



POLICY DISSEMINATION BRIEF

National Reproductive Health (RH) Policy 2022-2032 Dissemination Brief.

Background

The National Reproductive Health (RH) Policy 2022–2032 is anchored in the Constitution of Kenya (2010), which guarantees every person the right to the highest attainable standard of health, including reproductive health. This policy aligns with the Kenya Health Policy 2014–2030, Kenya Vision 2030, ICPD@25 Nairobi Summit Commitments, and the Sustainable Development Goals (SDGs).

Despite progress over the past decade, Kenya continues to experience preventable reproductive health morbidity and mortality, inequities in access to services, and emerging challenges affecting vulnerable populations. The Policy provides a comprehensive framework to guide universal access to quality, equitable, and responsive reproductive health services across the life course.

Rationale

Reproductive health outcomes remain uneven across regions, socio-economic groups, age cohorts, and special populations. The Policy responds to key national priorities by:

- Aligning reproductive health programs with constitutional provisions within the devolved system of governance.
- Mainstreaming national RH priorities, including Universal Health Coverage (UHC).
- Increasing domestic financing for reproductive health programmes.
- Addressing reproductive health needs among adolescents and young people.
- Strengthening partner coordination, alignment, and stakeholder management.

Policy Goal

To minimize the burden of preventable morbidity and mortality related to reproductive health.

Strategic Objectives

The Policy seeks to:

- Achieve universal coverage of quality, comprehensive reproductive health interventions nationwide.
- Improve responsiveness to clients' reproductive health needs and expectations.
- Strengthen health system enablers, including partnerships, coordination, and collaboration.

Life-Course Approach

The Policy adopts a life-course framework to ensure continuity of care and tailored interventions across population groups:

- **Pregnancy & Newborn (0–28 days):** Safe motherhood, emergency obstetric and newborn care, postnatal services.
- **Childhood (28 days–9 years):** Preventive and early childhood health interventions.
- **Adolescence (10–17 years):** Adolescent-friendly services, prevention of early pregnancy, comprehensive sexuality education, and GBV prevention.
- **Early Youth (18–24 years):** Family planning, STI prevention and treatment, maternal health services.

- **Adulthood (25–49 years):** Comprehensive RH services including family planning, maternal care, infertility management, and cancer screening.
- **Older Adults (50+ years):** Menopause care, reproductive cancer screening, and integrated chronic care services.

Expected Outcomes

- Reduce unmet family planning needs.
- Promote gender equity.
- Improve RH outcomes.
- Strengthen RH implementation environment: data, research, innovation, human resources, and partnerships.



Call To Action

- **Ministry of Health:** Strengthen coordination, policy review, monitoring, accountability, and allocation of funding.
- **County Governments:** Strengthen coordination, allocate funding and integrate RH into planning processes.
- **Health Care Providers, including Pharmacists and Pharmaceutical Technologists:** Provide confidential, RH information, services, and reporting,
- **Development and Implementing Partners:** Support evidence-based programs.

