

## **ADDRESSING GENDER DISPARITIES IN ACCESS TO MEDICALLY ASSISTED THERAPY: A WOMEN-LED OUTREACH ACTIVITY IN KIAMBU, KENYA**

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### **Background:**

Kiambu County ranks fourth in Kenya for the highest number of people who use/inject drugs (PWUID) in a 2021 estimate, where 3,312 heroin users (2,776 men, 536 women) were identified, most concentrated in Kiambaa subcounty. Despite interventions enabling 835 individuals to access Medically Assisted Therapy (MAT) and harm reduction services, only 10.6% of women who use drugs (WWUD) have ever enrolled. As of 2025, merely 166 patients (151 men, 15 women) remain on treatment.

### **Description of the model of care/intervention/program:**

In response, a women-led Self-Help Group (SHG) initiated a targeted outreach in January 2025, focusing on four out of ten major hotspots in Kiambaa. This pilot identified 26 women, gathering demographic data and insights through a survey, into the barriers hindering their engagement with MAT. The outreach included health education on sexual and reproductive health, distribution of 25 clean needles, 20 female condoms, 40 sanitary pads, peer counselling, documentation and referrals of 18 violence and 13 sexual violence incidences, and MAT services education.

### **Effectiveness:**

WWUD deprioritize their health due to the heroin cycle, exposing them to violence and deepening stigma. They face a lack of gender-specific outreach, with services mainly providing needles, syringes, male condoms, and general health education, neglecting their needs. Cultural stigma and discrimination further isolate them, discouraging access to MAT and other health services. Economic disparities and societal taboos on women's substance use limit opportunities, making MAT services even less accessible. These combined barriers reinforce their exclusion from essential care. This initiative showcased the potential impact of a community-driven, gender-responsive approach.

### **Conclusion and next steps:**

Key outcomes underscore the need for interventions tailored to the distinct barriers faced by WWUD, including expanded outreach, women-friendly safe spaces, and integrated harm reduction. This pilot project highlights the importance of community-led, women-centred strategies in advancing equitable service delivery, calling for policy shifts and resource allocation to sustain and scale similar initiatives.

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