

Nourish Life

BOMET

NUTRITION INVESTMENT CASE





Despite progress made on health outcomes over time, malnutrition in Bomet County remains a major public health problem. However, the county government has demonstrated political commitment for preventing malnutrition by investing in the scale-up of low-cost high-impact nutrition interventions. With the support of Nutrition International, county leadership and nutrition stakeholders, Bomet County has developed the County Nutrition Action Plan (CNAP) 2020-2025, which sets ambitious targets for the scale-up of nutrition interventions over the next five years. The plan identifies priority multisectoral nutrition actions for each sector, defines targets for each intervention, and provides a monitoring and accountability framework as well as costing of interventions, which the county can use for subsequent planning and budgeting.

This Investment Case highlights the potential health impacts and economic benefits of scaling up the low-cost high-impact nutrition-specific interventions included in the Bomet County CNAP.1

BOMET COUNTY CNAP (2020-2025)

TOTAL COST OVER **FIVE YEARS:**

COST OF HIGH-IMPACT PREVENTATIVE INTERVENTIONS:

KSH1.8B

KSH723.4M

(US \$17.5M)

(US \$6.9M)

PROJECTED HEALTH IMPACT:

5,680 cases of stunting averted

552 child deaths averted

2.452 cases of wasting averted

cases of anaemia in 11.406 pregnancy averted

¹ While all costs and programs included in the CNAP are important, it is not possible to model the impact of nutrition-sensitive, public health and enabling environment interventions due to lack of evidence of their effects.



THE COST OF MALNUTRITION

HEALTH IMPACTS

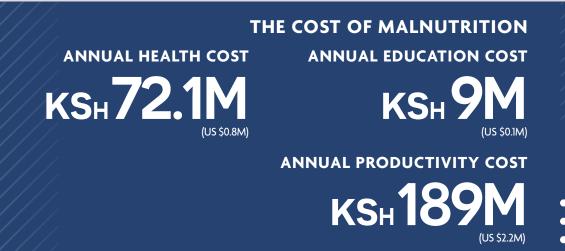
The Cost of Hunger in Africa (COHA) study in Kenya report (2019) highlighted the high levels of child undernutrition and its lasting health and human capital consequences for the country. The COHA model was applied during the development of this Investment Case by customizing it using county nutrition data to estimate the level of morbidity, mortality, school repetition, school dropout and reduced physical capacity that can be directly associated to a person's undernutrition before the age of five. The COHA study estimated additional cases of morbidity, mortality, school repetitions, school dropouts and reduced physical capacity that can be directly associated with undernutrition in children under the age of five for the year 2014. It is estimated that 35.5% of children under the age of five (KDHS, 2014), which is equivalent to 39,396 children in Bomet County, were stunted. Furthermore, malnutrition causes an estimated 6,995 cases of low birth weight and underweight annually. Overall, undernutrition in Bomet County costs the health system approximately KSh 72.1M per year (US \$0.8M).

HUMAN CAPITAL AND ECONOMIC IMPACTS

In addition to the impact of stunting on the health of individuals, it also affects cognitive development in children, and in turn, reduces a child's educational performance, resulting in increased grade repetition and dropouts. It is estimated that there are 735 cases of grade repetition in Bomet County annually due to stunting, which costs an estimated KSh 9M (US \$0.1M) annually to the education system and families.²

In addition, stunting affects future economic productivity due to increased mortality (i.e., loss of workforce) and lowered labour productivity. Based on the latest data available, it is estimated that the annual losses in economic productivity due to malnutrition in Bomet County were KSh 189M (US \$2.2M). Overall, the annual cost of malnutrition in the county is equal to KSh 270M (US \$3.1M), which represents 0.33% of its GDP.

² Kenya COHA Report (2019)



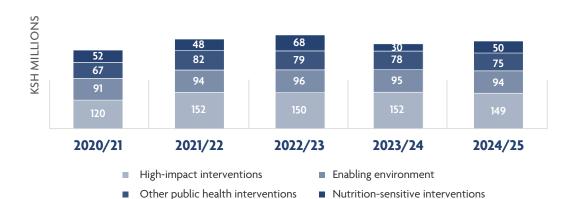
BOMET'S COUNTY NUTRITION ACTION PLAN

TOTAL COST OVER FIVE YEARS

The total public investment required to deliver the Bomet CNAP is estimated to be KSh 1.82B (US \$17.5M) between 2020 and 2024. Within the CNAP, 40% of the resources are allocated to low-cost high-impact nutrition interventions, 14% to nutrition-sensitive interventions, 21% to other public health interventions, and 26% to health and nutrition system and infrastructure costs (enabling environment). The average annual cost of the CNAP is KSh 364.4M (US \$3.5M) per year.

Category	Total Cost (KShB)	Total Cost (US \$M)	Total cost (%)
High-impact interventions (with severe acute malnutrition treatment)	0.723	6.94	40%
Enabling environment	0.47	4.51	26%
Other public health interventions	0.38	3.66	21%
Nutrition-sensitive interventions	0.25	2.38	14%
Total	1.82	17.49	100%

CNAP COSTS BY CATEGORY



Source: Bomet CIC Analysis



COST OF HIGH-IMPACT NUTRITION INTERVENTIONS

Within the package of evidence-based high-impact preventative nutrition interventions included in the Bomet CNAP, the total cost for each preventative interventions over five years is KSh 15.3M (US \$ 0.1M) for weekly iron and folic acid supplementation in adolescents (WIFAS), KSh 22M (US \$0.2M) for iron and folic acid supplementation in pregnancy (IFAS), KSh 87.5M (US \$0.8M) for infant and young child feeding (IYCF), KSh 481.9M (US \$4.6M) for the treatment of severe acute malnutrition (SAM), KSh 35.1M (US \$0.3M) for vitamin A supplementation (VAS), KSh 13.2M (US \$0.1M) for micronutrient powder supplementation (MNP), KSh 55M (US \$0.5M) for zinc and oral rehydration salts (ORS), and KSh 13.6M (US \$0.1M) for other high-impact interventions.

ANNUAL COST OF HIGH-IMPACT NUTRITION INTERVENTIONS:

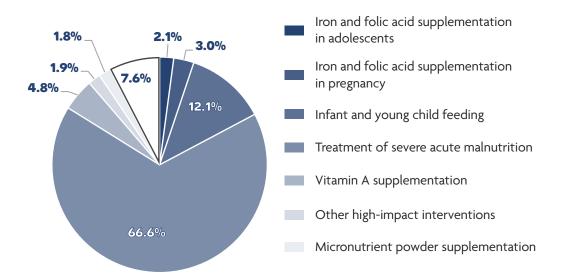
PER CAPITA

KSH165 (US \$1.6) PER PREGNANT WOMAN, ADOLESCENT GIRL AND CHILD (UNDER FIVE)

KSH892



BREAKDOWN OF THE COSTS OF HIGH-IMPACT NUTRITION INTERVENTIONS



THE HEALTH AND ECONOMIC BENEFITS OF INVESTING IN NUTRITION

INTERVENTION REACH

The preventative high-impact nutrition interventions within the CNAP will reach an average of 136,049 newborns, children, adolescent girls and pregnant women annually. The interventions with the highest reach over five years are VAS, IYCF and IFAS in pregnancy.

REACH OF HIGH-IMPACT NUTRITION INTERVENTIONS



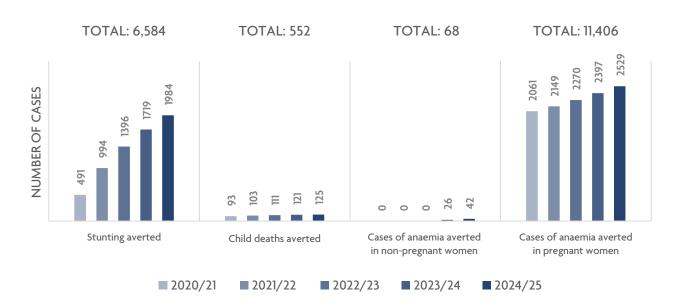
Intervention	Total reach over five years	
IFAS	74,709	
IYCF	54,896	
WIFAS	4,280	
VAS	420,111	
SAM	17,887	
Zinc+ORS	62,361	
MNP	19,200	

HEALTH IMPACTS

Nutrition interventions within the Bomet CNAP are projected to have a significant impact on the health of newborns, children, adolescent girls, and pregnant women. The interventions are projected to result in 5,680 additional alive, non-stunted children (a reduction of the prevalence of stunting by approximately 35% within five years). The interventions are projected to result in 11,406 cases of anaemia averted in pregnant women. This impact will result in reduction of the prevalence of iron deficiency anaemia in pregnant women by approximately 4%. In addition, the interventions are projected to result in 2,452 cases of wasting averted, which will reduce the prevalence of wasting in children under five by 72%.

Overall, the interventions are projected to result in 552 child deaths averted. The sum of these health impacts results in a potential 38,315 Disability Adjusted Life-Years (DALYs)³ averted. In addition to the health impact, these interventions will lead to cognitive and human capital impacts over time such as increased IQ and educational attainment.

HEALTH IMPACTS OF HIGH-IMPACT INTERVENTIONS

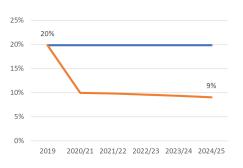






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Prevalence of Stunting in Children



Prevalence of Iron Deficiency Anaemia in Pregnant Women



Baseline
 Scale up scenario

The CNAP is projected to contribute a relative reduction of 35% in the prevalence of stunting, and of 54% in the prevalence of iron-deficient anaemia in pregnant women by 2025, which represent important gains towards the World Health Assembly global nutrition targets.

COST-EFFECTIVENESS AND BENEFIT-COST

There is a strong evidence base demonstrating that the high-impact preventative nutrition interventions included in the Bomet CNAP are highly cost-effective. It is estimated that the cost per case of stunting in children is KSh 31,072 (US \$298.31). Additionally, the cost per case of anaemia averted is projected to be KSh 719 (US \$6.90) for IFAS in pregnancy and KSh 204,023.01 (US \$1,958.75) for WIFAS for adolescent girls.

By translating this level of health impact into DALYs averted, it is estimated that investing in the high-impact nutrition interventions costs KSh 18,879.62 (US \$181) per DALY averted. Using a Value of Statistical Life-Year for Kenya, the Bomet CNAP is also estimated to yield a benefit-cost ratio of 19:1 in the long-term, which is indicative of excellent value for money from this investment.

HIGH-IMPACT INTERVENTION COST-EFFECTIVENESS: VERY COST EFFECTIVE

COST PER DALY AVERTED

KSH18,879.62

BENEFIT-COST RATIO

19:1

RECOMMENDATIONS

Invest in nutrition for guaranteed value for money and an essential path to reaching national and county aspirations.

Nutrition is a vital building block in the foundation of human health and development. Bomet County has high levels of malnutrition making it a key public health concern with potential to hinderance to achieving the county's developmental agenda. The Bomet CNAP has identified appropriate interventions and targets to be implemented in the next five year to address the nutrition challenge in the county. To remove access barriers to nutrition interventions and fully realize the benefits outlined in this investment case, there is need for the county government and other stakeholders to increase the availability of resources in line with the set scaling up and coverage on nutrition interventions. This analysis show there are huge (benefit-cost ratio 19:1) economics benefits that will be realized with optimized investments in nutrition programs in Bomet county.

Take a sustainable financing approach to nutrition.

Sustained investment in nutrition has higher benefits over time, which calls for more sustainable financing approaches to guarantee coverage. Domestic resources mobilization offers an optimal path to sustainable financing for nutrition in Bomet County, and this will call for continued advocacy to ensure increased political and public support for nutrition, resource allocation for identified high-impact nutrition activities and promotion of healthy nutrition behaviours and practices. These combined efforts will see dramatic improvements in funding and resonate well with the World Bank call for US \$30 per child targeted in order to meet nutrition targets (WB 2014).

Prioritize the implementation of evidence-based and cost-effective high-impact nutrition interventions for health, human capital and economic benefits.

The CNAP includes a wide range of nutrition-specific and nutrition-sensitive interventions to be implemented across different sectors to help address the causes of malnutrition. The Lancet Series on Maternal and Child Undernutrition (2013) identifies low-cost, high-impact nutrition interventions and the roadmap for scaling up these interventions is included in the CNAP. To reduce the negative effects of child undernutrition on the health, education and labour sectors, Bomet County should prioritize the implementation of these proven low-cost, high-impact interventions.

Support the generation of critical nutrition data to guide planning and budgeting for nutrition in the county.

The CNAP defines a common results measurement and accountability framework for county actions. There is a clear need to routinely collect and collate nutrition data from various sectors to inform planning and budgeting and provide clarity on equity and efficiency of interventions. To improve data management and its use for decision making, Bomet County should facilitate regular nutrition data/information review during coordination meetings and generation/dissemination of knowledge products. This should include data that provides a clear understanding of the nutrition financing landscape in the county.

Enhance governance and coordination of nutrition interventions at county level.

The CNAP in a multisectoral document that seeks to ensure that nutrition is systematically embedded into existing governance structures by advocating for and supporting county structures and institutions that plan and manage the implementation of nutrition programs. The coordination and governance framework should promote a multisectoral approach and encourage cross-sectoral collaboration to address the social determinants of malnutrition sustainably with an overall aim of ensuring optimal nutrition for citizens of Bomet County, by ensuring that the roles and responsibilities of the different sectors are clear and that each carries out its action with the recognition that addressing the triple burden of malnutrition requires multisectoral and multi-disciplinary approaches. This will ensure maximization of realized benefits across sector such as them education, health, and WASH.

Strengthen community health approaches and mobilize communities in the context of COVID-19 and beyond.

The COVID-19 pandemic has disrupted nutrition services through health systems and school-based platforms, and decreased purchasing power resulting from economic slowdown, access to nutritious food resulting from disrupted supply chains, and food production. There is a need to strengthen the community health approach and mobilize communities to adopt behaviours and practices that promote better nutrition at community level. Bomet County should prioritize budget allocation to support the strengthening of a community health strategy in line with the Community Health Services Act.

