



Sustainable Scale-up Strategy

Kuwa Mjanja 2018-2020

September 2018



Background



– **Ultimate “owner”**: Ministry of Health, Community Development, Gender, Elderly, and Children

– **Focus area:** Evidence-based scale-up for sustainability¹

» Horizontal Scale-up
(Geographic Expansion)

» Vertical Scale-up
(Institutionalization)

– **Timeline:** 2018-2020

¹ExpandNet/WHO. Nine Steps for developing a scaling up strategy. 2010.

Vertical Scale

| for Sustainable Health System Ownership

- **Partnership with “Owners” at all health system levels**
 - National level– MOH
 - Regional level– Regional Health Offices
 - District level– District Health Offices, Public health facilities, Community Development offices, Youth Development offices

- **Institutionalized capacity through partnership**
 - National level —
 - Revised AYSRH in-service training curriculum, in partnership with AYSRH sub-group of the national SRH Technical Working Group
 - Job aids for key health and non-health cadres, integrating key Kuwa Mjanja content for youth friendly, cross-sectoral programming
 - Regional level —
 - Capacity development for KM supervision, financing, & planning
 - District level –
 - Capacity development for supervision and service delivery; collaboration between health and non-health local actors to deliver and sustain

Horizontal Scale

| for Sustainable Large-Scale Coverage

- **Today (Q1-Q2 2018)**
 - Active in
 - 18 regions
 - 1,059 total *one-time events* reaching 26,105 total adopters
- **Tomorrow (Q42018-2020)**
 - Sustainable coverage in MOH priority districts
 - Lasting Kuwa Mjanja coverage in:
 - 100 districts
 - Reaching 150,000 15-19 year old girls

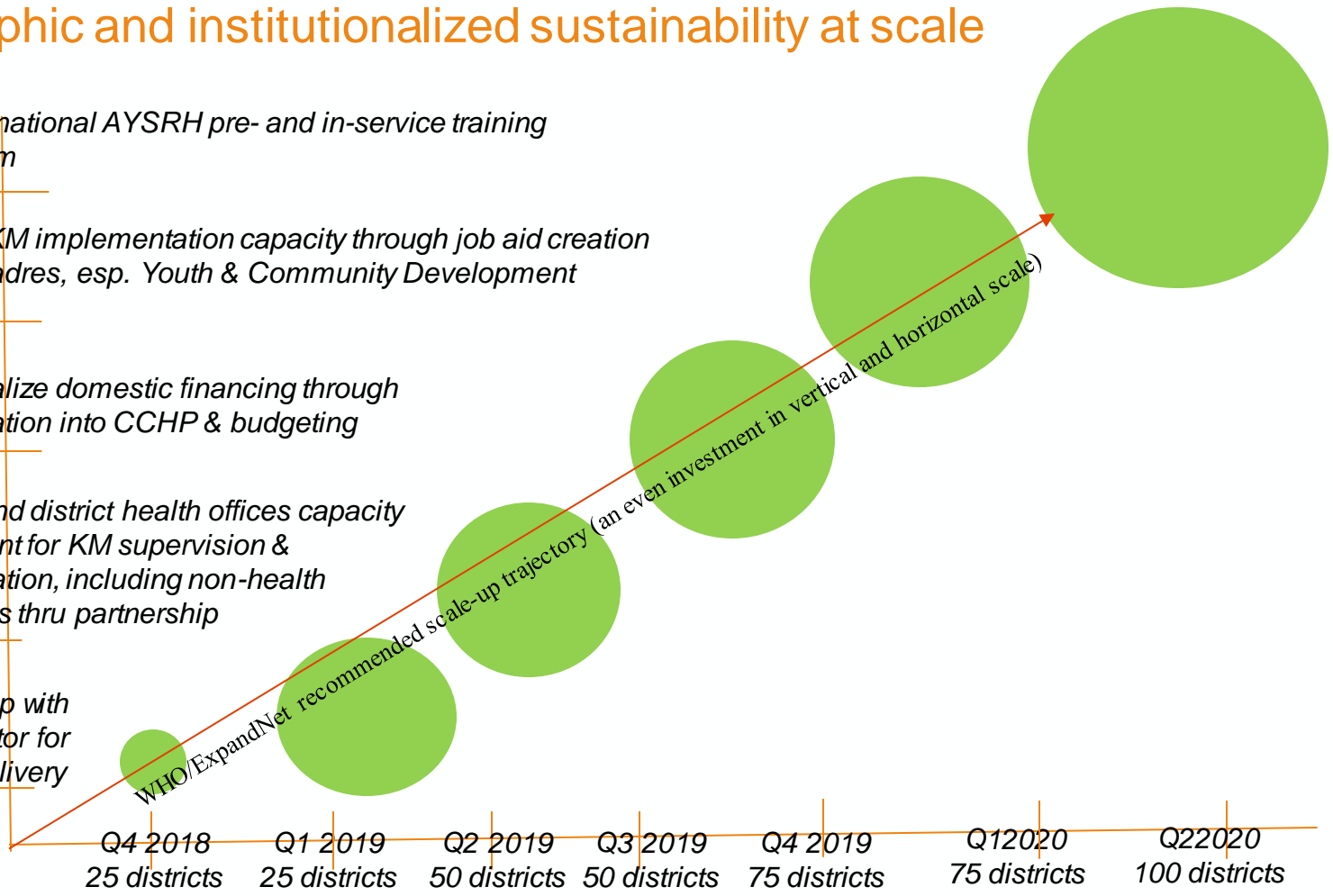


Sustainable Scale-Up Trajectory

Geographic and institutionalized sustainability at scale

Vertical scale: Institutionalizing Kuwa Mjana

- Revised national AYSRH pre- and in-service training curriculum
- Sustain KM implementation capacity through job aid creation for key cadres, esp. Youth & Community Development Officers
- Institutionalize domestic financing through KM integration into CCHP & budgeting
- Regional and district health offices capacity development for KM supervision & implementation, including non-health components thru partnership
- Partnership with public sector for service delivery



Horizontal scale: Geographic expansion & saturation of Kuwa Mjanja sites

Note: From Q42018-end of project, Kuwa Mjanja will employ a kickstart capacity development approach, whereby mobilization and service delivery overlaps with targeted capacity development for future district and facility public sector “owners”