

Republic of Kenya



Ministry of Health



**1** Good nutrition is a fundamental right for every person

**2** Malnutrition leads to huge economic losses and is a threat to Kenya's achievement of Vision 2030

**3** Addressing malnutrition requires collaborative efforts across sectors.

# KEY MESSAGES ON SCALING UP NUTRITION

**Message 1: Good nutrition is a fundamental right for every person**

**Message 2: Malnutrition leads to huge economic losses and is a threat to Kenya's achievement of Vision 2030**

**Message 3: Addressing malnutrition requires collaborative efforts across sectors.**

## Message 1: Good nutrition is a fundamental right for every person

Malnutrition, including micronutrient deficiencies, is a significant public health problem in Kenya. Nutritional trends show no significant change in the nutritional status of children less than five years from 1998 to 2008 with the stunting stagnating at about 35per cent according to the Kenya Demographic and Health Survey in 1998, 2003 and 2008, illustrating no significant improvement in nutritional status.

Consequently, **Every Year, 19,000** deaths of children below five years are attributed to underweight; **10,000** deaths are attributed to lack of protective vitamin A; and **11,000** children deaths are attributed to poor breastfeeding practices. Underlying malnutrition continues to be the single greatest contributor to child deaths (45 per cent).

**The Constitution of Kenya (2010)** recognizes food and nutrition as a human right. Chapter 4 Article 43 (1) (c) states that, every person has the right to be free from hunger and to adequate food of acceptable quality while Article 53 (1) (c) states that every child has the right to basic nutrition. **The Kenya Food and Nutrition Security Policy (FNSP)** provides a comprehensive framework covering the multiple dimensions of food security and nutrition improvement. It recognizes the need for a multi-sectoral approach embracing both public and private sector involvement, and that hunger eradication and nutrition improvement is a shared responsibility of all Kenyans. Additionally, the Kenya National Nutrition Action Plan has clearly laid out the plan for implementation of nutrition actions at both the national and the county level.

Poor nutrition contributes to poor health, impaired development and increases risk of death.

Malnutrition is the single greatest contributor to death in children underfive, causing over 45 per cent of deaths either directly or indirectly

By signing as the 30th Country towards Scaling Up Nutrition, a global movement that unites people from government, UN, civil society, donors, academia and business in a collective effort to improve nutrition, Kenya is committed to implementing practical and sustainable interventions that will prevent under nutrition and reverse the rising trend of non-communicable diseases. This is reflected in a number of actions including implementation of the package of **High Impact Nutrition Interventions**: which, if implemented fully to scale, can reduce child mortality by 30per cent and have the potential to reduce stunting as follows:

- **Fortification of staple foods (flour, oil and sugar)** with essential vitamins and minerals such as vitamin A, iron and folate and micronutrient supplementation.
- **Growth Monitoring:** Measuring poor growth during the first five years of life is one of the main ways to know how children are being affected in the long-term and is associated with reduced school performance. This can help identify the children most at risk.
- Addressing the challenges of **food insecurity**, getting the best nutrition for pregnant women and young children aims to make a difference during the first 1000 days (from conception to two years after birth) of life and beyond.
- Promotion of exclusive breastfeeding and appropriate complimentary feeding from 6-24 months of age.
- **Salt iodization.** Current household coverage of iodized salt is 98per cent, which is above the international goal of 90per cent. Kenya has officially achieved Universal Salt Iodization (USI)— one of the few African countries to do so however we need to reach the remaining 2per cent of households.

The SUN framework strongly advocates for adoption of a multi-sectoral approach to addressing the challenge of malnutrition.

Major gaps exist in the operation and scaling up of nutrition interventions. The key gaps are:

- Low coverage of high impact nutrition interventions.
- Inadequate commitment to nutrition as a national and county priority reflected in funding and staffing by the government.
- Poor environmental health conditions in Kenya. Improved water source and sanitation, could reduce stunting by at least 10per cent.
- Gaps in the promotion of complementary feeding with monitoring and accountability of maternal and young child programmes.
- Inadequate human resources for nutrition at county level.
- Low general public awareness of importance of nutrition.

## Message 2: Malnutrition leads to huge economic losses and is a threat to Kenya's achievement of Vision 2030

Malnutrition greatly affects Kenya's socio-economic development and potential to reduce poverty. Achievement of Vision 2030 will not be realized unless the nutrition of women and children is prioritized in the national development programmes and strategies. Nearly 2.8 million children or 35per cent of all children in Kenya are undernourished, and micronutrient deficiencies are widespread. In addition to hunger and malnutrition, evidence from the 2008 KDHS points at the growing prevalence of an overweight and obese population in Kenya. The emergence of diet related non-communicable diseases (NCDs) such as cancers and diabetes in Kenya is worrying.

Sustainable economic growth is reinforced by a healthy and productive workforce.

### Negative impacts of malnutrition on Vision 2030

- Child survival and development:** If the prevalence of underweight does not improve between now and 2030, an estimated 430,000 children will die. Successfully implemented interventions could save 120,000 lives during this period if underweight prevalence is reduced by even a third.
- Education:** Malnutrition leads to indirect losses in productivity from poor intellectual development and schooling. **Low birth weight** may reduce a person's IQ by 5 percentage points while under nutrition may reduce it by 5 to 11 points while iodine deficiency will reduce a person's IQ by up to 10 to 15 points. An extrapolation of data reveals that every year over 90,000 children will be born with varying degrees of mental retardation in Kenya due to **iodine deficiency**. **Iron deficiency anaemia** consistently reduces performance on tests of mental abilities (including IQ) by 8 points. Children suffering from malnutrition are more likely to enroll later, complete fewer grades and perform poorly in school.
- Economy;** between 2010 and 2030, Kenya would lose **104 billion shillings, approximately 1 billion USD**, due to **Iodine Deficiency Disorders**. If each household in Kenya were to consume iodized salt, more than one million lives would be saved from 2015 to 2030. As a consequence of **iron deficiency anaemia** in the female labour force, **126 billion shillings worth of productivity** will be lost between 2015 and 2030. Iron supplementation could play a large role in helping avert this loss in productivity. It is estimated that in 2010 alone, Kenya has lost about Kshs **95 billion** due to stunting.

### Key gains if malnutrition is addressed

- a) Reduction of underweight by one third would save over 50,000 child lives
- b) Scaling up vitamin A supplementation would save over 50,000 deaths
- c) It is estimated that 4per cent and 8per cent of all deaths among infants are attributed to diarrhoea and respiratory infections respectively due to sub-optimal breastfeeding. Scaling up appropriate infant and young child feeding practices would save over 10,000 of all child's death annually
- d) 400,000 children could be saved from mental retardation
- e) 39 billion KSh saved from dressing iron deficiency, iodine and stunting (2010 profiles)

Malnutrition leads to huge economic losses – Kenya loses about Kshs. 147 billion every year due to productivity losses as a result of malnutrition.

## Message 3: Addressing malnutrition requires collaborative efforts across sectors.

### NUTRITION IS KEY: Step up your commitment.3

Given the multiple causes of malnutrition, multi-sectoral interventions are needed. This calls for establishment of linkages between various sectors such as agriculture, livestock, fisheries, water, planning, education and health whose programmes impact on nutrition of communities. The nutrition sector cannot do it alone and nutrition within the health sector alone cannot address malnutrition effectively.

Implementation of the nutrition activities requires commitments and collaboration. Delivering an effective multi-sectoral response requires strong co-ordination and leadership at all levels.

However, multi-sectoral capacity at national and county level are weak and with low political demand for action against under nutrition. Top level leadership is needed to achieve better nutrition status.

#### Key Asks

- a) Commitment for increased funding support to the nutrition sector with explicit budget lines for nutrition at both national and county governments.
- b) Increased funding support by development partners to scale up high impact nutrition interventions in the country.
- c) Establishment of a high level multi-stakeholder platform (MSP) at national and county levels.
- d) Develop and implement a multi-sectoral, common results framework (CRF) for food and nutrition security in the country.
- e) Strengthening inter-sectoral collaboration. Involves strengthening linkages between nutrition and key sectors like agriculture, education, social protection, health, water and sanitation.

Kenya will focus on Scaling up Nutrition (SUN) by enhancing establishment of multi-stakeholder platforms (MSPs) and effective engagement of the same.



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# Nutrition is Key

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*“Commitment and Collaboration to SUN”*