



Integrating Nutrition in different conditions in Kenya

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Integrated Agriculture-Nutrition-Market Approach for Scaling up OFSP

Project activities & outputs

Disseminating **planting materials of preferred varieties** and training farmers

Integrating OFSP & vitamin A into **nutrition education** and counseling

Providing technologies and training for sweetpotato **storage & marketing**

Improving information flows, evidence base, and stakeholder **learning**

Project outcomes

Increased production of nutritious sweetpotato

Improved nutrition knowledge and practices

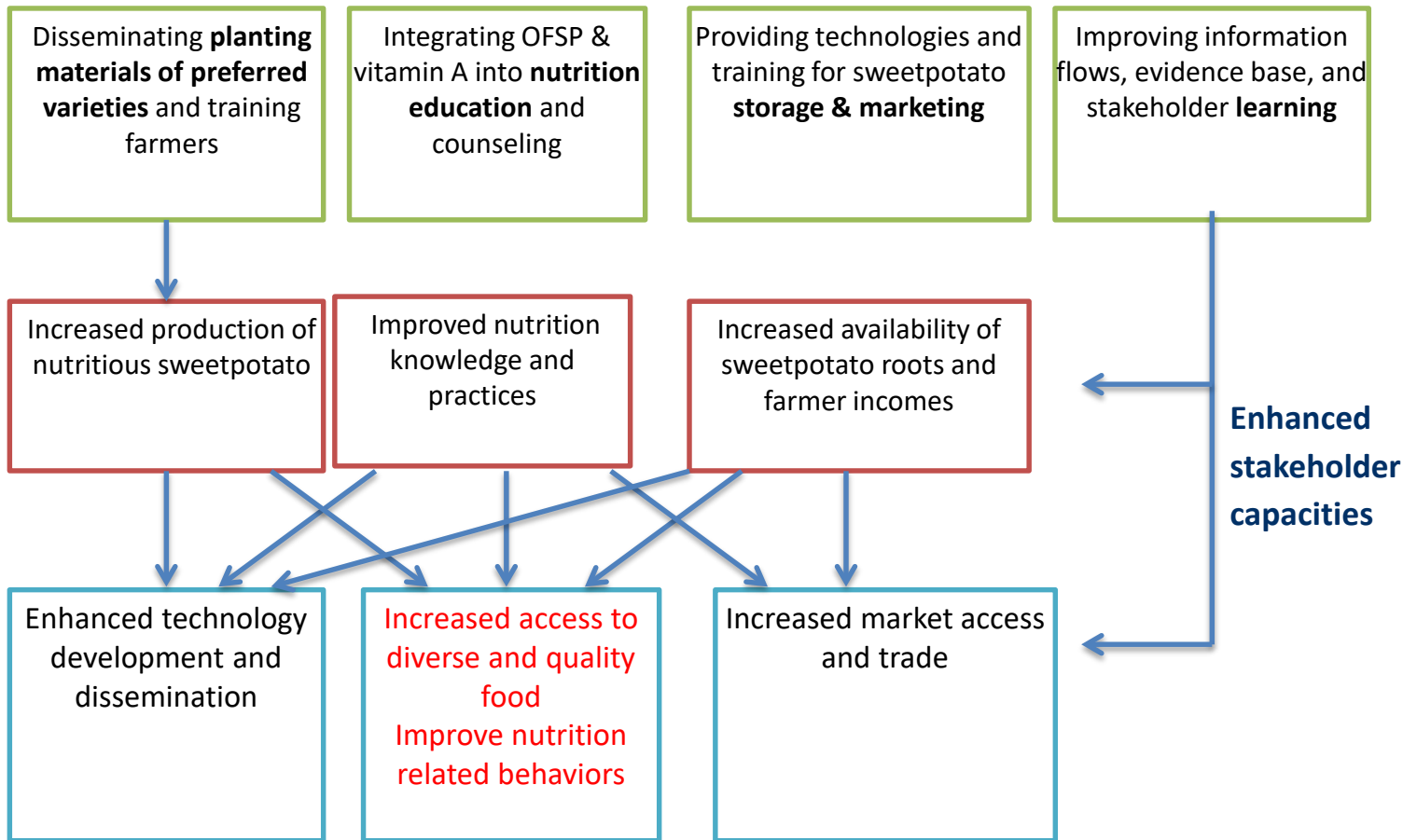
Increased availability of sweetpotato roots and farmer incomes

Enhanced technology development and dissemination

Increased access to diverse and quality food
Improve nutrition related behaviors

Increased market access and trade

Enhanced stakeholder capacities



Nutritional Indicators for Western Kenya

- 84% Prevalence of VAD among children under 5
- 39% prevalence of VAD among women of reproductive age
- 50% of children do not get Vitamin A Supplementation

- Low Birth rate is at 5%
- Infants weighed at birth-58.8%
- Exclusive breastfeeding is at 35.8%
- Minimum meal frequency at 32.2%
- Stunting -40%

- Marriage before the age of 18% (45.4)

The focus on nutrition integration

- Focus is on the 1st 1000 days (the window of opportunity to reverse malnutrition)
- Contribute to implementation of WHO/UNICEF recommendations for Infant and young child feeding
 - Exclusive breastfeeding
 - Continued breastfeeding till 2 years or more
 - Safe, appropriate and adequate complementary feeding
 - Frequency of feeding
 - Integration of minimum WASH practices
- Promotion of affordable balanced diet during pregnancy
- Adherence to ante and post-natal care

Integration of Nutrition through collaboration

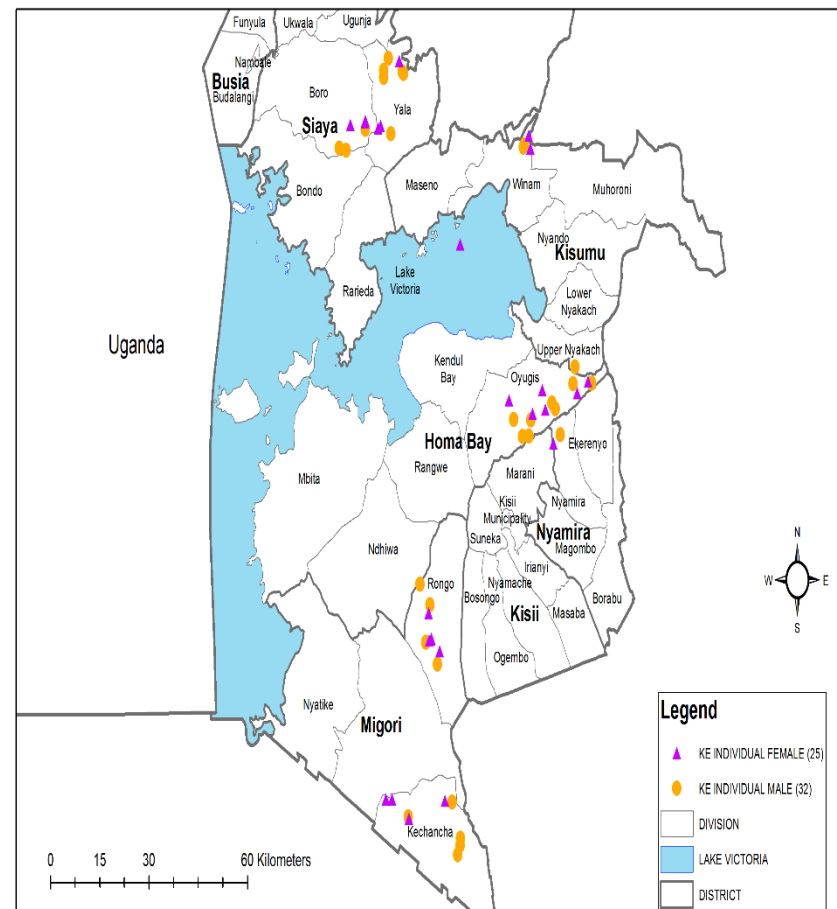
- Previously collaborated with PATH
- Currently collaboration is with county government directly
- Department of Nutrition and department of public health
- Utilizes elaborate community structure whereby households are clustered into community units
- About 100 households are manned by a community health worker



Linking agriculture and nutrition

- Vine multipliers linked to health facility
- Vine beneficiaries recruited at the health facility during ante and post-natal consultation.
- Over 27, 000 households have been reached with vines and some for of nutrition education
- 90 health workers trained on Agri-nutrition
- 760 community health workers trained

KENYA INDIVIDUAL VINE MULTIPLIERS - 2015



Approaches to integrate nutrition activities



- **Nutrition Education:** These are guided modules facilitated by a trained community health worker. Training manuals are provided by the project (adapted from Mama SASHA)
- **Nutrition Counselling:** Could be at the health facility or at the community. Mainly conducted by a trained Nutritionist. Often project has to facilitate activity.

Community Based cooking demonstrations:

These are conducted by community health workers. Supervision is provided by either MOH or MoA staff. Project facilitates





**Social and behavior
change
communication**

- Completed a knowledge, attitude and practice survey
- Study necessitated by the need to document drivers and barriers to adoption of OFSP, its inclusion in usual diets including infant feeding
- Study results are being used to come up with messages to achieve behavior change.
- **Full time staff hired.**



Monitoring progress and learning

- Baseline survey- results being used to guide implementation
- Baseline-Knowledge, attitude and practices
- Elaborate monitoring plan
- Operational research- Collaboration with A4HCRP
- Annual survey- AVCD