



KEYNOTE ADDRESS FOR LUXURY GOODS AUCTION TO BENEFIT NEGLECTED WOMEN'S DISEASES

DATE: Thursday, 17th October, 2024
VENUE: Argyle Grand Hotel, Nairobi
TIME: 06.00pm – 10.00pm

Salutations

- Dr Anne Kihara, President of FIGO;
- Ms Terry Mungai, CEO Ashleys Kenya Ltd and Director, Miss World Kenya Franchise;
- Brian Decker, Founder and CEO, DeckerMed Africa Trust;

Invited guests, ladies and gentlemen;

Good evening!

1. Today, I stand before you to shed light on a critical yet often overlooked aspect of global health: neglected women's diseases. While many illnesses capture headlines and funding, countless conditions affecting women remain in the shadows, depriving millions of their dignity, right to health and well-being.
2. Neglected women's diseases are health conditions that disproportionately affect women, yet often receive insufficient attention in terms of research, prevention, and treatment. Some common examples include reproductive tract infections, endometriosis, polycystic ovarian syndrome, breast and cervical cancer, obstetric fistula, and neglected tropical diseases. More recently we have added mental health issues and Gender-Based Violence cases to this list.
3. Kenya, like many developing countries, faces significant challenges in addressing women's health issues, particularly those that are often overlooked or underfunded. These neglected diseases have a profound impact on women's quality of life, their economic productivity, and their overall well-being.
4. Neglected Tropical Diseases (NTDs) are a group of infectious diseases that often occur in low-income countries. They primarily affect people living in tropical and subtropical areas. These diseases have severe physical and social consequences on their victims. As imagined, poverty, lack of access to clean water, and inadequate sanitation largely contribute to their spread.
5. Here in Kenya, several NTDs specifically affect our women and girls. They are primarily responsible for limiting women's ability to work and participate in economic activities.

They are also known to hinder girls' education, marriage prospects, and their overall quality of life.

The questions we must ask ourselves this evening are; Why do these diseases remain neglected in 2024? What can we do to mitigate these circumstances?

6. First and foremost, many women remain unaware of the symptoms or risks associated with Neglected Women's Diseases. Excessive bleeding during monthly periods and lumps in the breast may not alarm a woman or young girl who is ignorant of its consequences. However, these could very well be symptoms of cervical and breast cancer.
7. I was privileged to interact with survivors of fistula during a local NGO's anniversary dinner last August, and the horrifying tales they narrated were heart breaking. First-time mothers are basically unaware of what to expect from a child-bearing experience. So, when they suffer obstetric fistula, it takes many a while before they realize they have a major problem.
8. Unfortunately, women who experience fistula undergo devastating physical, psychological and social consequences. These include constant incontinence, shame, social segregation, stigmatization and other myriad health complications. You can imagine all this happening to a young mother in a rural setting. Very devastating!
9. The societal stigma associated with most of these diseases is alarming. Many cultural and social norms prevent women from seeking healthcare or discussing their health concerns. This is why many women today opt for over-the-counter testing and medication for Sexually Transmitted Infections as going to hospital means discussing the ailment with a health practitioner. In many cases this may be a man, further compounding the patient's privacy problem.
10. The limited availability of healthcare facilities, skilled health workers, and appropriate diagnostic tools especially in rural areas, also contribute to women's limited access to quality care. And, as stated earlier, poverty remains a major impediment to women seeking medical treatment. Further, it is worth noting that women are more likely to be exposed to disease-carrying vectors due to their roles in agriculture, water collection, and childcare.
11. And while the Government has taken huge strides in reducing maternal mortality, it remains a significant public health challenge. Infant and child mortality rates remain relatively high, particularly in rural areas. This is an area we must all come together and address urgently.
12. So how do we go about this? We require a multi-faceted approach. The Government has done a lot in most of these areas. Relevant policies and legislative frameworks are in place. It is now time for Non-State Actors, development partners, Academia and the local communities to step up.

13. The Social Health Insurance Fund supports the government's goal of achieving Universal Health Coverage by strengthening the health system and reducing the risk of impoverishment caused by health issues.
14. Regular public health education, sensitization and awareness-creation campaigns must be undertaken at the grassroots level. These will inform women about these diseases, their impact and how to prevent them at the individual or family level. During such campaigns preventive medication can be provided to entire communities to reduce the prevalence of NTDs. The community must be reminded of the need for good nutrition and sanitation.
15. We are in agreement that our healthcare services are not enough for the existing population. We must expand them, especially those in rural areas, to ensure that women have greater access to quality care. At the same time, we have to engage the local communities in health promotion activities. The Government's move to recruit and pay Community Health Volunteers a monthly stipend, is a step in the right direction.
16. When it comes to retrogressive cultural practices like FGM and early marriages, we must urgently address the barriers that impede women from discussing their health conditions. Women must know that untreated STIs can lead to pelvic inflammatory disease, infertility, and complications during pregnancy. Early diagnosis and treatment for the same is therefore advised.

Ladies and Gentlemen;

17. We cannot leave our Academia behind on this mutual journey. Investment in research must be prioritized. This will lead to the development of new diagnostic tools, treatments, and preventive measures.
18. On the issue of mental health, the community must be sensitized on the fact that depression and anxiety are real! Depression is a common mental health condition among women in Kenya, often exacerbated by poverty, Sexual and Gender-Based Violence, and discrimination. Anxiety disorders affect women's well-being and productivity. Limited access to mental health services, stigma surrounding mental illness, and cultural barriers hinder the treatment of these disorders.
19. I am happy to report, at this juncture, that my Office has finalized plans to roll out a massive countrywide campaign dubbed "**Safe Homes: Safe Spaces**". This campaign is targeted at homes and individuals' level. It seeks to remind women that they have the power to stop GBV. We want them to be able to see the signs and remove themselves from situations early enough before the violence begins. With economic empowerment, I know they can carry on their lives in safe spaces.

In conclusion,

20. I am proud to note that today's LGA auction target of Ksh 5 million is aimed at expanding your presence to more Counties, conducting more screenings, making timely referrals,

and advocating for better treatments. Your devotion to women's health at the grassroots level is admirable, we commend you!

21. Going forward, let us join hands to promote gender equality and empower women to make informed decisions about their health. As nurturers and natural caregivers, women make daily sacrifices. They deny themselves, to ensure their families live in comfort and get the best out of life. With information and finances, they will make the right decisions for all.
22. My Office will be working closely with DeckerMed Africa Trust in conducting medical camps for neglected women diseases at the county levels. We hope to reach as many women who suffer from those diseases as we can and restore their dignity and health.
23. I am confident that together we shall achieve our collective dream – to break down the barriers surrounding neglected women's diseases for better healthcare and the well-being of all women.

Thank you.

Hon. Harriette Chiggai,
President's Advisor on Women Rights