



A Strategic Blueprint for Health Civil Society Collective Action in Kenya

AN OVERVIEW

A Shifting Health Landscape

Kenya's health system is undergoing significant change. Shifts in financing, governance, the legal environment, and political leadership are changing how decisions are made, how resources flow, and how civil society can influence health outcomes.



A devolved health system

Civil society must engage with and connect both national policy and 47 distinct county systems and realities.



Health financing in transition

Shrinking external funding and new financing models raise the stakes for how health resources are allocated and spent.



A legal space for civil society

Legal and public-participation frameworks (such as the Public Benefits Organizations Act) create entry points for civil society, but access and enforcement remain uneven.



Political transitions

Any partnership civil society builds must be designed to survive political transitions and turnover rather than depend on individual goodwill.

Built by and for Kenyan health civil society

The Blueprint grew from more than a year of collective sensemaking, consultation and action with Kenyan health civil society, convened by HENNET with Humentum.

Hennet
Health NGOs' Network



For health civil society, adapting organisation by organisation will not be enough. The way civil society works together also must change.

From Fragmentation to Collective Action



Kenya's health civil society already has deep expertise, relationships, networks and reach.

The opportunity is not to build another structure, but to connect what exists more effectively by sharing information, finding synergies and acting collectively where doing so creates greater influence.

MOVE AWAY FROM

- Fragmented efforts
- Duplicated work
- Competing asks
- Information held within organisations



MOVE TOWARDS

- Stronger coordination
- Complementary roles
- Shared positions where they matter
- Collective action where no organisation can succeed alone



The goal is to use this Blueprint

to strengthen a connected, credible and independent health civil society that works across organisational boundaries, strengthens community voice, and brings collective influence to shaping an equitable and accountable health system.

What is the Blueprint?

The Strategic Blueprint is a shared foundation for collective action, co-created through more than a year of sensemaking, consultation, and action with Kenyan health civil society, convened by HENNET and Humentum.

It identifies what health civil society must protect and evolve, where collective effort should focus, how civil society engages others, and the commitments needed to work together effectively.

It is not a comprehensive sector strategy or finished implementation plan. It provides shared direction from which more specific action can grow.

Read the full blueprint →



Like a building, each part depends on the others.

Civil Society's Distinctive Value

What must be protected as we evolve

Four core civil society functions must be protected as the health landscape shifts:

1

ACCOUNTABILITY

Civil society helps ensure government and other duty-bearers follow through on commitments, use resources responsibly, and uphold people's rights.

2

SERVICE DELIVERY

Civil society helps deliver or extend services where government systems don't fully reach.

3

INTERMEDIARY

Civil society helps close the information and accountability loop between people's lived experience and the health system.

4

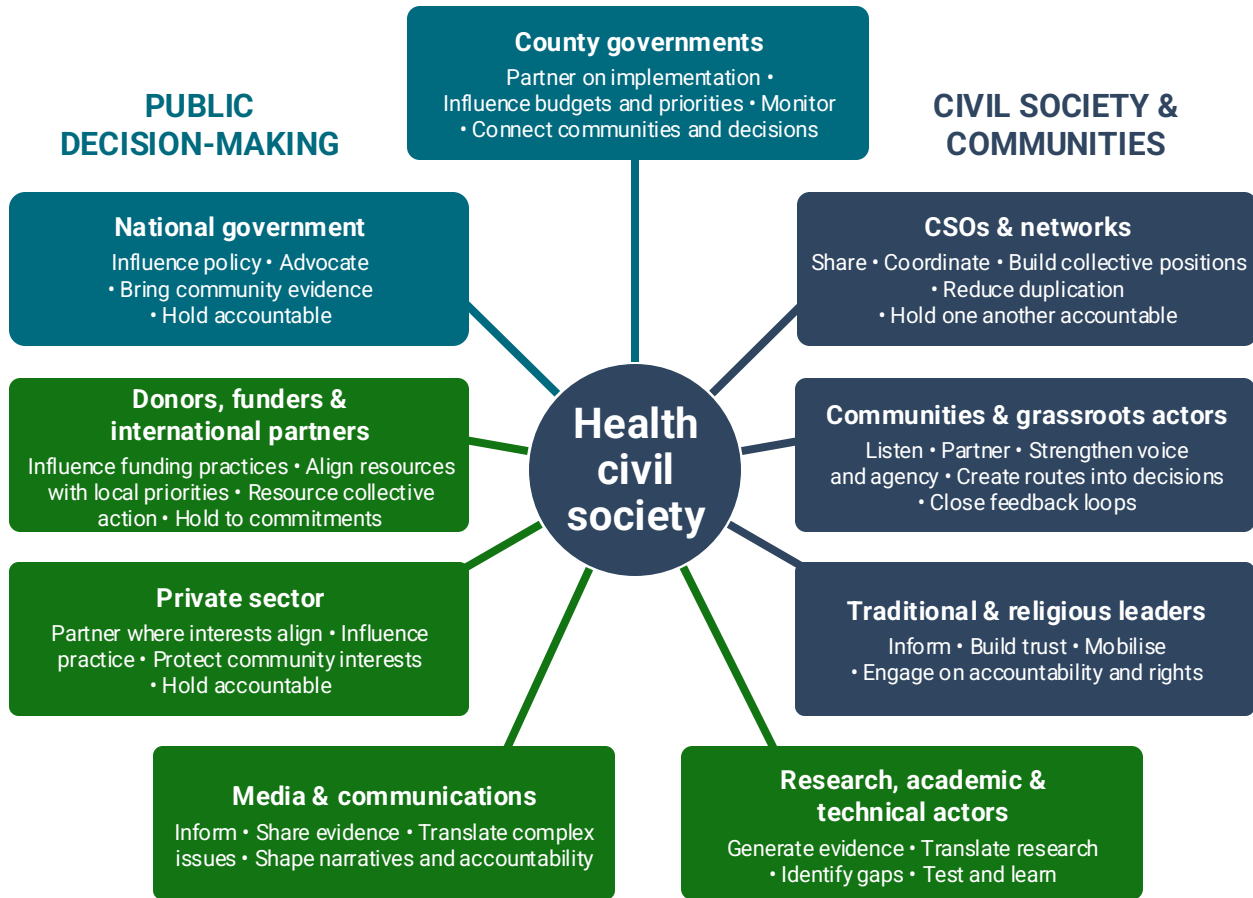
ADVOCACY AND AGENDA SETTING

Civil society helps shape what government prioritises and how policies, budgets, and decisions respond to people's needs and rights.

**And yet protecting these core functions does not mean protecting the status quo.
As the health landscape changes, the ways civil society performs them must evolve.**

Different Actors, Different Relationships

Health civil society operates within a wider ecosystem. Different relationships require different forms of engagement – partnering, influencing, informing, enabling and holding accountable.



Four Priorities for Collective Action

So where can greater collective action strengthen the role and influence of health civil society?
In the four areas below, acting together can achieve more than organisations acting alone.



Representation and Accountability

Strengthen legitimate civil society representation and accountability in health decision-making spaces.



Health Outcomes and Resource Allocation

Focus collective advocacy on specific, evidence-based policy and budget changes that improve health outcomes.



Government Partnership and Implementation

Establish clear and lasting ways for civil society and government to work together.



Coordination and Collective Action

Strengthen the connections, information flows, and coordination mechanisms that enable civil society to act collectively.

What Those Priorities Mean in Practice

1 **Mandate representation**

Establish credible CSO representation in government-to-government spaces

2 **Build one shared ask**

Shared evidence-based budget asks

3 **Test county partnership**

Practical county government – CSO working arrangements

4 **Map and connect**

Stronger connections and information channels between existing networks



These are practical starting points to test and learn from – not a complete implementation plan.

Start with practical action. Build on what already exists.

How We Work Together Matters as Much as What We Work on

Stronger collaboration does not happen because organisations agree on priorities.
It happens because they choose to work differently.

These are not abstract values. The commitments outlined below capture behaviours essential for building trust, increasing collective impact, and strengthening the role of health civil society in Kenya.

WE SHARE BEFORE WE COMPETE

Share information, learning and opportunities; resist hoarding and territorial behaviour.



WE PRIORITISE COLLECTIVE IMPACT

Build shared positions and measure success by what we achieve together.



WE STAY ACCOUNTABLE TO COMMUNITIES

Strengthen community voice and close the feedback loop between communities and decision-makers.



WE HOLD OURSELVES ACCOUNTABLE

Practice the transparency, integrity and constructive challenge we expect from others.



Collective Action Doesn't Remove the Hard Choices

Naming tensions early makes it easier to navigate them before they become conflicts.

1 Access to government ↔ Independence from government

How do we gain influence without weakening our ability to hold government accountable?

2 Ambition ↔ Capacity

How do we advance four interconnected priorities without spreading limited capacity too thinly?

3 Strengthening what exists ↔ Creating something new

How do we strengthen existing networks and mechanisms before adding another layer?

4 Collective voice ↔ Organisational interests

How do we act collectively while recognizing organisations' legitimate needs for funding, visibility, and identity?

5 Urgency ↔ Inclusion

How do we move quickly when needed without excluding the voices that give collective action legitimacy?



The goal is not to eliminate these tensions, but to navigate them deliberately.

What Would be Different if this Works?

One year from now, we would expect to see:



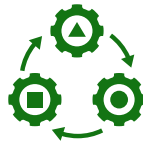
A stronger collective voice

Civil society enters key decision-making spaces with credible representation and shared positions—while protecting its independent watchdog role.



More focused collective influence

Organisations bring shared, evidence-based policy and budget asks rather than multiple competing demands—and follow commitments through to implementation and health outcomes.



More durable government–civil society partnership

Practical working arrangements are being tested at county level, documented, and adapted rather than rebuilt from scratch.



Stronger connective tissue

Networks know how they connect, information and opportunities move more freely, and organisations spend less time duplicating one another's work.



Communities with greater agency

Communities have stronger routes into decisions and accountability—not only being spoken for, but increasingly speaking for themselves.



Success is not simply more collaboration. It is better health civil society coordination, influence, and accountability in service of communities and health outcomes.

This Blueprint is an Invitation to Act

Use it.

Bring the Blueprint into your organisation, network, and partnerships. Use it to test your own priorities, relationships, and ways of working.

Challenge and strengthen it.

Confirm, sharpen or challenge what it proposes. The Blueprint should continue to evolve through use.

Find where you can contribute.

Bring people, evidence, relationships, resources or leadership, and look first for opportunities to connect with work already underway.

Act together.

Share information, coordinate positions and pursue collective action where it creates greater influence than acting alone.



This Blueprint is a starting point, not an endpoint. Its value will come from what people do with it.

Explore the full Blueprint and practical guidance.



What happens next? Civil Society Roadmap to Resilience Kenya (CSO R2R-Ke) is beginning to translate the Blueprint's four priorities into practical 6–9 month action, testing what works and learning as it goes.

Who Shaped the Blueprint

HENNET and Humentum partnered to convene and facilitate the process behind the Blueprint, connecting perspectives, supporting collective sensemaking, and translating the learning into a practical resource.



About HenNet

HENNET (the Health NGOs Network of Kenya) is a national network of health NGOs, connecting and strengthening health civil society and amplifying its collective voice in policy, financing, and accountability spaces. <https://hennet.or.ke/>



About Humentum

Humentum is a global organisation that helps social good organisations strengthen how they operate, adapt, and work together to achieve their missions. www.humentum.org

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Community Change advocate
Crawn Trust
Diplomats For Health In Resilient Community (DFHRC)
Eldoret Inner Harbour Resort
FAWS
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