Kenya’s mobilization of Counties for nutrition action, with technical assistance from Nutrition International

This webinar will begin at:
7:30 – 9:00 EST (Ottawa, Canada); 14:30 – 16:00 EAT (Nairobi, Kenya)
17:00 – 18:30 IST (New Delhi, India)

Be aware that this session is being recorded

Feel free to introduce yourself in the chat box. Please set the ‘To’ dialog to ‘everyone’ so that everyone will see your comments.

If you have any questions for the speakers you can use the chat box throughout the presentation and we will take note of them for the Q&A session.

Don’t forget to tweet about this webinar! Use the hashtags #InvestInNutrition #NTEAM and tag @NutritionIntl so that others can join the conversation!
Acknowledgments

This webinar was prepared with support from Nutrition International’s TAN project, funded with UK aid from the UK government, in collaboration with the Ministry of Health, Kenya.
Webinar facilitator and moderator

Dr. Richard Pendame
Africa Regional Director
Nutrition International
Background on Nutrition International’s NTEAM and TAN project

Through its Nutrition Technical Assistance Mechanism (NTEAM), Nutrition International shares its expertise globally to support the scale-up of nutrition for the most vulnerable. We believe that knowledge, rigorously obtained and generously shared, is key to effective progress for nutrition.

NTEAM provides timely and coordinated expert technical assistance to governments, multilateral organizations, development banks and other global nutrition partners to overcome gaps in capacity, design and delivery of multi-sectoral national nutrition action plans. NTEAM encourages broad use of knowledge by translating technical information and research into accessible guidance, tools and capacity strengthening resources. Across all areas in which we work and taking a gender-sensitive approach, we provide guidance, oversight and quality assurance to ensure relevant and impactful technical assistance.

Technical Assistance for Nutrition (TAN) is a project within Nutrition International’s Nutrition Technical Assistance Mechanism (NTEAM) funded with UK aid from the UK government.
Speakers

Opening remarks
**Gladys Mugambi**
SUN Focal Point and Head, Division of Health Promotion
Ministry of Health, Kenya

Presenter and panel member
**Leila Akinyi Odhiambo**
Deputy Head, Division of Nutrition and Dietetics
Ministry of Health, Kenya

Presenter and panel member
**Martha Nyagaya**
Country Director, Kenya Nutrition International

Presenter and panel member
**Ruth Kaloki**
Head of Nutrition and Dietetics Unit
Makueni, Kenya

Presenter and panel member
**Leila Akinyi Odhiambo**
Deputy Head, Division of Nutrition and Dietetics
Ministry of Health, Kenya

Presenter and panel member
**Dr. Daniel Mwai**
NTEAM Technical Assistance Provider
Nutrition International
Objectives and Agenda

Objectives
For the Government of Kenya and Nutrition International to share their experience with technical assistance for:
- Successfully implementing nutrition priorities at county level in alignment with national plans
- Identifying and implementing ways of working between local and national authorities to shape local nutrition plans and allocate local funding to them

Agenda
- Welcome and house keeping
- Opening remarks
  - Gladys Mugambi
- Presentations
  - Leila Akinyi Odhiambo
  - Martha Nyagaya
  - Dr. Daniel Mwai
  - Ruth Kaloki
- Interactive Panel Discussion
- Close
Opening remarks

Gladys Mugambi
SUN Focal Point
Head of the Division of Health Promotion
Ministry of Health, Kenya
Leila Akinyi Odhiambo
Deputy Head, Division of Nutrition and Dietetics
Ministry of Health, Kenya
KNAP & CNAP
SUPPORT FROM NUTRITION INTERNATIONAL

By Leila Akinyi
Deputy Head, Division of Nutrition and Dietetics
Ministry of Health, Kenya
Devolution of nutrition in Kenya

• Kenya transitioned to devolved governance with 47 autonomous counties in 2013

• Decentralization is seen as a means of bringing government closer to the people and enhancing responsiveness to local needs through the transfer of power, authority, functions, responsibilities, and resources from the national government to local governments which are closer to the public to be served.

• With considerable budgetary autonomy in determining how they plan, budget, allocate, and spend funding from national government transfers as well as locally raised revenue, county governments have a critical role in the success of nutrition programs.

• County governments are also responsible for translating national nutrition and health policies and strategies into county priorities and plans. The extent to which nutrition is a local priority determines the extent to which it is locally funded.
Nutrition Functions of multiple sectors distributed between National and County level. For example, in Health:

**National**
- Health Policy
- National Referral Health facilities
- Technical assistance to counties

**County**
- a) Promotion of primary health care
- b) County health facilities and pharmacies
- c) Ambulance services
- d) Licensing and control of undertakings that sell food to the public
- e) Veterinary services excluding regulation of the profession
- f) Refuse and solid waste disposal
- g) Cemeteries, funeral parlour and crematoria
ROLE OF GOVERNMENTS IN DEVOLUTION (DIVISION OF NUTRITION AND DIETETICS)

• Capacity building and technical assistance to the counties.
• Development and distribution of policies, guidelines and standards
• Mobilization and management of resources for nutrition programs
• Provision of preventive and rehabilitative nutrition services
• Emergency nutrition response
• Conduct assessments, analysis and provide data on the nutrition situation
• Requisition and distribution of nutrition commodities
• Nutrition Information and Education
Local Governments are important for scaling up nutrition action:

- Implementation – Own County health facilities and services including county referral hospitals, sub-county health facilities

- Offer environmental health services, communicable disease control, nutrition, family planning, maternal and child health plus Health Education.

- Recruitment, deployment and progression for HCWs

- Provision of drugs and other medical supplies as needed by patients

- Provision of primary health care services
Lessons learnt and recommendations

- Division of Nutrition and Dietetics has critical role in provision of technical assistance to counties in the development of policy documents, strategic plans and technical guidelines.
- Coordination of Nutrition and health need strengthening at County level especially through empowering of County Nutrition Coordinators and CNTF.
- County Nutrition Coordinators need capacity support in identification of priority nutrition actions in respective counties and alignment of CNAPs with the KNAP.
- Understanding of multisectoral CNAP is varied and need to be streamlined. Devolution has made this more complicated especially on components that are devolved and those that are national mandates. Education is the main casualty.
- Partner interest/priority incorporation in development of CNAPs needs to be aligned.
- Matching funding is a good concept towards securing government financial commitment.
- Insufficient resources caused some counties to lag behind in the development of respective CNAPs e.g. Machakos, Nyandarua, Kirinyaga, Kericho, Uasin Gishu, Laikipia, Meru, Lamu.
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<tr>
<th>Priority areas needing technical assistance in the future</th>
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<td><strong>Policy Making and strategic Planning</strong></td>
<td>MIYCN strategy, Food fortification communication strategy</td>
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<td><strong>Health Legislation regulation and standards</strong></td>
<td>nutrition research repository</td>
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<td><strong>Reporting and monitoring</strong></td>
<td>Nutrition assessments including national surveys and research in nutrition (KNMS, Food consumption survey, KDHS)</td>
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<td><strong>Coordination and partnerships</strong></td>
<td>national coordination, capacity for coordination for the counties (trainings and establishment), regional meetings with CNCs – MSPs, CNTF</td>
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<td><strong>Resource mobilisation</strong></td>
<td>Processes such as proposal writing, financial tracking support to counties</td>
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<td><strong>Capacity Building and Technical Assistance</strong></td>
<td>County support for CNPAs, training and dissemination of standards ant protocols, advocacy, assessments and M &amp; E. National mandate is training CHMT</td>
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<td><strong>Development of guidelines and protocols</strong></td>
<td>all programs</td>
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<td><strong>Advocacy and Awareness creation</strong></td>
<td>COHA, campaigns, national days celebrations, policy briefs, advocacy meetings</td>
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<td><strong>Health service delivery</strong></td>
<td>printing protocols, IEC materials</td>
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<td><strong>Health products and technologies</strong></td>
<td>Supplements, Nutrition commodities in KEML</td>
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THANK YOU
Presenters

Martha Nyagaya
Kenya Country Director
Nutrition International

Dr. Daniel Mwai
NTEAM Technical Assistance Provider
Nutrition International
Nutrition International’s Support in Kenya

Martha Nyagaya
Country Director Kenya, Nutrition International

Daniel Mwai
NTEAM Technical Assistance Provider, Nutrition International
NTEAM TAN 2015-2021 in Kenya

- **2015**: Joint diagnosis of TA with MoH
- **2016**: Joint design of ToR and work package
- **2017**: KEN-01 Review of 2012-2017 NNAP
- **2018**: KEN-02 (Knap development) KEN-03 (SBN support)
- **2019**: TA Assessment, KEN-05 (support to counties)
- **2020**: KEN-06 Additional support to counties; TA assessment
- **2021**: Completion of KEN-06 TA; TA assessment; project close out
Supported development of a **national plan** with prioritized actions, targets, and costs

Supported development of a **county-level plans** based on the national plan, ensuring evidence-based interventions were prioritized

Supported **advocacy efforts** with governors and departments of finance at the county-level to ensure the local plans were funded

Signed **new performance-based matched funding agreements** to increase investment by county governments

We are bringing **4.9M USD above baseline or a ~5X increase in domestic funding for nutrition interventions** over a five-year period across 11 counties
Nutrition International Kenya - Multisectoral Nutrition Program Model

The objective

- **Scale-up of low-cost, high-impact nutrition interventions**, aligned with CNAPs
- **Mobilize additional domestic resources** from the county in support of these interventions
- **Increase effectiveness and impact** of nutrition expenditure and programming in the county
- **Increase transparency and accountability** in nutrition financing and programming, thereby increasing the likelihood of attracting additional financial resources for nutrition

From Nutrition International’s perspective, **we must be able to see not just more money for nutrition but more nutrition for the money**
What is significant about the Model?

Why is this model Important?

- It supports the implementation of the Multisectoral Action Plan at scale
- It ensures county ownership and financial sustainability
- It provides predictability for the county (3-year plan and commitment)
- It ensures additional domestic resources for low-cost high impact nutrition interventions
- It ensures additional domestic resources for low-cost high impact nutrition interventions
- It increases confidence of donors in the county and its systems
- It is a replicable model that can be scaled up

What is exceptional?

Involvement of not just the department of health, but stakeholders from finance, agriculture, education, water, gender, community development and the county assembly to ensure nutrition is prioritized and resourced
Critical Actions to speed up progress

Five critical Actions

1. Support comprehensive multisectoral programs at county level

2. TA to improve targets and drive actions

3. Continued advocacy and engagement of multiple stakeholders

4. Scale up and diversify financing

5. Foster sustainability
Approaches implemented to meet the objectives of the TA

Mainstreaming gender equality & outcomes

Mobilizing financial and other resources for nutrition at the local level

Critical elements
Approaches implemented to meet the objectives of the TA

Consultative meetings with DND (national level) & Senior County Officials

Desk review of relevant documents at county level

Setting up County writing team (multi-sectoral)

Inception meeting (Identifying priority areas)

Editing/Design/Artwork

Validation meeting

Writing workshop (Capacity building on gender, costing, M&E)

Costing nutrition interventions

CNAP launch

Dissemination

Resource Mobilisation, county commitment, matching fund

DND (national level)           \(\text{multi-sectoral}\)
Mainstreaming gender equality & the outcomes

• Raising the awareness, those involved in drafting & validation of the CNAPs, of the importance of reducing gender disparities to improve nutrition
  • Capacity development
  • Snapshot of County gender nutrition issues
  • Consultation on how best to address gender related nutrition issues

• Integrating gender equality in the CNAP, for gender-sensitive indicators
  • Responses from other sectors about gender equality integration

• Achievements, failures, challenges & adaptive solutions
Mobilizing financial and other resources for Nutrition, at the local level

Who was engaged?
- Respective County Government heads (Governor, Deputy Governor, Senator, Members of Parliament, Member of County Assemblies)
- County line ministries
- Development partners

How were agreements made?
- Governance coordination using multisectoral approach (inception, writing workshop, validation meeting)
- County governments negotiation and advocacy efforts to committing funds to support nutrition example Bomet (Ksh. 10 million committed)
- Prioritizing implementation of evidence based and cost-effective high impact nutrition interventions including evidence such as investment case
- Advocating for strengthening of community health approaches in the context of Covid 19 and beyond

Working with other partners
- Support in tracking the resources available for nutrition
- Donors and partners providing information of the interventions they will be funding
- Help counties to develop a financing mobilisation strategy to mobilise resources
Five Critical Elements

1. Government led and demand driven TA

2. Multisectoral Coordination and multistakeholder involvement

3. TA and financial support to development of costed national and sub-national nutrition plans
   - Articulating the joint shared Vision – joint gap identification
   - Identifying contextually appropriate actions
   - Setting realistic targets and costing

4. Advocacy for political and operational support
   - Mobilizing Political commitment – engagement of senior county officials and political leaders

5. Ownership and capacity development – more CNAPS developed using the same approach
**Strengths of Nutrition International’s Technical Assistance**

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<th>Demand-driven support:</th>
<th>Technical assistance provided by Nutrition International is <strong>tailored to the request</strong> for support received from by the Government.</th>
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<td>TA can be long-term if needed:</td>
<td>In Kenya, TA was based on a long-term relationship between Nutrition International and government, based on trust and making it possible to develop high level strategic work such as advocacy, capacity development, planning and resource mobilization at multiple levels of government.</td>
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<td>Support for multiple functional areas:</td>
<td>Support was both <strong>broad and deep</strong>, covering data and monitoring, evaluation and learning, financing for nutrition, governance and planning, advocacy, and gender equality.</td>
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THANK YOU
Perspective from Makueni’s County Nutrition Action Plan (CNAP) development and local mobilization

Ruth Kaloki
Head of Nutrition and Dietetics Unit, Makueni County
Makueni County is one of the forty-seven counties in Kenya; Located in south eastern Kenya

The county is one of the arid and semi-arid lands in Kenya and has a population of 987,653 (Census 2019).

The County experiences high levels of poverty which currently stands at 34.7%.

The county faces the triple burden of Malnutrition:-

- More than a quarter (25.1%) of children below five years are stunted and 11.2% are underweight.
- More than half (55.5%) of pregnant women in Makueni suffer from iron deficiency Anaemia
- Thirty percent (30%) of women of reproductive age are Overweight and Obese.
The Government of Makueni County—Local Resource Mobilization Process

June-September 2019
Formation of CNAP Technical Working Group
Inception meeting/Buy in meetings /Drafting Workshop for CNAP

October 2019
Validation meeting/Printing & Launch of CNAP
Budget-Analysis Process
Confirmation of Fiscal space for Nutrition

November 2019
Printing and launch of the CNAP
Confirmation of Nutrition Budget by the county Government
Financial commitment by County government and NI

January-February 2020
Signing of a joint 3-year Nutrition Financing Agreement amounting to KES 66 Million on a matched funding basis.
Development of Joint Workplan, Project monitoring Framework and Budget from the CNAP

July 2020
Project set up phase (Opening of Special purpose Account)
• Implementation of the Joint Workplan
### Value Add of Nutrition International’s Technical Assistance

<table>
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<th>Process</th>
<th>Value Add of Nutrition International’s TA</th>
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<tr>
<td>CNAP Development</td>
<td>• Technical expertise</td>
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<td>• Consultative process</td>
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<td>• Prioritization/identification of context appropriate interventions</td>
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<td>• Costing framework development</td>
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<td>• Development of the Monitoring, Evaluation, Accountability and Learning framework</td>
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<td>Domestic Resource Mobilization for Nutrition Financing</td>
<td>• Engagement of high-level stakeholders through advocacy meetings</td>
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<td></td>
<td>• Budget analysis for determining fiscal space for Nutrition</td>
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<td></td>
<td>• Development of the nutrition financing agreement - Special Purpose Account opened, Implementation commenced-July 2020</td>
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Outcomes Since Implementing The Makueni CNAP

**Enabling Environment (Leadership/Co-ordination)**
- Strengthened nutrition multi-sectoral collaboration through the County Nutrition Technical Forum
- Enhanced linkages at the inter-departmental level

**Provision (Service delivery)**
- Increased capacities of health and non-health managers, front line service providers (Health workers, Teachers) on delivery of High Impact Low-cost Nutrition interventions.
- Improved Health and Nutrition service delivery and quality of care.
- Improved data quality and increased reporting of nutrition data on Kenya Health Information Software

**Consumption (Demand creation of services)**
- Strengthened Community Health strategy
- Improved implementation of Behaviour Change Interventions:- *Anzilisha* (1000 days Initiative)-Social Behavior Change Communication, Baby Friendly Community Initiative
Thank you
Interactive Panel Discussion

Moderator
Dr. Richard Pendame
Africa Regional Director
Nutrition International

Leila Akinyi Odhiambo
Deputy Head,
Division of Nutrition and Dietetics
Ministry of Health, Kenya

Martha Nyagaya
Country Director, Kenya
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Closing remarks

Dr. Richard Pendame  
Africa Regional Director  
Nutrition International
Thank You