Presentation at Emory University Conference Centre, Atlanta Georgia, USA: Making School Health Programmes Work

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Presentation Outline

- □Background and Context
- ☐ The Challenges of School Health Programmes
- ■What appears to work
- □ Providing Policy Support
- □Capacity, knowledge generation, M & E
- □Our Future Priorities

Background and Context

- ☐ Vision 2030 guides Kenya's development path in the long-term. The Vision is being implemented through three pillars namely economic, social and political.
- The social pillar aims to create a just, cohesive and equitable social development in a clean and secure environment.
- ☐ Education and Training; Health and the Economy; Water and Sanitation are three of eight key sectors under the social pillar.
- ☐ Empirical data show that physical facilities are an important factor in both school attendance and achievement.
- ☐ Currently, Kenya has over 19,000 public primary schools and over 1000 non- formal schools (392 of these get FPE Support for Instructional Materials)

Background and Context Cont'd

- ☐ The introduction of FPE in 2003 influx of pupils thus over stretching existing infrastructure.
- The comprehensive school health policy developed with 8 thematic areas including;
 - 1. Values and Life-skills
 - 2. Gender
 - 3. Child rights, protection and responsibilities
 - 4. Water, Sanitation and Hygiene
 - 5. Nutrition
 - 6. Disease prevention and control
 - 7. Special Needs, Disability and Rehabilitation
 - 8. School infrastructure and Environmental safety

The Challenges of School Health Programmes

Experiences : School Health Programmes

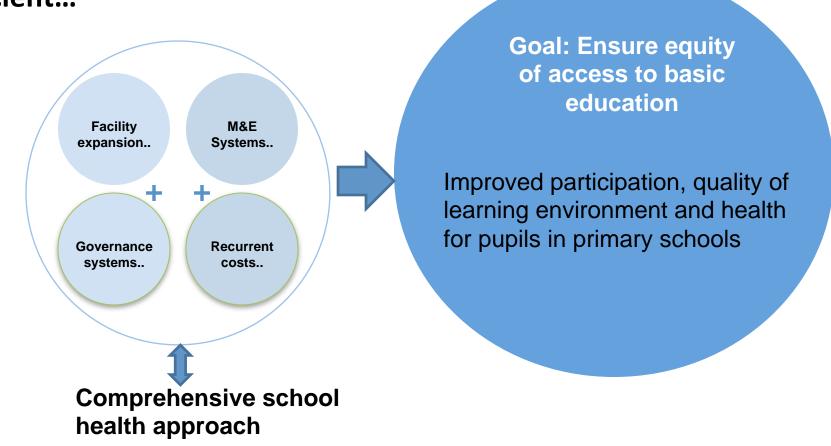
- Major backlog of infrastructure provision
- Existing infrastructure in a number of schools are generally in poor condition due to limited funding and maintenance.
- FPE has added pressure on existing infrastructure(44% increase in 9 yrs)
- ASAL areas and urban slums are worst hit.
- Management of information systems
 & feedback process still weak –
 capacity issues.
- Girl absenteeism due to reproductive health issues

- Maintaining school health infrastructure and quality of learning environment
- Deepening knowledge on approaches that work
- Transmitting policy goals, approaches and action down to the school level
- Capacity at all levels
- Recurrent costs are significant
- Addressing comprehensive health needs for pupils
- Accountability and leadership issues at various levels

.....Emerging Issues

What appears to work:

In School Health, a major lesson from the past is that paying emphasis to infrastructure expansion is necessary but not sufficient...



Providing Policy Support

| Under Kenya's new constitutional dispensation, improved water, sanitation and giene helps fulfill every child's constitutional right to health and education. | |
|---|-----|
| Devolution and emphasis on self government at county level is a new variable. | |
| School health policy and guidelines developed to address stand alone terventions in school health.We need to address sustainability and wastage issu | es. |
| A task force is currently reviewing education policy to realign it to the new onstitution and improve the system where necessary. | |
| There is FPE initiative to support access to education. Other delivery channels uch informal schools | |
| The political and policy environment is more demanding especially in this ansition period | |

An enabling policy environment for sustainable school health interventions is an important prerequisite for;

- Strengthening coordination of school health interventions by relevant Ministries, communities and other stakeholders
- Ensuring mechanisms are put in place for sustainability of school health programmes
- Facilitating effective monitoring and evaluation of school health interventions.
- Adequate resource mobilization at various levels.
- Creating child friendly schools that encourage pupils especially girls to complete their education. This has far-reaching implications for women's health and Kenya's economy.

Policy support cont' d

| The Government of Kenya (Ministry of Finance) in FY 11/12 has; |
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| ☐ Zero rated all sanitary towels to increase affordability. |
| □Allocated Kshs.301 Million (USD.4M) for the purchase of sanitary towels for deserving girls in public primary and secondary schools. |
| ☐ Increased -Repair, Maintenance and Infrastructure (Kshs. 127 in 2010 to kshs. 130 in 2011 i.e. \$ 1.49 to \$1.53: 1.23% and Electricity, Water and Conservancy (Kshs.10 to ksh.20 i.e. \$0.12 to \$ 0.23)-100% vote heads per child |
| □Allocated Kshs. 475m i.e. USD. 5.59m for 2,100 schools in 2011/2012 for improve access to portable water(although realocated to SFP due to drought) |
| □Other initiatives are: CDF;LATF;GOK/OPEC; Care Kenya; KESSP;GOK/UNICEF& Govt of Netherlands among others |

Capacity, Knowledge generation, M&E

- Capacity of institutions at the local level are still weak – supervision by MoE is not adequate, local communities have little role to play and accountability mechanisms are still inadequate.
- Inconsistency in financing (especially where donor contributions are significant as in KESSP) means follow up of policy commitments is weakened

Capacity, Knowledge generation, M&E cont'd

- ☐ Frontline agencies need to adopt a uniform set of tools to monitor and track progress. But these tools have to be simple, comprehensive and easy to administer.
- □ Strengthening training and participation of stakeholders at local level is key to sustainability and promoting ownership.
- ☐ Emphasis on research, data collection and generating knowledge on lessons and what works is key for scaling up.

Ministry's Future Priorities

- Strengthening the implementation of the Comprehensive School Health Policy – the policy identifies 8 key thematic areas for intervention and different institutions at each level for coordination.
- Investing in both infrastructure development and providing additional grants to ensure recurrent costs are met.
 - This is being undertaken through the review of capitation grants for schools.
- Strengthening policy coordination and partnership with Ministry of Public Health and Sanitation especially through the Inter Agency Coordinating Committee and National School Health Technical Committee.
- Building better partnerships with Non State Actors including NGOs
- Capacity building, knowledge generation, M & E
- Strengthening management of information systems.

Thank you for your attention!