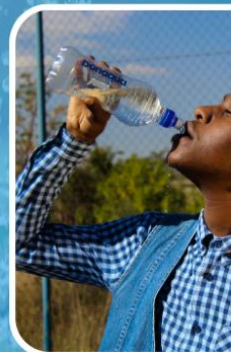




DRAFT NAKURU NUTRITION POLICY

2023-



December 2023



Foreword

Nutrition remains a fundamental yet often overlooked aspect of development, particularly in regions like Sub-Saharan Africa where nutrition indicators are among the lowest globally. In response to this pressing issue, the County Government of Nakuru has developed a Nutrition Policy aimed at addressing the complex determinants of nutrition and improving the well-being of our residents.

It is with great pleasure that I present the Nakuru County Nutrition Policy, a comprehensive framework aimed at addressing the critical issues of food and nutrition insecurity in our county.

This policy underscores our commitment to prioritizing nutrition as a cornerstone of socio-economic development aligned with the provisions of the Constitution of Kenya (2010) and key national development agendas such as the County Integrated Development Plan (2022-2027), Kenya Vision 2030, and the United Nations Sustainable Development Goals.

As Governor of Nakuru County, I recognize the urgent need to tackle the challenges outlined in this policy document. Malnutrition, food insecurity, teenage pregnancy, limited access to potable water and inadequate coordination and collaboration among sectors are among the pressing issues that require immediate attention.

Through this policy, we aim to address the political, economic, social, and institutional challenges hindering sustainable progress in nutrition across the life cycle, including among vulnerable groups such as children under five years of age, pregnant & breastfeeding women, and the elderly. Moreover, we acknowledge the impact of climate change on nutrition and commit to integrating climate change perspectives into our nutrition programs.

The County Government of Nakuru seeks to become a food and nutrition secure society, fostering socio-economic development and improved livelihoods for all residents by embracing innovative technologies and best practices across all relevant sectors. The targets outlined in this policy are aligned with the Sustainable Development Goals (SDGs) and will contribute to ending hunger, achieving food security, and improving nutrition in our county. It will also build on existing efforts to address sustainable nutrition and promote gender-transformative approaches, ensuring that gender mainstreaming is integral to all nutrition initiatives.

This policy has been developed through extensive collaboration among various stakeholders, including government departments, civil society organizations, development partners, and the community. It reflects our collective commitment to improving the health, well-being, and future prospects of every resident of Nakuru County. It provides a strategic roadmap with clear objectives, strategies, and actions to scale up nutrition-specific interventions, promote nutrition-sensitive approaches across sectors, enhance resource mobilization, and create an enabling environment for sustainable development.

Key to the success of this policy will be effective monitoring and evaluation, ensuring that our efforts translate into tangible outcomes for our communities. We will track progress, learn from our experiences, and adjust our strategies through data-driven approaches and participatory monitoring mechanisms.

I commend the efforts of all those involved in the development of this policy and call upon all the responsible sectors in the County Government, development partners and stakeholders to collaborate closely in the implementation of this policy. I believe we can make a meaningful impact on the lives of our people and build a healthier, more prosperous Nakuru County for generations to come.

H.E. Governor Susan Kihika, EGH

County Government of Nakuru

DRAFT

Preface

Nutrition is not merely a matter of food consumption; it is a fundamental human right, a vital aspect of public health, and a cornerstone of sustainable development. The County Government of Nakuru recognizes the critical importance of nutrition in ensuring the health, well-being, and prosperity of our residents thus the need for this policy which is a significant milestone in our efforts to improve nutrition outcomes across Nakuru County.

This Policy is developed in accordance with the Constitution of Kenya (2010) and in alignment with national pathways to sustainable food systems, the vision 2030 and the County Integrated Development Plan 2023-2027 to provide a comprehensive framework for action to improve nutrition outcomes for all representing our commitment to addressing the complex challenges facing nutrition in Nakuru county.

In this policy, we outline our strategies to combat malnutrition, enhance food security, and promote healthy lifestyles across all sectors. We aim to create an enabling environment where every individual can access and enjoy nutritious food, regardless of their socio-economic status by addressing the underlying determinants of nutrition. The policy emphasizes the importance of coordination, monitoring, and evaluation to ensure effective implementation and accountability. It provides a roadmap for integrated interventions, leveraging the strengths of various sectors to achieve our nutrition goals.

As we embark on this journey towards improved nutrition outcomes, we recognize the need for sustained commitment, innovation, and collaboration. We are confident that we can build a healthy county free from malnutrition together with our partners and stakeholders.

County Executive Committee Member,

Department of Health Services,

County Government of Nakuru

Acknowledgement

The development of this policy has been a collaborative and inclusive process, involving extensive consultations and contributions from a wide range of stakeholders from government sectors and agencies, development partners, civil society organizations, and communities. We extend our deepest gratitude to all individuals, organizations, and stakeholders who have played a role in shaping this crucial document giving valuable insights, dedication, expertise, and collaborative spirit have been instrumental in bringing this policy to fruition.

In particular, we acknowledge and thank Nutrition International and the Global Alliance for Improved Nutrition (GAIN) for their support throughout this process. Their technical assistance and financial contributions has enabled us to undertake thorough research, engage with communities, and develop a comprehensive and actionable policy. Their commitment to improving nutrition at both global and local levels is commendable and deeply appreciated.

We also express our deep gratitude to the dedicated team involved in drafting and refining this policy through hard work, perseverance, and attention to detail in creating a document that is both visionary and practical. Special appreciation goes to the technical working groups and community members whose insights and feedback have ensured that this policy is responsive to the needs and realities of our county.

We are confident that the Nakuru County Nutrition Policy will serve as a cornerstone for improving nutrition outcomes and fostering socio-economic development in the county. We urge the teams to maintain close collaboration with the sectors responsible for health, agriculture, education, gender, water, development partners, and all relevant actors to commit to its implementation with the same dedication and collaborative spirit that characterized its development.

CHIEF OFFICER, PUBLIC HEALTH

Executive Summary

This Policy is a comprehensive framework aimed at addressing the critical issues of malnutrition and food insecurity within Nakuru County. It is policy is built on the principles enshrined in the Constitution of Kenya, and aligns with national and county development agendas such as the National M&E Policy 2022, the County Integrated Development Plan (CIDP) 2023-2027, the Kenya Vision 2030, which aims to transform Kenya into a newly industrializing, middle-income country providing a high quality of life to all its citizens. It also comprehensively addresses several key SDGs, including SDG 2: Zero Hunger, by aiming to end hunger and ensure access to safe, nutritious, and sufficient food; SDG 3: Good Health and Well-being, by promoting healthy lives and well-being for all at all ages; SDG 5: Gender Equality, by ensuring equal opportunities and addressing nutritional needs specific to women and girls; and SDG 17: Partnerships for the Goals, by fostering multi-sectoral collaboration and partnerships to achieve sustainable development. It advocates for a multi-sectoral approach to nutrition, integrating efforts across various sectors to ensure holistic and sustainable solutions.

The Policy outlines a comprehensive approach to combat malnutrition and improve food security through coordinated efforts across various sectors. The policy emphasizes the importance of robust monitoring and evaluation mechanisms, guided by national standards and frameworks, to ensure data-driven decision-making and effective program implementation. Key strategies include capacity building, the use of participatory approaches, and the integration of nutrition objectives into county development plans. Financial sustainability is prioritized through dedicated budget allocations across all relevant sectors, external partnerships, and innovative financing mechanisms.

The primary objectives of the policy are to reduce malnutrition rates, enhance food security, and improve the overall health and socio-economic development of Nakuru County residents. Key strategies include promoting healthy diets, enhancing food security, strengthening health systems, and engaging communities in the implementation of nutrition interventions. These strategies aim to encourage the consumption of diverse, safe, and nutritious foods, implement sustainable agricultural practices, enhance the capacity of health services to provide nutrition-related care, and involve communities in planning and monitoring nutrition programs. The policy also highlights the critical role of stakeholder engagement, including community contributions and advocacy, to foster ownership and ensure the long-term success of nutrition interventions.

The County M&E unit will oversee the implementation of this policy, coordinating with departmental M&E committees and the Nakuru County Food and Nutrition Technical Coordinating Committee (NCFNTCC). Efforts will be made to integrate this policy's M&E system with existing county monitoring, evaluation, and information systems, employing participatory monitoring and evaluation approaches to ensure comprehensive data collection and analysis.

Data for monitoring and evaluation will be collected from both primary and secondary sources, including field surveys, stakeholder forums, and progress reports from county departments. Findings will be documented and shared in quarterly and annual progress reports to inform decision-making and policy adjustments, ensuring that interventions remain effective and responsive to emerging challenges.

The success of the policy will be measured through a set of financial and non-financial targets and indicators, aligned with global, regional, national and county best practices and incorporated into the CIDP indicator handbook. Regular tracking and evaluation will ensure systematic monitoring of progress towards achieving the policy objectives.

To maintain its relevance and effectiveness, the policy's implementation plans will be periodically reviewed. This review will involve assessing progress towards the policy objectives and making necessary adjustments based on the findings.

The policy has established several key committees to ensure effective coordination and implementation:

- The Nakuru County Food and Nutrition Coordination Committee (NCFNCC) provides leadership and oversight, ensuring nutrition is mainstreamed across development plans and that resources are effectively utilized.
- The Nakuru County Multisectoral Nutrition Technical Coordination Committee will offer technical advice, prepare and implement departmental plans, and ensure public engagement in nutrition initiatives.
- Sub-County Multisectoral Nutrition Coordination Committees will facilitate the implementation of nutrition strategies at the sub-county level, ensuring alignment with county-wide objectives.

The development of this policy was made possible through the collaborative efforts of numerous stakeholders, including county government sectors and agencies, development partners, and community members. The Nakuru County Nutrition Policy represents a significant step towards improving the nutritional status and overall well-being of the county's residents. Through collaborative efforts and a commitment to continuous improvement, this policy aims to create a food and nutrition-secure environment, contributing to the socio-economic development of Nakuru County.

Abbreviations and Acronyms

ADP	Annual Development Plans
ANC	Antenatal Care
CBOs	Community Based Organization
CECM	County Executive Committee Member
CFNPR	County Food and Nutrition Progress report
CIDP	County Integrated Development Plan
CNAP	County Nutrition Action Plan
CoK	Constitution of Kenya
ECDE	Early Childhood Development Education
FAO	Food and Agriculture Organization
GAIN	Global Alliance for Improved Nutrition
GBV	Gender based Violence
GDP	Gross Domestic Product
GNR	Global Nutrition Report
GoK	Government of Kenya
ICN	International Conference on Nutrition
KALRO	Kenya Agriculture and Livestock Research Organization
KCHS	Kenya Continuous Household Survey
KDF	Kenya Defence Forces
KDHS	Kenya Demographic Health Survey
KHIS	Kenya Health Information system
KNBS	Kenya National Bureau Of Statistics
MIYCN	Maternal Infant and Young Child Nutrition
NAWASIP	National Water and Sanitation Investment Plan
NCDs	Non- Communicable Diseases
NCFNTCC	Nakuru County Food and Nutrition Technical Coordinating Committee
NI	Nutrition International
ODF	Open Defaecation Free
OVC	Orphaned and Vulnerable Children
PWD	Person With a Disability
SDGs	Sustainable Development Goals
SHIF	Social Health Insurance Fund
SRH	Sexual Reproductive Health
TVET	Technical and Vocational Education and Training
UN	United Nations
UNICEF	United Nations Children’s Fund
URTI	Upper Respiratory Tract Infection
WASH	Water Sanitation and Hygiene
WFP	World Food Programme
WHA	World Health Assembly
WHO	World Health Organization

Chapter One

Introduction

Adequate nutrition is a prerequisite for human growth and development and an integral element for the social and economic development of a country. Adequate nutrition is critical for physical and intellectual development of an individual and is a major determinant of one's intellectual performance, academic and professional achievement, and overall work productivity at later stages in life. This directly and indirectly influences potential future gains and economic contribution of the individual to the nation. By improving nutrition, we can build human capital and fuel economic growth for future generations. However, improvements in nutrition can only be realized when all sectors are involved.

In 2016, the United Nations (UN) General Assembly proclaimed 2016–2025 the United Nations Decade of Action on Nutrition, an opportunity for addressing all forms of malnutrition. It sets a concrete timeline for implementation of the commitments made at the Second International Conference on Nutrition (ICN2) to meet a set of global nutrition targets and diet-related NCD targets by 2025, as well as relevant targets in the *Agenda for Sustainable Development* by 2030 – in particular, Sustainable Development Goal (SDG) 2 (end hunger, achieve food security and improved nutrition and promote sustainable agriculture) and SDG 3 (ensure healthy lives and promote wellbeing for all at all ages).

The UN Decade of Action on Nutrition calls for policy action across 6 key areas led by WHO and the Food and Agriculture Organization of the United Nations (FAO). These include:

1. Creating sustainable, resilient food systems for healthy diets
2. Providing social protection and nutrition-related education for all
3. Aligning health systems to nutrition needs, and providing universal coverage of essential nutrition interventions
4. Ensuring that trade and investment policies improve nutrition
5. Building safe and supportive environments for nutrition at all ages; and
6. Strengthening and promoting nutrition governance and accountability, everywhere.

Causes of malnutrition are multi-faceted, which require multi-sectoral approach, coordination, and implementation platforms with clear terms of reference at all levels. According to UNICEF conceptual framework, diseases and inadequate dietary intake are immediate causes of malnutrition which can be addressed through nutrition specific interventions within the health sector. The underlying and basic causes such as inadequate access to food, inadequate care for women and children, access and control of resources and political and ideological factors can only be addressed through nutrition sensitive interventions implemented within other sectors.

Interventions such as cash transfer, programming that improves household food security by increasing affordability of nutritious foods and dietary diversity as well as increasing uptake of health services can enhance effectiveness of nutrition interventions. Health insurance may also improve child health outcomes, by covering general health costs and by protecting individual or household budgets from catastrophic health shocks that can force people into negative coping mechanisms and deeper poverty. Social protection can contribute to reduced under-five morbidity and mortality by improving household food security and feeding practices. Programming aimed at behaviour change on retrogressive gender and social norms in households improves diets. The amount of cash transfers vis-à-vis household consumption is a key determinant of the expected change and can further be enhanced if accompanied by information aimed at shifting specific child care practices.

Social protection can reduce risky sexual behaviours and improve adolescents' knowledge of SRH, hence reducing teenage pregnancies. The nutrition situation of household does not only depend on food security, but also on feeding and hygiene practices as well as psychosocial care and health-seeking behavior, a healthy household environment (e.g. access to shelter, healthcare, and WASH facilities), the parent's educational status and beliefs, their psychosocial wellbeing and access to resources.

Rationale for the Policy

Nakuru County is a region of great resources and potential, it is a cosmopolitan County and home to 2.35 million people in 2023 (KNBS, 2022 projections) of different ethnic, cultural & racial backgrounds and religious beliefs. The County has been rapidly urbanizing with approximately 51.3 percent of the population living in urban areas. The major economic activities in the County include Agriculture, forestry, and fishing; transport and storage; wholesale and retail trade; and electricity generation & supply. Other economic activities include manufacturing; construction; real estate; financial and insurance; accommodation & food services.

Improving the health and nutrition status of the people of Nakuru county is vital to its development. Malnutrition undermines individual well-being, reduces productivity, and is the result of direct and underlying causes in a variety of sectors, which are in turn dependent on wider economic, social and political factors. The foundation of this policy is grounded in the acknowledgement that enhancing nutrition plays a pivotal role in the comprehensive development of Nakuru County. This section delineates the compelling factors and fundamental principles motivating the formulation and execution of a focused nutrition improvement policy.

Additionally, Nakuru County Nutrition Policy is derived from an extensive analysis of the nutritional landscape within the county. Various factors contribute to the imperative need for this policy:

1. **High Malnutrition Rates:** The County is faced with high prevalence rates of malnutrition indicators such as stunting, wasting, underweight, overweight, obesity, and micronutrient deficiencies across the population. This policy will provide a multi-sectoral approach towards addressing this challenge.
2. **Complex Determinants:** Nutrition is influenced by a multitude of factors, including healthcare, agriculture, education, and socio-economic conditions. Recognizing the interconnectedness of these determinants, the policy adopts a multisectoral approach to comprehensively address the root causes of malnutrition.
3. **Uncoordinated Approaches:** The concept of Nutrition in Nakuru County has been under the misconception that it falls **ONLY** under the Department of Health Services. This policy endeavors to augment coordination among the diverse sectors, departments, and stakeholders engaged in nutrition-related activities, in order to foster a more cohesive and effective response.
4. **Inadequate Resources:** Limited resources have been allocated to advocate, promote, and support nutrition-focused interventions across departments that bear the primary responsibility for enhancing nutrition. Commitment to increased budgetary allocation and resource mobilization for external financing will ensure sustainability of improved nutrition across different segments of the Nakuru population. This policy provides a framework for resource mobilization through budgetary allocation.

5. **Emerging and re-emerging Health Issues:** The dynamic health trends, marked by the increasing prevalence of non-communicable diseases and evolving dietary patterns, demands an adaptive and forward-looking policy. This policy endeavors to establish a resilient and responsive nutritional framework that proactively addresses emerging issues.
6. **Socio-Cultural and Economic Impact:** Socio-cultural and economic practices and beliefs in the County such as alcoholism, drug abuse, gender based violence and retrogressive cultural practices carry extensive implications on nutrition status. This policy endeavors to address these practices through strategic investments in sustainable nutritional enhancements such as education, advocacy and economic empowerment.
7. **Global and National Commitments:** The county aligns itself with global and national commitments aimed at enhancing nutrition, as delineated in initiatives such as the Sustainable Development Goals (SDGs) and national nutrition frameworks. This policy serves to substantially contribute to the realization of these overarching objectives within the context of Nakuru County.
8. **Community Involvement:** The policy emphasizes the importance of community engagement and participation in shaping nutritional outcomes. By involving communities in decision-making, the policy aims to create sustainable solutions that resonate with the local context and cultural practices.

The policy will provide a platform for the County government to have strategies to tackle identified problems resulting in intended impact - that is mainstreaming nutrition across all the relevant sectors, creating an enabling environment that includes effective coordination and resource mobilization for nutrition programming.

Guiding Policy Principles

Anchored in a set of guiding principles and values, the policy emphasizes equity, inclusivity, and sustainability. This section articulates the ethical foundation upon which the policy rests, ensuring a fair and just approach to nutrition improvement.

This Policy shall be guided by the following overarching principles and core values:

1. Inclusivity;
2. Multisectoral approach;
3. Effectiveness and efficiency;
4. Equitable distribution of resources;
5. Social accountability;
6. Respect for human rights;
7. Gender mainstreaming;
8. Cultural diversity and ethics;

Scope of the Policy

This policy applies to the County Government of Nakuru and shall be implemented through a multi-sectoral approach that includes various Departments of the County Government that bear the greatest and direct responsibility of improving nutrition, private sector and development partners.

Intent of the Policy

Nutrition is multifaceted and requires a multi-sectoral approach. Good nutrition results from, and is sustained by, effective work in many sectors. Improvements in the health sector alone will not bring about sustained changes in nutrition status, however formal collaboration between relevant line ministries in relation to nutrition is key. Need for strengthening linkages between the most important sectors that contribute toward improvement of nutrition status across the population. Health, Agriculture (crops, livestock and fisheries), Education, Water and Sanitation, Environment, Social Protection and Gender. Trade and commerce is equally important due to the role of the private sector in the food industry especially with increased urbanization.

There is a high dependency on donor funding for nutrition programming in the county which limits sustainability. Additionally, nutrition is not assigned a high priority in terms of resource allocation. Available resources could be used more efficiently through coordinated planning hence the need to bring the various sectors together.

In the past the county based its nutrition plans and budgets on the National Food and Nutrition Security policy. In 2020, Nakuru county developed the County Nutrition Action Plan which provides guidance to the Department of health, health related sectors, partners and other relevant non-state actors interested in the implementation of nutrition interventions. Now the need to develop Nakuru specific policy that address nutrition needs for the Nakuru population through a multisectoral approach is critical. The policy will provide a platform for the County Government to have strategies to tackle identified problems resulting in intended impact - that is mainstreaming nutrition across all the relevant sectors, address coordination and resource mobilization for nutrition.

The overall purpose of this policy therefore is to define a framework through which available technical, human, and financial resources may be mobilized in order to ensure the health and nutrition status of all Nakuru county people is significantly improved.

Chapter 2: Situational analysis

2.1 Health and nutrition

Malnutrition is one of the world's most serious development challenges. Its human and economic costs are enormous, falling hardest on the poor, women, and children. According to the Global Nutrition Report (GNR) 2022 the global nutrition crisis is getting worse with worrying trends across every form of malnutrition, from hunger to obesity.

Globally, an estimated 148.1 (22.3%) million children under 5 years of age were affected by stunting in 2022 while in the African region 56.2 million children were affected. The prevalence of wasting in children under 5 years of age was 6.8% representing 45 million children. These numbers may become substantially higher as the global food and nutrition crisis continues to unfold and the full impact of the crisis on stunting may take years to manifest

On the other hand some 33.0 million children under 5 years of age were overweight. Childhood overweight and obesity increase the risk of obesity, NCDs, premature death and disability in adulthood.

According to the GNR 2022 very few countries around the world are on course to meet the WHA targets for diet-related non-communicable diseases (NCDs). No country is on course to halt the rise of obesity, with 16.2% of adult (aged 18 years or over) women and 12.3% of adult men estimated to be living with obesity globally. At the same time, diabetes is estimated to affect 8.9% of adult women and 10.5% of adult men.

Although the global prevalence of anemia in women aged 15–49 years decreased slightly from 31.2% in 2019 to 29.9% in 2000 the total number affected increased considerably due to population growth – from 492.9 million in 2000 to 570.8 million in 2019. Prevalence was higher among pregnant women at 36.5% than non-pregnant women at 29.6%.

Kenya is grappling with a “triple burden of malnutrition” characterized by the coexistence of undernutrition (stunting and wasting), micronutrient deficiencies and over nutrition (overweight and obesity).

According to the Global Nutrition Report 2022 Kenya is 'on course' to meet four WHA targets for maternal, infant and young child nutrition (MIYCN). No progress has been made towards achieving the target of reducing anaemia among women of reproductive age, with 28.7% of women aged 15 to 49 years now affected. Meanwhile, there has also been some progress towards achieving the low birth weight target with 11.5% of infants having a low weight at birth. Kenya is 'on course' for the exclusive breastfeeding target, with 60% of infants aged 0 to 5 months exclusively breastfed, 'on course' to meet the target for stunting, with 18% of children under 5 years of age affected, which is lower than the average for the Africa region (30.7%). Kenya is also 'on course' for the target for wasting, with 3% of children under 5 years of age affected, which is lower than the average for the Africa region (6.0%). The prevalence of overweight children under 5 years of age is 3% and Kenya is 'on

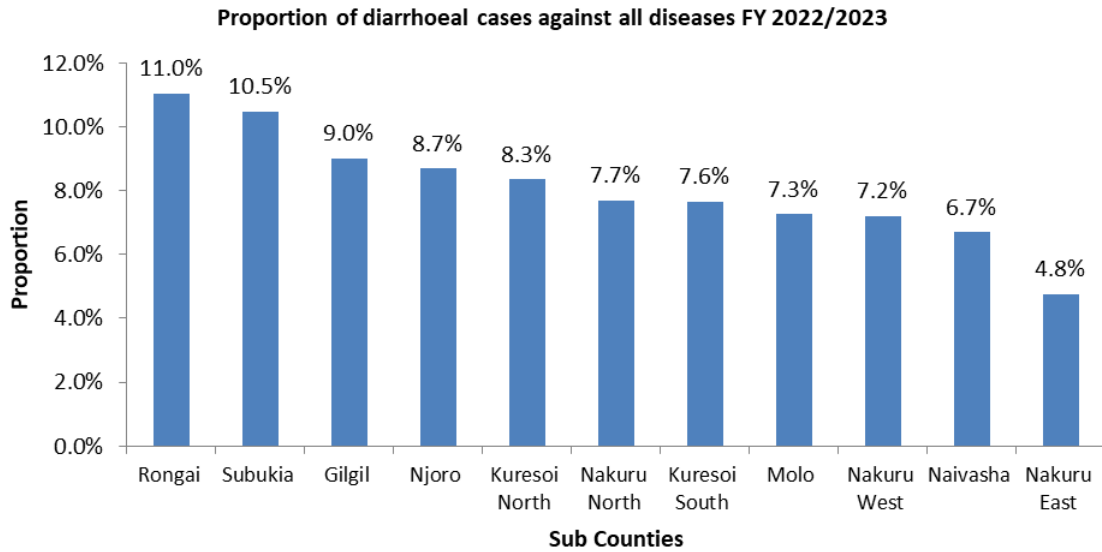
course' to prevent the figure from increasing. However, there are geographical and social demographic variations in the severity of malnutrition with 3 counties reporting over 30% stunting prevalence.

Kenya has shown limited progress towards achieving the diet-related non-communicable disease (NCD) targets. 13.4% of adult (aged 18 years and over) women and 3.6% of adult men are living with obesity. Kenya's obesity prevalence is lower than the regional average of 20.8% for women and 9.2% for men. At the same time, diabetes is estimated to affect 7.3% of adult women and 7.0% of adult men.

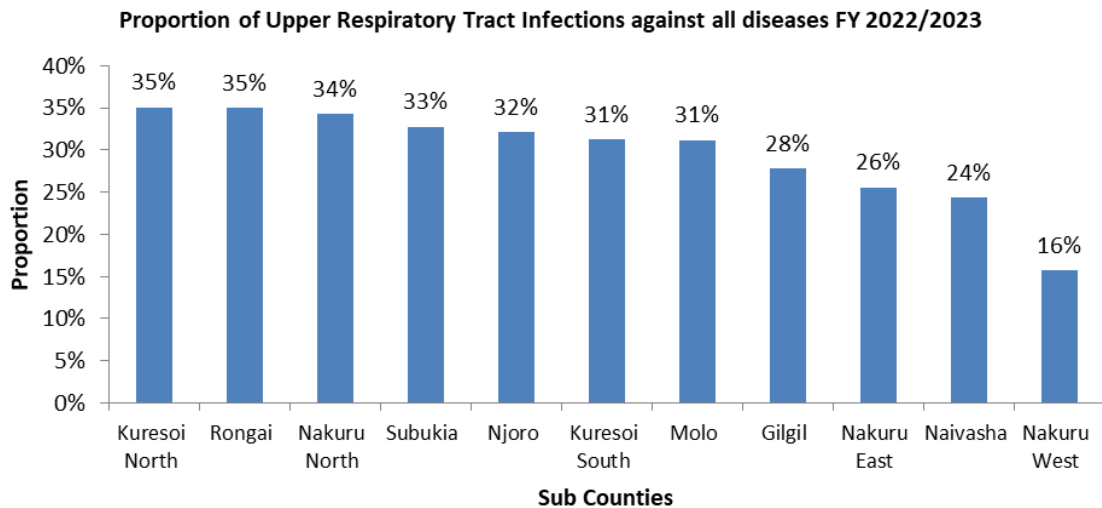
The health and nutrition status of the population in Nakuru county is very similar to the global and national situation with a high burden of non-communicable diseases, malnutrition and micronutrient deficiencies. All three forms of malnutrition occur within individuals, households, and populations throughout the life course – pregnant women, children, adolescents, adults and older persons – throughout the county at different levels of public health significance.

According to the KDHS 2022, an estimated 17.5% of children under the age of 5 years living in Nakuru County are stunted while 3% are wasted and 9% are underweight. The Infant Mortality rate stands at 41 per 1000 live births which is higher than the National rate which stands at 32 per 1000 live births. In addition the Under 5 mortality rate in Nakuru County stands at 51 per 1000 live births which is still higher than the National rate which stands at 41 per 1000 live births. These high levels of malnutrition remain a public health concern and a hindrance to achieving the county's developmental agenda. Some of the maternal, child and adolescent health challenges that affect the nutrition status of women and children include; underutilization of ANC services with only 17% of pregnant women attending ante-natal clinics in the first 12 weeks; high teenage pregnancy (12%), with sub-counties such as Kuresoi North and South having 19% and 18% teenage pregnancies respectively.

According to KHIS, an increase in diarrheal cases was observed from 6.9% in 2021/22 to 7.5% in 2022/23 against the total disease burden. Diarrhoea contributes to malnutrition through reduction in food intake, decrease in absorption of nutrients and increase in catabolism of nutrient reserves thus contributing to a higher burden of malnutrition. The highest diarrheal cases in children under 5 years were seen in Rongai Sub County (11%) with the lowest observed in Nakuru East Sub County(4.8%).

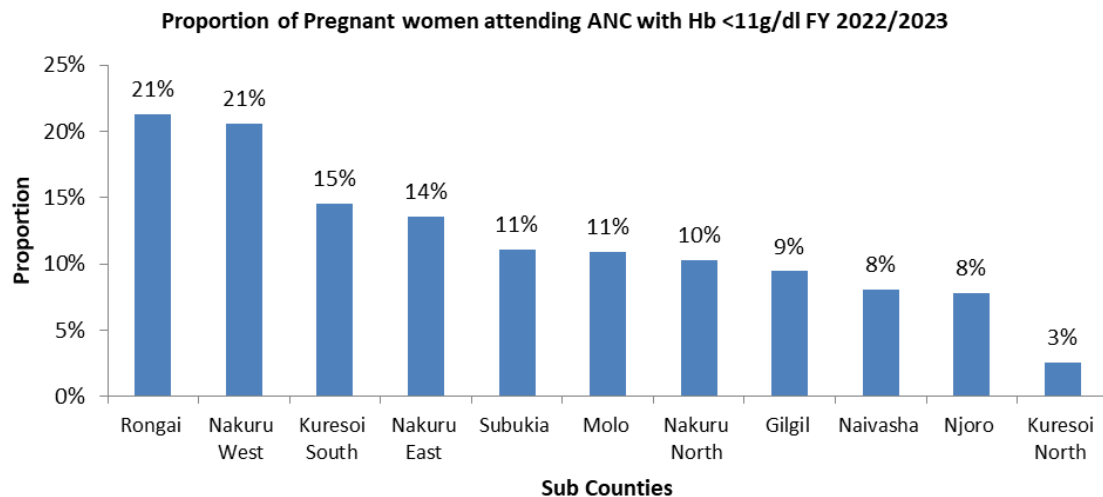


Although there was a reduction in URTI cases from 28% to 27% in 2022/23 45% URTI accounts for 45% of all diseases treated in health facilities in Nakuru County. Malnourished children with severe acute URTI have been shown to have a 2.3 times higher mortality rate than healthy children. The highest proportion of URTI in the general population was seen in Kuresoi North and Rongai Sub Counties (35%) while the lowest was Nakuru West at 16%. At least seven out of eleven Sub Counties had above 30% of URTI Cases.



Communicable conditions accounted for 2,101,869 (54%) of the overall disease burden in the period FY 2022/2023 . Non- Communicable conditions that are among the top 10 causes of mortality for all ages include prematurity and low birth weight (6.9%), other cardiovascular diseases (5.0%), and birth asphyxia and birth trauma (5.0%). An increase

was also observed in Diabetes and Hypertension cases from 4.1% to 4.2% in the period FY 2022/23. Anemia prevalence among women of reproductive age is also a concern with 11.9% of pregnant women having a HB of <11g/dl although this is a reduction from 16% in the FY 2020/21. Efforts are still needed to reduce this rate to below 10%. Rongai and Nakuru West Sub Counties had anemia prevalence rate of 21%, while Kuresoi Sub County had the lowest at 3%.



Key Issues in health & nutrition

- 1: High prevalence of under nutrition (stunting) and micronutrient deficiencies
- 2: Increase in the consumption of processed and convenience foods, leading to a spike in overweight and obesity rates across urban, peri-urban, and rural areas.
3. Limited knowledge on dietary diversity and meal frequency in caregivers leading to unacceptable diets among children.
4. High burden of non-communicable diseases.

2.2 Agriculture, Livestock, Fisheries and Veterinary Services sector

The Global Food Security Program recognizes nutrition as a crucial cross-cutting component. Achieving food and nutrition security remains challenging for developing countries due to technological limitations, inefficient production, economic constraints, population growth and climate variability.

While global hunger numbers have stalled between 2021 and 2022, there are many places in the world facing deepening food crises. Almost a third (29.3%) of the world's population, 2.3 billion people, were moderately or severely food insecure in 2021, up from 25.4% before the COVID-19 pandemic. The growing impact of climate change could further cut crop

yields, especially in the world's most food-insecure regions. Previously self-sustaining rural regions, especially in Africa and Asia, are now found to be increasingly dependent on national and global food markets.

Risks associated with poor diets are also the leading cause of death worldwide. Millions of people are either not eating enough or eating the wrong types of food, resulting in a double burden of malnutrition that can lead to illnesses and health crises. An estimated 3 billion people in the world cannot afford a healthy diet.

Rising population, income growth and urbanization are increasing the demand for food of animal origin at an unprecedented level. It has been documented that world aggregate meat consumption will increase from 209 million tons in 1997 to 327 million tons by 2020 and milk consumption from 422 to 648 million tons. The challenge is therefore to transform the Livestock Sector to enable it meet this demand for livestock products.

Global production of aquatic animals was estimated at 178 million tonnes in 2020, a slight decrease from the all-time record of 179 million tonnes in 2018. Capture fisheries contributed 90 million tonnes (51 percent) and aquaculture 88 million tonnes (49 percent).

In Kenya, 51% of the population faces food and nutrition insecurity due to factors such as agricultural policies, food prices and economic development. Projections from the Kenya National Bureau of Statistics (KNBS) indicate that the country's population may reach around 96 million by 2050, with nearly 50 percent residing in urban areas by then, compared with 27 percent in 2019. Food and nutrition security has been affected by adverse weather, below average crop and livestock production, local conflicts and the ripple effects of COVID-19.

The livestock sector plays a major role in the Kenyan food system, contributing about 12 percent of the country's overall GDP, 40 percent of agricultural GDP and 22 percent of food system GDP. The sector employs about half of the agricultural labor force.

In 2021, the total fish production was 163,702 metric tons worth 30.38 billion Kenya shillings. This was an 8.2% increase in production compared to 151,289 tons worth 26.25 billion Kenya shillings landed in 2020. The increase in the value was mainly due to the catches from industrial vessels and the increase in prices for areas with less production based on the demand and supply impacts on the fish prices.

Agriculture contributes 60 percent to Nakuru county's economy. The Individual Food Poverty Estimates in the county was 21.9 percent in 2020, therefore the sub sector aims at reducing the proportion of food poor households. The agriculture sector's priorities include improvement of crop, livestock and fish production; improved extension services, agribusiness development and strengthening research-extension farmer linkages.

Inadequate crop, livestock and fisheries productivity is a major challenge to achieving 100% food and nutrition security. Food crops and fodder productivity is negatively affected by over-reliance on rainfed agriculture coupled with low access to water for supplemental

irrigation for crops and livestock. This scenario is further impacted by adverse effects of climate change such as failed rains which lead to crop failure and inadequate pasture, especially in low rainfall areas. There are increasing incidences of emerging pests and diseases as well as migratory pests such as locusts and *quelea quelea* birds which result in pre-harvest losses, increased production costs, decreased productivity and low-quality produce, thus compromising on food availability. Enhanced temperatures and change in precipitation regimes have led to reduced suitability of agro-based enterprises; reduced productivity of crops, livestock and fisheries due to temperature and water stresses. Heavy rainfall destroys aquatic eco-systems, floods croplands and causes livestock mortalities.

The high cost of inputs including labour further increases the production costs and hampers uptake of modern farming technologies. Inadequate certified seed and high-quality seedlings, as well as the sale of counterfeit seed by unscrupulous business people also negatively affect productivity. Soil degradation through erosion and inadequate replenishment of nutrients also limits productivity.

This situation is further compounded by increased land fragmentation occasioned by increasing population and urbanization. This has caused a shift from high potential areas to marginal areas with limited adoption of dryland farming technologies. Food and nutrition security encompasses availability of adequate quantities of a diversity of food commodities including a variety of cereals, fruits, vegetables and animal products whose availability is hampered by low diversification of agricultural enterprises.

Fish production in the county is from the inland lake Naivasha and farm ponds. Per capita fish consumption is low at 5kg/Person/Year against the WHO recommendation of 13kg/Person/Year. To increase fish availability, restocking has been done in fresh water bodies including Lake Naivasha, existing dams and farm ponds. However, fish feeds are expensive and farmers have limited knowledge in fish husbandry.

Priorities in the crops sub-sector include promotion of traditional high value crops to enhance dietary diversity and adapt to climate change. The productivity of most crops remained below the potential, for example maize yield was 2.77 tons/Ha against a potential of 5.63 tons/Ha, beans yield was 692kg/Ha which is below the potential of 1.8 tons/Ha. Livestock productivity is affected by limited access to, or high cost of feed, veterinary services and other inputs. Poor infrastructure has increased transportation and storage costs for livestock inputs, which increases the cost of livestock products and negatively affects affordability.

High post harvest losses (30%) compromise food and nutrition security. Despite the existence of several agro-processing and value-addition facilities in the County, such as Njoro Canning Factory, KDF fruits and vegetables drying unit in Gilgil, milk pasteurizers, milk cooling systems and dispensers for dairy cooperative societies, farmers experience produce losses. Investments in agro processing mostly focus on increasing production of value-added products for commercialization, with only a few activities geared towards

improving household food and nutrition security. The uptake of agro-processing at smallholder level is inadequate.

The extension staff:farmer ratio of 1:1,300 is significantly above the recommended ratio of 1:400. This compromises on effective extension service delivery leading to inadequate technical knowledge among the farming community, leading to continuous use of poor farming practices.

Safety of agricultural produce is also a major issue due to poor handling of farm produce and unethical practices for pesticide and drug application. Malpractices by producers in the value chain are largely uncontrolled, coupled with non-adherence to the manufacturer's instructions on use of pesticides and drugs. This results in incidences of food products having antibiotic and pesticide residues, which are unsafe. In 2022, the County Government of Nakuru issued a ban on consumption of fish from some lakes within the county citing high levels of lead. Some areas are also known to produce maize high in aflatoxin. Counterfeit value-added and adulterated dairy products have also been confiscated within the County. These food safety challenges have the potential to cause serious health problems if they are not addressed. Some people might also opt to keep off these foods completely due to the fear of their safety, resulting in reduced dietary diversity.

Biofortification is among the strategies in the sub sector to increase the nutritional value of crops products. Scientists at the Kenya Agriculture and Livestock Research Organization (KALRO), have bred nutrient enriched crops/foods such as orange fleshed sweet potatoes and micronutrient rich beans. However low consumer awareness, scarcity of certified seeds and high cost negatively influence adoption of these technologies, hence micronutrient deficiencies continue to plague the County population.

Key issues

1. Inadequate crop, livestock and fisheries productivity due to poor management practices, over-reliance on rainfed agriculture, adverse effects of climate change, land use change in high potential areas, pushing farmers to marginal areas.
2. High post harvest losses.
3. Increasing incidences of emerging pests, and diseases in crops and livestock.
4. High cost of inputs including fingerlings, seeds, seedlings, fertilizers, feeds, pesticides and labour.
5. Low awareness on availability of bio-fortified and other nutrient dense crops.
6. Inadequate extension staff hence low coverage.
7. Low diversification of agricultural enterprises.
8. Low dietary diversity.

9. Unsafe foods due to poor handling, inappropriate use of agrochemicals, counterfeit and adulterated food products.
10. Low uptake of agro processing and value-addition technologies.

2.3 Water and Sanitation.

Kenya has ratified several international conventions, treaties and declarations, under which the human right to safe drinking water and sanitation is guaranteed. Kenya is in particular committed to the Sustainable Development Goal 6 that aims to ensure access to water and sanitation for all by 2030, which is also in line with the Country's development blueprint, Kenya Vision 2030.

In Nakuru County's slum areas, economic challenges pose a significant barrier to residents' access to clean water, intensifying malnutrition. This issue is particularly pronounced in some communities, where limited financial resources create a cyclical health dilemma, with restricted access to clean water becoming a pivotal factor in the persistence of malnutrition.

Despite overall progress in achieving Open Defecation Free (ODF) status, sanitation challenges persist in some low-income areas of Nakuru County, especially in the maintenance of latrines. Villages certified ODF in Nakuru County, continue to grapple with sanitation issues, necessitating sustained efforts in infrastructure upkeep and community education. As of 2022, 92% of households in the county have functional toilets.

In Nakuru County's urban slum areas, the limited access to potable water directly contributes to malnutrition. The percentage of coverage of the water grid for Nakuru County underscores the severity of the problem, emphasizing the urgent need to address water accessibility to break the cycle of malnutrition in these specific communities.

Rapid urbanization growth in Nakuru County, which recently attained city status, is intricately linked to decreased water accessibility resulting in rationing of clean safe drinking water leading to adverse health effects of residents. Migration and rapid urban population growth in Nakuru County underscore the urgency of adaptive strategies for sustainable water access, preventing further declines in residents' well-being.

In some rural regions of Nakuru County, poor water quality contributes to waterborne diseases, compounding the malnutrition challenge. Data on the prevalence of waterborne diseases in Nakuru County underscore the immediate need for interventions to improve water quality and reduce health risks associated with contaminated water sources in among rural communities.

The absence of water points in many schools in Nakuru County hampers hygiene practices, affecting the health of students. Data on the availability of water points in educational institutions in Nakuru County emphasize on need for targeted initiatives to ensure that all schools are provided with water points to support the well-being of students.

Key issues

1. Low water quality (Relatively high levels of fluoride, total coliforms and E.coli).
2. Low economic access to safe drinking water especially in slum areas
3. Poor maintenance of latrines in low income areas causing sanitation challenges
4. Rapid urbanization with recent attainment of city status linked with decreased safe water accessibility and increased sanitation demand.

2.4 Gender and Social Protection

The causes and consequences of food insecurity are closely entwined with gender, where the most food insecure countries are also the most gender unequal. A study by Care International on Food security and Gender Equality (2022), indicates that gender inequality plays a role in how food is produced and consumed, shapes the strategies people employ to cope, and influences the manifold impacts of hunger and food insecurity on the protection and wellbeing of those affected. Often overlooked is the role of gender in shaping children's and adolescent's experiences of food insecurity and Malnutrition.

The Constitution of Kenya (2010) contains a comprehensive Bill of rights. Article 43 of the Constitution guarantees all Kenyans economic, social and cultural rights including the right to health, education, food and decent livelihoods. Article 21 commits the State to working towards the gradual realization of the social and economic rights. Social protection is entrenched primarily in three ways:

- a) through **cash transfer** programmes where beneficiaries attest to improved household food security, retention of children in schools and access to basic health care,
- b) enhanced social support networks through **the National Social Security Fund (NSSF)** providing social security protection to formal and informal workers in form of lump sum payments upon retirement;
- c) Social health insurance implemented by the **Social Health Insurance Fund (SHIF)** through subsidy programs for orphans and vulnerable children, persons with severe disabilities and older persons.

The National Policy on Gender and Development outlines one of its key policy actions as enforcement of targeted implementation of existing health and nutrition programmes to benefit vulnerable women and girls; The cash transfer for orphans and vulnerable children (CT-OVC) increases the financial assistance targeting vulnerable groups to supplement the already existing initiatives while the Children's Act of 2022 which is anchored in the welfare of children, incorporates provisions for ensuring proper nutrition as an essential component of child protection.

The National Policy on Older Persons and Ageing Kenya highlights policy issues for older persons who are most vulnerable to malnutrition, hunger and famine situations due to their

increased susceptibility to food insecurity, consumption of foods of low nutrition values, income poverty and lack of means and resources for food production. The policy objective is to put in place measures to ensure availability of adequate food that is nutritious and safe for older persons.

Adolescent pregnancy is a key issue in Nakuru County. According to the Kenya Demographic and Health Survey 2022 report, the adolescent birth rate in Nakuru County is 17% for girls aged 15-19 years, which is higher than the national average of 15%. Household gender power imbalances are also high in the county contributing to unequal distribution of resources and decision making thus influencing nutrition outcomes negatively. Households where females have ability to make decisions on use of resources available to the family, the children appear to have better nutrition compared to those where women have no room for decision making. Lack of access to financial resources and low levels of education among women impacts household food choices negatively.

Poverty is associated with hidden hunger and nutrient deficiencies, which exacerbate the severity of malnutrition in individuals. According to the Kenya Poverty report, 2021, the overall county poverty rate is 39.4 % with 0.1% living under extreme poverty.

Men tend to get a larger share of animal protein at the expense of the rest of the family. The choice of food given to children and the foods a child is weaned on are heavily influenced by traditions and cultural practices. It is also notable that there is no diversification of food given to children, led by the perception that children require light meals. Drugs, substance abuse and Gender Based violence are factors that deprive households of resources that could be used for production and consumption of nutritious food.

Key Gender and Social Protection issues in nutrition:

- i) High rate of teenage pregnancy which increases susceptibility of girls and their children to malnutrition due to the increased nutrient needs and poor nutrition practices contributing to a vicious cycle of malnutrition.
- ii) Gender-based violence cases, specifically intimate partner violence has been found to negatively impact maternal breastfeeding practices thereby compromising infant and young child nutrition.
- iii) The choice of food given to children and the foods a child is weaned on lacks diversification due to retrogressive traditional and cultural practices.
- iv) Gender power imbalances and household poverty affect nutrition outcomes negatively

- v) Delegation of childcare to extended family in rural settings or day care centers in urban settings or leaving children under care of older siblings who may not be able to make decisions on diet and nutrition. .
- vi) Drugs and substance abuse among young parents leading to malnutrition for the addicts and their households.

2.5 Education sector

Health and Nutrition status is a significant determinant of a child's holistic development and learning ability. Good health is essential for the success of the implementation of any educational programs.

According to the School Feeding Worldwide report 2022, approximately only 41% of children enrolled in primary school benefit from school meals. Unfortunately, coverage remains lowest in low-income countries where only 18% receive a daily nutritious meal in school. Malnutrition remains a serious problem in Kenya, especially among impoverished households. The National stunting rate stood at 18% in 2022 according to KDHS, (2022). The Government of Kenya (GOK) in collaboration with World Food Programme (WFP) has been implementing School Feeding Programme in Kenya since 1980 working with the Ministry of Education to provide nutritious meals to over 1.5 Million children in most food-insecure regions.

The Government of Kenya in sessional paper No.1 of 2005 recognized the importance of integrating child health and nutrition in ECDE Programme. ECDE Act of 2021 focused on Early Childhood Development Education, this act underscores the importance of nutrition in the formative years, acknowledging its impact on cognitive development.

The Kenya National School Health Policy (2009) called for integration of health and nutrition in Early Childhood Development and Education (ECDE). The Menu Guide for Schools in Kenya provide nutritional guidelines to ensure school menus are designed to meet the dietary needs of students. The Pre-Primary Education Policy of 2017 acknowledges the crucial role of nutrition in pre-primary education, promoting the integration of health-conscious practices. The draft School Feeding Policy provides a cornerstone for nutrition-sensitive education, emphasizing the provision of balanced and nutritious meals for school-going children.

The 4th schedule of the Constitution of Kenya (COK)(2010) stipulates the role of County Government as mandated to oversee Pre – Primary Education and child care facilities. It further provides for the right of every person to the highest attainable standard of health.

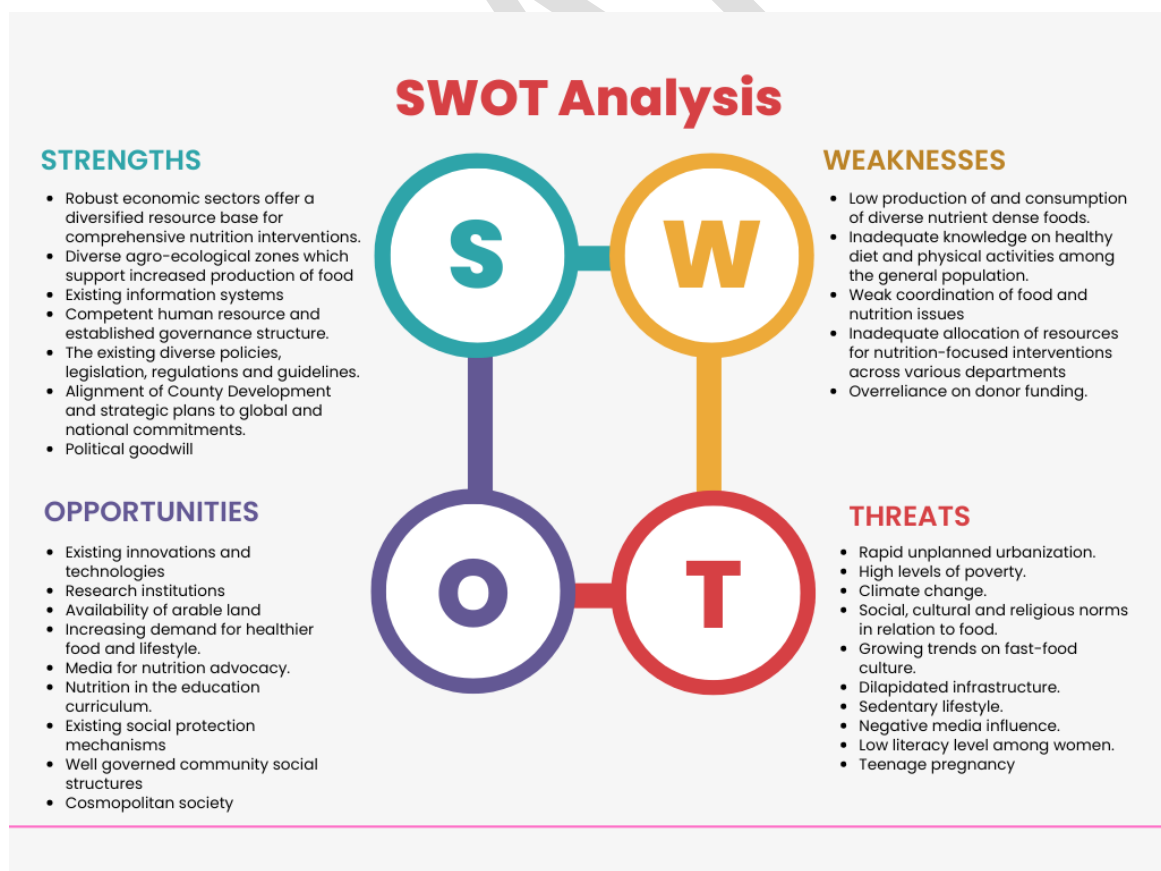
Although most households in Nakuru depend on agriculture, about a third of people in the County of Nakuru don't have access to healthy and nutritious food. 49% of the population is poor while 36% is food-poor. Infants as well as school going children are among the most affected by hunger and malnutrition. This has reduced education performance of learners through absenteeism and low participation rates. Various Public pre-primary schools in

Nakuru had been implementing parent-led feeding programmes consisting mainly of hot porridge, while others had none. Other schools had pupils who carry food/snacks from home. There was therefore no equity in the school feeding programme in Nakuru.

The County Government of Nakuru has committed to implement pre-primary school feeding to improve nutrition, alleviate short term hunger and increase enrolment and retention. Kenya National School Meals and Nutrition Strategy 2017-2022 serves as a roadmap for implementing school feeding programs in Nakuru to address hunger and enhance the nutritional quality of meals. The School Meals Programme will play a significant role on the overall education achievements and general development of school age children by ensuring that children are well fed, healthy and able to learn for effectiveness of our education system.

Key issues

1. Inadequate funding to sustain school feeding programme
2. Inadequate infrastructure like kitchens, dining areas and sanitation facilities
3. Poor storage of food supplies
4. Inadequate access to clean water and sanitation in schools
5. Increasing food prices affecting the quality of school meals



Stakeholder Mapping

To ensure that the Policy is implemented seamlessly, the County will have a multi-sectoral approach to management and coordination of Food and Nutrition Security activities. Various players and actors from different sectors will be included in the coordination mechanism and will play a critical role in mainstreaming Food and Nutrition Security within their varied areas of programmes and activities.

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Chapter 3: Policy Framework

Policy title: Nakuru County Nutrition Policy

Policy Goal

The policy provides a framework for improving nutrition through mainstreaming and multisectoral collaboration to steer the county from adverse effects of malnutrition towards a healthy, productive community that is food and nutrition secure

Policy Objectives

1. To scale up nutrition specific interventions which address the immediate cause of malnutrition in the county, that is; disease and inadequate dietary intake.
2. To strengthen nutrition sensitive interventions that influence the underlying determinants of nutrition across the sectors
3. To enhance resource mobilization across **county departments/sectors**
4. To foster an enabling environment (leadership, governance, information & learning, multi-sectoral collaboration) for improved nutrition

Policy Expected Outcomes

1. Improved nutrition situation in the community/county
2. Increased productivity and well-being
3. Increased resources for food and nutrition interventions
4. Strengthened synergy among relevant sectors for better/improved nutrition outcomes

Chapter 4: Policy Strategies and Role of relevant Sectors/Departments

Objective 1: To scale up nutrition specific interventions which address the immediate cause of malnutrition in the county, that is; disease and inadequate dietary intake.

1. Health Sector

Policy statement 1.

The department of health will promote optimal nutrition throughout the human life cycle to reduce morbidity and mortality; and increase productivity

Strategies

1. Provide information on optimal Maternal Infant & Young Child Nutrition through community engagement.
2. Promote and strengthen consumption of healthy diets and physical activity for older children, adolescents, adults and the elderly in collaboration with relevant sectors.
3. Strengthen screening for malnutrition for early identification, prevention and referral.
4. Strengthen capacity building for prevention and control of malnutrition across the lifecycle

Policy Statement 2

The department of health will implement interventions to ensure prevention, control & management of nutrition deficiencies.

Strategies

1. Enhance micronutrient supplementation during critical periods of the life cycle.
2. Strengthen the delivery of clinical nutrition and dietetics in disease management.
3. Strengthen integrated management of acute malnutrition.
4. Strengthen supply chain for nutrition commodities and equipment.

Policy Statement 3

The department of health will implement interventions for prevention, control and management of communicable diseases and diet related non-communicable diseases.

Strategies

1. Enhance continuous community awareness and engagement on health information and healthy lifestyle behaviors.
2. Promote consumption of healthy and diverse diets across the life cycle
3. Promote positive water, sanitation and hygiene practices among the population

4. Capacity build healthcare workers on management of communicable and diet related non-communicable diseases.
5. Strengthen supply chain for nutrition commodities and equipment.

Policy Statement 4

The department of health is responsible for implementation of interventions for food fortification and safety.

Strategies

1. Promote consumption of fortified foods to the population.
2. Enhance compliance and surveillance to food fortification standards by all relevant food processors.
3. Advocate for compliance to food safety standards by all food processors, retailers and consumers,
4. Increase awareness on measures for food safety.

Objective 2: To strengthen nutrition sensitive interventions that influence the underlying determinants of nutrition across the sectors

1. Education Sector

Policy statement 1 : The Department responsible for education will ensure nutrition is mainstreamed in the education sector to promote well-being of learners

Strategies

1. Promote utilization of the school platforms in collaboration with the health sector for nutrition interventions and use ECDs as growth monitoring centers in collaboration with the health sector.
2. Strengthen and promote a sustainable nutritious school feeding programme that ensures nutritious school meals for learners.
3. Strengthen nutrition education in learning institutions.
4. Development of infrastructure and provision of equipment that support nutrition and WASH in collaboration with relevant sectors
5. Strengthen nutrition and agricultural school-based learning activities in collaboration with the Agriculture Sectors.
6. Strengthen multi sectoral collaboration through joint forums
7. Promote physical activities and sports as key components of education and good health; and

8. Regulate access and advertisement of non-nutritious food near learning institutions
9. Integrate sensitization on appropriate child care practices during parents-teachers meetings

2. Gender and Social Protection

Policy statement 1: The Department responsible for Gender, Social Services and Inclusivity commits to mainstream nutrition in gender and social protection programs for inclusion.

Strategies

1. Sensitize communities and day care centers to encompass issues of nutrition and responsive caregiving
2. Hold socio economic empowerment activities to improve households purchasing power for nutrition
3. Link and create awareness on the available social safety nets and cash transfers for the vulnerable to promote household food and nutrition security
4. Strengthen male engagement to promote dietary diversity, nutrition and care practices
5. Promote integration of nutrition education in mentorship programs for boys and girls
6. Promote gender responsive household decision making on food diversification and nutrition
7. Conduct programmes that mitigate against GBV and harmful cultural practices in nutrition.
8. Conduct nutrition education for drug and substance abusers, link them with psychosocial support and rehabilitation services.

3. Water and Sanitation Sector

Policy Statement 1: The Department responsible for Water and Sanitation will ensure sustainable development and management of water and sanitation resources for improved nutrition.

Strategies

1. Strengthen intergovernmental collaboration in implementation of county projects outlined in the National Water and Sanitation Investment Plan (NAWASIP), especially bulk water sources e.g., Itare, Chemususu and Malewa dams.
2. Increase Operations and Maintenance (O&M) cost recovery through use of renewable energy sources and gravity systems.
3. Increase coverage of potable water for domestic use and livestock use, fish farming , irrigation and commercial purposes.
4. Promote rain water harvesting and recharge of underground aquifer system for the purpose of increasing water resource
5. Enhance linkages for protection and rehabilitation of water sources.
6. Ensure water quality through appropriate water treatment technologies e.g. Construction of supportive defluoridation infrastructure.
7. Enhance climate change mitigation, adaptation and resilience to ensure protection and increase of water resources
8. Improve food and nutrition security through sustainable management of environment and natural resources by supporting agroforestry, fruition, afforestation and reforestation
9. Promote programs that enable local communities to effectively adapt to climate change and reduce impact on food and nutrition security
10. Promote rainwater harvesting for crop irrigation and livestock
11. Ensure access to both on-site and off-site sanitation in collaboration with the public health sector.
12. Promote recycling and reuse of wastewater and fecal sludge for irrigation and fertilizer production for crop production.
13. Promote solid and liquid (leach) waste management and promote recycling and reuse in disposal sites.

14. Strengthen linkages with agriculture sector to implement sustainable agriculture such as Climate Smart agriculture, no-till agriculture and agroforestry
15. Take actions today to address the impacts of climate change on food and nutrition security through climate resilience activities
16. Adopt a risk management approach which is anticipatory and preventive
17. Adaptation to climate change mitigation for continued access to clean water
18. Promote and enforce sustainable management of the environment around water catchment areas and wetlands including riparian land, rivers and streams.
19. Adherence to public health policies and regulations in relation to water
20. Adaptation to new technologies for continued access to safe water for drinking, household use and irrigation.

4. Agriculture, Livestock, Fisheries and Veterinary Services Sector

Policy Statement 1: The Department responsible for Agriculture, Livestock, Fisheries and Veterinary Services will ensure increased, sustainable production of safe crops, livestock and fish products for improved household food and nutrition security.

Strategies

1. Promote increased availability and utilization of certified and bio-fortified seeds, quality seedlings & fingerlings; and other quality farm inputs.
2. Promote diversification in crop, livestock and fish farming to enhance availability of nutrient dense foods.
3. Support improvement of livestock breeds and management to increase productivity.
4. Strengthen crops and livestock pests and disease control measures and surveillance.
5. Promote increased fish production from capture and aquaculture for enhanced food diversity.
6. Promote appropriate climate smart technologies and innovations for increased production of nutrient dense, diverse foods.
7. Strengthen research-extension-farmer linkages for improved agricultural service delivery
8. Strengthen appropriate measures aimed at addressing post-harvest losses, food quality and safety across the agriculture value chains.
9. Enhance knowledge and skills for extension officers on Nutrition Sensitive Agriculture.
10. Promote women, youth and PWD involvement in agribusiness as an income generating activity to improve food purchasing power.
11. Promote and strengthen linkages to credit, cooperatives and insurance for crop, livestock, and fish production.

Policy Statement 2: The Department responsible for Agriculture, Livestock, Fisheries and Veterinary Services will promote dietary diversification for improved nutrition.

Strategies

1. Promote sustainable availability of and accessibility to diversified foods to enhance dietary diversity (traditional high value crops, fish farming, bee keeping)
2. Scale up awareness creation on nutritious food, food preparation and utilization among communities and institutions.
3. Promote effective climate smart technologies, including conservation agriculture for sustainable nutrient dense food production.
4. Promote establishment of crop, livestock and fish production demonstration plots for enhanced learning and technology transfer.
5. Promote agro-processing technologies to prevent food losses and enhance availability of safe, diverse and nutrient dense foods.
6. Promote food preservation and value addition to enhance availability of and access to quality and nutritious food.
7. Advocate for increased consumption of value-added nutrient dense foods, including dried fruits, vegetables and fish for dietary diversity.

5. Trade Sector

Policy Statement 1: The Department responsible for Trade will strengthen trade practices to protect food safety and nutrition

Strategies

1. Promote investment in provision of market sanitation facilities to improve food safety.
2. Enhance consumer protection practices through quality control and assurance mechanisms;
3. Ensure fair-trade practices to facilitate access to food;
4. Promote marketing capacities to market nutritious food products that have a net positive impact for better health outcomes;
5. Improve access to market information and surveillance mechanisms;
6. Enforce compliance and adherence to policies, legislations and regulations on trade in the food industry;
 1. Advocate for regulation on the sale of fast and unhealthy foods; and
 2. Enhance advocacy of adverse effects on health and nutrition from the sale and consumption of drug substances.

Objective 3: To Enhance Resource Mobilization Across County Departments/Sectors

Policy Statement 1

The County Government is responsible for availability and effective utilization of resources for food and nutrition in the relevant departments.

Strategies

1. The departments responsible for Health Services, Agriculture, Fisheries & Livestock shall commit a minimum of 1% of their annual budgetary allocation towards nutrition interventions.
2. The departments responsible for Education, Gender & Inclusivity, Water & Sanitation and Trade will commit at least 0.5% of their annual budgetary allocation towards food and nutrition interventions.
3. Strengthened Advocacy for domestic and external resource mobilization for food and nutrition.
4. Enhanced financial tracking & accountability in utilization of the available resources.

Objective 4. To foster an enabling environment (leadership, governance, information & learning, multi-sectoral collaboration) for improved nutrition

Policy Statement 1: The county will foster an enabling environment conducive to improving the health and nutrition status of its population.

Strategies

1. Invest in capacity building initiative to enhance skills and knowledge of relevant stakeholders, empowering them to leverage the opportunities provided by the enabling environment.
2. Advocacy campaigns to educate stakeholders about the benefits of the enabling environment and encourage their active participation.
3. Establish mechanisms for monitoring and evaluating the effectiveness of the policy interventions.
4. Facilitate knowledge sharing and exchange of best practices, both locally and internationally to inform policy implementation and review
5. Strengthen collaboration with research institutions/organizations to build a body of knowledge on food and nutrition for evidence based decision making.
6. Strengthen the governance structures in the County to mainstream food and nutrition security programmes across all sectors

Chapter 5. Institutional Framework and Coordination

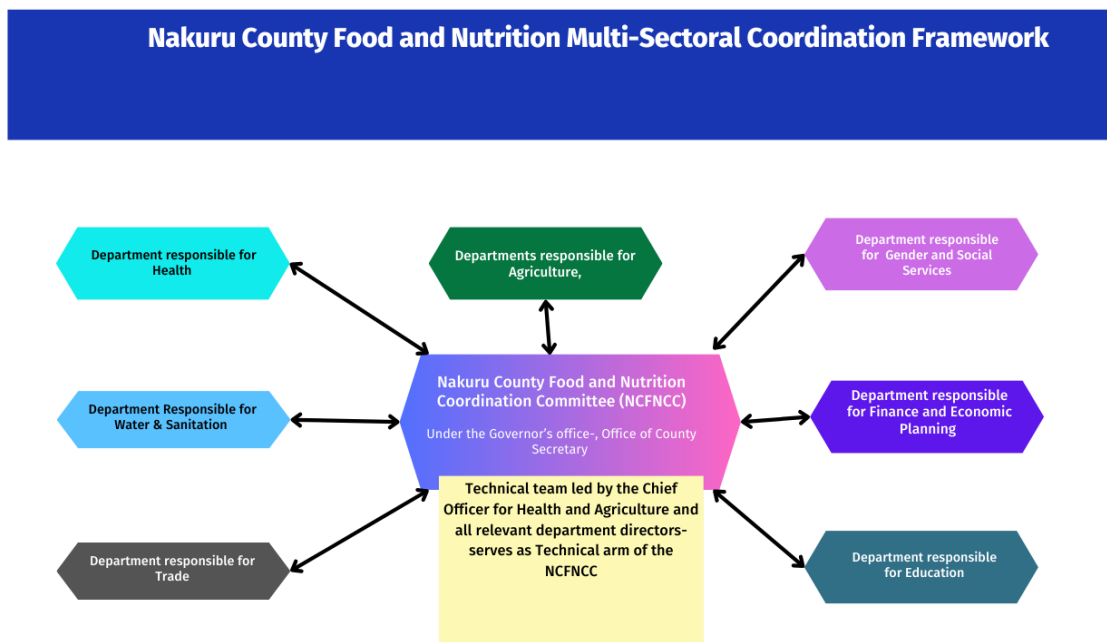
The Ministries of Health and Agriculture and Livestock Department are the lead national institutions addressing the food and nutrition agenda in Kenya.

These two are mandated by the Constitution under Part 1 of the Fourth Schedule to set standards, quality assurance and develop national policies on issues related to food and nutrition.

Within the County establishment, the Department of Health Services, and the Department of Agriculture, Livestock, Fisheries and Veterinary Services are mandated to handle food security and nutrition activities.

Consequently, food and nutrition issues are anchored in the Departments responsible for Health Services and Agriculture.

Nakuru County Food and Nutrition Multi-Sectoral Co-ordination Framework



This Policy guides the multi-sectoral implementation of food security and nutrition programmes with each participating department taking responsibility of relevant strategies. Implementation of the policy however shall be actualized through existing leadership and management structures at all levels of the participating departments. Given the multi-dimensional and cross-sectorial nature of nutrition, the coordination and implementation mechanisms for this Policy shall necessitate joint efforts by the relevant departments. This

policy establishes the following 2 main committees as the main structures for coordination of food and nutrition interventions under this policy:

1. Nakuru County Food and Nutrition Coordination Committee (NCFNCC)
2. Nakuru County Food and Nutrition Technical Coordinating Committee

The County Secretary office under the Governor's Office will oversee the overall coordination mechanism. The policy shall be domiciled in the Department of health.

All participating departments will coordinate the policy strategies through their sectoral working groups - Chaired by the Sector Directors.

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Chapter 6) Monitoring and Evaluation

Implementation and Coordination

The M&E framework is designed to measure the progress in the implementation of the Nakuru County Multi-Sectoral Nutrition Policy. This framework outlines the objectives of the policy, including verifiable indicators, key actors, and timelines for achieving each strategy.

Monitoring & Evaluation Mechanism

The Nakuru County Food and Nutrition Technical Coordinating Committee (NCFNTCC) will oversee the M&E activities, assessing the efficacy and efficiency of achieving the nutrition objectives and strategies. Effort will be made to link the M&E System of this policy with existing monitoring, evaluation and information systems in the County. The Departmental M&E Committees for participating sectors will be supported in their own efforts to monitor their contributions towards attaining food and nutrition security objectives and outcomes through their own Sectoral Strategic Plans, Annual Development Plans and technical programmes that implement the various strategies in the policy. The use of participatory monitoring and evaluation approaches, currently used by the various sectors, will be applied as appropriate.

Data Collection, Analysis, Reporting and Learning

Primary and secondary data – both qualitative and quantitative – shall be used for M&E purposes. Primary data will be collected through interviews and observations from field visits/surveys, citizen/stakeholder and engagement forums. Secondary data will be collected from County departments' progress reports, County indicator handbook(s), survey publications, County Integrated Development Plans (CIDPs), Annual Development Plans (ADPs), and any other written reports.

The collection and management of relevant data will be the responsibility of the Participating departments and other stakeholders implementing various nutrition programmes/activities detailed in the Nakuru County Food and Nutrition Security Policy. The findings of M&E will be documented, reported and shared in line with guidelines and procedures for quarterly/ annual progress reporting. Participating departments shall prepare quarterly and annual progress reports on food and nutrition security focusing on among other [achievements towards food and nutrition goals and objectives as implemented through their own sectoral plans and programmes, timeliness, consistency with approved work plans and accuracy of the performance data for the period and recommendations to address prevailing challenges & enhance performance in future.] and submit to the NCFNTCC who shall review the reports and prepare the respective County Food and Nutrition Progress Report (CFNPR) which shall be submitted to the NCFNCC for review and adoption.

Findings of M&E activities will be disseminated for lessons learning and to support evidence-based decision making.

Progress Indicators

Monitoring and evaluation of the implementation of the Nakuru County Multi-Sectoral Nutrition policy will be through a set of financial and non-financial targets and indicators. The targets will be benchmarked against global best practices. A set of indicators for food and nutrition programmes shall be defined in accordance with the policy objectives and outcomes to monitor and evaluate its implementation. The indicators for the participating sectors will be incorporated in the CIDP indicator handbook and will be tracked through CIDP Indicator Handbooks. The Department of Health, shall undertake a mid-term evaluation on the policy to measure the achievements of the outcomes and the impact of the policy and identify the bottlenecks which will inform its review.

Feedback Mechanism

The Nakuru County Food and Nutrition Coordination Committee shall disseminate the findings of the M&E activities through various channels including stakeholder meetings, press releases, social media platforms, online web portals and the County website.

The outcomes and lessons learned from M&E activities will be used to support evidence-based decision-making and necessary policy adjustments. Additionally, the findings from M&E will inform the preparation of the Annual Progress Reports, ensuring that the insights gained contribute to continuous improvement and accountability in governance.

Implementation Framework

OBJECTIVE	STRATEGIES	INDICATORS	ACTORS	TIMELINES
<p>To scale up nutrition specific interventions in the county</p>	<p>a) Provide information on optimal Maternal Infant & Young Child Nutrition through community engagement.</p> <p>b) Promote and strengthen consumption of healthy diets and physical activity for older children, adolescents, adults and the elderly in collaboration with relevant sectors.</p> <p>c) Strengthen screening for malnutrition for early identification, prevention and referral.</p> <p>d) Strengthen capacity building for prevention and control of malnutrition across the lifecycle</p> <p>e) Strengthen micronutrient supplementation during critical periods of the life cycle.</p> <p>f) Strengthen clinical nutrition and dietetics in disease management.</p> <p>g) Strengthen integrated management of acute malnutrition.</p> <p>h) Strengthen supply chain for nutrition commodities and equipment.</p> <p>i) Continuous community awareness</p>	<ul style="list-style-type: none"> · Reduction in malnutrition rates among children under five. · Decrease in the prevalence of lifestyle-related diseases · Reduction in the prevalence of micronutrient deficiencies · Improvement in disease management outcomes through better nutrition · Decrease in the incidence of acute malnutrition in the community · Reduction in stock-out rates of nutrition supplies. · Decrease in the incidence and prevalence of non-communicable diseases (NCDs) such as diabetes, hypertension, and cardiovascular diseases. · Reduction in the incidence of waterborne and hygiene-related diseases, such as diarrhea and cholera. 	<ul style="list-style-type: none"> · Department of Health · Partners 	<p>2027</p>

and engagement on health information and healthy lifestyle behaviors.

j) Promote consumption of healthy and diverse diets across the life cycle

k) Empower the population on water, sanitation and hygiene practices.

l) Capacity build healthcare workers on management of communicable and diet related non-communicable diseases.

m) Strengthen supply chain for nutrition commodities and equipment

n) Promote consumption of fortified foods to the population.

o) Ensure compliance to food fortification standards by all relevant food processors.

p) Advocate for compliance to food safety standards by all food processors, retailers and consumers,

q) Create awareness on measures for food safety.

<p>To promote nutrition sensitive interventions across the sectors</p>	<p>a) Promote utilisation of the school platforms in collaboration with the health sector for nutrition interventions and - Use ECDs as growth monitoring centers in collaboration with health sector.</p> <p>b) Strengthen and promote a sustainable nutritious school feeding programme that ensures nutritious school meals for learners.</p> <p>c) Strengthen nutrition education in learning institutions.</p> <p>d) Development of infrastructure and provision of equipment that support nutrition and WASH in collaboration with relevant sectors</p> <p>e) Strengthen nutrition and agricultural school-based learning activities in collaboration with the Agriculture Sectors.</p> <p>f) Strengthen multi sectoral collaboration through joint forums</p> <p>g) Promote physical activities as key component of education and good health</p> <p>h) Regulate access and advertisement of non-</p>	<ul style="list-style-type: none"> · Improvement in the nutritional status of school-aged children · Increase in academic performance and attendance rates 	<p>Department Responsible for Education</p>	<p>2027</p>
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	<p>nutritious food near learning institutions.</p> <ul style="list-style-type: none">i) Integrate nutrition and sporting activitiesj) Promote the consumption of healthy food and dietk) Empower and capacity build youth champions for nutrition programsl) Increase education resources for nutrition education as part of formal and non-formal classes and activities			
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	<p>a) Mapping and digitalization of vulnerable groups and institutions to integrate nutrition education and promotion in existing programs</p> <p>b) Deliberately support community initiatives that promote nutrition within the social protection program</p> <p>c) Promote gender inclusive nutrition interventions</p> <p>d) Strengthen and promote community social structures to support behaviour change to address malnutrition</p> <p>e) Capacity build the elderly persons, PWD, orphans and vulnerable children (OVCs) and caregivers on the importance of nutrition</p> <p>f) Ensure day care centres encompass issues of nutrition, early stimulation and responsive caregiving</p> <p>g) Strengthen nutritional issues for vulnerable groups during emergencies</p> <p>h) Promote targeting of nutritionally vulnerable populations in social protection programs</p> <p>i) Enhance social economic empowerment activities</p>	<ul style="list-style-type: none"> · Improvement in household food security and dietary diversity · Reduction in gender disparities in nutrition and health outcomes · Increase in women's participation in decision-making related to nutrition · Reduction in harmful cultural practices affecting nutrition 	<p>Department Responsible for Gender and Social Services</p>	<p>2027</p>
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to improve households purchasing power for nutrition

j) Provide social safety nets and cash transfers for the vulnerable to promote household food and nutrition security

k) Strengthen linkages with the health and agriculture sector to build capacity of community-based organizations to promote food diversification and nutrition

l) Strengthen male engagement to promote dietary diversity, nutrition and care practices

m) Promote integration of nutrition education in mentorship programs for boys and girls

n) Promote gender responsive household decision making on food diversification and nutrition

o) Promote gender analysis to inform conception, design, implementation and monitoring of nutrition programmes;

p) Capacity development on gender responsiveness in nutrition; and

q) Promote programmes that

mitigate against GBV and harmful cultural practices in nutrition.

r) Strengthen traditional structures to promote diversified and healthy diets

s) Promote consumption of traditional nutritious foods

t) Promote programs that mitigate against harmful traditional and cultural practices that affect dietary diversification and nutrition

u) Leverage ICT to disseminate nutrition information to the local communities

	<p>a) Increase coverage of potable water for domestic use and livestock use, fish farming, irrigation and commercial purposes.</p> <p>b) Promote rain water harvesting and recharge of underground aquifer system for the purpose of increasing water resource</p> <p>c) Enhance linkages for protection and rehabilitation of water sources.</p> <p>d) Ensure water quality through appropriate water treatment technologies.</p> <p>e) Enhance climate change mitigation, adaptation and resilience to ensure protection and increase of water resources</p> <p>f) Improve food and nutrition security through sustainable management of environment and natural resources by supporting agroforestry, affruition, afforestation and reforestation</p> <p>g) Promote programs that enable local communities to effectively adapt to climate change and</p>	<ul style="list-style-type: none"> · Improvement in water quality and access to potable water. · Reduction in waterborne diseases and related health issues. · Increase in the adoption of improved sanitation and hygiene practices 	<p>Department responsible for Water, Environment and Climate Change</p>	<p>2027</p>
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reduce impact on food and nutrition security

- h) Promote rainwater harvesting for crop irrigation and livestock
- i) Ensure access to both on-site and off-site sanitation in collaboration with the public health sector.
- j) Promote recycling and reuse of wastewater and fecal sludge for irrigation and fertilizer production for crop production.
- k) Promote solid and liquid (leach) waste management and promote recycling and reuse in disposal sites.
- l) Strengthen linkages with agriculture sector to implement sustainable agriculture such as Climate Smart agriculture, no-till agriculture and agroforestry
- m) Take actions today to address the impacts of climate change on food and nutrition security through climate resilience activities
- n) Adopt a risk management approach which is anticipatory and preventive

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| | <ul style="list-style-type: none">o) Adaptation to climate change mitigation for continued access to clean water;p) Promote and enforce sustainable management of environment around water catchment areas and wetlands including riparian land, rivers and streams;q) Adherence to public health policies and regulations in relation to water; andr) Adaptation to new technologies for continued access to safe water for drinking, household use and irrigation. | | | |
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	<p>a) Promote increased availability and utilization of certified and bio-fortified seeds, quality seedlings and other quality farm inputs.</p> <p>b) Promote diversification in crop and livestock farming to enhance dietary diversity.</p> <p>c) Support improvement of livestock breeds and management to increase productivity.</p> <p>d) Strengthen crops and livestock pests and disease control measures and surveillance.</p> <p>e) Promote increased fish production from capture and aquaculture for enhanced food diversity.</p> <p>f) Promote appropriate climate smart technologies and innovations for increased food production.</p> <p>g) Strengthened research-extension-farmer linkages for improved agricultural service delivery</p> <p>h) Strengthen appropriate measures aimed at</p>	<ul style="list-style-type: none"> · Increase in food production and dietary diversity. · Improvement in household food security. · Reduction in post-harvest losses and food wastage. 	<p>Department of Agriculture, Livestock, Fisheries and Veterinary Services</p>	<p>2027</p>
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addressing post-harvest losses, food quality and safety across the agriculture value chains.

- i) Promote dietary diversity through increased production and utilisation of nutrient dense indigenous and underutilised foods.
- j) Promote women, youth and PWD involvement in agribusiness as an income generating activity to improve food purchasing power.
- k) Promote access and sustainability of diversified foods to enhance dietary diversity (traditional high value crops, fish farming, bee keeping)
- l) Scale up awareness creation on nutritious food, food preparation and utilization among communities and institutions
- m) Promote effective agricultural technologies, conservation, and minimum tillage agriculture for

nutrient dense food
production

- n) Promote establishment of crop, livestock and fisheries production demonstration plots for enhanced learning and technology transfer

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	<p>a) Promote investment in provision of market sanitation facilities to improve food safety</p> <p>b) Enhance consumer protection practices through quality control and assurance mechanisms;</p> <p>c) Ensure fair-trade practices to facilitate access to food;</p> <p>d) Promote marketing capacities to market nutritious food products that have a net positive impact for better health outcomes;</p> <p>e) Improve access to market information and surveillance mechanisms;</p> <p>f) Enforce compliance and adherence to policies, legislations and regulations on trade in the food industry;</p> <p>g) Advocate for regulation on the sale of fast and unhealthy foods; and</p> <p>h) Enhance advocacy of adverse effects on health and nutrition from the sale and consumption of drug substances.</p>	<ul style="list-style-type: none"> · Increase in the availability and accessibility of nutritious foods in markets. · Improvement in food safety and quality standards. · Reduction in the sale and consumption of unhealthy foods. 	Department Responsible for Trade	2027
Enhanced Resource Mobilisation	a) a) Commit at least 10% of the annual budget from the Health and Agriculture departments, and 0.5% from other relevant	Increase in funding for nutrition programs and interventions	Nakuru County Food and Nutrition Coordination Committee	2027

	<p>departments, towards food and nutrition initiatives.</p> <p>b) Enhance domestic and external resource mobilization for food and nutrition.</p> <p>c) Ensure accountability in utilization of the available resources.</p>			
<p>Creating an enabling environment for policy adoption, attendant legislation and necessary regulations.</p>	<p>a) Promote and strengthen use of innovative information systems and technology for advocacy, awareness creation on healthy living.</p> <p>b) Promote gender responsive food and nutrition planning, implementation, surveillance, monitoring and evaluation to provide data for decision making.</p> <p>c) Strengthen collaboration with research institutions/organizations to build a body of knowledge on food and nutrition for evidenced based decision making.</p> <p>d) Establish a framework for knowledge translation, continuous learning, innovation and resource center for food and nutrition information sharing.</p>	<ul style="list-style-type: none"> · Improvement in the availability and use of nutrition-related data for decision-making · Increase in public awareness and knowledge of healthy living practices. · Increase in evidence-based practices in nutrition programs. · Improvement in the quality and impact of nutrition interventions. · Enhancement of multi-sectoral coordination for nutrition security · Increase in community participation and engagement in 	<p>Nakuru County Food and Nutrition Coordination Committee</p>	<p>2027</p>

	<ul style="list-style-type: none"> e) Enhance capacity on food and nutrition across all relevant sectors and levels of management. f) Strengthen inter-county and inter-governmental learning for knowledge and information sharing on food and nutrition. g) Strengthen the governance structures in the County to mainstream food and nutrition security programmes across all sectors h) Establish coordination structures for food and nutrition security i) Institute a community participation and engagement framework. j) Enhance collaboration with key stakeholders on food and nutrition security 	<p style="text-align: center;">nutrition programs</p>		
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Policy Review

The policy’s implementation plans shall be reviewed periodically to evaluate progress towards achievement of the policy objectives and inform policy review.

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ANNEXES

1. Membership of the Nakuru County Multisectoral Nutrition Coordination Committee (NCFNCC)

The NCFNCC members include:

1. County Secretary- (Chair and managing the affairs of the NCFNCC)
2. CECM responsible for Health
3. CECM responsible for Agriculture, Livestock, Fisheries and Veterinary services
4. CECM responsible for Education
5. CECM responsible for Gender & Inclusivity
6. CECM responsible for Water and Sanitation
7. CECM responsible for Finance and Economic Planning
8. Chief Officers from the relevant Departments
9. Departments responsible for Health and Agriculture are secretaries on rotational basis
10. The County Attorney is an ex-official member

Functions of the Nakuru County Nutrition Coordination Committee.

1. The NCFNCC is the apex for food and nutrition coordination committee headed by the Governor and CS providing the management of the NCFNCC
2. Provide leadership for effective coordination of interventions on food and nutrition among participating departments;
3. Ensure nutrition is mainstreamed across the participating development plans- CIDP, Mid-term Plans, Annual plans and Annual Fiscal strategy paper;
4. Oversight on implementation of all County food and Nutrition development plans for coherence and efficient use of available resources;
5. Commit a budgetary allocation for the implementation of the departmental nutrition plans of at least 1 % in the Health & Agriculture sectors and 0.5% in other nutrition sensitive sectors.
6. The committee also support resource mobilization for additional resources from partners
7. Ensure timely disbursements of the funds committed by participating departments for the implementation of the departmental food and nutrition plan.
8. Ensure the performance by each participating departments of the functions
9. Provide oversight on accountability of financial resources provided for nutrition
10. Provide guidance on food and nutrition policy and legislation;

NCFNCC Meetings - It is proposed that the NCFNCC meet at least once every three months

2. Nakuru County Multisectoral Nutrition Technical Coordinating Committee

Membership of the committee include:

1. The Chief officers of Health and Agriculture shall be members of the technical committee and shall co-chair (on rotational basis) the committee meeting
2. All directors of participating departments
3. The County Nutrition Coordinator in the department responsible for Health Services

Functions of the Technical Multisectoral Nutrition Coordination Committee

1. Provide technical advice to Nakuru County Multisectoral Nutrition Coordination Committee on matters food and nutrition
2. Prepare and ensure implementation of the Departmental food and Nutrition development Plan and programs;
3. Capacity build their respective departments on matters food and nutrition
4. Implementation of the decisions and directives of the Multisectoral Nutrition Coordination Committee;
5. Provide linkages with other stakeholders engaged in nutrition programs and services in the county;
 - a. budget preparation and implementation in accordance with the respective departmental nutrition development plan;
 - b. implement the strategies on resource mobilization;
6. Ensure public engagement in food and nutrition implementation to enhance public engagement and responsive;
7. Ensure development of an engagement and participation framework for non-state actors in food and nutrition
8. prepare and submit quarterly and annual reports to the County Nutrition Coordination Committee;
9. Ensure mainstreaming and integration of the departmental food and nutrition plans into CIDP and Mid-term plans, the annual departmental plans and
10. Ensure integration of the Food and Nutrition policy strategies into the monitoring and evaluation frameworks of participating departments and the CIDP monitoring framework and Indicator Handbook.
11. Monitor performance of the food and nutrition plans at respective departments.
12. In coordination with Sub-County technical committees, lobby and advocate for planning and financing of food and nutrition interventions using Ward funds.

Meetings of the Technical committee: The Technical committee shall meet at least once every quarterly, two weeks before the NCFNCC meeting to facilitate reception of all relevant departments' reports.

3. Sub-county Multisectoral Nutrition Coordination

To facilitate coherent coordination and implementation of food and nutrition strategies, each department using established sub-county structures will undertake the following:

1. Ensure implementation of the participating departmental food and Nutrition Plan and programs;
2. Capacity build their respective departments on matters food and nutrition
3. Implementation of the decisions and directives of the technical Coordination committees directives in relation to participating departments Food and nutrition interventions
4. Provide linkages with other stakeholders engaged in nutrition programs and services at the sub-county and ward/community level;
5. Undertake advocacy on food and nutrition interventions
6. Support the capacity development of the sub-county technical teams on issues of food and nutrition
7. Ensure public participation in food and nutrition implementation;
8. Prepare and submit quarterly and annual reports to the Technical County Food and Nutrition Committee on implementation of the food and nutrition interventions at ward/ community level
9. Working in coordination with Technical Food and Nutrition Coordination Committee to lobby and advocate for planning and financing of food and nutrition interventions using Ward Fund

Stakeholder Mapping Table

No.	Category / Organization	Name of the stakeholder	Role of Stakeholder
1	The County Government	County Executive Committee	<ul style="list-style-type: none"> - Policy approval - Formulation of laws, regulations and guidelines - Ensure adequate allocation of resources

2		The County Assembly	<ul style="list-style-type: none"> - Legislation of laws - Oversight of the executive - Representation
3		<p>County departments responsible for:</p> <ul style="list-style-type: none"> - Health Services - Agriculture, Livestock & Fisheries - Water & Sanitation - Trade - Finance & Economic Planning - Education - Gender and Social Services 	Policy implementation
4	National Government	<ul style="list-style-type: none"> - Ministry of Health - Ministry of Agriculture and Livestock Development - Gender culture and Heritage - Education - Water and Sanitation <p>National Government Regulatory and Research Agencies</p>	<ul style="list-style-type: none"> - Provide sector policy guidelines, set standards, - Provide capacity building - Provide emergency support - leveraging on national government programs that support food and nutrition <ul style="list-style-type: none"> ● Support research and sector statistics, continuous learning, quality assurance, commodities, and equipment

5	Partners	Development Partners , Implementing Partners and Non- state actors	<ul style="list-style-type: none"> ● Provide financial and technical support. ● Provide commodities and equipment ● Supporting implementation of this policy. ● Skills and technological transfer ● Provide social accountability
6	Research institutions and Academia	Universities, Technical colleges, TVETS and research institutions	Research , innovation, capacity, technical skills transfer
7	Private Sector	- Chamber of Commerce	<ul style="list-style-type: none"> - Investment - Advocacy - lobbying
8	Community	<ul style="list-style-type: none"> ● Community based organizations (CBOs) ● Community leaders ● Religious leaders ● Opinion leaders 	<ul style="list-style-type: none"> ● Advocacy ● social accountability

Definition of Terminologies

Advocacy: The act of supporting a cause or issue to achieve a desired result; or an action directed at changing policies, positions, or programs and resource allocation decisions within political, economic, and social systems and institutions.

Body Mass Index (BMI): A simple measure of weight-for-height that is commonly used to classify overweight and obesity in adults.

Complementary Feeding: The process starting when breast milk alone is no longer sufficient to meet the nutritional requirements of infants and therefore other foods and liquids are needed, along with breast milk. It should be timely, meaning that all infants should start receiving foods in addition to breast milk from six months onwards. It should be adequate, meaning that the complementary foods should be given in amounts, frequency, and consistency and using a variety of foods to cover the nutritional needs of the growing child while maintaining breastfeeding.

Exclusive Breastfeeding: The infant receives no other liquids or solids, not even water other than breast milk in the first six months of life.

Food Fortification: The addition of one or more essential nutrients to a food, whether or not it is normally contained in the food, for the purpose of preventing or correcting a

demonstrated deficiency of one or more nutrients in the population or specific population groups (FAO/WHO 1994).

Food Security: When all people at all times have access to sufficient, safe, nutritious food to maintain a healthy and active life.

Healthy diet: Diet that provides an adequate amount and variety of nutritious safe foods to cover (but not exceed) a person's energy and nutrient needs.

Low Birth Weight (LBW): A birth weight of a live born infant of less than 2,500 g regardless of gestational age.

Malnutrition: Refers to over-nutrition, under-nutrition and micronutrient deficiencies. It is an abnormal physiological condition caused by inadequate, excessive or Imbalance absorption of macronutrients (carbohydrates, proteins, and fats), water and micronutrients (Vitamins and minerals). It refers to acute malnutrition, chronic malnutrition, micronutrient deficiencies, overweight and obesity. All forms of malnutrition can be mild (at the on-set), moderate (threat) or severe (fatal).

Micronutrient Deficiencies: A lack of essential vitamins and minerals required in small amounts by the body for proper growth and development. Micronutrients include, but are not limited to vitamins A, B, C and D but also minerals like iodine, iron, and zinc, among others.

Micronutrient deficiency disease (MND): is a clinical disease caused by a lack of intake, absorption or utilization of one or more essential vitamins or minerals.

Nutrients: Nutrients are a substance obtained from food that is required by humans for growth, development and normal function.

Nutrition: The end-result of various processes in society which end when food is eaten followed by subsequent nutrients ingestion, digestion, absorption, metabolism transportation, storage, excretion, ensuring utilization of the food nutrients by the body to provide health.

Nutritional anaemia: Insufficient iron intake and food as well as prevalence of diseases especially malaria, worms and bilharzia; especially among pregnant women, children below five years of age and school children.

Nutritional Indicators: A measure of status linked to the characteristics of persons, times and places, in order to obtain an indication of the nature and distribution of the under nutrition problem in the population, and thus reach an overall picture of the situation.

Nutrition sensitive interventions: are those interventions that influence the underlying determinants of nutrition that are largely delivered by the education, agriculture, livestock, water and sanitation, gender and other sectors. These interventions have potential to improve food and nutrition security of beneficiaries.

Nutrition-specific interventions: are the interventions which address the immediate causes of malnutrition (that is; disease and inadequate dietary intake) and are largely delivered by the health sector.

Over Nutrition: Overconsumption of nutrients and food to the point at which health is adversely affected. Over nutrition can develop into obesity, which increases the risk of serious health conditions, including cardiovascular disease, hypertension, cancer, and type-2 diabetes.

Overweight and obesity: Abnormal or excessive fat accumulation that may impair health. This condition may co-occur with micronutrient deficiencies, which are also linked to poor diets. A high Body Mass Index (BMI) is a major risk factor for non-communicable diseases.

Therapeutic Food: Designed for specific, usually nutritional, therapeutic purposes as a form of dietary supplement, as such, considered diets of persons with special nutrition requirements.

Under nutrition: The outcome of insufficient food intake and repeated infectious diseases. It includes being underweight for one's age, too short for one's age (stunted), thin for one's height (wasted).

Underweight: Children whose weight-for-age is below minus 2 Z-scores from the mean of the reference population.

Vitamin A Deficiency (VAD): A lack of vitamin A especially among children of between six months and five years of age.

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