

## BRIEFING PAPER 2

NICK

(Nutritional Improvement for children in urban Chile and Kenya)

### The implementation process in Kenya: achievements and challenges<sup>1</sup>

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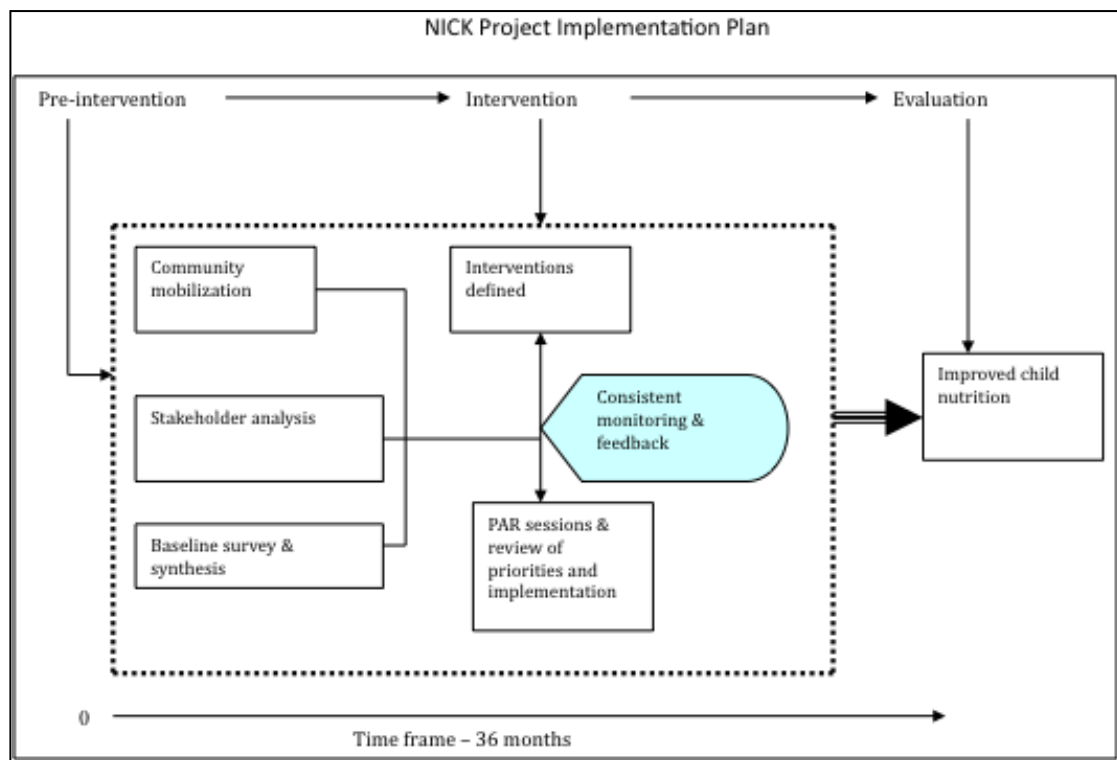
This paper provides a summary of the experiences of the Kenyan team in initiating the NICK project in Mombasa. It considers the achievements between January and

challenges faced by the team in initiating the project in a participatory manner.

### (1) Introduction

The NICK project is being implemented in one Mombasa informal settlement (with one matched control settlement). The project, which started on October 1<sup>st</sup> 2010 and ends on September 30<sup>th</sup> 2013, is guided by the following central question: *Can child malnutrition amongst families living in poverty in informal settlements and slums in Mombasa and Valparaíso be reduced through broadening community and stakeholder participation to change the social determinants of nutritional status?*

The project seeks to address the following research questions:



December 2011 and shares some of the

<sup>1</sup>The implementing partners in Kenya are the Municipal Council of Mombasa, Government Ministries (Public Health & Sanitation, Medical Services, Education, Water and Agriculture) and non-state actors (including AphiaPlus, Coast Development Authority and ICRH).

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- (i) What are the social determinants of child malnutrition?
- (ii) How effective are any policies, initiatives and networks that are already in place in influencing these determinants in the informal settlements?
- (iii) What are the constraints on the effectiveness of these policies, initiatives and networks in the selected sites?

- (iv) What are the actions, pathways and mechanisms (including those in existing structures) through which broadening community and stakeholder participation can be made most effective in reducing child under-nutrition in a sustainable way?
- (v) What are the main implications and lessons learned for policy development and implementation at scale in the project countries and for other countries?

## **(2) Project Initiation Process**

Given the recognition that the determinants of child malnutrition are systemic and require multi-disciplinary concerted efforts to address, the Kenyan research team decided to explore ways of ensuring that the project is integrated into the national efforts that focus on child nutrition. The initial steps, therefore, involved holding discussions with the Nutrition Division in the Ministry of Public Health and Sanitation (MOPHS). During these discussions (in January 2011), it emerged that there are multiple efforts being put in place to strengthen interventions on child malnutrition and related problems among the urban poor. One such initiative was the proposed formation of Urban Nutrition Working Groups (UNWG).

The Kenyan NICK team considered that establishing an UNWG in Mombasa was critical entry point that would help to make NICK activities an integral part of local initiatives with a high possibility of sustainability. This UNWG would function as the participatory action research (PAR) group that was needed for the NICK Project. The team, therefore, sought the support of the national nutrition office to do the following:

- (i) Facilitate the formation of the Coastal UNWG;
- (ii) Conduct a baseline survey on child nutrition in informal settlements of Mombasa;
- (iii) Identify key social determinants and engage with UNWG in defining interventions with immediate, medium and long-term impacts;
- (iv) Implement some interventions (to be determined by the UNWG) towards

addressing some of the identified determinants; and

- (v) Evaluate the impacts of the interventions at the end of 12 months of implementation.

Following the granting of permission to work with the Provincial Nutrition Officer, several meetings were held in Mombasa to plan for an initial meeting with local stakeholders to introduce the project and form a Participatory Action Research (PAR) group. The agreement was that the UNWG would also serve as the PAR group.

The research group also met with Dr. Shariff,<sup>3</sup> the Director of Medical Services, in the Ministry of Public Health and sanitation (MOPHS) who was supportive of NICK and emphasized the need for the project to enhance the implementation of national nutrition priorities. The team also met with members of the Kenya Food Security Steering Group (KFSSG) who had just completed a national survey on Urban Food Security.

The preparatory phase was also utilized to carry out literature reviews and interviews to consolidate the situational analysis. A research permit was acquired, which was granted by the National Council for Science and Technology. With this permit, the Kenyan research team was able to plan for the baseline survey.

## **(3) Achievements**

### **(i) Formation of the Provincial Nutrition Technical Committee and UNWG**

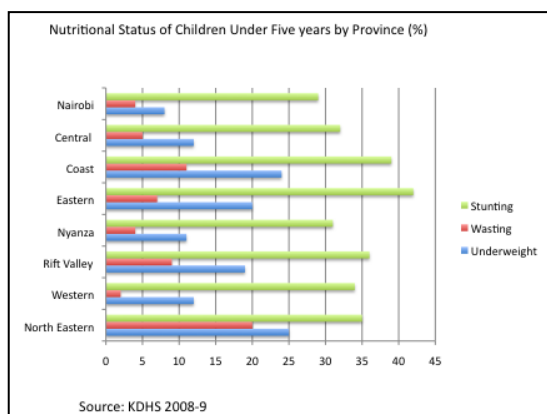
This meeting was held in Mombasa on April 29<sup>th</sup> 2011. It brought together 24 participants who were drawn from the participating government departments and other partners. During this meeting, the team agreed to form the Provincial Nutrition Technical Committee under the leadership of the Provincial Nutritionist. Thirteen members were also nominated to form the UNWG under the leadership of the District Nutrition Officer. The members were supportive of this group due to the potential to have a coordinated approach to addressing child nutrition in the region.

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<sup>3</sup> Dr. Shariff is a member of the NICK Advisory Group.

## (ii) Conduct of the baseline survey

During the initial meeting, it was agreed that the UNWG would be involved in carrying out the baseline survey. As part of community service, the members agreed that anthropometric measurements would be done for every child up to 5 years in the two study sites of Chaani (intervention) and Kongowea (control). Over 900 children were weighed and measured. Data from children 12-59 months indicate higher than national averages for stunting, with Chaani worse off than Kongowea.



The KDHS indicates high levels of stunting and underweight in the Coastal Province.

A household baseline survey was conducted (between June and July 2011) during which over 800 households were interviewed. The main issues addressed were child nutrition, health seeking behaviour and coping mechanisms. Data analysis is ongoing.

The Kenyan team is now facilitating the UNGWA through three 6-monthly cycle of action and reflection to develop, implement and improve a range of small scale multisectorial action to change the social determinants of child undernutrition.

### (iii) 1<sup>st</sup> UNWG/PAR workshop – July 2011

This was a three-day meeting that was attended by 16 participants including the London-based researchers.

A follow-up meeting for the UNWG was held on 20<sup>th</sup> July during which the first multisectorial action plan was finalised.



Members of the UNWG during the training



The Convener (left) of the UNWG during the training

## (iv) Community level activities

Community sensitization is ongoing. The UNWG has held meetings with health officials and village elders in Chaani (the intervention site). A public meeting was held with the community members on 7<sup>th</sup> November 2011, which was attended by over 250 people. So far 17 formalized groups have been identified and the next steps are to assess the training and research needs of these groups. Support for this group, in the form of training and provision of seed funds will be initiated in January 2011.

### (4) Challenges

Although some of the UNWG members have shown a lot of commitment to the project, there have been some initial difficulties in getting the group together.

#### (i) Competing interests

The UNWG members are very busy with multiple responsibilities, which limits the amount of time they have for NICK activities, which are seen as not being directly part of their mandates. The implementation of national level campaigns, such as the polio campaign, interfered with planned programme activities.

## **(ii) Time constraints among Government officials**

It was difficult for the research team to interview the district level officers as key respondents for the baseline survey due to time constraints. Although some of them are interested in research they are hard pressed to put aside an hour for an interview.

## **(iii) Managing expectations**

It has been difficult due to the low project budget. In Kenya, there is a tendency for officers to be given allowances when they attend meetings. Doing this would deplete the project budget completely. The research team has shared the project budget with the UNWG and an agreement has been reached to facilitate travel but not to provide 'sitting allowances' as a compromise.

## **(iv) Balancing between studies and field activities**

Combining the field activities and the research activities of the extension research project on domestic violence and child undernutrition led to some delay in the implementation of community level activities and the 2<sup>nd</sup> PAR workshop. These activities will be initiated in earnest in January 2012. The PAR workshop will be held in February 2012.

## **(5) Conclusion**

The current project implementation process introduces a different mechanism of working in partnership at the community level for the implementation partners. Although the project has experienced some challenges, the achievement to-date indicates that with more support and additional training, the UNWG is in a position to implement sustainable interventions to address the social determinants of child nutrition. The baseline survey tools that will be used at the end of the project will be a good measure of whether this approach will have borne the anticipated outcome of multiple implementers working together for the common good.