# The Siaya County Health Diplomacy Framework: Advancing Climate-Resilient Local Health for Global & Continental Aspirations

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## Preamble

In solemn recognition of our commitment to the Constitution of Kenya, the global 2030 Agenda for Sustainable Development, the continental vision of Agenda 2063: The Africa We Want, and the decisive global action mandated by the Paris Agreement under the United Nations Framework Convention on Climate Change; and

Guided by the belief that health is a fundamental human right, a cornerstone of sustainable development (SDG 3), and a prerequisite for a prosperous Africa based on healthy and well-nourished citizens (Aspiration 1 of Agenda 2063); and

Affirming that our pursuit of Universal Health Coverage (UHC) and a robust Primary Health Care (PHC) system is a direct investment in achieving SDG 3 and building Africa's Human Capital for a transformative future; and

Declaring our unwavering resolve to confront the existential threat of climate change, aligning our actions with SDG 13 (Climate Action), our commitments under the Paris Agreement, and Aspiration 1's call for environmentally sustainable and climate-resilient economies and communities; and

Recognizing that our local action in Siaya County is a strategic and deliberate contribution to these interconnected global and continental blueprints.

The Government of Siaya County hereby establishes this Health Diplomacy Framework to articulate our integrated vision and to forge purposeful partnerships for a healthy, equitable, and sustainable future.

## Our Vision for a Healthy Siaya by 2050

To be a leading sub-national model in accelerating the Sustainable Development Goals and contributing to the aspirations of Agenda 2063 by achieving "Health for All" through a prosperous, low-carbon, and climate-resilient health system, in alignment with the Paris Agreement. Our vision is to empower a healthy populace that drives local prosperity, reduces poverty (SDG 1), and contributes to a transformed, unified, and peaceful Africa (Aspiration 4).

## Our Guiding Principles: A Health System Aligned with Global & Continental Goals

This Framework is operationalized through the six core building blocks of the health system, each designed to create synergistic impacts across the SDGs and Agenda 2063.

### 1. Leadership and Governance: Fostering Collaborative Stewardship for the Goals

Siaya County commits to transparent, accountable, and inclusive governance (SDG 16) in line with Aspiration 3 on good governance. We will:

i. Champion policy coherence by integrating the One-Health Approach to simultaneously advance SDG 3, 13, and 15 and Aspiration 1's goals for a healthy and sustainable Africa.
ii. Strengthen multi-stakeholder partnerships (SDG 17 / Agenda 2063's Continental Framework) to align domestic and international resources, including climate finance, with our integrated health and climate priorities.

iii. Use data from our advanced health information systems to report on our contribution to both SDG and Agenda 2063 indicators.

### 2. Health Workforce: Health Workforce: Investing in Our Frontline Diplomats of Health and Climate Resilience

Recognizing our health workers as the foremost ambassadors of health service delivery and as critical agents for achieving our Sustainable Development Goal (SDG) 3 commitments and building a climate-resilient future, we will pursue strategic partnerships to:

i. Enhance the capacity, training, and retention of a multi-disciplinary health workforce, in direct alignment with SDG 8 (Decent Work and Economic Growth) and Agenda 2063's Aspiration 1 for a high standard of living, quality of life, and well-being for all. This includes developing competitive career pathways and fostering a supportive work environment to build Africa's Human Capital and retain expertise within the continent.

ii. Promote the exchange of skills and expertise through international health partnerships, tele-mentoring programs, and diaspora engagement networks, operationalizing SDG 17 (Partnerships for the Goals). We will leverage these collaborations to fast-track the transfer of knowledge on climate-smart health technologies and innovations, fostering the "African Knowledge Society" envisioned in Agenda 2063's Aspiration 2.

iii. Equip our workforce with the competencies required to address climate-sensitive health challenges, manage new diagnostic technologies, and lead in low-carbon, sustainable healthcare practices, fulfilling our adaptation obligations under the Paris Agreement. This includes specialized training in using the Early Warning, Alert, and Response System (EWARS), implementing the One-Health Approach to tackle zoonotic diseases exacerbated by climate change, and adopting green practices that mitigate the health sector's environmental footprint, contributing to Kenya's Nationally Determined Contributions (NDCs).

### 3. Health Information Systems: Harnessing Geospatial Intelligence for the 2030 Agenda and Africa's Digital Transformation

We will leverage data as a strategic asset by building a High Spatial Resolution Geo-Enabled Health Information System, contributing to Africa's digital transformation (Aspiration 7). This will:

i. Power a robust Early Warning, Alert, and Response System (EWARS), directly contributing to SDG 3.d and strengthening Africa's health security against climate and pandemic threats.

ii. Map the intersection of health outcomes with poverty (SDG 1), malnutrition (SDG 2), and water access (SDG 6), enabling targeted, cross-sectoral interventions for inclusive growth.

iii. Provide the evidence base for building resilient infrastructure (SDG 9) and inform our journey towards a climate-resilient continent.

### 4. Access to Essential Medicines and Technologies: Fostering Innovation, Sovereignty, and Justice

Our commitment to a reliable supply of health commodities is a direct target of SDG 3.b and supports Aspiration 1. We will:

i. Leverage Diagnosis for All to decentralize healthcare, reducing inequalities (SDG 10) and building a resilient system less dependent on fragile global supply chains.

ii. Promote innovation (SDG 9) and contribute to African pharmaceutical sovereignty through partnerships for local manufacturing and technology transfer.

iii. Strengthen green supply chains, contributing to responsible consumption and production (SDG 12) and our continental climate resilience goals.

### 5. Health Financing: Investing in a Sustainable and Equitable Future

To achieve financial protection (SDG 3.8) and build a prosperous Africa (Aspiration 1), Siaya County will:

i. Align health financing with inclusive growth, viewing it as an investment in human capital to combat poverty (SDG 1) by preventing catastrophic health expenditure.
ii. Explore innovative climate and health financing mechanisms, aligning with SDG 17 and the partnership models of Agenda 2063 to fulfil the objectives of the Paris Agreement.
iii. Champion investments in climate-resilient health infrastructure as a core component of sustainable development (SDG 9 & 13) and a secure Africa.

### 6. Service Delivery: Delivering Integrated, Person-Centred Care for a Thriving Populace

Our service delivery model is designed for cross-cutting impact on both global and continental goals:

i. Our Integrated Preventive and Curative Health model ensures every interaction promotes health (SDG 3), well-being, and empowerment, contributing to a skilled and thriving citizenry.
ii. By scaling up Diagnosis for All within a geo-enabled system, we empower communities, enable proactive adaptation to climate-induced disease shifts, and advance gender equality (SDG 5) by reducing care burdens.
iii. Mainstreaming the One-Health Approach ensures our services safeguard life on land (SDG 15), protect vital livestock economies, and secure the environmental foundations of our collective prosperity.

### A Call to Partnership for the SDGs, Agenda 2063, and the Paris Agreement:

The ambitious visions of the 2030 Agenda, Agenda 2063, and the Paris Agreement cannot be achieved in isolation. The Government of Siaya County, in its determined pursuit of Health for All, extends a formal invitation for a Decade of SDG and Continental Action.

We seek collaboration with the United Nations, African Union, the Kenyan National Government, bilateral and multilateral development agencies, the private sector, academic institutions, civil society, and Kenyans in Diaspora to co-create solutions that demonstrate how targeted, integrated health investments can create a powerful ripple effect, accelerating progress across the Sustainable Development Goals, advancing climate resilience, and firmly establishing Siaya County as a contributor to "The Africa We Want."

Together, let us make Siaya a beacon of sustainable and equitable health, proving that local action is the bedrock of global and continental progress.

**Theory of Change: Siaya County Health Diplomacy & Climate Resilience Framework**

**Vision (The Long-Term Impact):**

Siaya County is a leading sub-national model of a low-carbon, climate-resilient health system that achieved Universal Health Coverage (UHC), safeguarded the well-being of its people and contributing to Kenya's Nationally Determined Contributions (NDCs), the SDGs, and the aspirations of Agenda 2063.

**Overarching Goal:**

To achieve "Health for All" in Siaya County by 2035 through a transformed, equitable, and sustainable health system that is resilient to climate shocks and stresses, as articulated in the Health Diplomacy Framework.

**The Pathways of Change**

This Theory of Change is structured around the six building blocks of the health system, demonstrating how each is strengthened to contribute to the three overarching impact pathways, reflecting the integrated nature of the policy. The pathways are: (i) The Health System Strengthening Pathway, (ii) The Climate Resilience and Adaptation Pathway, (iii) The Low-Carbon and Sustainability Pathway

| INPUTS | ACTIVITIES (Aligned with Policy Pillars) | OUTPUTS (Direct Results) | OUTCOMES (Short & Medium-Term Change) | IMPACTS (Long-Term Goal) |
|---|---|---|---|---|
| **FINANCIAL RESOURCES**<br>County health budget; International climate & health finance; Diaspora Infrastructure Bond; Green Climate Fund. | **1. LEADERSHIP & GOVERNANCE**<br>i. Integrate One-Health & climate into all health policies.<br>ii. Forge multi-stakeholder partnerships (SDG 17).<br>iii. Report on SDG, Agenda 2063 & NDC indicators. | i. Revised County health policies reflecting climate diplomacy.<br>ii. Functional multi-stakeholder partnership forum established.<br>iii. Annual "State of Health & Climate" report published. | **SHORT-TERM (1-3 YEARS)**<br>i. Improved policy coherence.<br>ii. Increased access to partnership resources.<br>**MEDIUM-TERM (3-7 YEARS)**<br>i. Siaya recognized as a leader in sub-national health diplomacy.<br>ii. Direct access to international climate finance secured. | **GOAL**: "Health for All" in a Climate-Resilient Siaya (By 2035)<br>i. Significant improvement in life expectancy and reduction in mortality rates.<br>ii. A healthy, productive populace driving local development.<br>iii. Siaya's health gains are protected from climate impacts.<br>iv. The health system is a low-carbon, national |

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| | | | | model contributing to Kenya's NDCs. |
| **HUMAN RESOURCES**<br>Health workers; Community Health Promoters (CHPs); Data managers; Policy makers, Diplomacy envoys. | **2. HEALTH WORKFORCE**<br>i. Train workforce in climate-health, EWARS, and green practices.<br>ii. Launch "Siaya Homecoming Fellowship".<br>iii. Promote skills exchange via tele-mentoring. | i. % of health workers trained in climate-sensitive health issues.<br>ii. Diaspora Fellowship program launched with X fellows/year.<br>iii. Digital Skills Portal operational. | **SHORT-TERM (1-3 YEARS)**<br>i. Improved skills for managing climate-sensitive diseases.<br>ii. Increased workforce motivation.<br><br>**MEDIUM-TERM (3-7 YEARS)**<br>i. Improved retention of skilled staff.<br>ii. A "brain gain" from diaspora knowledge transfer. | |
| **TECHNOLOGICAL INFRASTRUCTURE & DATA**<br>Diagnostics; Geo-Enabled HIS software; Renewable energy tech; Resilient health facilities. | **3. HEALTH INFORMATION SYSTEMS**<br>i. Deploy High-Resolution Geo-Enabled HIS.<br>ii. Power the EWARS with climate and health data. | i. Geo-Enabled HIS & EWARS fully operational.<br>ii. Real-time data driving public health alerts. | **SHORT-TERM (1-3 YEARS)**<br>i. Faster detection of disease outbreaks.<br>ii. Data-driven resource allocation.<br><br>**MEDIUM-TERM (3-7 YEARS)**<br>i. Proactive public health interventions.<br>ii. Reduced morbidity from climate-sensitive diseases. | |
| **PARTNERSHIPS & GOVERNANCE**<br>UN; AU; National Government; Bilateral & Multilateral Development Agencies, Private Sector; | **4. ACCESS TO MEDICINES & TECHNOLOGY**<br>i. Scale up "Diagnosis for All".<br>ii. Promote local manufacturing & green | i. "Diagnosis for All" devices deployed to all primary care facilities.<br>ii. Green procurement guidelines adopted. | **SHORT-TERM (1-3 YEARS)**<br>i. Increased early disease detection at community level.<br>ii. Reduced supply chain disruptions. | |

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| Academia, Kenyans in Diaspora. | supply chains. | | **MEDIUM-TERM (3-7 YEARS)**<br>i. Reduced out-of-pocket expenditure.<br>ii. Lower carbon footprint from supply chains. | |
| **POLICIES & LEGISLATION**<br>County Health Policy;<br>Climate Change Act. | **5. HEALTH FINANCING**<br>i. Explore climate-health financing mechanisms.<br>ii. Champion investment in resilient infrastructure. | i. X% of county health budget allocated to climate resilience.<br>ii. $Y million secured in climate finance for health. | **SHORT-TERM (1-3 YEARS)**<br>i. New funding streams identified.<br><br>**MEDIUM-TERM (3-7 YEARS)**<br>i. Increased & sustainable financing for resilient health systems.<br>ii. Reduced financial burden on households. | |
| **COMMUNITY AGENCY**<br>Local community structures. | **6. SERVICE DELIVERY**<br>i. Mainstream One-Health Approach.<br>ii. Deliver integrated preventive/curative care.<br>iii. Scale up community-based adaptation. | i. % of facilities providing integrated One-Health services.<br>ii. Community-based adaptation programs active in all Communes. | **SHORT-TERM (1-3 YEARS)**<br>i. Increased community trust and service utilization.<br><br>**MEDIUM-TERM (3-7 YEARS)**<br>i. Improved management of zoonotic and environmental health risks.<br>ii. Empowered, resilient communities. | |

### Assumptions (The "If" Conditions)

The success of this Theory of Change is dependent on the following critical assumptions:

i. **Political Will**: County and national governments maintain a sustained political and financial commitment to health and climate action.
ii. **Stable Partnerships**: International and local partners provide consistent, aligned, and predictable technical and financial support.
iii. **Community Agency**: Communities are actively engaged, trust the system, and utilize the services provided.
iv. **Technological Viability**: Technologies like Diagnosis for All and the geo-enabled HIS are appropriate, affordable, and maintainable in the local context.
v. **Data Integrity**: The health information system produces reliable, timely, and actionable data.
vi. **Climate Finance Access**: The county can successfully navigate and access international climate finance mechanisms.

### Risks and Mitigations

| RISK | MITIGATION STRATEGY |
|---|---|
| **Financial Insufficiency**: Inadequate funding from county or partners. | **Diversify financing**: Aggressively pursue blended finance, climate funds, and public-private partnerships. Advocate for increased national budget allocation. |
| **Political & Policy Shifts:** Changes in leadership lead to a change in priorities. | **Institutionalize the Framework**: Embed the policy in law and county development plans. Build a broad coalition of local champions beyond a single administration. |
| **Technical & Capacity Gaps:** Lack of skilled personnel to manage complex systems. | **Invest in Capacity Building:** Create continuous professional development programs. Partner with academic institutions for training and technical support. |
| **Climate Shock Severity:** An extreme climate event overwhelms the newly built resilience. | **Build Redundancy:** Design systems with backup plans (e.g., mobile clinics, redundant supply chains). Focus on community-level preparedness. |
| **Data Misuse or Siloing:** Data is not shared across sectors or is used ineffectively. | **Promote Data Governance:** Establish clear data-sharing protocols and ethics frameworks. Foster a culture of data use for decision-making at all levels. |

### Monitoring and Evaluation Framework: Siaya County Health Diplomacy & Climate Resilience Framework

### M&E Purpose and Guiding Principles

**Purpose**: To systematically track the implementation and effectiveness of the Health Diplomacy Framework, ensuring it achieves its goal of a climate-resilient, equitable, and sustainable health system for Siaya County. It will provide data for learning, adaptive management, accountability to stakeholders, and reporting on commitments to the SDGs, Agenda 2063, and the Paris Agreement.

**Guiding Principles**:

i. **Utilization-Focused**: All M&E activities will be designed to provide practical information for decision-makers.

ii. **Participatory**: County departments, partners, communities, and health workers will be involved in the M&E process.
iii. **Transparency**: M&E data and reports will be publicly accessible to ensure accountability.
iv. **Alignment**: Indicators are directly mapped to the Framework's Theory of Change and strategic pillars.

### M&E Governance Structure

i. **M&E Technical Working Group (TWG)**: Comprised of representatives from the County Health Department, Department of Environment and Climate Change, Finance, Planning, and key partner organizations. Responsible for data analysis, reporting, and recommending corrective actions.
ii. **Diaspora Coordination Unit (DCU)/Policy Lead Unit**: Serves as the secretariat for data collection, consolidation, and maintaining the M&E system.
iii. **County Executive Committee (CEC)**: Reviews M&E reports and approves major strategic shifts based on findings.

### Logical Framework (LogFrame) Matrix

This matrix outlines the hierarchy of objectives and how they will be measured.

| HIERARCHY OF OBJECTIVES | | KEY PERFORMANCE INDICATORS (KPIS) | MEANS OF VERIFICATION (MOV) | FREQUENCY OF REPORTING |
|---|---|---|---|---|
| **GOAL**<br>To achieve "Health for All" in Siaya County by 2035 through a transformed, equitable, and sustainable health system that is resilient to climate shocks and stresses. | | | | |
| **IMPACT** | | i. UHC Service Coverage Index<br>ii. Under-5 Mortality Rate (per 1,000 live births)<br>iii. Maternal Mortality Ratio (per 100,000 live births)<br>iv. Life Expectancy at Birth<br>v. County Vulnerability to Climate Change Index | Kenya Demographic and Health Surveys (KDHS), Routine Health Facility Data, Siaya County Climate Change Action Plan Reports | Every 3-5 Years |
| **OUTCOMES** | Health System Strengthened | i. Proportion of population facing catastrophic health expenditure<br>ii. Density of health workers per 10,000 population<br>iii. % of primary care facilities with functional "Diagnosis for All" devices<br>iv. Patient Satisfaction Index | Household Health Expenditure Surveys, Human Resources for Health Registry, Health Facility Supervisory Reports, Client Exit Interviews, Health Facility Survey | Annually |
| | Climate Resilience Enhanced | i. % of health facilities with uninterrupted services during and after climate shocks<br>ii. Reduction in morbidity rate for key climate-sensitive diseases (malaria, diarrhoea, ARI, etc.)<br>iii. # of public health alerts | Health Facility Assessment Reports, District Health Information System 2 (DHIS2), EWARS Logs | Bi-Annually |

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| | | generated and acted upon by the EWARS | | |
| | Low-Carbon Transition Achieved | i. Health sector carbon footprint (tCO2e)<br>ii. % of health facilities powered by renewable energy<br>iii. % of health facilities complying with green procurement and waste management guidelines | Energy Audits, Procurement Committee Records, Environmental Audit Reports | Annually |
| **OUTPUTS** | From Activities | i. Geo-Enabled HIS and EWARS operational (Y/N)<br>ii. # of health workers trained in climate and health, integrated care, and new technologies<br>iii. # of "Diaspora-Friendly" green investment projects launched<br>iv. Siaya County Diaspora Infrastructure Bond operationalized (Y/N)<br>v. "Siaya Homecoming Fellowship" program launched (Y/N) | Project Completion Reports, Training Registers, Investment Portfolios, Financial Records, Program Documentation | Quarterly |
| Inputs & Activities | Implementation of Framework Pillars | i. % of county health budget allocated to climate-resilience and green initiatives<br>ii. Amount of international climate finance secured (USD)<br>iii. # of multi-stakeholder partnership forums held<br>iv. # of policies revised to integrate One-Health and climate action | County Budget Allocation Reports, Grant Agreements, Meeting Minutes, Policy Documents | Quarterly |

### Evaluation Questions

To be addressed through specific evaluations (e.g., mid-term, end-line):

i. **Relevance**: To what extent is the Framework addressing the most pressing health and climate needs of Siaya's population?
ii. **Effectiveness**: How well have the outputs produced the intended outcomes and contributed to the goal?
iii. **Efficiency**: Have resources (funds, expertise, time) been used optimally to achieve the results?
iv. **Impact**: What significant, positive and negative, changes have occurred as a result of the Framework?
v. **Sustainability**: Are the benefits of the Framework likely to continue after the initial funding and political support ends?

### Data Collection, Management, and Reporting

i. **Sources**: A mix of routine data (DHIS2), surveys, administrative data, and qualitative methods (focus groups, interviews).
ii. **Management**: The Geo-Enabled Health Information System will be the primary platform for health and climate data. The DCU will maintain a dedicated M&E database for diplomacy and partnership indicators.
iii. **Reporting**: Quarterly Progress Reports: For internal county management.
iv. **Annual Performance Report**: For the County Assembly and the public, summarizing progress against KPIs.
v. **Biannual Thematic Briefs**: Focused on specific areas (e.g., "Financing Climate-Resilient Health").
vi. **Contribution Reports**: Submitted to relevant national and international bodies to demonstrate contribution to NDCs, SDGs, and Agenda 2063.

### Learning and Adaptive Management

i. **Annual Reflection Workshops**: Convened by the M&E TWG with all implementers and partners to review data, discuss challenges, and adapt implementation strategies.
ii. **Knowledge Products**: Case studies and success stories will be developed and shared to facilitate learning within and beyond Siaya County.