



STORIES OF CHANGE: SPOTLIGHT ON ALPHONCE KEMEI

INTEGRATING GENDER AND EVIDENCE-BASED PRACTICES IN HEALTHCARE DECISION-MAKING

Contributors: Sandra Y. Oketch, Henry Neondo, and Violet Murunga

The African Institute for Development (AFIDEP), together with the Makerere School of Women and Gender Studies, through the Alliance for Evidence and Equity in Policymaking in Africa (AEEPA), offered virtual training on evidence-informed and equity in policymaking to researchers and policymakers. The training, held in April 2024, aimed to equip participants with skills to access, appraise, synthesize, contextualize, and apply evidence in real-world settings, including policymaking processes, with a strong emphasis on gender equity and inclusion. This story is of Alphonce Kemei, a research officer working on maternal and newborn health programs at the Kenya Medical Research Institute. The story illustrates how this training has influenced his projects and led to tangible changes.

Alphonce's work involves capturing patient data in real time using machine-readable forms and feeding this information into decision-making processes. This approach ensures that health providers can access current data, enabling them to plan and allocate resources more effectively. Before the training, the project's focus was on evidence uptake and data management, but there was little consideration of gender dynamics in healthcare decision-making. After participating in the gender analysis component of the training, Alphonce realized that his project had not adequately captured gender issues during both its design and implementation phases. Specifically, he observed that ***"in most healthcare facilities, key leadership roles were occupied by men, while most staff in units like newborn care were women. This disconnect led to decisions that did not fully account for the needs and contributions of female healthcare workers, resulting in frustrations and inefficiencies"***.

The Alliance for Evidence and Equity in Policy-making in Africa (AEEPA) was established by the African Institute for Policy Development (AFIDEP).

AEEPA is one of three Africa LEEPS initiatives who lead technical capacity strengthening and policy engagement activities.

The Alliance aims to accomplish the following objectives:

- Strengthen institutional and individual EIP technical capacity at local and national levels to enhance decision-making in policy and programs with initial priority to reproductive health and clean energy
- Integrate gender equity in EIP processes at program and institutional levels with initial priority given to reproductive health and clean energy
- Nurture EIP networking and learning within countries and across the region
- Stimulate improvements in reproductive health and clean energy programmatic interventions in Kenya and Nigeria

The training helped Alphonse recognize the importance of including diverse voices in decision-making, especially those of women who were more involved in day-to-day patient care, while the majority of health leaders were male. This insight prompted immediate changes in his project, as Alphonse and his team began incorporating gender considerations into the project's monitoring and evaluation processes. By ensuring that decisions, especially around staffing and work conditions, were made collaboratively between male leaders and female providers, the project aimed to create a more inclusive and supportive environment for all healthcare workers.

Another key takeaway from the training was the importance of evidence-based practices in healthcare programs. Before the training, Alphonse was unfamiliar with evidence synthesis methods like systematic and scoping reviews. The training equipped him with the tools to conduct these reviews and apply the findings in practice, particularly engaging high-level stakeholders, like Ministry of Health officials and county health leaders. Alphonse's work spans five counties in Kenya, namely Machakos, Kiambu, Nairobi, Nakuru, and Kisumu, where he collaborates with health officials to improve maternal and newborn care. The training has enabled him to bridge the gap between field data and practice, ensuring that decisions are informed by robust evidence. For instance, he has started using data from scoping reviews to influence health planning at the county level and ensuring that interventions are grounded in the realities faced by health providers and patients alike.



Incorporating these practices has improved the quality of decisions and enhanced the sustainability of the interventions. Alphonse notes that **“contextualizing evidence and adapting solutions to local health facilities’ specific needs and values have been critical in making the interventions more impactful and sustainable”**. This approach ensures that solutions resonate with healthcare providers and patients, increasing the likelihood of long-term success.

The skills Alphonse gained from the training also helped him secure a mini-grant offered by the African Research and Impact Network (ARIN) for a project focused on post-discharge care for pre-term babies. The project aims to develop policies that promote shared decision-making between parents and healthcare providers, ensuring that both men's and women's perspectives are considered. By addressing the financial pressures that often lead to premature discharges from hospital admissions, the project hopes to improve outcomes for preterm babies and their families. Looking ahead, Alphonse envisions that the training will continue to influence his work, particularly in the way evidence is generated and applied. He plans to further integrate gender analysis into all aspects of his projects, specifically developing gender monitoring indicators, ensuring that interventions are evidence-informed and equitable.

In conclusion, the Evidence-informed and Equity in Policymaking Training has profoundly impacted Alphonse's work, leading to immediate changes in project implementation, the integration of gender analysis in his research, and the adoption of evidence-based practices. These changes have improved his projects' effectiveness and laid the foundation for more inclusive and sustainable healthcare interventions.