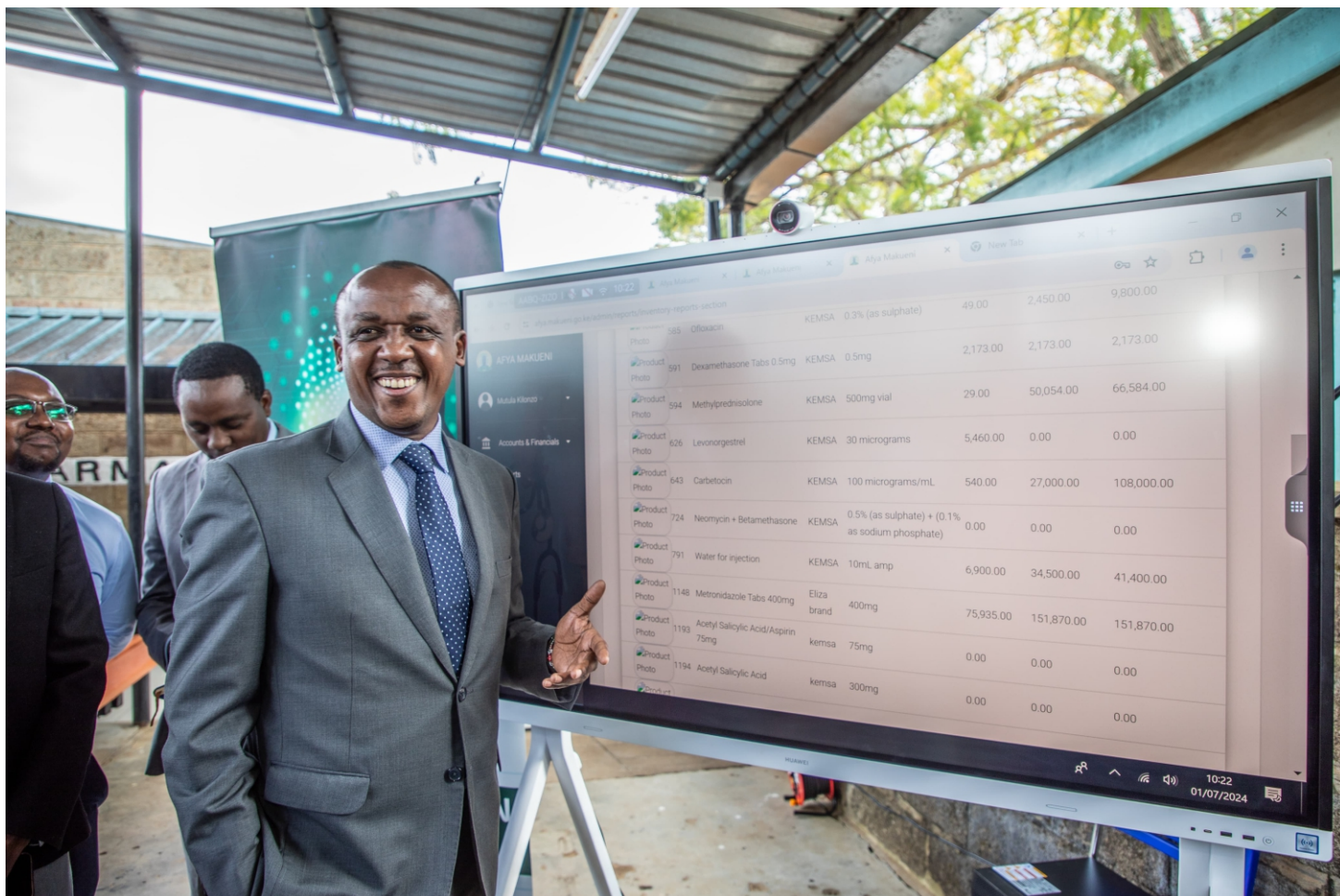
Tailored to each mother's unique gestational stage, the platform delivers timely, relevant messages that guide them through their pregnancy journey. The initiative is being rolled out across 30 health facilities and 15 basic emergency obstetric and newborn care centers in the county.

The messages cover a wide range of crucial topics, including: nutrition, pregnancy warning signs, reminders for antenatal care visits, tracking the number of visits completed and those remaining. Other topics covered are breastfeeding tips, immunization schedules for infants, guidance on when to wean children, and general health education on pregnancy and child growth milestones.

Christine Muindi, the County Coordinator for RMNCA (Reproductive, Maternal, Newborn, Child, and Adolescent Health), highlights that the system also allows mothers to respond to the messages, creating an interactive and supportive experience.

This initiative has been enhancing maternal and child health care in Makueni, ensuring that mothers receive the information they need at every stage of their pregnancy and beyond.

MAKUENI'S NETWORK OF CARE MODEL SLASHES MATERNAL & CHILD MORTALITY



Makueni County has successfully operationalized the Network of Care (NoC), a healthcare model recognized by the World Health Organization (WHO) as an interconnected system of service delivery sites that prioritize client-centered, efficient, and collaborative healthcare.

The model, which integrates 60 public and private healthcare facilities across six sub-counties, has yielded outstanding results. Makueni's maternal mortality ratio saw a dramatic decline from 124.5 per 100,000 in 2020 to 43.7 per 100,000 in 2023, stressing the effectiveness of this structured healthcare approach.

According to Dennis Matheka, the Deputy County Nursing Coordinator and a member of the WHO Networks of Care Steering Committee, the initiative has drastically improved referral systems, ensuring seamless

communication and coordination among facilities. This has led to timely and well-organized referrals, enhancing maternal and newborn care.

Matheka highlights that mentorship and capacity-building programs have played a pivotal role in strengthening the model. Further, he says that through continuous training, healthcare providers have gained critical skills and confidence in managing maternal and newborn emergencies, leading to improved patient outcomes.

Beyond strengthening individual healthcare facilities, the NoC model emphasizes collaboration between public and private health institutions, an approach that has proven to be both feasible and cost-effective for county governments seeking sustainable improvements in maternal and newborn healthcare.

“This initiative serves as a model for other regions aiming to implement structured, efficient, and client-centered healthcare systems,” Matheka emphasizes, urging other counties to consider adopting similar strategies for better maternal and child health outcomes.

Makueni's success with the NoC model demonstrates that strategic healthcare networks, enhanced communication, and continuous professional development can revolutionize maternal and newborn healthcare, setting a benchmark for other counties and regions to follow.

Advanced X-ray Technology Transforms Healthcare in Makueni

In March 2024, Benson Wambua, a resident of Kibwezi East and a boda boda rider was involved in a grisly road accident that left him requiring surgery for his broken hand.

Wambua however had to endure the excruciating pain as he waited for the X-ray results to reveal the severity of injuries. "I spent nearly the entire day waiting for my X-ray results because of technical issues. It was frustrating," he said.

"Now, with the new digital system, you can walk in, get served quickly, and leave with your results in hand and online!"

In August, another motorbike collision along the Mombasa-Nairobi highway left him with severe jaw injuries and was rushed to Kibwezi Sub-county Hospital for surgery.

This time however, in just ten minutes, Wambua had the X-ray results at hand and ready for theater. "I couldn't believe it!" he exclaimed, a smile breaking across his face as he held up his phone. "Not only did I get my results on paper, but they sent them to me on WhatsApp too!"

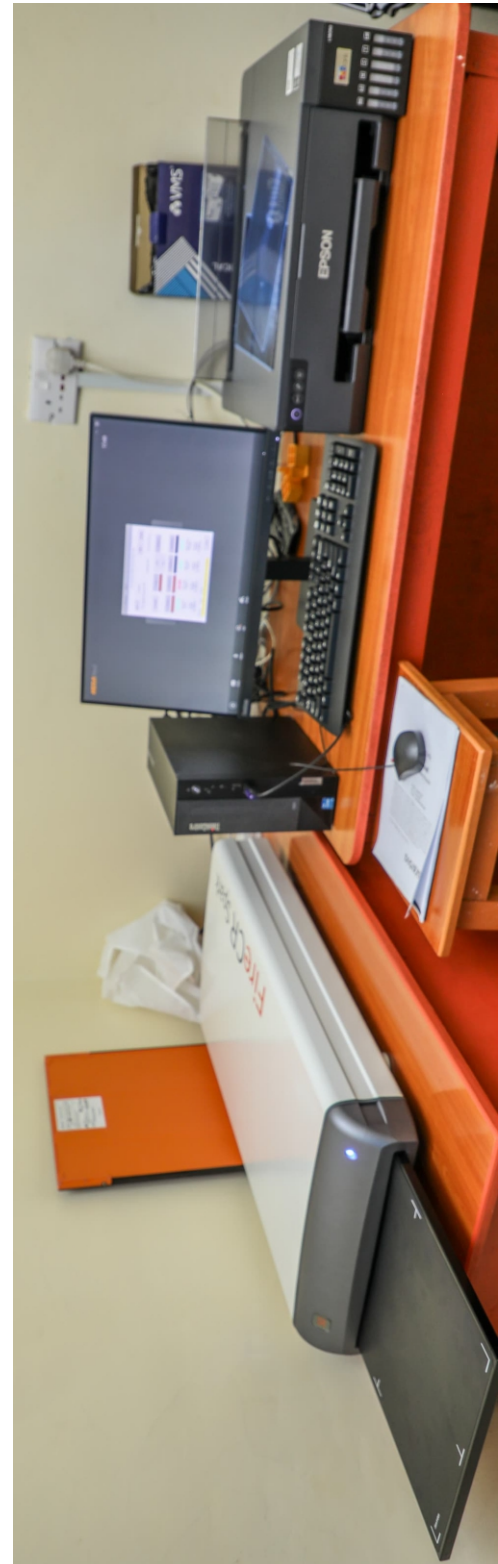
Thanks to Makueni County Government's investment in advanced computerized X-ray processors,

healthcare in all the Sub-county hospitals has gone a notch higher. The new X-ray machines have replaced the outdated manual X-ray system, with near real time turnaround time for results.

During the commissioning of these advanced X-ray systems, Governor Mutula Kilonzo Jr. highlighted the benefits they bring, including improved diagnostic accuracy, streamlined workflows, and significant cost savings for the county. "This technology revolutionizes our healthcare delivery on the positive impact of patient care," he says.

Chief Officer for Health Services, Dr. Harvey Mulei, expresses his enthusiasm for the new systems. "The manual equipment was becoming obsolete, and sourcing consumables and spare parts was increasingly difficult. With the old processors no longer in production, this new technology enhances efficiency and accuracy in our hospitals," he explains.

For patients like Wambua, the impact of these advancements is profound. "I'm grateful to the county government for making this change," he says. "It's not just about speed; it's about getting the care we need when we need it."



Makueni, Nutrition International

Partner to Create Safe Environment For Child Growth



In 2020, Makueni County signed a collaboration agreement with Nutrition International seeking to create a conducive environment for child development in the first 1,000 days after birth.

The partnership established a program dubbed Baby Friendly Community Initiative (BFCI) that promotes essential health practices such as Early Antenatal Care (ANC) before 13 weeks; a minimum of 4 ANC visits; Iron and folic acid supplementation for pregnant women; skilled birth attendance and initiating breastfeeding within the first hour of birth.

Chief Officer for Health Services Dr. Harvey Mulei notes that this initiative has enhanced exclusive breastfeeding, complementary feeding, and regular Vitamin A supplementation for children aged 6 to 59 months alongside deworming, growth monitoring, family planning, and maternal nutrition support.

The initiative operates through a network of 24 community health

units embedded in the county's healthcare system. Each unit consists of 10 Community Health Promoters (CHPs) and two Community Health Assistants who educate and provide outreach to caregivers, according to County Nutrition Coordinator Ruth Kaloki.

Mothers and caregivers with children under two years are organized into "Mother-to-Mother Support Groups" (M2MSGs)—small groups of 12 to 15 members led by "lead mothers" who facilitate bi-monthly discussions on health and nutrition.

Additionally, "Father-to-Father Support Groups" enable fathers to actively participate in maternal and child health, emphasizing their vital role in household decision-making.

With 378 Mother-to-Mother Support Groups and 17 Father-to-Father Support Groups established, the programme has reached over 4,000 mothers across the county. Kaloki further explains that CHPs not only educate on health but also train

caregivers on kitchen gardening, enhancing household dietary diversity.

Many participants have also embraced Village Savings and Loan Associations (VSLAs), fostering financial empowerment and sustained community engagement.

Data from health facilities linked to Baby Friendly Community Initiative sites show marked improvement in maternal and child health indicators, such as early ANC attendance, iron and folic acid supplementation, skilled birth attendance, early breastfeeding, and Vitamin A supplementation.

Kitchen gardens, promoted through the initiative, have further strengthened family nutrition.

MUNEE'S JOURNEY

FROM DRUG ADDICTION TO REDEMPTION

At just 30 years old, Catherine Munee has already lived through a storm she never saw coming. A promising student at Catholic University, she had to abandon her studies after falling into the abyss of drug addiction.

The turning point came in 2017 when she got involved with a man whose world revolved around drugs. Slowly, he introduced her to substance abuse, and before she realized it, school was a distant memory.

“Sometimes, I would have moments of clarity and talk about going back to school,” Munee recalls. “But he would always dismiss my dreams like fallen leaves.”

To sustain their addiction, the couple took up casual labor at a local hotel. Their meager wages, instead of putting food on the table, went straight to fueling their habits. Many nights, they went to bed hungry, lost in a haze of intoxication.

Her boyfriend's influence extended beyond just drugs. He encouraged her to watch films like *Friday* and *How High*, movies that glorified drug use. Munee now realizes how such portrayals subtly reinforced her addiction, making it seem normal, even desirable.

“These movies painted drugs as fun and harmless,” she says. “But once you're already hooked, they become an invitation to dive even deeper.”



Munee's struggles were compounded by the fact that she had lost her mother at a young age. She often wonders whether her life would have taken a different course had her mother been around. As if addiction wasn't enough of a battle, some of her relatives tried to take advantage of her vulnerable state, scheming to seize her late mother's property and inheritance. Fortunately, their efforts failed.

Seeing her life spiraling out of control, Munee's cousins intervened and took her to a rehabilitation center in Nairobi. She spent a year there trying to rebuild herself, but her recovery was far from complete.

Determined to support her journey to sobriety, her cousins encouraged her to join the Makueni County Government's psychology team. The initiative helped her recover fully. She is now enrolled in a short course at Wote Technical College and

hopes to return to university to complete her studies.

Looking back, Munee regrets the years she lost to addiction. She now dreams of becoming a voice in the fight against substance abuse, hoping to deter others from making the same mistakes.

“I wish I had never wasted my time on drugs,” she says.

“Sometimes, I feel the urge to lead the fight against substance abuse. I only wish drug peddlers understood the true cost of intoxication.”

According to Morgan Mwariama, the head of counseling services at the county referral hospital, the county has rehabilitated 110 individuals in the current financial year 2024/2025, with more undergoing treatment.

Empower Clinic Offers Lifeline to Cancer Patients in Makueni

Cancer continues to cast a long shadow over public health in Kenya, ranking as the third leading cause of death in the country. Among those battling this formidable foe is Rose Munini, a buoyant breast cancer survivor. Visitors to her rural home in Malivani may not immediately perceive the hardships she has faced; after five surgeries aimed at conquering the disease, her spirit remains unbroken.

When Afya Makueni visited her on a Friday morning, a vibrant Rose was preparing fresh fruits for her breakfast, embodying the vitality that belies her past struggles.

Rose's journey began in 2002 when she received her initial breast cancer diagnosis. The road to recovery has been fraught with challenges, including numerous surgeries and the financial burdens they entail.

Reflecting on her experience, Rose recalls, "In 2002, while working on my farm, I noticed my right breast was discharging a milky substance, despite having stopped breastfeeding three years prior. After discussing it with my husband, I consulted a friend who is a doctor, and he advised me to undergo several tests." The test confirmed her worst fear- malignant cancer cells were responsible for the milky discharge.

Rose had to make the hard decision of having her affected breast removed through a process known as mastectomy.

A decade later, Rose faced a recurrence of her illness in the form of cancer in her left breast. Unsure of how to proceed, she again sought medical advice, which led to another mastectomy for her safety. "The cancer was detected at stage two," she explains, emphasizing the importance of early detection. "If I hadn't gone to the hospital, I might not be in remission today. I encourage everyone in Makueni to take advantage of early cancer screenings."

Rose credits the Makueni County Government and the County First Ladies' Association for launching the "Empower Clinic" at the County Referral Hospital, where she has received ongoing care and support with many others.

When she is not attending medical appointments, Rose dedicates her time to her farm, where she and her husband cultivate oranges. It is this farming, where the two rake in between Ksh 1.2 million and K.sh 2 million, which helped the family compound Rose's condition at Kenyatta National Hospital. At one time, the family was slapped with a bill of Kshs 3.5M which it paid without straddling a begging bowl.



Data from the Makueni Empower Clinic reveal that a staggering 70.2% of cancer patients are diagnosed at stage four, with an additional 23.5% diagnosed at stage three. This makes it hard to treat and in most cases the patients are only put on lifetime medication.

Makueni County First Lady, Anita Mutula, has been a staunch advocate for free screening services for breast and cervical cancer, working to improve access to life-saving care for the community.

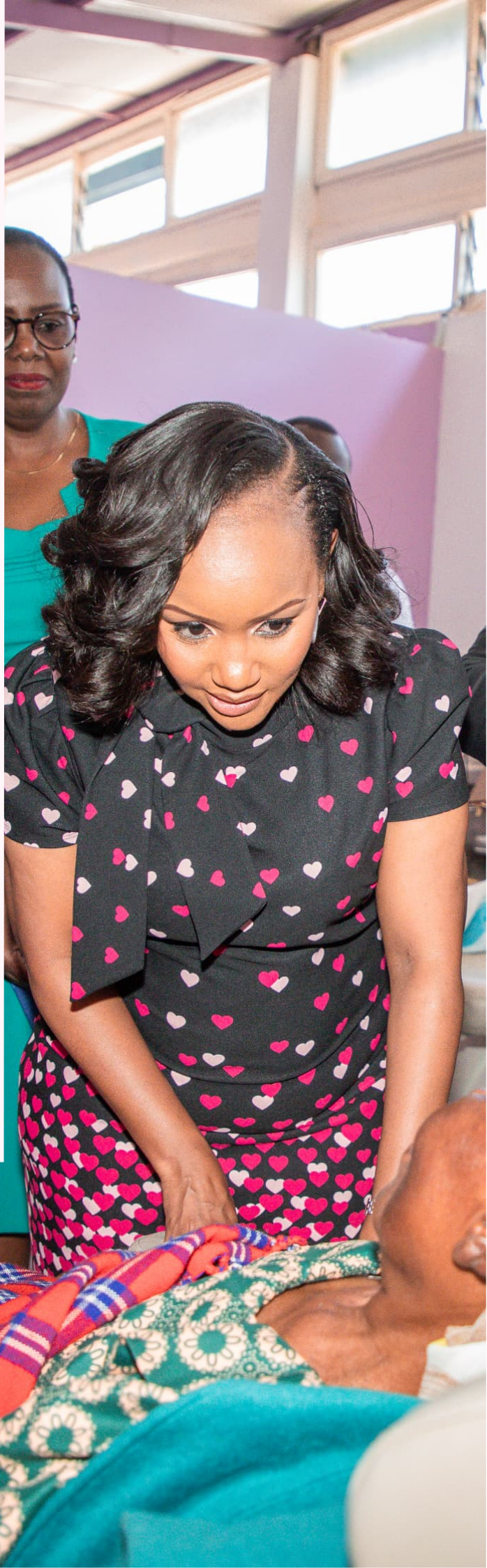
Anita underscores the importance of early detection and accessible healthcare for Makueni residents, stressing that these are essential in the broader fight against cancer across Kenya. She reveals that since its launch, the clinic has treated over a 1,000 cancer patients, offering critical treatment and support.

The clinic, which also provides comprehensive palliative care, is supported by partners including Roche-Kenya, Savanna Informatics Global Health, and the National Cancer Institute.

Dr. Gavin Orangi, an oncologist pharmacist at the Empower Clinic, reports that the facility is currently treating patients with 32 different types of cancer and manages chemotherapy services that cover 40 to 50 percent of oncology patients' needs. He notes that cancer medication is costly and poses a serious financial burden on patients. However, the county government has allocated funds for oncology medication, and the National Cancer Institute also supports the clinic by providing additional resources.

Dr. Orangi highlights that high patient volumes can occasionally lead to temporary shortages of specific drugs, forcing some patients to purchase medications privately. "Cancer treatment can be prohibitively expensive; a single dose may cost around five thousand shillings," Dr. Orangi explains.

Breast, cervical, and prostate cancers are the most prevalent, requiring higher quantities of medication according to Dr. Orangi.



Up-Close with Makueni First Lady Anita Mutula Reproductive Health Champion

1. As a spouse to one of the prominent governors in Kenya, what are you doing to support the governor's work?

A: The governor has a manifesto that articulates his agenda for the county, and a County Integrated Development Plan which guides all the development in the county. We all know counties are constrained of resources to fully implement these CIDPs to the letter. I complement the governor's work by raising more resources through partners to fund some of the programs with higher budget outlays especially in the health sector. I make sure to align my programs

with the CIDP so that I don't fall out of place with the county development trajectory.

2. Why did you choose the health sector?

A: My choice of the health sector is premised more on passion, especially on maternal and child health. As a champion of maternal and child health, it gratifies me to stand as a voice of the voiceless in advocating for more resources and focus in cancer screening and management, fistula screening and treatment, better nutrition under the malezi bora initiative, and family planning. This is not to say I turn a blind eye on other facets of healthcare, which we address on a need-basis, depending on availability of resources.

3. Out of the many programs you are running as a RAMNCHA+N champion, what are the key concerns that need the intervention of both county and the national governments? and what do you think should be done to address them?

A: Some of the key concerns coming out of this program are pre-mature births, neonatal and maternal mortalities. Navigating through the above requires

extra funding and emphasis by both counties and the national government.

4. Since becoming the First Lady more than two years ago, tell us how that has influenced your life in terms of how you lived then and now.

A: To start with, I am a mother of a teenage girl and a 7-year-old boy. Motherhood gives me strength and motivation to champion some of the programs such as child and reproductive health whose experience begins right at the family level. To balance the work, motherly and wifely duties calls for a lot of balancing so that all are given fair attention. To do this, I let the governor run many of the programs so that we are all not based at the county ignoring the family. I also take a stride at a time to avoid spreading too thin.

5. You have been so vocal in advocating for HPV vaccine for young girls, while we understand there are antivaxxers with various theories such as it being a birth control tool. What do you say to such naysayers, and the advice you can give?

A: It's true that there has been a long-standing hesitancy towards vaccines in some communities, and this is not unique to Kenya. The key is to educate and reassure people about the safety and efficacy of vaccines.



For example, during the COVID-19 pandemic, many were initially skeptical about the vaccine, but with time, transparency, and evidence, the broader public understood its importance. The same applies to the HPV vaccine. Despite some vocal opposition from anti-vaccine groups, it's essential to focus on the extensive research and the global approval from reputable organizations such as the World Health Organization (WHO), which confirm the vaccine's safety and its ability to prevent cervical cancer.

The HPV vaccine is a crucial tool in protecting the health of young girls and women, and the risks associated with not vaccinating far outweigh the baseless fears. My advice to those who are unsure is to seek information from trusted health professionals, and understand that this vaccine is not only safe but is a powerful means of preventing a potentially life-threatening disease.

6. You have been in the forefront in advocating for cervical and breast cancer screening, at one time even going for screening during one of the outreach camps in Makueni, while many would expect a person of your stature to get such services from high end health facilities. What was your drive?

A: My decision to undergo screening at the outreach camp was intentional. I

wanted to stand in solidarity with the women and girls of Makueni and experience firsthand the services they receive. I felt that by being present and participating, I could inspire more women to prioritize their health.

Being there allowed me to connect with them on a personal level, to reassure them that these screenings are safe, accessible, and essential for early detection. Seeing me take part encouraged many others to step forward and get screened. It was important for me to share in their experience and reinforce the message that these services are meant for everyone, regardless of status or background.

7. There has always been a focus on the girl child, including much of the work you do. What is the place of the boychild, who in recent times appears equally vulnerable?

A: The boy child has not been left behind in our programs. When we distribute dignity packs for girls, we also do for boys where they get a pack of boxers, toothpastes, tooth brushes and soap for general hygiene management. This is also to make them not feel left out. During the campaign for HPV vaccinations, boys are included, because research shows men are major spreaders of cervical cancer. When young girls are taught about menstrual hygiene boys are part of it so that they are socialized to be responsible

adults who appreciate women.

8. As a player in the health sector, what do you think of the budget cuts for several programs funded by the United States.

A: It is a big blow to the health sector. We just need to adjust ourselves to the new reality at both levels of government to circumvent the financing gap. I call on our leaders for more budgets and partners to realize the budgeting gaps and bridge them.

OBSTETRIC FISTULA PROGRAM in Makueni County: Finding the Forgotten Woman

Obstetric fistula (OF) is a devastating injury sustained during childbirth, resulting in severe, lifelong morbidity. Beyond medical complications, affected women often experience poverty, stigma, and both geographic and social isolation if left untreated. Women with fistula leak urine, feces, or both uncontrollably, significantly impacting their quality of life.

The 2015 Sustainable Development Goals (SDGs) are a universal call to action to end poverty and ensure prosperity and well-being for all. Preventing and managing obstetric fistula contributes to SDG3, improving maternal health. While OF has largely been eliminated in wealthier countries, it continues to devastate the lives of countless women in poorer nations.

Prolonged or obstructed labor remains the most common cause of OF, accounting for 75.4% of reported cases. Around 20% are considered iatrogenic, resulting from unsafe caesarean sections. Many women living with OF do not seek care, or they remain "hidden" due to the poverty, stigma, and isolation they experience. Of those who access care, only a few receive surgical treatment annually due to limited surgical capacity, leading to an intractable backlog of OF cases. Kenya currently has only 12 fistula surgeons, among them, Dr. Doris Mbithi, the lead fistula surgeon at Makueni County Referral Hospital.

It is evident that the leadership of Makueni County cares deeply about the health of women and their families.

Considerable investment and resources have been directed toward the Obstetric Fistula Program, in collaboration with Jhpiego Kenya. The overarching aim of the program is to prevent new OF cases and reduce the existing



Isurgical backlog — with the ultimate goal of eradicating OF in Makueni County.

To achieve this, several critical components must be in place: a skilled team capable of delivering OF services, a well-equipped repair center, supportive infrastructure, essential equipment and supplies, and a strong Community Health Promoter (CHP) platform for identifying cases, referral, and reintegration of affected women.

Thanks to ongoing capacity-building efforts, a full surgical and extended care team has been prepared to offer comprehensive services to women with obstetric fistula. A dedicated repair center has been established at the County Referral Hospital, receiving women referred from facilities across the county. The center is staffed with a trained surgeon, anesthetists, theatre nurses, screening nurses, a physiotherapist, psychological counselors, a nutritionist, and a social worker — all working together to care for women with OF.

Care extends beyond the facility into the community. Repairing a fistula does not always guarantee full recovery. These women need more than the physical closure of a hole, they require physical and mental rehabilitation and reintegration support. The repair center offers pre-operative, intra-operative, and post-operative care. Upon discharge, a multidisciplinary team conducts follow-up home visits to assess healing progress, monitor mental health, and support reintegration into the family and community.

The program also leverages the community health strategy platform, working through motivated CHPs who are trusted by the women and their communities. These CHPs identify potential clients during routine household visits and refer them for screening by trained nurses or doctors. Women who have successfully healed serve as powerful ambassadors, encouraging

others still in hiding to seek care.

The role of media cannot be overstated. Media, especially in local languages has the widest reach. Many women who eventually seek treatment often cite media as their source of information about OF. Indeed, addressing OF is everyone's business: health providers, CHPs, media professionals, healed women, community leaders, religious leaders, friends, neighbors, and families all have a role in reaching out to these women.

The impact of the OF program has been profound. Many lives both of the women and their families have been transformed. Makueni County now receives and hosts clients from other counties including Machakos, Kitui, Kajiado, Kiambu, and Kilifi, positioning it as a regional hub for OF care in eastern Kenya and beyond. The dignity of these women has been restored. There is immense joy among healthcare providers when they see the smiles of women who return for review, reporting that they are no longer leaking and sharing how their lives have changed as a result.

This program will continue to seek out and serve the "forgotten" women — until the last woman with fistula in Makueni County is repaired and healed.

Dr. Daisy Ruto

**Project Director,
Obstetric Fistula Project Jhpiego Kenya**

Pictorial



1. ENI Kenya Managing Director Enrico Tavolini and a delegation of the company staff donate nutrition supplements to Governor Mutula Kilonzo Jr. to enhance child healthcare in Makueni.
2. Partnership for New Life: Governor Mutula Kilonzo Jr. and ENI Kenya's Managing Director Enrico Tavolini share a photo moment at the Newborn Unit, Mother and Child Hospital, Wote, after the organization donated life-saving neonatal equipment.
3. An ophthalmology surgeon examines a cataract patient at Makindu Sub-County Hospital, during an eye camp.
4. Tender Moments: Deputy Governor Lucy Mulili interacts with a new mother during a routine visit to the Mother and Child Hospital to inspect delivery of services.
5. Caring Touch: Dr. Paul Musila shares a warm moment with an infant during a visit to the mother and Child Hospital.
6. Governor Mutula Kilonzo Jr. interacts with an obstetric fistula patient after her successful corrective surgery at the Mother and Child Hospital.
7. A state-of-the-art MRI machine at the Makueni County Referral Hospital meant to enhance delivery of health services
8. Nutrition supplies to manage cases of moderate acute malnutrition among children under five years in the County, courtesy of a partnership with Helen Keller International.



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