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)
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

Emerging 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
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...

Goal: Ensure equity of access to basic education

Improved participation, quality of learning environment and health for pupils in primary schools

Comprehensive school health approach
Providing Policy Support

- Under Kenya’s new constitutional dispensation, improved water, sanitation and hygiene 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 interventions in school health. We need to address sustainability and wastage issues.

- A task force is currently reviewing education policy to realign it to the new constitution and improve the system where necessary.

- There is FPE initiative to support access to education. Other delivery channels such as informal schools
- The political and policy environment is more demanding especially in this transition 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;

- 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 reallocated 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!