



**The Participatory Institutional Capacity Assessment (PICA) on  
Implementing Multisectoral Nutrition Approaches in  
Isiolo and Marsabit Counties**



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# Operational Definitions

<b>Capacity</b>	The ability of an individual, group, organization, network, or system to function effectively, work towards sustainability and achieve goals
<b>Institutions</b>	An established organization or corporation with a well-defined set of goals, visions, and objectives
<b>Capacity assessment</b>	An analysis of desired capacities against existing capacities which generates an understanding of capacity assets and needs that informs the formulation of a capacity development response
<b>Participatory assessment</b>	is an effective, field-tested methodology for gaining an understanding of the needs and capacities that reside within individuals and groups—considerations that should inform all planning, implementation, monitoring and evaluation
<b>Capacity strengthening</b>	A deliberate process that improves the ability of an individual, group, organization, network, or system to enhance or develop new knowledge, skills, attitudes, systems, and structures needed to function effectively, work towards sustainability and achieve goals.
<b>Budget analysis</b>	Examining and explaining the components of budget expenditure and institution revenue, and whether the budget meets the group's goals
<b>Political Economy Analysis</b>	An understanding of the political dimensions of any context and actively using this information to inform policy and programming

# List of Acronyms and Abbreviations

ABS	Annual Budget Statements
AFRMs	Accountability, Feedback and Response Mechanisms
ASAL	Arid and Semi-arid Lands
CADPs	County Annual Development Plans
CARA	County Allocation of Revenue Act
CCC	Comprehensive Care Centre
CEC	County Executive Committees
CHVs	Community Health Volunteers
CIDP	County Integrated Development Plans
CIMES	County Integrated Monitoring and Evaluation systems
CNAP	County Nutrition Action Plan
CNTF	County Nutrition Technical Forum
COI	Conflict of Interest
CPE	Continuous Professional Education
CRMF	Common Results and Monitoring Framework
CRS	Catholic Relief Services
CSO	Civil Society Organization
DANIDA	Danish International Development Agency
DEO	Divisional Education Officer
ECD	Early Childhood Development
ECDE	Early Childhood Development Education
EU	European Union
FGDs	Focused Group Discussions
FY	Financial Year
GAM	Global Acute Malnutrition
HOCAI	Holistic Organizational Capacity Assessment Instrument
IMAM	Integrated Management of Acute Malnutrition
IT	Information Technology
JD	Job Description
KDHS	Kenya Demographic Health Survey
KII	Key Informant Interviews
KNAP	Kenya Nutrition Action Plan
KNCDF	Kenya Nutrition Capacity Development Framework
KSDP	Kenya Devolved System Programme
M&E	Monitoring and Evaluation
MCAs	Members of the County Assembly
MCH	Maternal and Child Health
MDA	Ministries, Departments and Agencies
MECAT	Monitoring and Evaluation Capacity Assessment Toolkit
MOH	Ministry of Health
MOU	Memorandum of Understanding
MSP-N	Multi-Sectoral Platform for Nutrition
NDMA	National Drought Management Authority

NGO	Non-Governmental Organization
PBBs	Program Based Budgets
PCS	Partnership & Capacity Strengthening
PEA	Political Economy Analysis
PFS	<b>Performance Feedback System</b>
PICA	Participatory Institutional Capacity Assessment
SCDC	Sub-County Development Committee
SMART	Standardized Monitoring and Assessment of Relief and Transitions
SPRING	Strengthening Partnerships, Results, and Innovations in Nutrition Globally
SUN	Scaling up Nutrition
TB	Tuberculosis
TOR	Terms of Reference
UHC	Universal Health Care
UN	United Nations
UNICEF	United Nations Children’s Emergency Fund
VQC	Vision Quest Consultants
VSF	Vétérinaires Sans Frontières
WASH	Water Sanitation and Hygiene
WBG	World Bank Group
WDCs	Ward Development Committees
WGs	Working Groups



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# Executive Summary

## Background and rationale for the Participatory Institutional Capacity Assessment (PICA) in Isiolo and Marsabit

Isiolo and Marsabit Counties are in the arid and semi-arid areas of Kenya and are adversely affected by cyclic upsurges in the prevalence of acute malnutrition among children under age 5. This is a longstanding challenge. To guide sustained ownership of the institutional capacity development process, the county departments represented in the Multisectoral Platform for Nutrition (MSP-N) of the two counties were convened and facilitated by the Nawiri Program, led by Catholic Relief Service (CRS), to self-identify their respective capacity gaps and opportunities. Subsequently, the MSP-Ns of the two counties separately planned and budgeted for capacity strengthening in planning, designing, implementing, and monitoring the multisectoral nutrition actions. To fully contextualize necessary capacity strengthening efforts, and to promote holistic approaches to addressing acute malnutrition in sustainable ways, county nutrition budgets and the political economy were also analyzed. The objectives of the assessment were to:

1. Assess the institutional/system capacity to implement an effective multisectoral response to address malnutrition at the county, subcounty, ward and village levels.
2. Explore the institutional/organizational arrangements and their capacity to deliver and manage effective multisectoral nutrition interventions at all levels.
3. Analyze the nutrition budget to determine the level of funding for nutrition-specific and sensitive activities within the context of the county multisectoral nutrition action plans that have been developed.
4. Analyze the county political, economic, and social<sup>1</sup> relations and influences that affect the prospects for successful development and improvement in the nutrition-sensitive and nutrition-specific sectors, as well in the political commitment for nutrition.

## Methodological approaches

This was a highly participatory cross-sectional assessment that engaged key county officials (MSP-N) concurrently in Isiolo and Marsabit Counties in February 2021. The five-day self-assessment was completed using an adapted CRS Holistic Organizational Capacity Assessment Instrument (HOCAI), a facilitated self-assessment tool filled out by Isiolo County and Marsabit County MSP-N participants<sup>2</sup>.

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<sup>1</sup> Social dynamics influence both political and economic activities, e.g., women in leadership positions or decision-making at village, ward, and county levels

<sup>2</sup> HOCAI will be done through a facilitated process by empowering the multisectoral platforms for nutrition to do self-assessment. The role of the consultant will be to facilitate this process.

The HOCAI tool focuses on the assessment of structures and systems working to support communities. Additionally, quantitative nutrition budget analysis was conducted using the Strengthening Partnerships, Results and Innovations in Nutrition Globally (SPRING) method of budget analysis<sup>3</sup>.

The study team had adapted both instruments to the target county contexts. Further complementary data on budget analysis, as well as data to inform a Political and Economy Analysis (PEA), were collected from select key informants in the counties, sub-counties and at ward levels.

The adapted HOCAI tool is an Excel workbook, with five spread sheets (individually described under the *adapted HOCAI process* section as steps) and is intended to support county governments in Kenya to identify their strengths and capacity gaps vis-à-vis the Multisectoral Nutrition Implementation standards in five critical areas— (i) Policies, programs, and frameworks; (ii) Resources (human, financial) and infrastructure (iii); Coordination and partnerships; and (iv) Evidence-based decision-making. Issues of gender, leadership and accountability are integrated across all the capacity areas but are also captured under v) Cross-cutting issues—and to develop a tailored plan to address identified gaps.

Nutrition budget data were analyzed as per the SPRING manual, while all qualitative data from the Key Informants Interviews and Focused Group Discussions were analyzed through the focused theme-analysis process. All data were triangulated to address the assessment objectives and questions.

## Findings

Based on the findings of the HOCAI process, budget and political and economy analysis, the following are the findings, with recommendations proposed against the key findings.

### Institutional capacity

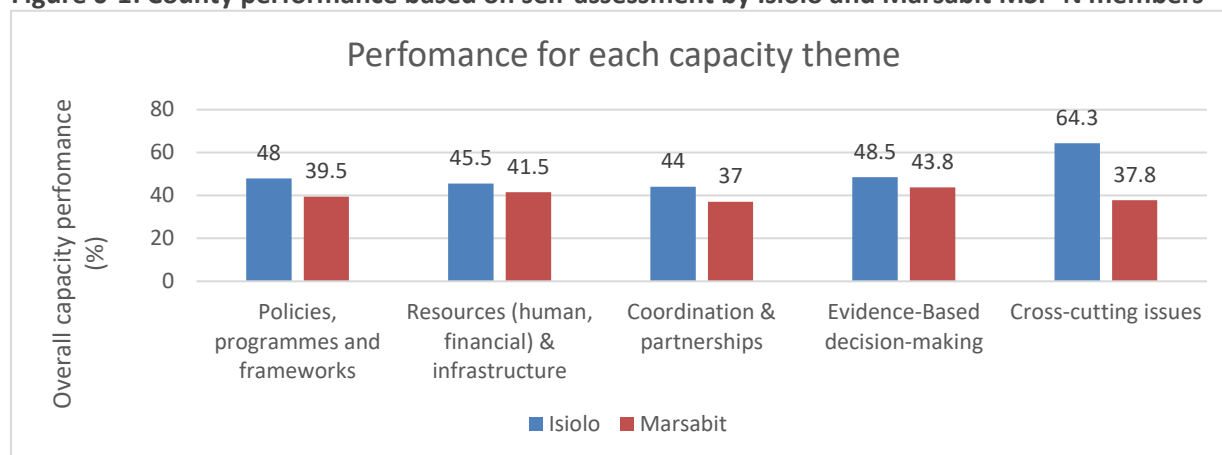
The 16 capacity statements were assessed, and a color-coded score<sup>4</sup>, from ‘weak’ to ‘strong’, was used to determine score for each capacity statement. Save for the theme on cross-cutting issues where Isiolo county scored above 50% and was categorized as “good,” the performance in other capacity themes was “weak”—indicating the need to strengthen the capacity of these dimensions in both Isiolo and Marsabit Counties.

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<sup>3</sup> <https://www.spring-nutrition.org/publications/series/users-guide-nutrition-budget-analysis-tool>

<sup>4</sup> Color code scores - 0–29.9% (poor) as red; 30–49.9% (weak) as orange; 50–79.9% (good) as yellow; and 80–100% (strong)

**Figure 0-1: County performance based on self-assessment by Isiolo and Marsabit MSP-N members**



Although the design of the assessment was not for comparing the two counties, Isiolo and Marsabit Counties can learn from each other on various specific capacity areas. Isiolo performed better in sectoral commitments, policy, multisector nutrition strategies and plans, political commitment and government leadership, problem assessment/identification, environmental sustainability and gender and related issues. On the other hand, Marsabit performed better on infrastructure and operational plans, technical guidance, and protocols. The variations were generally due to the differing level of investments and the efforts put on the areas by the two counties. The refinement of agreed actions and budgeting processes were finalized at the county level during the MSP-N meetings post HOCAI workshops.

While sectoral nutrition targets exist, their actions not well mainstreamed to optimize nutrition sensitivity, e.g., nutrition education not streamlined into sectors other than health. A sector-by-sector orientation on streamlining of their respective policies, strategies, and actions to be more nutrition-sensitive will be needed, accompanied by the attendant revision of sector/departmental functions, TORs and job descriptions of nutrition focal persons and training of staff. While the MSP-N is functional at the county level, it is not formally recognized and not robustly linked to the possible subcounty and ward level multisectoral systems. The counties will need to formalize and institutionalize - and where not present, form - the MSP-N structures and strongly link it up with strengthened sub-county, ward and sub-ward levels multisectoral platforms and structures and sector working groups to spearhead the collaboration and coordination of nutrition-sensitive and nutrition-specific actions at all levels in the county and ensure as many relevant sectors as possible are represented and active.

## Budget analysis

In both counties, tracking nutrition financing and expenditures is an ad-hoc activity conducted from time to time and not systemized due to 1) lack of a suitable adapted tool agreed upon by all department for use; and 2) the absence of staff trained on it. This means that evidence-based feedback for the nutrition budgeting process is not within reach. This analysis indicated that funding for nutrition is on an increasing trajectory overall, albeit there are no tangible results on nutrition outcomes. There is need to identify and adopt a suitable tool and advocate for its use in tracking budget allocation, expenditures and facilitate the provision of feedback to the budgeting process. The tool(s) should reflect the multifaceted approaches by a multisectoral stakeholder teams and all the plausible budget line items that go with such operations.

Limited budget tracking further contributes to the challenge of determining the adequacy of the funds allocated for nutrition, even though the inadequacy was confirmed qualitatively. When compared to the CNAP budgets as a benchmark, the funding allocation for nutrition in both counties was inadequate, though external sources of funds were increasing in Marsabit to match and exceed government allocations for nutrition. There was no indication of donors co-budgeting with the county for increased government's contribution to nutrition, and generally, the nutrition-sensitive allocation is on the rise with a decline on the nutrition-specific allocation — contribution for the former being mainly in the agriculture and water sectors. In Isiolo, the water and agriculture departments were experiencing a reduced budget deficit in the two preceding budget years, a sign that they were relatively better funded for nutrition compared to other departments. Continued advocacy for increased nutrition funding, both for sensitive and specific components in all the relevant sectors, is required. This includes advocacy for specifically identified line items relating to program gaps, and ensuring partners and external donors introduce funding conditions, such as the matching their contributions by the county, at a rate above their contributions. In tandem with efforts and advocacy for increasing funds for nutrition, there is a need to specify the actual nutrition budget lines, and integrate into the nutrition tracking, a regular analysis of nutrition spending, and monitor if funding is used for planned purposes.

The CNAP is an important and valuable tool for nutrition advocacy, planning, and resource allocation, but necessary “soft” advocacy skills to influence budget allocation at higher levels of the executive and county assembly remain limited. There is also limited capacity development among key nutrition-affiliated staff on nutrition budget tracking processes. Capacity development for departmental staff on nutrition budget tracking processes as well as the tools that will be adopted by the county will be needed, including capacity building of the MSP-N members on advocacy skills, to augment their positions of influence in planning and budget allocation for multisectoral nutrition.

## Political economy analysis

Low awareness and priority for multisectoral nutrition was noted among key political leaders and limited prioritization of nutrition as a development agenda, therefore, awareness and advocacy for multisectoral nutrition, especially among the governor, county secretary chief officer and MCAs (through the relevant county assembly committees) will be very key. The focus of the awareness should be on the importance of passing relevant bills related to nutrition and increasing funding for nutrition in the relevant sectors. In Isiolo, the county commissioner, national assembly representatives, women representatives, and county senators, were identified as external influencers on development issues in the county, while in Marsabit, the governor and the members of the county assembly were considered as having greater propensity to positively influence policy change, planning, and resource allocation for nutrition. Awareness and advocacy will need to be extended and contextualized for multisectoral nutrition to target these external influencers and top leadership and politicians through the relevant thematic/sectoral committees as well as in the specially organized advocacy forums.

In Isiolo, several economic and development drivers were identified and should be harnessed optimally for maximum nutrition benefits. In Marsabit, issues that touch on pressing and common community concerns, such as drought situations and emergency health and nutrition, elicit high concern among politicians and top leadership and are a valuable entry point for multisectoral nutrition advocacy. Economic development drivers are well identified and can be augmented to foster positive change in support of livelihoods.

Unfavorable climate in both counties diminishes the impact of developmental progress made at the county level through triggering migration, limited access to diverse diets and limited meal frequency. There is therefore need for policy and decision-makers as well as partners to focus on supporting approaches that promote resilience to drought, including scaling up support for agropastoralism. Pressing community needs strongly articulated and presented by the community to politicians are key to influencing action by the county. Capacity builds the communities and the relevant community structures to articulate multisectoral nutrition issues during public participation and when presenting other key pressing needs.

Gender issues have been well identified as a critical social concern that needs the attention of the highest authority in the county and by all departments. In Isiolo, there is need to augment the implementation of gender and gender-related policies, and scale up the advocacy and awareness from the top leadership and politicians to departmental staff and the community level, while in Marsabit, intensify advocacy on the role and importance of women's involvement in leadership and decision-making, as well as dispelling negative cultural attitudes towards women.

## Conclusions

The implications of the county self-planned actions for county, subcounty and ward-level actions have been proposed for each capacity area and counties now have plans for strengthening the multisectoral approaches. Closely facilitated multisectoral structures and capacity strengthening efforts will be monitored by the MSP-N at the county level.

Based on the rich learning from the PICA process, there is need to document the capacity assessment and strengthening processes for future adaptation within and beyond Nawiri program areas. Potentially, relevant products that can be published, which include an adapted HOCAI manual with additional modules for strengthening multisectoral nutrition capacity, including the costs involved in the first and subsequent HOCAI processes; guidelines or frameworks for and critical lessons learned in strengthening subcounty and ward-level multisectoral nutrition competencies and systems/processes.

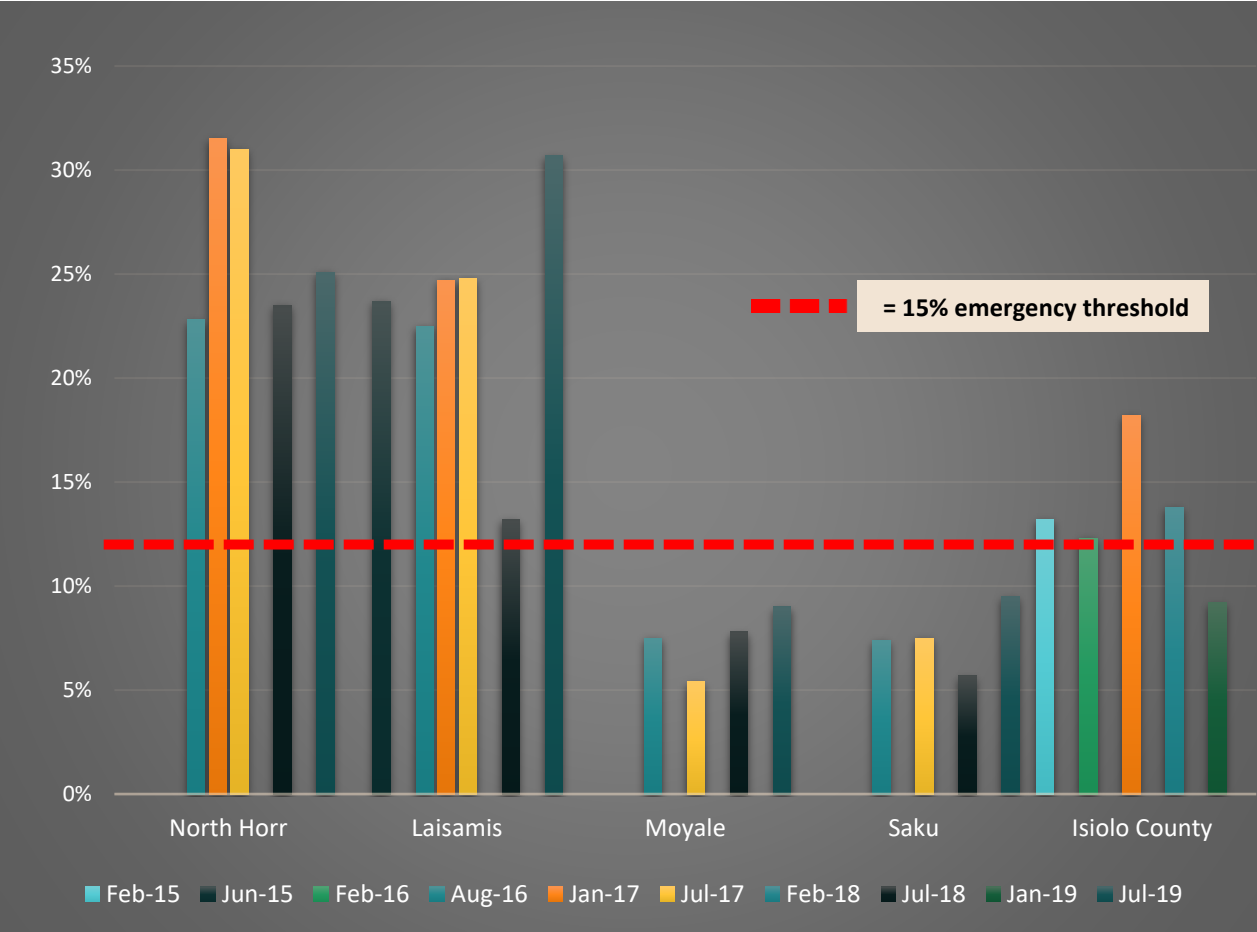
There is need to conduct subsequent adapted HOCAI processes during and after capacity strengthening efforts to gauge progress and further inform additional multisectoral nutrition actions for improving and sustaining improvements in addressing acute malnutrition. The varied approaches and planned HOCAI-generated actions by Marsabit and Isiolo Counties, provide an opportunity for a wealth of lessons to be learned and shared between the two counties and beyond, to promote inter-county learning on capacity strengthening through sharing of lessons learned, challenges and best and novel practices/approaches in tackling the challenge of acute malnutrition sustainably.

# Introduction

## Background

Isiolo and Marsabit Counties have in the past experienced cyclic upsurges in the prevalence of acute malnutrition among children under age 5. This is detrimental to the health, growth and cognitive development of infants and young children, and escalates the possibility of suboptimal cognitive development by age 2 and the occurrence of noncommunicable diseases and reduced productivity later in life. Figure 1-1 compares the trend in levels of global acute malnutrition (GAM) in two adjacent counties of Isiolo and Marsabit. As depicted in the figure, the two major sub-counties of Marsabit had consistently been on emergency need (>15% GAM rates) between 2015 and 2019. Isiolo recorded >15% GAM except in 2016 and 2019. Acute malnutrition is a major challenge in Marsabit and the adjacent counties. One indication of resilience by the community and the county systems will be demonstrated when the levels of GAM go down below 15% and are maintained at that level in the longer term.

**Figure 1-1: Trends in Global Acute Malnutrition in Marsabit sub-counties and Isiolo Counties**



**Source of data:** SMART Surveys 2015–2019. Data was consistently disaggregated as per the sub-counties in Marsabit. This was not the case of Isiolo County, and hence the variations in how data has been presented in Figure 1-1.

Hitherto there is an increased integration and convergence of programs that prevent and treat both acute and chronic malnutrition. It is tenable, therefore, that addressing acute malnutrition also significantly contributes to a reduction in chronic malnutrition. The causes of acute malnutrition are complex. To sustainably address these causes, there is a need to strengthen the multisectoral approaches that promote and support access to quality nutrition-specific and nutrition-sensitive services. Various systems in counties must work together to sustainably address not only acute malnutrition but also other forms of malnutrition.

These include health systems; agriculture and food security systems; education systems; social protection systems; WASH systems; and nutrition-sensitive policies, strategies, and programs. However, the capacities of these systems and the institutions that run them, as well as the political and economic environment, have limited the large-scale implementation of nutrition programs for decades. The Kenya Nutrition Capacity Development Framework (KNCDF) 2014–2019<sup>5</sup> recognizes four nutrition capacity areas that need to be addressed in the country. These are 1) system-wide capacity development considerations which comprise the policy, legal and regulatory landscape; 2) organizational; 3) technical; and 4) community capacity developments.

With the advent of devolved systems, the capacity areas identified by KNCDF have become clearer and more localized at the county levels and further guided by County Nutrition Action Plans (CNAP), counties have made remarkable attempts to fill these capacity gaps. Hitherto both nutrition-sensitive and specific interventions have been implemented concurrently. Challenges in multisectoral nutrition efforts are more county-specific and efforts are becoming more and more contextualized, even within counties. However, the capacity of institutions mandated to address the complexity of multisectoral nutrition approaches remains limited. There is, therefore, the need to understand institutional capacity gaps to inform context-specific capacity development efforts following the self-assessment processes undertaken in both counties.

To trigger and sustain ownership of the institutional capacity development process, institutions involved in addressing acute malnutrition in the counties needed to be convened and facilitated to self-identify the gaps, and plan and budget for capacity development efforts and approaches. The CRS-led Nawiri Program facilitated this process.

Participatory Institutional Capacity Assessment (PICA) on the planning, designing, implementation and monitoring of the multisectoral nutrition approaches in Isiolo and Marsabit counties was facilitated by Nawiri concurrently in the two counties to inform strengthening capacities of the county for effective implementation of multisectoral nutrition programming to reduce the levels of acute malnutrition. Three key components of the PICA were 1) institutional capacity assessment, 2) the nutrition budget analysis and 3) political and economy analysis (Fig. 2-1 and Methodology section).

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<sup>5</sup> GOK, 2014. Kenya Nutrition Capacity Development Framework (KNCDF)



# Objectives of the Assessment

## The overall objectives

The purpose of the PICA was to facilitate county authorities, as per their mandate, to effectively assess the capacity of county-, subcounty- and ward-level government institutions to legislate, plan, manage, adapt, and scale up promising multisectoral approaches to reduce the prevalence of acute malnutrition in two counties of Isiolo and Marsabit.

## Specific objectives

Specifically, the assessment was conducted simultaneously in Isiolo and Marsabit to:

1. Assess the institutional/system capacity to implement an effective multisectoral response to address malnutrition at the county, sub-county, ward, and village levels.
2. Explore the institutional/organizational arrangements and capacity to deliver and manage effective multisectoral interventions (nutrition-specific and nutrition-sensitive services), at all levels.
3. Analyze the nutrition budget to determine the level of funding for nutrition-specific and nutrition-sensitive activities within the context of the county multisectoral nutrition action plans that have been developed.
4. Analyze county political, economic, and social<sup>6</sup> relations and influences that affect the prospects for successful development, including political commitment for nutrition.

## PICA Assessment Questions

1. Institutional capacity as assessed using the adapted CRS Holistic Organizational Capacity Assessment Instrument (HOCAI)
  - a) What are the strengths and weaknesses of the institutional arrangements and capacity to lead and manage a multisector response to malnutrition at the county, subcounty and ward levels, including oversight functions at the national level?
  - b) What capacity exists, or does not, to lead and manage a multisector response to malnutrition?
  - c) How can weaknesses be collaboratively addressed?
  - d) What processes and mechanisms exist to address the weaknesses?
  - e) Based on policies and performance sector standards, what are the strengths and weaknesses of the institutional arrangements and capacities at the county, subcounty and ward levels to manage the delivery of nutrition-specific and nutrition-sensitive services?

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<sup>6</sup> Social dynamics influence both political and economic activities, e.g., women in leadership positions or decision-making at village, ward, and county levels

2. Budget analysis as conducted using the USAID Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING) Nutrition Budget analysis Tool, and complemented by the Key Informants Interviews
  - a) What is the status of nutrition financing (where is the funding, resource gaps, tracking financial flow)?
  - b) What are the potential funding mechanisms?
  - c) What advocacy opportunities exist for increasing commitment for nutrition financing?
3. Political Economy as assessed by key informant interviews
  - a) What are the political drivers of sectoral developments, including the political offices that have leverage in shaping the development agenda and commitments for nutrition in the two counties?
  - b) Which economic drivers of development are key and have a higher propensity to influence county government decision-making?
  - c) What are the social drivers of political and economic influences including women in leadership and decision-making?

## The Rationale for the Assessment

Considering the causality of acute (and other forms of) malnutrition, which illustrates the multisectoral nature of the challenge, one single sector cannot adequately address basic, underlying, and systemic causes of malnutrition. Approaches in addressing acute malnutrition are implemented by different sectors/departments in the counties and include, but are not limited to, those shown in Table 1-1. These multisectoral approaches cannot be strengthened without improving the capacity of key institutions and systems that support the implementation of nutrition-specific and nutrition-sensitive interventions to enhance their positive impacts. It is also apparent that these capacities cannot be improved without a clear understanding of the system and institutional needs, capacity gaps and opportunities, as well as the elucidation of the funding status and elaboration of the political and economic environments in which the county institution's function. Commissioning of the Participatory Institutional Capacity Assessment (PICA) by Nawiri was therefore designed to engage key actors in collaboratively identifying existing opportunities, capacity strengths, weaknesses, and gaps to inform pragmatic recommendations that will guide relevant institutional action priorities in Isiolo and Marsabit Counties.

**Table 1-1: Key multisectoral interventions in addressing malnutrition<sup>7,8</sup>**

#	Sector/departments	Interventions
<b>A Nutrition specific interventions</b>		
1	Health system	<ul style="list-style-type: none"> <li>• Management of severe acute malnutrition</li> <li>• Preventive zinc supplementation</li> <li>• Promotion of breastfeeding</li> <li>• Management of moderate acute malnutrition</li> <li>• Periconceptual folic acid supplementation or fortification</li> <li>• Maternal balanced energy protein supplementation</li> <li>• Maternal multiple micronutrient supplementation • Vitamin A supplementation</li> <li>• Maternal calcium supplementation</li> </ul>
	Health and agriculture system	<ul style="list-style-type: none"> <li>• Appropriate complementary feeding</li> </ul>
<b>B Nutrition specific interventions</b>		
	Health system	<ul style="list-style-type: none"> <li>• Family planning: healthy timing and spacing of pregnancy</li> <li>• Early childhood care and development</li> </ul>
	Agriculture/food system	<ul style="list-style-type: none"> <li>• Nutrition-sensitive agriculture</li> <li>• Food safety and food processing</li> </ul>
	WASH system	<ul style="list-style-type: none"> <li>• Water, sanitation, and hygiene (WASH)</li> </ul>
	Education system	<ul style="list-style-type: none"> <li>• Girls’ and women’s education</li> </ul>
	Social protection system	<ul style="list-style-type: none"> <li>• Livelihoods and social protection</li> </ul>
	Other systems	<ul style="list-style-type: none"> <li>• Economic development and planning</li> </ul>
		<ul style="list-style-type: none"> <li>• Trade and private sector</li> </ul>
		<ul style="list-style-type: none"> <li>• Environment and climate change</li> </ul>
		<ul style="list-style-type: none"> <li>• Conflict resolution</li> </ul>
		<ul style="list-style-type: none"> <li>• Gender and women’s development</li> <li>• Livelihoods and social protection</li> </ul>

## Scope of the Assessment

Isiolo and Marsabit PICA processes involved co-designing the assessment with Nawiri, county teams and the Vision Quest Consultants (VQC), including adapting it to the evolving Nawiri context as guided by the PICA assessment questions. This included interpretation of the Terms of Reference (TOR), development of a detailed methodology and tools for data collection. Field planning and other preparations were followed by actual fieldwork in February 2021, which involved facilitating both county HOCAI processes among the Multisectoral Platform in Nutrition (MSP-N) members, collecting nutrition budget data and conducting Key Informant Interviews (KIIs) with county departmental directors for complementary data on the budget analysis and for the Political Economic Analysis (PEA). Data were analyzed and the draft reports subsequently validated by county MSP-N members and the Nawiri team in June 2021. The half-day validation exercise involved the Nawiri and VQC teams giving presentations on the PICA assessment findings and recommendations, followed by plenary discussions that informed final report revisions.

<sup>7</sup> World Bank, 2013. Improving nutrition through multisectoral approaches. <http://documents1.worldbank.org/curated/en/625661468329649726/pdf/75102-REVISED-PUBLIC-MultisectoralApproachestoNutrition.pdf>

<sup>8</sup> USAID 2014. Multi-sectoral nutrition strategy 2014-2025. [https://www.usaid.gov/sites/default/files/documents/1867/USAID\\_Nutrition\\_Strategy\\_5-09\\_508.pdf](https://www.usaid.gov/sites/default/files/documents/1867/USAID_Nutrition_Strategy_5-09_508.pdf)

# Methodology

## Assessment overview and design

The study was a cross-sectional assessment that drew retrospective information/data to inform efforts to prioritize capacity strengthening needs to reduce persistent acute malnutrition in Isiolo and Marsabit Counties. The highly participatory approach assessed institutional capacity and analyzed the nutrition budgets and political and economic environment for implementation of nutrition-specific and nutrition sensitive actions. Institutional capacity assessment: The main data and information collected were from a facilitated self-assessment of County Multi-Sectoral Platform for Nutrition (MSP-N) participants using the CRS HOCAI tool, adapted for Nawiri PICA purposes as explained in the Section, *adaptation of the CRS HOCAI tool*, of this report<sup>9</sup>. The HOCAI tool and processes were highly participatory and focused on the structures and systems working to support communities. Information and data collected were analyzed as per the CRS HOCAI tool manual adapted for PICA and subsequently the corresponding and relevant community-level (subcounty to sub-ward level) actions drawn from the agreed-up actions at the county level.

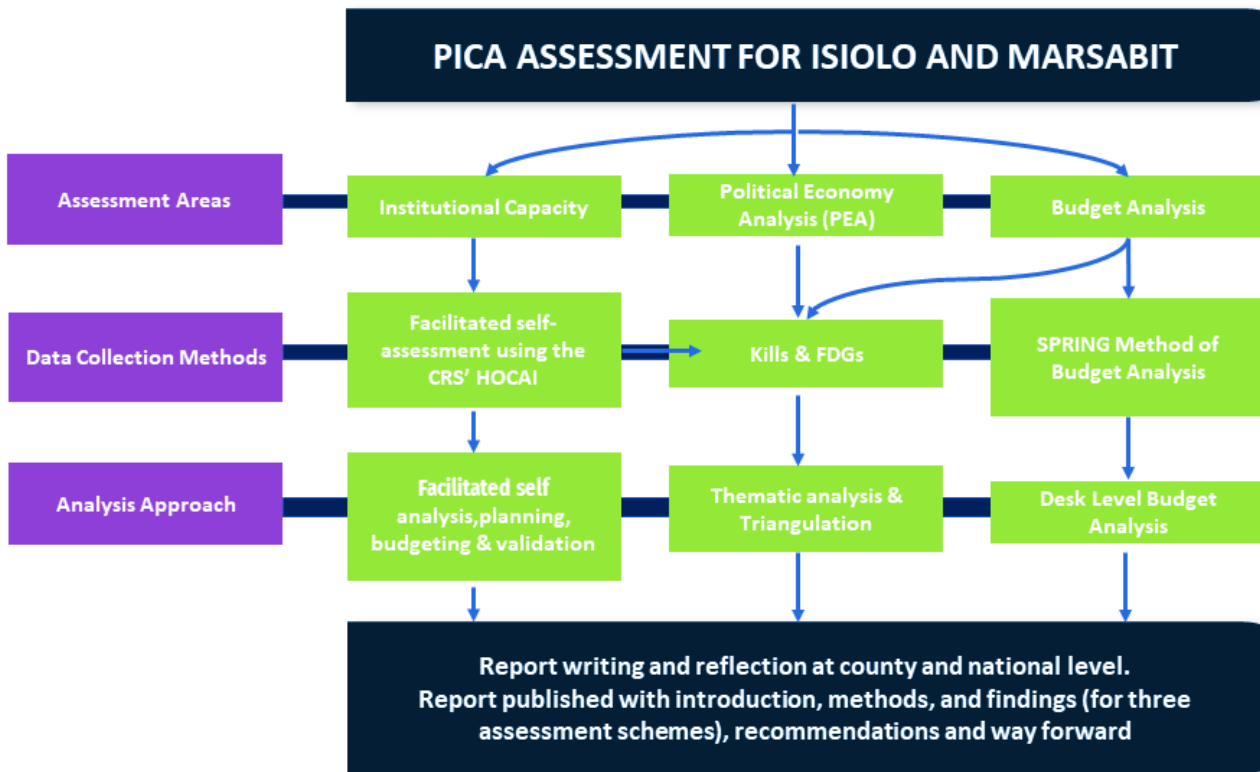
The quantitative nutrition budget analysis was conducted using the USAID Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING) Nutrition Budget Analysis Tool<sup>10</sup>, adapted for the target counties. The budget analyses determined where the funding for nutrition lies within the context of the county multisectoral nutrition action plans that have been developed for both counties. They identify existing resource gaps track financial flows] to identify potential funding mechanisms and/or develop investment cases for nutrition to advocate for the mobilization of funding for nutrition activities. Nutrition budget data were analyzed as per the SPRING Nutrition Budget Analysis Tool. Further complementary qualitative data on budget analysis, as well as political and economy analysis, was collected from selected key informants in the counties, sub-counties, and ward levels. The PEA examined county political and economic dynamics, as well as prevailing relations and influences that affect prospects for successful development, including political commitment to nutrition. Qualitative data was analyzed through the focused theme-analysis process. All data was triangulated to address the assessment objectives and questions. Figure 2-1 is a schematic representation of the assessment design.

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<sup>9</sup> HOCAI was completed through a facilitated process by empowering the multisectoral platforms for nutrition to do a self-assessment. The role of CRS was only to facilitate this process.

<sup>10</sup> <https://www.spring-nutrition.org/publications/series/users-guide-nutrition-budget-analysis-tool>

Figure 2-1: Schematic representation of the assessment design



## Desk Review

Several documents were reviewed to put the assessment into current national and county contexts and inform appropriate process and tools development and adaptations to Nawiri context. The SMART surveys justified this study, indicating the persistent and cyclic nature of acute malnutrition in both counties between the years 2015 and 2019 and the clear need to strengthen multisectoral approaches moving forward. This assessment was designed within the context of the Kenya Nutrition Capacity Development Framework (2014–2019) which outlines four capacity themes: systemic, organizational, technical and community related. The first two themes of system-wide and organization capacities were essentially institutional and therefore well covered in the present assessment, but with more focus on issues touching directly on acute malnutrition. The technical capacity theme as outlined by the KNCDF was covered under the adapted HOCAI within the capacity theme of resources (human, financial) and infrastructure, but with much focus on the institutional issues. The assessment did not cover the community capacity theme as outlined in the KNCDF but examined and reflected on the corresponding action and implications of county-level self-proposed goals and community-level efforts.

Owing to their multisectoral nature, a review of the Kenya Nutrition Action Plan (KNAP), first County Nutrition Action Plans (CNAP), County Integrated Development Plans (2013–2018; 2018–2022) and County Annual Development Plans informed the drafting of some of the capacity statements and the categorization of levels of achievements in the capacities.

Various sector-based capacity assessments done in Isiolo and Marsabit Counties were reviewed. It was realized that some of these assessments included institutional components but were more sector-focused and generally completely devoid of multisectoral perspectives. This further justifies the multisectoral approach of the present assessment in the Nawiri context. Sector capacity assessments available for review included those in water and livestock sectors, as well as in both County Integrated Monitoring and Evaluation Systems (CIMES).

The tools reviewed for suitability for the objectives of the assessment included the CRS HOCAI tool, found suitable for highlighting institutional capacity issues needing strengthening. Other documents reviewed highlighted appropriate adaptations for use in the Nawiri context. Within the wide range of tools available for budget analysis, the SPRING method was found suitable for the assessment objectives of budget analysis, as well as being simple to administer within a limited period for the Nawiri Isiolo and Marsabit teams.

## Adaptation of the CRS HOCAI Tool

The CRS adapted HOCAI tool for multisectoral nutrition capacity assessment was developed by the Nawiri team in collaboration with the CRS Partnership & Capacity Strengthening (PCS) Unit. After a desk review on institutional level multisectoral nutrition capacity areas, the team came prioritized 16 capacity areas under five themes (as shown in Table 2-1) aligned with the capacity domains defined by the Kenya Nutrition Capacity Development Framework and the U.N. Network for Scaling Up Nutrition (SUN) Nutrition Capacity Assessment Guidance Package,<sup>11</sup>. The SUN Nutrition Capacity Assessment Guidance Package is intended to support the countries to comprehensively assess capacity needs for effective scale up of nutrition actions and provide a holistic multisectoral, multi-stakeholder, multidimensional and multilevel model for assessing capacity with the objective of sustainable capacity development in nutrition. The adapted HOCAI tool also drew upon several existing tools, including the USAID [Monitoring and Evaluation Capacity Assessment Toolkit: User Guide — MEASURE Evaluation](#) and the CRS Holistic Organizational Capacity Assessment Instrument. The adapted HOCAI tool was piloted in Kenya with the County Government of Isiolo and refined based on feedback from the government, project, and partner staff.

The adapted HOCAI tool is an Excel workbook, with five spread sheets (individually described under the adapted HOCAI process section as steps) and is intended to support county governments in Kenya to identify their strengths and capacity gaps vis-à-vis the Multisectoral Nutrition Implementation standards in five critical areas—(i) Policies, programs, and frameworks; (ii) Resources (human, financial) and infrastructure; (iii) Coordination and partnerships; and (iv) Evidence-based decision-making. Issues of gender, leadership and accountability are integrated across all the capacity areas but are also captured under (v) Cross-cutting issues—and to develop a tailored plan to address identified gaps.

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<sup>11</sup> UN Network for Scaling Up Nutrition (SUN) Nutrition Capacity Assessment Guidance Package

**Table 2-1: County capacity assessment themes and areas**

Capacity themes	Capacity areas
Policies, programs and frameworks	Political commitment and government leadership
	Policy, multisector nutrition strategies and plans
	Supportive operational plans, technical guidance and protocols for implementation of multisectoral nutrition approaches
	Sectoral commitment
Resources (human, financial) and infrastructure	Adequately skilled human resources at all levels
	Performance oversight/supervision/monitoring
	Nutrition financing and resource mobilization
	Infrastructure
Coordination and partnerships	Partnerships, collaborations, and coordination of nutrition actions at all levels
Evidence-based decision-making	Information skills, M&E and reporting
	Effective reporting and dissemination
	Organizational and adaptive learning
	Problem assessment/identification
Cross-cutting issues	Gender and related issues
	Risk management
	Environmental sustainability

## HOCAI Workshop

### During the workshop

The workshop program is as shown in Appendix 2, and the Section, *Adapted HOCAI process*, describes the steps involved. The HOCAI workshop brought together the Isiolo and Marsabit County MSP-N members for a five-day workshop, at a central location away from their counties for full concentration on the process. On day one, joint preliminary sessions were done for the two counties covering an introduction to CRS’ Partnership and Capacity Strengthening<sup>12</sup> assessment principles and an overview of the adapted HOCAI. After the preliminary sessions, the two county teams were split into different rooms (two groups) with facilitators from Nawiri to conduct their self-assessments using the CRS-adapted HOCAI tool for the rest of the four days.

Each group identified a group chair (a different one for each day), and a secretary (also a different one for each of the assessment days), took notes on the deliberations. The role of the chair was to facilitate group discussions, while that of the secretary was to fill in the Excel tool, based on the group discussions and for each step as discussed under the Section, *Adapted HOCAI process*.

### HOCAI participants

The concurrently conducted HOCAI workshops for Isiolo and Marsabit Counties had representations from the departments in the respective MSP-N. The departments shown in Table 2-2 were each represented by one member responsible for addressing acute malnutrition. As shown in Appendix 1, the participants

<sup>12</sup> <https://www.crs.org/our-work-overseas/program-areas/partnership-and-capacity-strengthening>

were mostly at the level of directors and county executive committees (CECs). Nevertheless, some departments were represented by technical persons.

**Table 2-2: Adapted HOCAI participants in Isiolo and Marsabit Counties**

#	The departments	Isiolo	Marsabit
1	MOH – Nutrition	✓	✓
2	MOH - Preventive & Promotive Health	X	✓
3	Agriculture	✓	✓
4	Fisheries	✓	✓
5	Livestock/Veterinary Services	✓	✓
6	Economic Planning	✓	✓
7	Environment & Natural Resources	X	✓
8	Tourism, Gender, Culture & Social Services	X	✓
9	Social Services	X	✓
10	Water	✓	✓
11	Education, Skills Development, Youth and Sports		✓
12	Trade, Industry and Enterprise Development	✓	✓
13	Executive	X	✓
14	Civic Engagement & Public Participation	X	✓
15	Communication	✓	X
16	Public Administration	✓	X

## Adapted HOCAI process

The adapted CRS HOCAI followed the following steps:

**Step 1** – Input of the **institutional data** related to the institution being assessed (name, address, number of sub-counties, etc.)

**Step 2a** - is used to **assess** the current level of various county capacity areas. This assessment sheet contains capacity statements considered as basic capacities for a multisectoral approach to nutrition. The core of Step 2a is CRS’ adapted HOCAI, developed to help the county governments conduct a comprehensive, Nawiri facilitated, county-led self-assessment of their organizational strengths and challenges and develop an action plan to improve organizational functions through capacity strengthening. This section of the adapted CRS HOCAI uses observable statements adapted from various sources. The adapted CRS HOCAI sections use 81 observable statements that are distributed among 15 capacity areas (See Table 2-1 for capacity areas assessed).

**Step 2b** - These **Compiled Capacity Assessment Results**, provide the county governments with a **summary of their results** and allow them to see their strengths and gaps in terms of the self-assessed capacity areas. The worksheet titled Step 2b is generated automatically when worksheet Step 2a is completed, showing summarized percent scores for each of the capacity statements and aggregates for the capacity area. The scores are color coded as follows: 0–29.9% (poor) as red; 30–49.9% (weak) as orange; 50–79.9% (good) as yellow; and 80–100% (strong). While no information input is needed for the Step 2b worksheet, the counties should review it. This summarized information provides the best clues



about what detailed information/notes should be reviewed from the probe-guided conversations to complete the action plans.

**Step 3 – Activities for Action Plan:** The county government uses this worksheet to outline the specific activities required to strengthen the capacities they identified as Level 1, Level 2, or Level 3 during the assessment (Step 2a), and which they plan to tackle during the current implementation period. This exercise is meant to create the activities that will ultimately be included in a capacity strengthening/transition plan.

**Step 4 – Initial Costing:** The county government uses this worksheet to do some initial costing of what they have proposed in Step 2a. These costs will be reviewed by the core team and eventually integrated into the overall county budget within the parameters of county budgetary constraints.

By the end of the five-day workshop, Step 4 had not been completed, and the counties agreed to complete this step once they returned to their respective counties. The MSP-N members also committed to initiating a follow-up of agreed actions using the follow-up guide in the adapted HOCAI tool to track progress, with technical support from the Nawiri team.

## Budget and Political Economy Analysis Data Collection Methods

The budget and political economy analysis was completed after the adapted HOCAI process, and the field work was designed to collate information not only for the objectives under these sections of PICA, but also to supplement the data collected from the adapted HOCAI process. Information was collected using the SPRING tool<sup>13</sup> and KII (for budget analysis) and KII and FGDs (for political and economy analysis), at the county, subcounty and ward levels. The plan was to consider some key informants and FGD participants at the county level and cover at least two sub-counties.

SPRING's four-step process is described below:

- Step 1: Define the scope with colleagues: The analysis focus was determined by the assessment questions of the budget analysis part of the PICA.
- STEP 2: Meet with stakeholders: The MSP-N members from both counties were briefed on the process, documents required and the information that will be collected through the KIIs.
- STEP 3: Gather documents: The departmental budgets for the past four years were gathered from the Department of Economic Planning, the custodian of the budget.
- STEP 4: Extract Data: It is in this step that the Budget Analysis Tool was used. The first thing was to identify nutrition-related actions (or activities, interventions, strategies) from the CNAP. Next, all budget documents for any line items that included the nutrition-related actions mentioned in the plan(s) or keywords were identified. For all such line items, "Section A (green columns)" found on the "Data Sheet" tab of the Budget Analysis Tool was completed.

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<sup>13</sup> The tools and guidance on how to use the SPRING tool can be found in this link: <https://www.spring-nutrition.org/publications/series/users-guide-nutrition-budget-analysis-tool>

The KII tools were revised after the adapted HOCAI process to consider issues that arose during the process and were administered to respondents from Isiolo and Marsabit Counties. These respondents included: Governors or their deputies; Directors of health, agriculture, water/environment, education, and social protection; Technical leads in the sectors represented in MSP-N if already selected; Subcounty administrator; Chair of the Sub-County Development Committee (SCDC); Ward administrator; and the chair of the Ward Development Committee

FGD guides were also revised after the adapted HOCAI process to cover some information gaps identified in the participatory self-assessment and were administered to the technical lead persons (the directors) in each county. The FGD guide questions primarily collected converging and diverging views on the perspectives and attitude towards the specific issues on the institutional capacity, budget and political economy in the counties.

## Sampling of the sub-counties

The KIIs at the ward level provided twin contexts, not for comparison but for the collection of diverse issues to be considered to inform the next phase of Nawiri program planning. In Isiolo County, there are only three sub-counties and one (Isiolo Central) was excluded since pre-testing was done in that location—leaving Garbatulla and Merti as the sub-counties of consideration for the assessment. From each subcounty, one ward that had both the ward administrator and chair of the ward development committee was randomly selected— Garbatulla and Merti wards. Marsabit County has four sub-counties, namely Saku, Moyale, Laisamis and North Horr. Laisamis and North Horr were selected for the assessment due to their rural nature and because they both represented the worst-off scenarios in terms of adequacy and services delivery by the county government. Kargi and Maikona Wards were selected from the two sub-counties, respectively, owing to their comparatively higher level of acute malnutrition based on the 2019 SMART survey (Figure 1-1).

## Data entry and analysis

The SPRING methodology of budget analysis was adopted for use as per the SPRING manual. The KII and FGD data were entered appropriately into the Excel worksheet and coded accordingly for analysis. The analyses were done per the objectives and research/assessment questions, ensuring that there was an appropriate triangulation of responses and analyses from different participants. The theme categorization method of analysis of qualitative data was used. The draft findings were based on the agreed outline and presented per county.

## Data Quality Assurance

To assure data quality, the following measures were taken:

1. **Training of the field teams:** Training of the field teams was completed centrally for the two counties. The trainings were for:
  - a) The HOCAI facilitators (and note takers) on common skills in facilitating discussions and qualitative data collection including participatory approaches and note-taking skills, expected challenges and potential solutions (troubleshooting). The training also included the skills to promote the participation of all the MSP-N members and moderate domineering individuals.
  - b) Budget analysis, KII and FGDs enumerators in conducting budget analysis data collecting, interviewing techniques, note taking and trouble shooting.

2. **Pretesting and standardization of tools:** Pretesting was done after the training, where the facilitators and notetakers (for HOCAI) and the enumerators (for budget analysis and KIIs) were guided to apply the tools in a nonparticipating subcounty (Isiolo central).
3. **Recording the interviews:** Where appropriate, and with the permission of the participants and key informants, discussions and KIIs were conducted in English, recorded, and transcribed to update and cover gaps in the notes taken.
4. **Supervision:** The Nawiri consultants supervised the enumerators daily to ensure that the assessment protocol was followed, and that quality data was assured. There were daily debriefings with enumerators to discuss and address field challenges experienced, including those related to data.

## Ethical Considerations

The study paid attention to the ethical issues highlighted in the ToR and discussed during inception meetings for this assessment. These included:

1. **Informed consent and confidentiality:** The following measures were taken to secure informed consent of the respondents: explaining the objective of the study; the kind of information required and the intended use; and above all, providing reasons for choosing the respondent. The interviews were conducted behind closed doors to assure privacy. The field team considered the possibility of access being both granted and denied and planned for both. The consultants ensured that the protocol was followed in adherence to CRS and other Nawiri partner regulations. All KII and FGD notes were coded and stored safely, with access only after a reasonable request submitted to CRS. All recordings were done only after obtaining permission to record.
2. **COVID -19 measures:** The general national and county COVID-19 guidelines were strictly followed, including the use of masks and social distancing and strict adherence to curfew times.

## Report writing

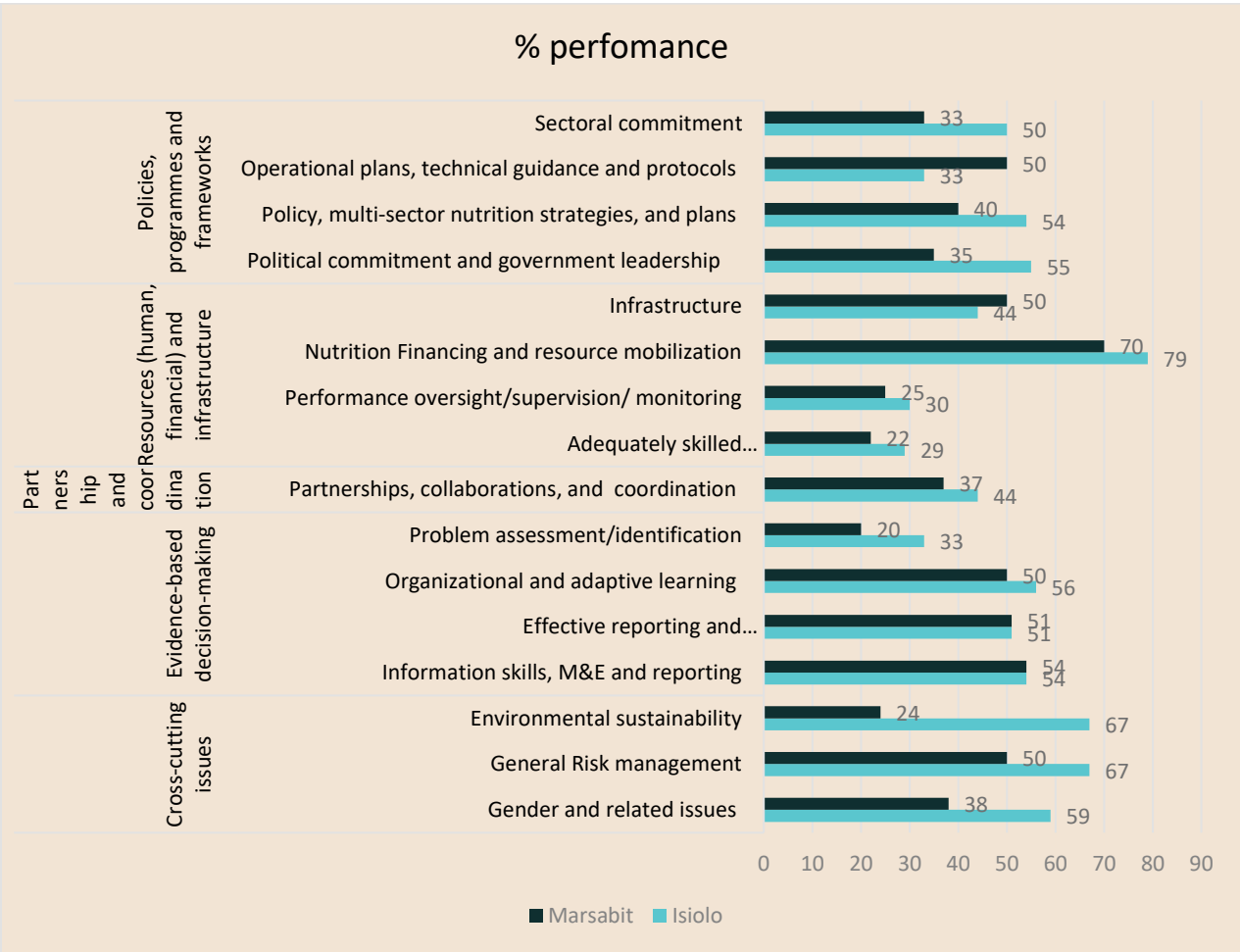
The PICA report was drafted using an agreed format, with findings reviewed and reflected on with the Nawiri team before validation by key county stakeholders in subsequent workshops. A PowerPoint presentation of the key findings and recommendations was prepared and used by CRS and VQC consultants in a validation exercise attended by county MSP-N members and the Nawiri team. The half-day virtual validation workshop presented the PICA assessment findings and recommendation, followed by plenary discussions on the findings. It was unanimously agreed that the findings did reflect the situation in the counties. Some recommendations were amended to reflect proposals from the meeting. A two- to three-page executive summary, focused on key findings and recommendations, was developed for each county report. The findings and recommendations were disaggregated per county.

# Findings

## Institutional Capacity

In this section, the strengths of Isiolo and Marsabit Counties in the various capacity areas are depicted as analyzed in Step 2b of the adapted CRS HOCAI process. Figure 3-1 below summarizes the overall performance of the two counties in the various capacity areas. The two counties did not score a “strong” performance level in any of the 16 capacity areas studied. In most of the capacity areas, the performance was classified as “good” (seven areas in Marsabit and 10 in Isiolo) and in five areas in Isiolo and six in Marsabit, the performance was classified as “weak.” In Isiolo, under the resource theme, the capacity area on adequate skills was rated as “poor,” while Marsabit had three of the capacity areas classified as “poor.”

**Figure 3-1: Summary of the capacity status as categorized by the findings of the adapted HOCAI assessment**



Poor	0-29.9%
Weak	30-49.9%
Good	50-79.9%
Strong	80-100%

Overall performance levels shown in figure 3-1 can be compared with the findings of subsequent HOCAI processes in the same county during or post-intervention to gauge progress, and with other counties to foster learning and “cross-pollinate” approaches. Albeit the design of the assessment was not for comparing the two counties, they can learn from each other. Isiolo performed better in sectoral commitments; policy; multisector nutrition strategies and plans; political commitment and government leadership; problem assessment/identification; environmental sustainability; and gender and related issues. On the other hand, Marsabit performed better under infrastructure and operational plans; technical guidance; and protocols. The variations were generally due to the differing level of investments and efforts by the two counties.

For each capacity area, the summary of the county performance has been provided. Input from the HOCAI participants has been summarized from the documented notes and the overall direction of actions at the county—and implications for actions at the subcounty and ward levels—have been outlined in the table and summarized in the text.

Consensus on goal statements (respective to every capacity statement) informed the given implications for cascading the actions down to subcounty, ward and possibly sub-ward levels.

## Policies, programs, and frameworks

### Political commitment and government leadership

The performance in the capacity area was scored as “good” in Isiolo county and “weak” in Marsabit county.

In Isiolo county, county assembly support and attention to multisectoral nutrition programming were particularly poor, indicating the need for awareness and sensitization among the politicians. Sectors represented in the MSP-N had a good understanding of the multisectoral approach in nutrition. The CIDP is nutrition-sensitive and nutrition-specific, especially in Chapter 4 and Chapter 5 of the document. Participants unanimously recognized the need for increased support for nutrition and the attendant budget, and that lobbying and advocacy for the same was critical. The need for multisectoral nutrition support by the high-ranking leadership was also reiterated. Some participants thought that the county governor was too busy to be a nutrition champion and opted to appoint the county executive committees (CEC) as nutrition champions. On the other hand, some asserted that the governor had been, on several occasions, advocating for child nutrition issues in the media and has been active in supporting enterprise development for women, leading to the health and nutrition of children. Nevertheless, the county planned to have the governor officially engaged as the nutrition champion, with a clear TOR that emphasizes making relevant nutrition-related public statements on a regular basis. This will be supported by a functional county assembly multisectoral nutrition committee. These actions will be implemented at all other levels (as shown in Table 3-1), including nominating a county-level nutrition champion, with a clear TOR, to work closely with the MSP-N on implementing the efforts and declarations of the governor. The nutrition champion would work hand in hand with the multisectoral structures formed at the subcounty and ward level.

In Marsabit County, participants argued that there was no high-level leadership in support of nutrition and that nutrition was not a priority in the budgeting processes, which explains the low implementation of the costed CNAP and relevant nutrition activities within CIDP, as well as the limited focus on monitoring and evaluating the actions within the two strategy documents—CNAP and CIDP. The governor had not been officially identified as the county nutrition champion, and hence no nutrition-related statements

were being made from this highest-level office. Nevertheless, participants agreed to confirm the governor as the nutrition champion, with clear Terms of Reference (TOR). Currently, the Health CEC is the unofficial champion for nutrition, but with no clear TOR. The team agreed to advocate for political commitment and government leadership actions, targeted at achieving county nutrition goals. They also agreed to activate the nutrition championship, develop a clear M&E plan for nutrition-specific and sensitive targets in the CIDP, create nutrition awareness among the county executive and integrate nutrition issues in health and other county assembly committee activities. The envisaged implications for community-level efforts include the nomination, capacity building and guiding of the subcounty and ward level champions, ensuring that the county-level champion statements and actions are cascaded to the community level, and ensuring that implementation and M&E for nutrition are an integral agenda for multisectoral platforms at sub-county and ward levels. The capacity score and goal statements, and implications for community-level actions, are shown in Table 3-1. The same has been done for other capacity areas.

**Table 3-1: Political commitment and government leadership**

#	Capacity statement		Capacity score	Goal statement as drafted by the counties	Implications for cascading capacity efforts up to the community level
1	County has high level leadership in support for nutrition.	Isiolo	Good	Governor officially engaged as nutrition champion with a clear TOR	Nominate subcounty and ward nutrition champion with clear TOR
		Marsabit	Poor	Committed high-level leadership within the county in support of nutrition activities	Nominate and orient subcounty-, ward- and even village-level nutrition champions with clearly defined TOR
2	Evidence of sustained commitment to act, including integration of nutrition-specific and nutrition-sensitive targets and priorities into the CIDP at county and subcounty level, and alignment with the corresponding components of the County Nutrition Action Plan (CNAP).	Isiolo	Good	Improved systematic multisectoral M&E and communication systems	Draft a simple framework and tool for monitoring progress in multisectoral nutrition at ward level  Streamline reporting systems for multisectoral nutrition from ward to subcounty and to the county level
		Marsabit	Weak	Developed clear M&E plan for nutrition-specific and nutrition-sensitive target in the CIDP and communicate to the executive	Capacity built the ward- and village-level development committees to come up with proxy but practical indicators to track progress and make informed decisions in multisectoral nutrition

3	Public statements by leadership in support of nutrition that includes a multisectoral reference.	Isiolo	Good	Public statements by Governor and CECM well-documented and follow-up actions taken	MSP-N to pass over the governor public statement to subcounty- and ward-level champion to pass on and act on the declaration at the two levels
		Marsabit	Good	Well-consolidated public statements by county leadership in support of nutrition in multisectoral approach	Subcounty and ward structures (potentially the subcounty and ward development committees) and champions are made aware and act on the public statement by the governor/champion
4	County assembly support and attention on multisectoral nutrition programming.	Isiolo	Poor	County assembly multisectoral nutrition committee functional and bills and by-laws passed	Form and operationalize the multisectoral platforms at the subcounty and ward level (potentially the subcounty and ward development committees)
		Marsabit	Poor	A legal framework and expanded health committee to include nutrition activities	Subcounty and ward structures include multisectoral nutrition as standing agenda

**Policy, multisector nutrition strategies and plans**

Overall, participants in Isiolo County classified the county strength in this capacity area as “good.” Isiolo County now has a County Nutrition Action Plan (CNAP) that is multisectoral, quite different from the previous one which was more focused on nutrition-specific intervention. The team agreed that while sector operational plans only existed in the CIDP, the CNAP was inclined more to the health sector and was not well linked to the county budgeting processes. Further, the CNAP and other M&E frameworks exist, but are not referenced during nutrition program planning and implementation. Partners seem to have their own plans out of the CNAP. The team agreed that there is a need for standard operating procedures (SOPs) for multisectoral nutrition policies and plans, and that the nutrition focal persons from each department should be sensitized on the same. Actions will focus on linking sector plans to a well-monitored, tracked and financed CNAP and ensuring that relevant, evidence- and learning-informed, multisectoral policies and frameworks are developed after extensive consultations with a wide range of stakeholders. Efforts will also be made to include cross-cutting issues, like environmental sustainability concerns and key actors’ commitments to existing legislation and policy frameworks. Implications for community-level actions include activating or forming the subcounty and ward multisectoral committees and linking their well monitored and cross-cutting issues/sensitive plans to the MSP-N plans. This will include ensuring that the subcounty and ward multisectoral platforms have drafted TORs, are highly inclusive in composition, contribute to the CNAP review and budgeting and that they have and use effective tools for planning and monitoring.



In Marsabit County, the overall score in this capacity area was determined as “weak.” Participants indicated that the multisectoral plans existed in the CIDP and that the costed CNAP reflected the nutrition-related plans—explaining why the capacity statement on a costed county multisector plan was rated “strong.” It was, however, noted that the CNAP actions, and the accompanying annual plans, required inspiration and strategic direction from top leadership in the governor’s office. Further, it was noted that CNAP is not directly budgeted for by the county government and that the sectoral budgets are not linked to it. There has not been a review of the CNAP, a regular plan for its review is not in place and the plan does not have a robust M&E plan. It was also apparent that the nutrition-related regulation frameworks existed but have not been fully enforced. The main planned actions will focus on aligning the sector annual work plans to the CNAP, developing comprehensive nutrition-sensitive budgets and a common result framework as guided by CNAP. Subsequently, these efforts should be cascaded to the subcounty, ward, and village levels, ensuring multisectoral structures match the county actions and ensuring a two-way communication and information flow between the MSP-N and lower-level structures. This will include the alignment of the subcounty and ward plans and budgets to the CNAP and promoting and supporting the implementation of county policies and strategies at subcounty, ward and sub-ward levels.

**Table 3-2: Policy, multisector nutrition strategies and plans**

#	Capacity statement		Capacity score	Goal statement as drafted by the counties	Implications for cascading capacity efforts up to the community level
1	Existence of a costed multisectoral Nutrition Action Plan (CNAP), and sectoral nutrition plans and alignment between national and county plans.	Isiolo	Good	All sectors under the MSP-N have linked operational plans to the CNAP	The multisectoral plans of the multisectoral committees at subcounty and ward levels linked to MSP-N plans
		Marsabit	Strong	Well-aligned CNAP and sector annual work plans	Align the sub-counties and ward plans and annual work plans to CNAP
2	CNAP annual operational plan exists, is fully costed, and is reviewed regularly to ensure adherence to CNAP implementation schedules and budgets and to inform annual planning processes.	Isiolo	Good	The CNAP operational plans are fully costed, and progress is regularly monitored	Support creation of a system for monitoring progress of the multisectoral plans at subcounty and ward levels
		Marsabit	Poor	Develop, adopt, and implement a multisectoral operational annual plan specific to nutrition and review it annually	Align the sub-counties and ward plans and annual work plans to CNAP
3	Budget developed with funding released on a timely manner to finance the CNAP annual operational plan implementation.	Isiolo	Poor	Budget developed with funding released on a timely manner to finance the CNAP annual operational plan implementation	Contribute to the CNAP budget review by providing community-level budget needs
		Marsabit	Poor	Fully developed budget for a multisectoral operational	Develop the subcounty- and ward-level budgets



				plan for implementation, with funds released on schedule	on multisectoral nutrition to inform the county-level budgets
4	Evidence that implementation of the CNAP is monitored regularly (quarterly at a minimum) and evaluated.	Isiolo	Weak	CNAP is monitored regularly (quarterly at a minimum) and evaluated	Half-yearly monitoring of the subcounty and ward-level multisectoral actions
		Marsabit	Weak	Well reviewed and monitored common result framework every quarter	N/A
5	Multisectoral nutrition policies and plans developed are informed by evidence and learning experience.	Isiolo	Good	Multisectoral nutrition policies and plans developed are informed by evidence and learning experience	N/A
		Marsabit	Poor	Fully developed and implement clear SOPs for multisectoral nutrition policies and plans	Support the drafting and dissemination of a standard guide to assist subcounty and ward structures (potentially the subcounty and ward development committees) to come up with multisectoral plans
6	Adequate regulatory multisectoral frameworks in place, monitored and enforced (e.g., food fortification regulations, International Code of Marketing of Breastmilk Substitutes, maternity protection, tax laws, water regulation frameworks etc.).	Isiolo	Good	Adequate regulatory multisectoral frameworks in place, monitored and enforced	Draft a simple framework and tool for monitoring progress in multisectoral nutrition at ward level
		Marsabit	Good	Fully enforced and monitored regulatory frameworks for all sectors	N/A
7	Existence of institutional processes and procedures for policy development and planning that engage broader stakeholder participation from all sectors that contribute to nutrition (agriculture, health, trade, etc.)	Isiolo	Good	Existence of institutional processes and procedures for policy development and planning that engage broader stakeholder participation from all sectors that contribute to nutrition	Draft the subcounty and ward-level multisectoral committees TORs to include as many possible relevant stakeholders in those levels
		Marsabit	Weak	Well-structured guidelines for domestication and development of sector policies	N/A

	including vulnerable populations (e.g., CSO and private sector, People with Disabilities, Youth).				
8	Awareness of and commitments to existing legislation and policy frameworks among key actors at all levels (e.g., government, CSO, private sector).	Isiolo	Good	Awareness of and commitments to existing legislation and policy frameworks among key actors at all levels	Mobilize stakeholders and create awareness among them on the role of multisectoral committees and their engagements in these committees
		Marsabit	Weak	Initiated well-documented communication processes with commitment from various actors	Draft, disseminate and implement an explicit information flow framework from the multisectoral structures in villages to wards, to sub-counties and to the MSP-N at the county
9	Environmental sustainability considerations are integrated into food and nutrition policies of the county.	Isiolo	Weak	Environmental sustainability considerations are integrated into food and nutrition policies of the county	Include in the environmental sustainability as key aspects for monitoring and tracking by subcounty and ward level by the multisectoral platforms
		Marsabit	Weak	SMART environmental sustainability integration in county food and nutrition as well as sectoral strategic plans	Integrate into the subcounty and ward-level development plans, environmental sustainability efforts

**Supportive operational plans, technical guidance, and protocols for implementation of multisectoral nutrition approaches**

The Isiolo County performance in this capacity area was scored as “weak,” while in Marsabit it was scored as “good,” mainly due to current efforts to ensure that there is the availability of guidelines at the service provision level. In Isiolo, participants reiterated that sector policy and the program do not conform to multisectoral guidance, i.e., individual sector guidance exists but there is no specific multisectoral guidance to align them to be nutrition sensitive. Additionally, sector coordination and technical forums exist at the county level but not at the subcounty, ward and community levels. Also, there are no efforts geared toward scaling up civic education and public participation on issues influencing nutrition. Actions planned in this capacity area aimed at ensuring that sector guidelines are disseminated at all levels of service provision at county, subcounty and ward level and ensuring close monitoring of guideline implementation, particularly at the lower levels. In Marsabit, the national guidelines are in use, and some have been adopted and contextualized to the counties. Nevertheless, some guidelines have not been

disseminated, with some only partially disseminated to front-line service providers. It was apparent that fully cascaded mechanisms for dissemination/implementation and monitoring of multisectoral plans was needed. The full dissemination of the sector guidelines up to the lowest levels of service provision should go hand in hand with county efforts to cascade the CNAP to the ward and village level.

**Table 3-3: Supportive operational plans, technical guidance, and protocols for implementation of multisectoral nutrition approaches**

#	Capacity statement		Capacity score	Goal statement as drafted by the counties	Implications for cascading capacity efforts up to the community level
1	Availability and adherence to guidance, protocols and procedures for use in service delivery (e.g., dietary guidelines).	Isiolo	Weak	Guidelines to be disseminated to all levels and guidelines to be adhered to	Multisectoral committees to monitor and track dissemination of the guidelines in all sectors also at ward level
		Marsabit	Good	All service providers clearly mapped, and guidelines disseminated at all levels	All front-line workers in all nutrition-sensitive and nutrition-specific sectors provided with and oriented on all relevant guidelines
2	Existence of adequate guidance to support county and sub-counties in developing, implementing, and monitoring multisector plans to address malnutrition.	Isiolo	Weak	Existing guidelines are disseminated at all subcounty levels	Multisectoral committees to monitor and track dissemination of the guidelines in all sectors also at ward level
		Marsabit	Weak	Fully cascaded mechanism for dissemination/implementation and monitoring of multisectoral plans to all levels (CNAP)	Dissemination of and orientation on the CNAP at subcounty, ward and village levels

## Sectoral commitment

In Isiolo County, the overall county capacity in this area was scored as “good.” Out of the 13 key areas in delivering multisectoral nutrition services within the CNAP, seven are nutrition-specific (health department), three are nutrition-sensitive and the other three are with the environmental department. In the education sector, for instance, the outputs are clearly defined but there is no responsibility line for delivering multisectoral nutrition services. There is no documentation showing communication on sector roles and responsibilities in delivering multisectoral nutrition services communicated to sector staff. Nutrition-sensitive targets, priorities and activities are in place at county and sub-county levels, but they are not budgeted for. There was broad consensus from the team that the roles of the sectors in multisectoral nutrition need to be communicated to all and reflected in sector-specific and/or sector-sensitive plans, which should have well-defined targets and accompanying budgets. These efforts should be cascaded to the subcounty and ward levels.

Sectoral commitments in Marsabit County were scored as “weak.” Sectoral and departmental roles in CNAP are well articulated, but not for all sectors/departments. Most departments are, therefore, unaware of their roles and responsibilities on the CNAP, necessitating the need to communicate the same to them. It was also highlighted that the County Integrated Monitoring and Evaluation System (CIMES) was in place, but the CNAP M&E system was not in place. Actions planned both at county, subcounty and ward levels revolved around clearly defining the multisectoral roles for all sectors and strengthening tracking of nutrition targets.

**Table 3-4: Sectoral commitment**

#	Capacity statement	County	Capacity score	Goal statement as drafted by the counties	Implications for cascading capacity efforts up to the community level
1	The roles and responsibilities of each department/line sector clearly defined.	Isiolo	Good	The roles and responsibilities of each department/line sector clearly defined	Roles and responsibilities of engaged sectors in subcounty and ward multisectoral committees defined and disseminated
		Marsabit	Weak	Well-defined roles and responsibilities for all key sectors on contribution to nutrition improvements	The roles and responsibilities of all the village, ward and subcounty actors in multisectoral nutrition clearly defined
2	Evidence of sustained (over the years, not one-off) commitment to act, including integration of nutrition-specific and nutrition-sensitive targets and priorities into the sectoral plans at the county and subcounty levels.	Isiolo	Weak	Sectoral plans have nutrition-specific and/or nutrition-sensitive targets and priorities with clear monitoring plan	Plans with targets developed for the multisectoral committees at subcounty and ward levels
		Marsabit	Weak	Improved/strengthened monitoring and communication of nutrition-specific/sensitive targets and priorities in sectoral plans	The subcounty, ward and village multisectoral structures are oriented on their respective roles and responsibilities, sectoral priorities and targets

## Resources (human, financial) and infrastructure

### Adequately skilled human resources at all levels

In Isiolo, the overall score for this capacity area was determined as “weak.” There are no sector nutrition focal persons, save for the health department, and sector organograms do not provide for this function. This indicated that nutrition functions were not a priority in many sectors. The existing focal persons at sector levels did not have TORs and job descriptions, save for the health sector, and had not received any form of training due to lack of budget allocation for this purpose. While the level of skills and knowledge on service provision is high in the line sectors, there is no TOR for respective nutrition functions. The job descriptions for other sector/departmental staff are well defined but do not integrate the nutrition functions. Further, there are no incentives and plans for training or budgets to support the same in the nutrition-related sectors and plans. All sectors needed to clearly define their roles in multisectoral nutrition and have nutrition focal persons with clear TORs/JDs defined for their respective line departments and communicated accordingly. Additionally, staff working on nutrition issues needed more training for effective service provision to be well incentivized and funds allocated for these efforts. For corresponding response at the subcounty and ward levels, the multisectoral committees need to have wide representation from the appointed stakeholders and orientation on their roles and responsibilities. The committees need to also monitor capacity building/training and incentivization efforts at those levels.

In Marsabit County, the overall status in this capacity area was scored as “poor.” Not all the departments have nutrition focal persons at the county and subcounty levels. Robust efforts are needed in all the areas assessed. Participants agreed on the need to clearly define sector nutrition responsibilities and develop an explicit working, capacity enhancement and incentive framework for the nutrition focal points. Conversely, the subcounty- and ward-level development committees need to have nutrition focal points with clear TORs, orientation in nutrition and a reward system for best-performing wards in multisectoral nutrition.

**Table 3-5: Adequately skilled human resources at all levels**

#	Capacity statement		Capacity score	Goal statement as drafted by the counties	Implications for cascading capacity efforts up to the community level
1	Existence of “focal person” for nutrition within each departmental/sectoral office at county and subcounty level, authority, and support to effectively represent their line departments in nutrition multisectoral and multistakeholder processes.	Isiolo	Weak	Nutrition focal persons exist in all departments and formally appointed with clear TOR.	All sectors in MSP-N represented in the subcounty and ward multisectoral committees  Sector representatives in the subcounty and ward multisectoral committees are formally appointed and oriented on their roles and responsibilities
		Marsabit	Weak	Appointed nutrition focal person in all sectors with clearly defined TOR	Draft and sensitize on TOR for subcounty-, ward- and village-level multisectoral nutrition focal points
2	Clarity, appropriateness, and up-to-date job descriptions of nutritionists/nutrition focal persons at county, sub-county and ward levels level that have been effectively communicated to ensure that every staff is clear on his/her role.	Isiolo	Poor	All nutrition focal persons have written job descriptions stating their nutrition roles, which are annually updated	As Isiolo (1) Above
		Marsabit	Poor	Well defined job descriptions for nutrition focal person and regularly updated	N/A
3	Clarity of the roles and responsibilities of other staff in line departments on delivering nutrition services, which will be included in their job descriptions, workplans and performance plans, with time and budget allocations.	Isiolo	Poor	The organizational structure and other key documents adequately define roles and responsibilities of other staff in line departments in delivering multisectoral nutrition services	As Isiolo (1) Above
				Roles and responsibilities in delivering nutrition services have been communicated to staff in line departments	As Isiolo (1) Above

		<b>Marsabit</b>	<b>Poor</b>	Well defined specific nutrition roles and responsibility of line departments	Orientation of the frontline workers at ward level on their specific roles and responsibilities
<b>4</b>	Availability of adequately qualified staff with skills and agency, as well as access to capacity development opportunities (in-service training) to support the development and oversight of multisector plans on nutrition and to ensure optimum performance in multisectoral nutrition interventions at all levels.		<b>Weak</b>	Staff are equipped with skills, agency as well as access to capacity development opportunities	Monitor/track capacity building/training efforts in the sub-county and wards and report the gaps
			<b>Poor</b>	Capacity enhancement for staff on nutrition aspects to ensure optimum performance on multisectoral nutrition intervention	Orientation and capacity enhancement for ward -level sector by sector staff on nutrition
<b>5</b>	Existence and clarity of organizational structure, HR management, decision-making lines, reporting and supervision lines explicitly showing the functional responsibilities and lines of authority as it relates to the nutrition aspects of the line ministry.	<b>Isiolo</b>	<b>Good</b>	Updated organizational chart or organogram with description of roles and responsibilities and lines of authority as it relates to the nutrition aspects of the line ministry.	As Isiolo (1) above
		<b>Marsabit</b>	<b>Poor</b>	Well-defined organization charts on nutrition activities across all sectors	N/A
<b>6</b>	There are incentives (financial and non-financial) for the county staff in nutrition-related sectors to delivery services.	<b>Isiolo</b>	<b>Poor</b>	There are incentives (financial and non-financial) for the county staff in nutrition-related sectors to delivery services	Ward multisectoral committees to monitor and report incentive gaps to the subcounty and county
		<b>Marsabit</b>	<b>Poor</b>	Established innovative incentives for county staff on nutrition-specific and nutrition-sensitive areas	Establish and implement a reward system for best performing wards in multisectoral nutrition
<b>7</b>	Existence of equitable accessible staff training and development plans,	<b>Isiolo</b>	<b>Poor</b>	Existence of equitable accessible staff training and development plans, including training opportunities for	As in Isiolo (5) above

	including training opportunities for functional and technical capacities.			functional and technical capacities	
		Marsabit	Poor	Developed harmonized County training and development plans	Develop and implement training and orientation for the ward- and village-level multisectoral structures in coordinating sectoral nutrition actions at ward and village level
8	The plan and allocation of funds for staff training and development are equitable.	Isiolo	Poor	The plan and allocation of funds for staff training and development are equitable	As Isiolo (5) above
		Marsabit	Poor	Developed harmonized county training and development plans	N/A

### Performance oversight/supervision/ monitoring

In Isiolo and Marsabit Counties, the overall score for this capacity area was “weak.”

In Isiolo, staff appraisal forms are filled out, but no actions are taken based on appraisal status, and capacity development and performance are not linked to CNAP and CIDP. Support supervision, on-job-training (OJT) and mentorship activities are ongoing, but feedback is not provided nor is it linked to staff appraisals. Further, there are no tools for joint supportive supervision on multisectoral nutrition implementation. The county will aim to develop a system to jointly supervise frontline service providers and recognize their efforts in providing both nutrition-sensitive and nutrition-specific interventions. Conversely, at the subcounty and ward levels, the multisectoral committees will develop tools for multisectoral joint planning, supervision, monitoring and reporting to the MSP-N.

In Marsabit, there are no systems for performance management, supervision, oversight, incentivization or organizational charts. Further, the multisectoral activities have not been factored into staff performance, development, and evaluations. It was also reported that the implementation of multisector activities had been not aligned across all sectors, and there was no harmonized joint supervision plan and standardized reporting tools. There is a need to improve feedback systems on all performance appraisals and find practical ways to document how various sectors link in nutrition, including scaling up technical oversight and joint monitoring. At the ward and county levels, efforts should focus on the capacity of the subcounty and ward structures (potentially the subcounty and ward development committees) in coordinating, monitoring, and reporting multisectoral nutrition action in the subcounty and wards.



**Table 3-6: Performance oversight/supervision/monitoring**

#	Capacity statement		Capacity score	Goal statement as drafted by the counties	Implications for cascading capacity efforts up to the community level
1	A functional performance management system is in place that guides staff recognition, promotions, and other rewards.	Isiolo	Weak	A functional performance management system is in place that guides staff recognition, promotions, and other rewards	N/A
		Marsabit	Weak	Strengthen Performance Feedback System (PFS) and annual appraisals and feedback for all sectors	Half-yearly appraisal of the subcounty and wards development committees in coordinating the nutrition multisectoral actions and giving feedback
2	Documented guidance linking all county multisectoral nutrition capacity development initiatives (support supervision, training, monitoring, performance reviews, mentorship and coaching, peer learning, continuous professional education, etc.), with multisectoral nutrition activities integrated into staff performance and development plans.	Isiolo	Weak	Documented guidance linking all county multisectoral nutrition capacity development initiatives	Ward multisectoral committees to report progress, challenges and plans to the MSP-N through the county multisectoral committees using developed tools
		Marsabit	Poor	Developed and documented guidance linking county multisectoral nutrition capacity development initiatives	Draft a multisectoral nutrition reporting formats for subcounty and ward structures
3	Formal processes for technical oversight/supervision/monitoring of the nutrition-specific and nutrition-sensitive portfolios of relevant staff from the line departments.	Isiolo	Weak	Formal processes for technical oversight/supervision/monitoring of the nutrition-specific and nutrition-sensitive portfolios of relevant staff from the line departments	Draft and disseminate tools for multisectoral joint monitoring for services offered at ward level
		Marsabit	Weak	Strengthen technical oversight, supervision, coaching, mentorship, and accompaniment for staffs	Training and supervision of the ward structures (potentially the ward development committees) in supporting and coordinating multisectoral actions
4	Staff that work in line ministries that contribute to nutrition have nutrition-related	Isiolo	Weak	Staff that work in line ministries that contribute to nutrition have nutrition-related individual work	Multisectoral committees at sub-county and ward

	individual work plans and goals for the year.			plans and goals for the year.	level have annual plans and goals
		Marsabit	Poor	Well developed, adapted, and implemented nutrition-related workplans and goals for individual staffs for line department	Support the development of ward committees workplans in coordinating the sectors at that level
5	Sectors jointly align activity implementation, plan, and execute joint supervision and monitoring of activities.	Isiolo	Poor	Sectors jointly align activity implementation, plan, and execute joint supervision and monitoring of activities	Support joint implementation and supervision of the multisectoral plans at subcounty and ward levels
		Marsabit	Poor	Develop well aligned, implemented, jointly monitored multisectoral nutrition works plans	Orient subcounty and ward committees on supervision/ tracking/monitoring of multisectoral actions

### Nutrition Financing and resource mobilization

In Isiolo, participants scored this capacity area as ‘strong’. The county executive is involved in the budgeting process and review and monitoring, while the technical staff are not involved. There are significant variations between the budgets and allocations, including limited budget monitoring and feedback. Further, the CNAP is budgeted for, but not funded, and a system to detect and correct duplication of funding from the same interventions is not in place. changes in budgets are always communicated from the sector chief officers. Based on these discussions, the county planned to disseminate the budgeting tools at county and sub-county, including the CNAP financial targets. The county team also planned to establish a system to detect and prevent duplication of funding, and to ensure staff have adequate knowledge, skills and experience on the budget process, negotiations, and budget/activity controls. Further, at ward levels, appropriate budgeting tools will be disseminated, and capacity built on use of relevant budgeting and reporting tools for relevant budgeting committees. All ward plans will be accompanied by budgets and all stakeholders will be made aware of these plans.

In Marsabit County, this capacity area was scored as “good.” Formally documented and approved planning and budgeting tools for CNAP and CIDP exist, and the CNAP annual operation plans and budget include programmatic and financial targets. There are ongoing efforts to operationalize the CNAP at the departmental level and to align, plan and implement sector activities with the CNAP targets. The budget processes were well understood by the departmental staff, but budget negotiation and advocacy skills were limited. Most sector budgets and plans were not aligned to the CNAP targets, budget reviews were lacking, and sector budget capacity needed to be enhanced. As shown in Table 3-7, corresponding efforts may be put in place to support community participation in the budgeting process and especially in advocating for increased funding for nutrition-sensitive and nutrition-specific sectors.

**Table 3-7: Nutrition financing and resource mobilization**

#	Capacity statement		Capacity score	Goal statement as drafted by the counties	Implications for cascading capacity efforts up to the community level
1	Availability of formal guidance/tools to assist counties and sub counties in budgeting for the implementation (scale up) of nutrition-specific and nutrition-sensitive interventions.	Isiolo	Strong	Availability of formal guidance/tools to assist counties and subcounties in budgeting for the implementation (scale up) of nutrition-specific and nutrition-sensitive interventions.	Develop and disseminate tools for ward level nutrition-specific and nutrition-sensitive budgeting to address special issues at that level and submitted to the county through the subcounty
		Marsabit	Good	Consistent application/implementation of the formally approved planning and budgeting guidance and tools in place	N/A
2	The CNAP annual operation plans and budget include programmatic and financial targets and include all significant activities in sufficient detail to provide a meaningful tool for monitoring subsequent performance.	Isiolo	Good	The CNAP annual operation plans and budget include programmatic and financial targets and include all significant activities in sufficient detail to provide a meaningful tool for monitoring subsequent performance	N/A
		Marsabit	Strong	N/A	N/A
3	All operational activities adequately planned, implemented, and coordinated by all line departments/functions, to ensure that programs are implemented in an efficient and coordinated manner.  Systems are in place to avoid duplication of efforts and funding for same interventions.	Isiolo	Strong	Systems are in place to ensure no duplication of efforts and funding for same interventions/actions	The budget tool for wards and subcounty level include the contributions of each stakeholder/partner for each activity effort
		Marsabit	Poor	Deliberately align, plan, implement and coordinate sectoral activities with the CNAP targets	Orient and motivate the subcounty and ward committees to monitor, track and coordinate multisector action with the CNAP targets in highest consideration
4	Adequate procedures and controls in place to authorize and communicate budget changes to other sectors supporting nutrition.	Isiolo	Strong	Changes are communicated to the technical staff	All frontline worker staff at ward level in all sectors are well informed of the nutrition multisectoral activities and plans
		Marsabit	Strong	N/A	-

5	Existence of a system or mechanism in place to allocate, monitor, control and evaluate budget, including tracking of budget allocation and expenditures.	Isiolo	Strong	Measures in place to control budget at activity level	N/A
		Marsabit	Strong	N/A	-
6	Budget review process considers the nutrition goals and plans in place, particularly for line ministries that support nutrition, and that they are implemented as per the plans.	Isiolo	Good	Documented action plans shared	All stakeholders in the subcounty and ward are provided with multisectoral plans and accompanied budgets
		Marsabit	Weak	Systematic budget reviews for nutrition programs conducted by departmental management on quarterly basis	Conduct quarterly review for sectoral budget and expenditures for nutrition- sensitive and nutrition-specific departments
7	Capacity of sector nutrition focal staff to understand budget process, are engaged in the process and negotiate resource allocations on nutrition and to prioritize nutrition activities.	Isiolo	Poor	Key staff have adequate knowledge skills and experience on the budget process and negotiations	As in (4) and (6) above
		Marsabit	Good	Capacity building on budget making process, negotiation, and engagement for nutritional focal staffs	Train sector nutrition focal persons on budgeting process especially the use of IFMIS/ financial management system for tracking their sector budgets and expenditures

**Infrastructure**

Isiolo County scored a “weak” performance in this capacity area. Various sectors do not have adequate physical resources (e.g., offices, IT equipment, vehicles, etc.) to monitor service implementation in key regions of the county. Sectors mainly relied on partners support for logistical support during program implementation, monitoring and performance evaluation, and efforts to document and address gaps in multisectoral service delivery were limited. Consequently, the county planned to have adequate physical resources to monitor and document service implementation in all regions of the county. This will be done by reporting infrastructural gaps in service provision to the relevant county departments and lobbying for the same. Considering that the wards have been provided with sufficient resources for service and infrastructure supervision and monitoring, reporting on progress and gaps to the MSP-N will be strengthened. In Marsabit County, sector infrastructure for supporting service delivery was suboptimal. The coverage and quality of sector-based services was acceptable but required improvements. Nevertheless, the overall score in this capacity area was “good” owing to the need for improving the availability of adequate infrastructure for multisectoral nutrition. These efforts can be replicated at community levels through advocacy.

**Table 3-8: Infrastructure**

#	Capacity statement	Capacity score	Goal statement as drafted by the counties	Implications for cascading capacity efforts up to the community level	
1	County has adequate physical infrastructure, IT systems and transportation to monitor activity implementation in key areas/regions of the country.	Isiolo	Poor	The organization has adequate physical resources to monitor service implementation in all regions of the county.	Subcounty and ward multisectoral committees to be allocated resources and infrastructure for service provision to coordinate and monitor multisectoral services
		Marsabit	Weak	Improve, increase, equip and repair physical infrastructure, IT and transportation to monitor activity implementation in key regions of the county	Support the wards and the village committees to advocate for the availability of adequate physical infrastructure, IT systems and transportation at that level
2	Distribution and quality of multisectoral service delivery facilities (e.g., hospitals, schools, agriculture extension learning centers, etc.).	Isiolo	Good	Documented progressive efforts to address facility gaps adequate	Ward plans, progress, achievements, challenges, gaps and lessons learned in service provision and to be reported to the MSP-N through the subcounty
		Marsabit	Good	Improve on the inventory documentation to address the existing gaps	Support the wards and the village committees to advocate for and follow-up on the availability of multisectoral service delivery facilities

## Coordination and partnerships

### Partnerships, collaboration, and coordination of nutrition actions at all levels

The performance of Isiolo County and Marsabit County in this capacity area was “weak.” In Isiolo County, although the MSP-N is a government-led coordination structure, it is in its formative stages, with no proper structures and still not formalized, since it has not yet been recognized as a formal structure by the governor and the county assembly. Participants proposed that, in addition to the sector/departmental focal persons who are members of the MSP-N, other partners/stakeholders in the county should also be added as participants. The County Nutrition Coordination Forum exists but does not meet regularly to share information. On the involvement with Scaling up Nutrition (SUN), the County Nutrition Coordinator (CNC) is the primary person linking the county with SUN, but there were no structures to initiate and support the advocacy processes. The county actions will endeavor to engage all partners and stakeholders in the county and ensure they are engaged in multisectoral issues on a regular (quarterly) basis to share lessons and best practices guided by a well-defined term of reference (TOR). It was proposed that the county identify ways to formalize the MSP-N and ensure it’s convened by the governor’s office and put in place an accountability mechanism to ensure performance by all actors. Efforts at the subcounty and ward levels will focus on ensuring the multisectoral committees are formalized and financed, that a comprehensive partner mapping (using the 4W matrix - Who is doing What, Where, When) is done and that partner accountability mechanisms are put in place and regular coordination meetings convened.

In Marsabit County, county engagements with various partners had been improving. The MSP-N structure was functional and oversaw and coordinated multisectoral nutrition, though its TOR had not been communicated to all members. All members needed to be sensitized on the TOR including the objective of the platform, linkages with the SUN movement and the frequency of the meetings. Mapping of key actors had been done through the support of the National Drought Management Authority (NDMA) but not yet finalized. The MSP-N structure needs strengthening and, in particular, a well-defined structure, more regular consultations, linkages with the mapped-out partners, and information sharing and monitoring. Documented procedures for managing conflict of interest (COI) especially for collaborations with private sector was partially in place. Corresponding efforts at the ward level will require that the ward structures have well-drafted TORs, expanding membership to include more ward-level stakeholders, hold regular consultations and monitor of multisectoral efforts.

**Table 3-9: Partnerships, collaborations, and coordination of nutrition actions at all levels**

#	Capacity statement	County	Capacity score	Goal statement as drafted by the counties	Implications for cascading capacity efforts up to the community level
1	County actively engages with other implementers, partners, stakeholders and public (including communities), private, civil societies, faith-based, development partners (donors) and actors (e.g., CCM, political bodies, etc.) to coordinate nutrition-specific and nutrition-sensitive activities and collaborate on efforts to achieve county objectives.	Isiolo	Good	County actively engages with other implementers, partners, stakeholders, and public	<ul style="list-style-type: none"> <li>Drafting and updating of the 4W matrix (Who is doing What, Where, When)</li> <li>Sub-counties and wards share lessons and experiences in multisectoral nutrition through various platforms including learning visits (benchmarking)</li> </ul>
		Marsabit	Good	Strengthened collaboration and coordination with all stakeholders with formalized TORs on nutrition-sensitive and nutrition-specific activities to achieve county objectives	<ul style="list-style-type: none"> <li>Support ward committees to draft and implement TOR for the multisectoral coordination at ward level</li> </ul>
2	Existence and functional formal multisectoral and multistakeholder institutional setup (e.g., coordination structure), e.g., Multisectoral Platform for Nutrition (MSP-N) to coordinate multi-sectoral actions on nutrition at all levels, with high-level convening body from the government (political endorsement).	Isiolo	Weak	Structure in place where quarterly meetings are regularly held.  Governor (or representative) convenes MSP-N members	Include in TOR forward and subcounty multisectoral platforms/committee, regular (quarterly meetings)
		Marsabit	Good	Strengthened operationalization of MSP-N and other coordination structures for nutrition activities in the county	Support the regularity and functionality of the ward committees in supporting and monitoring multisectoral activities
3	Organizational structure has relevant procedures and clearly defined roles that are aligned with its functions.	Isiolo	Good	Written and communicated terms of reference and work plan of activities to all members  Budget is allocated to implement workplan	Budget allocated for the operation of the subcounty and ward multisectoral committees
		Marsabit	Poor	Finalization and alignment of MSP-N organizational	Guide the ward committees to

				structure with clear roles and procedures	expand representation to be more comprehensive by including more and relevant stakeholders
4	Frequency and quality of dialogue on nutrition between sectors and with stakeholders' groups in coordination forums throughout the program cycles (planning through to evaluation and learning).	Isiolo	Weak	Quarterly meetings held  Meeting minutes are in place  Documentation and follow-up of actions agreed at the coordination forums.	Multisectoral committees' meetings drafted and presented to the MSP-N through the subcounty
		Marsabit	Weak	Established frequent and quality dialogue with stakeholders throughout the project cycle	At ward level, have quarterly partner meetings to promote learning and to mobilize resources for the ward and village-level actions
5	Focal Points from key stakeholder groups formally appointed to participate in the MSP-N.	Isiolo	Poor	Formalize MSP-N	Formalize the existence and operations of the multisectoral committees in the subcounty and wards by recognizing them in the governance structures
		Marsabit	Poor	Mapped actors and formalized appointments of nutritional focal persons with clear TORs to participate in multisector platform	Map and mobilize all the partners and stakeholders working at the ward level on multisectoral nutrition
6	Defined government-led secretariat functions supporting multisectoral and multistakeholder coordination at all levels.	Isiolo	Good	Defined government-led secretariat functions supporting multisectoral and multistakeholder coordination at all levels	Define and orient the subcounty and ward governance offices responsible for multisectoral nutrition approaches
		Marsabit	Good	Strengthened government-led secretariat functions with adequate funding for multisectoral and multi stakeholders' coordination at all levels	N/A
7	Existence of stakeholder SUN networks coordination (e.g.,	Isiolo	Weak	Existence of stakeholder SUN networks coordination, e.g.,	N/A



	government, CSO, academia, business, etc.).			government, CSO, academia, business	
		Marsabit	Poor	Established SUN coordination network	N/A
8	Mechanisms in place to foster information-sharing and learning between partners, e.g., good practices.	Isiolo	Weak	Mechanisms in place to foster information-sharing and learning between partners, e.g., good practices	Include in the TOR for subcounty and ward multisectoral committees the role of promoting and supporting information sharing and learning between stakeholders at that level
		Marsabit	Weak	Established regular and consistent mechanism for information sharing and learning among partners	N/A
9	An accountability mechanism in place to ensure performance by all actors.	Isiolo	Poor	An accountability mechanism in place to ensure performance by all actors	Activities and targets in the plans for the subcounty and ward level show respective sectors, and partners responsible for leading implementation
		Marsabit	Poor	Established Common Results and Monitoring Framework (CRMF) accountability mechanism between partners to ensure performance by all actors	N/A
10	Established procedures for preventing and managing conflicts of interest (COI) to safeguard public health and nutrition in the engagement with stakeholders.	Isiolo	Good	Evidence of procedures for managing COI; documented discussions on issues related to possible COI and clear communication	N/A
		Marsabit	Poor	Strengthened and align implement procedure for managing and preventing Conflict of Interest (COI) to safeguard public health and nutrition in engagement with stakeholders	N/A

## Evidence-based decision-making

### Information skills, M&E, and reporting

Ikiolo County's overall performance in this capacity area scored as "good." The M&E directorate exists, but the county has not developed a common results and monitoring framework (CRMF), the main document guiding monitoring and tracking of nutrition-specific and nutrition-sensitive indicators. CIDP indicators include the multisectoral nutrition indicators and targets, but the database needs to be reviewed regularly, updated, and better managed to depict trends. Generation of new multisectoral nutrition information was done mainly by partners, majorly NDMA and UNICEF, and it was strongly felt that the county must fund surveys that generate multisectoral data. The county-planned actions in this capacity area include activation of the M&E unit/directorate, development of the county CRMF, creation and maintenance of databases for the CIDP and individual sectors and ensuring nutrition targets are reflected in the sector plans and strategies. Additionally, county-planned actions will support multisectoral committees at the ward and subcounty levels to have local multisectoral nutrition targets and develop simple tools to monitor and track progress.

Overall, Marsabit County scored "good" in this capacity area. Marsabit County does not have a functional M&E unit and a TOR for the M&E unit on monitoring of the CNAP does not exist. The CIDP has some nutrition outcome and output indicators, but these indicators are not monitored to show progress or lack of progress over time. Nutrition indicators are found in sectoral monitoring plans, but this is not the case for all the relevant sectors. Nutrition targets were, however, not captured in sectoral plans and the related data was not being collected/generated and repositied centrally for access and use for critical decision making. Additionally, the SMART surveys had been conducted regularly, with the last one being conducted in June 2019, but due to the Covid-19 pandemic, no surveys were conducted in 2020. The support for capacity strengthening at the county level should be cascaded to all levels through careful selection of the indicators to be tracked and reported at the subcounty and ward levels.

**Table 3-10: Information skills, M&E and reporting**

#	Capacity statement	Capacity score	Goal statement as drafted by the counties	Implications for cascading capacity efforts up to the community level	
1	County has a functional M&E unit/directorate, with a clear mandate on the CRMF, and meets regularly to assess nutrition indicators, review progress, plan, and coordinate activities.	Isiolo	Poor	County has a functional M&E unit/directorate, with clear mandate on the CRMF, and meets regularly to assess nutrition indicators, monitor progress, plan, and coordinate activities	County to develop a CRMF; The ward and sub-county supported to develop and use simple tools for monitoring progress in multisectoral nutrition
		Marsabit	Poor	Operational M&E unit directorate with clear mandate on Common Results and Monitoring Framework (CRMF) and develop clear nutrition indicator. Operational CIMES.	Development and sensitization of ward-level multisectoral monitoring and reporting tools
2	System in place to collect, collate and analyze multisectoral nutrition information.	Isiolo	Weak	CIDP indicators database	As Isiolo (1) above
		Marsabit	Good	Strengthened, updated and centralized system to collect, collate, analyze and share multi-sectoral nutrition information	N/A
3	Existence of county and subcounty nutrition indicators and targets in all sectors.	Isiolo	Good	Sectoral databases	As Isiolo (1) above
		Marsabit	Good	Established and strengthened nutrition indicators/targets in all sectors	Support the development and dissemination of the subcounty and ward-level multisectoral nutrition indicators
4	Nutrition targets reflected in sectoral strategies/plans.	Isiolo	Good	Monitoring plan for CIDP	Subcounty and ward multisectoral teams develop local-level nutrition targets and include them in the sectoral plans
		Marsabit	Good	Developed and implemented nutrition targets reflected in sectoral plans and strategies	Support the development and dissemination of the subcounty and ward-level multisectoral nutrition indicators

5	Mechanism for generating data on nutritional status on a regular basis (e.g., surveys, surveillance).	Isiolo	Good	Sectoral monitoring plans	N/A
		Marsabit	Good	Strengthened mechanism for data generation on nutrition status on regular basis	Support the development and dissemination of the subcounty- and ward-level multisectoral nutrition indicators
6	Evidence that nutrition data and other monitoring data are being used for decision-making and for plan and county improvement.	Isiolo	Good	Nutrition targets reflected in sectoral strategies/plans	As Isiolo (4) above
		Marsabit	Weak	Develop and implement evidence-based data generated on nutrition/monitoring in decision-making	Train the subcounty and ward-level multisectoral committees in using locally generated data to make critical decisions

### Effective reporting and dissemination

Isiolo County’s overall score for this capacity area was “good.” “The county has in-county skills for collecting and analyzing nutrition data, though it is not clear whether the knowledge and skills are adequate. Reporting of nutrition indicators is only done by some sectors, led by health, while others do not report on nutrition indicators. The MSP-N does not have a system for documentation of knowledge and/or learning from the implementation of nutrition-specific/nutrition-sensitive activities. The planned actions for improving the score in this capacity area included building the skills of the relevant sector frontline workers to collect, collate and analyze data for use in decision-making, tracking progress of multisectoral nutrition actions and monitoring the relative contribution of the individual sectors to the multisectoral actions. At the ward level, locally made decisions should be guided by the monitoring of select nutrition indicators, and progress in achievement of these indicators reported regularly to the MSP-N through the sub-counties. Marsabit county’s overall score for this capacity areas was “good.” SMART surveys are mainly financed and led by partners. There is a need to strengthen the capacity of the health sector and nutrition data collection. Nutrition indicators are reported by some sectors in their annual reports, while other do not report. The MSP-N reports are not available since the MSP-N has not operationalized reporting and tracking of activities. The sector officers have suboptimal knowledge and skills in collecting and reporting nutrition data, a capacity that also needs to be enhanced among the multisectoral committees at the ward level. The effort to monitor and report multisectoral efforts at the ward level will have to be linked to the MSP-N through the relevant subcounty structures.

**Table 3-11: Effective reporting and dissemination**

#	Capacity statement	Capacity score	Goal statement as drafted by the counties	Implications for cascading capacity efforts up to the community level	
1	Skills and personnel to collect, collate, analyze, and present data for decision making both across sectors, and within the health sector.	Isiolo	Good	Skills and personnel to collect, collate, analyze, and present data for decision making both across sectors, and within the health sector.	N/A
		Marsabit	Good	Strengthened capacity enhancement for frontline officers in health and other sectors on data collection, collation and analysis	N/A
2	Clear reporting mechanism and tracking of progress and results at sub-county level by County level, and at County level by National level.	Isiolo	Good	Clear reporting mechanism and tracking of progress and results at sub-county level by County level, and at County level by National level.	Develop indicator/targets reporting system at the ward level to be used for local decision making and submitted to the MSP-N through the sub-county
		Marsabit	Good	Strengthened multi-sectoral reporting and tracking mechanism on nutrition indicators	Developing and sensitization on ward-level multisectoral monitoring tools
3	MSP-N tracks, reports and critically reflects on own contributions and accomplishments.	Isiolo	Poor	MSP-N tracks, reports, and critically reflects on own contributions and accomplishments	Same as Isiolo (2)
		Marsabit	Poor	Developed align, implement multi-sectoral platform tracks and report on contribution and accomplishments	Link the ward-level reporting (through the sub-county multisectoral committees) to the MSP-N

## Organizational and adaptive learning and accountability

Isiolo county performance in this capacity area was scored as 'good'. Public participation is done for sector strategies, policies, and programs. However, accountability remains limited in practice as the authority does not get feedback from the community for fear of backlash and clashing priorities. Accountability to the community is an issue that needs to be taken seriously, and therefore, participants agreed on the need to give valid reasons to the community during public participation when their expectations are not met. Not all sectors document successes with intervention outcomes and the lessons learned. Participants also agreed that there are no effective systems or systematic approaches for knowledge and/or learning between national, county, sub-county, ward, and community levels. Proposed actions aimed at ensuring timely community feedback on multisectoral development efforts, and documentation and sharing of key lessons learned from different sectors through available platforms to support learning and adaptations.

Marsabit County self-scored 'good' in this capacity area. The county has not yet established community participation, accountability, feedback, and engagement mechanisms. Documentation of lessons learned on nutrition-specific and sensitive issues also remains weak. Sectors have irregular review meetings, reported to be critical learning and accountability platforms but adversely affected by Covid-19 since 2020. It was apparent that systems, platforms, and processes for the generation and sharing of key lessons within and across multisectoral structures at county level (i.e., the MSP-N and others), need to be strengthened to foster timely use of findings and learning for effective adaptive programming. These capacity strengthening efforts should be accompanied by a supportive roll out of an effective accountability, feedback, and response mechanisms (AFRMs), including at ward levels to report and address valid community-level complaints. The MSP-N also planned to support the development of indicators to be used by the ward multisectoral committees to monitor progress; and support inter-ward lesson sharing forums and conducting ward-level operation research to generate lessons and to trigger the adaptation of the lessons learned at community levels. The county will also ensure sub-county and ward level needs are proactively communicated to the MSP-N through regular communication and sharing of minutes.

The findings in this capacity areas are in line with Nawiri efforts underway to ensure the production and effective roll out of diverse, audience-friendly communication processes and resources across Nawiri, as fitting. Over time, Nawiri support to wider institutional and technical capacity strengthening efforts will include strengthening related county capacity at all levels and rolling out the accountability and feedback and response mechanisms (AFRM) system and mechanisms, in collaboration in with our MSP-Ns.

**Table 3-12: Organizational and adaptive learning**

#	Capacity statement		Capacity score	Goal statement as drafted by the counties	Implications for cascading capacity efforts up to the community level
1	County proactively uses community feedback in all phases of activity development and management using transparently selected, representative community groups.	Isiolo	Good	County proactively uses community feedback in all phases of activity development and management using transparently selected, representative community groups.	Report ward-level multisectoral needs to the MSP-N through the sub-counties
		Marsabit	Weak	Developed transparent and proactive community feedback, complains and response mechanism at all levels in the County	Support, encourage, remind, and motivate the ward committees to submit community complaints to the sub-county and county levels
2	Documentation of lessons learned on nutrition-specific/sensitive in the county.	Isiolo	Weak	Documentation of lessons learned on nutrition-specific/sensitive in the county	Minutes of the regular meetings submitted to the MSG include the lessons learned in multisectoral nutrition
		Marsabit	Weak	Developed, availed, and documented lesson learned on nutrition sensitive/ and nutrition specific in the County	Integrate operational research in ward-level support to document lessons and best pragmatic practices
3	Mechanisms in place to share knowledge/learning between national, county, sub-county, ward, and community levels.	Isiolo	Weak	Mechanisms in place to share knowledge/learning between national, county, sub-county, ward and community levels.	Inter-ward learning through benchmarking and sharing of lessons and best practices
		Marsabit	Good	Developed TOR availed budget to sectors to share knowledge, experience with all	Trigger and support ward committee's

				stakeholders at County, sub-county, Ward and Community level	forum to share lessons and best practices within and without the respective sub-counties
4	Credible emerging learning from mixed sources (implementation experiences, M&E activities) are consistently used to make timely quality improvements throughout the project cycle (planning, implementation, monitoring, review, evaluation) for effective adaptive programming.	Isiolo	Good	Credible emerging learning from mixed sources (implementation experiences, M&E activities) are consistently used to make timely quality improvements throughout the project cycle planning, implementation, monitoring, review, evaluation for effective adaptive programming	Develop indicator/targets reporting system at the ward level to be used for local decision making
		Marsabit	Good	Prioritized credible emerging learning from mixed sources are consistently used to make timely, quality improvements throughout project lifecycle	Encourage and inspire the ward committees to implement lessons learned from other wards
5	Enabling conditions for learning and adaptations exist (such as culture of working, resources (time, skills, money), support by leadership.	Isiolo	Good	Enabling conditions for learning and adaptations exist (such as culture of working, resources (time, skills, money), support by leadership.	N/A
		Marsabit	Weak	Established structured favorable enabling conditions for learning and adaptations exist and supported by leadership	Encourage and inspire the ward committees to implement lessons learned from other wards
6	Learning &Adaptation is everyone's role - managers & implementers/frontline staff (not just an M&E role).	Isiolo	Good	Learning &Adaptation is everyone's role - managers & implementers/frontline staff not just an M&E role)	N/A
		Marsabit	Good	Established and implemented learning and adaptation for managers, implementers, and frontline staff	Train the sub-county and ward committees on learning and adaptation using the lessons learned



## Problem assessment/identification

Isiolo County scored ‘weak’ in this capacity area. Several bottleneck analyses have been done in the county albeit without a multi-sectoral nutrition lens, though they have included other cross-cutting themes. All sectoral assessments done were donor led, in line with the donor signed Memorandum of Understanding (MOUs) with the counties. Participants agreed that plans were underway to conduct nutrition-specific and nutrition-sensitive services access and coverage assessments in the county. The actions planned to address gaps in this capacity area include building the county capacity to identify and critically analyze problems with the aim of finding relevant solutions for execution. Correspondingly, at the ward level, the multisectoral committees need capacity building to identify, clarify and generate solutions to the local bottlenecks. Marsabit County scored ‘poor’ in this capacity area, owing to the missing intentional efforts to analyze key and critical underlying causes of acute malnutrition, as well limited efforts to assess sectoral efforts in nutrition-specific and sensitive service delivery. Improvements in this area can have community-level impact if there are corresponding efforts to support the sub-county and ward levels to identify, report and effectively address bottlenecks and problems in related service delivery across sectors, and efforts to strengthen inter- and multi-sectoral approaches for lasting impact.

**Table 3-13: Problem assessment/identification**

#	Capacity statement		Capacity score	Goal statement as drafted by the counties	Implications for cascading capacity efforts up to the community level
1	Processes at County and sub-county level to regularly assess/identify nutrition-related challenges and analyze underlying causes	Isiolo	Weak	Processes at County and Sub- County level to regularly assess/identify nutrition problems and analyze underlying causes	Identifying, responding to, and reporting (to MSP-N through sub-county) of upcoming problems from the community
		Marsabit	Poor	Developed a process at county and sub county levels regularly to identify nutrition progress problems and analyses underlying causes	Capacity build ward committees to identify and report nutrition problems/challenges to the sub-county multisectoral committees, including but not limited to the issues of service coverage, quality and coordination.
2	Processes at County and Sub- County level to regularly assess sectoral service delivery and address key bottlenecks/barriers.	Isiolo	Weak	Processes at County and Sub- County level to regularly assess service coverage and bottlenecks/barriers	Same as Isiolo (1) above
		Marsabit	Poor	Developed and assessed processes at county and sub-county level regularly to assess service coverage	Same as Marsabit (1) above

## Cross-cutting issues

### Gender and related issues

Overall, participants in Isiolo county scored institutional performance on gender and related issues as 'good', while Marsabit scored themselves as 'weak' in this area. Isiolo team agreed that gender issues remain controversial and widely misunderstood even by the top leadership. The county gender policy was still in draft form, thereby delaying and hampering efforts to address gender disparities and promote gender-sensitive budgeting. The one-third gender rule (at least one-third of government positions should be women) applied during procurement and hiring processes in some sectors, including giving preference to women – albeit some still viewing institutional capacity to address women's empowerment negatively. Efforts are ongoing at county level to ensure that women are adequately represented in senior management. It was reported that some partners focus grants and support solely on women. Sector-specific gender analyses and audits were being conducted by the county in collaboration with NGO partners, but the findings have not been used to inform programming.

In response to the gaps and opportunities identified, the Isiolo County team will draft and implement a gender equality policy and strategy, which will provide a framework for recognizing the voice of both men and women, ensure open discussions on gender issues by the management, spell out clear gender roles and responsibilities, address gender disparities, and include gender budgeting processes and regular gender audits. The gender policy is awaiting approval and structures are being put in place for its implementation including budget allocation. Further, the county will ensure that gender-sensitive indicators are included in the M&E system. At the sub-county and ward level, gender-based assessments and audits will involve collection of data/information from the communities and multisectoral committees as well as providing feedback on the findings. The gender policies and strategies will also be disseminated at sub-county and ward levels and used for capacity building, in planning, monitoring, and reporting on gender-based issues at those levels.

Marsabit has a draft gender equality policy in place, though there is unequal gender representation in senior government positions. The participants felt that general cultural beliefs and attitudes on the role of men and women among leaders and sector managers were a hinderance to the implementation of national and county government policies on gender. Further, gender analyses are not systematically conducted. County departmental budgets were reported to be gender-sensitive, though they were not tracked using the available monitoring plans. Advocacy and implementation of gender policies need to be strengthened, including supporting gender representation at all levels.

**Table 3-14: Gender and related issues**

#	Capacity statement		Capacity score	Goal statement as drafted by the counties	Implications for cascading capacity efforts up to the community level
1	County follows a documented gender equality policy or strategy.	Isiolo	Weak	Documented gender equality policy fully implemented	Disseminate gender equality and strategy at the sub-county and ward level
		Marsabit	Poor	Developed mainstream gender equality policy/strategy at county level	Ward committees to be sensitized and capacitated/trained on gender mainstreaming in different sectors
2	Women and men are equally represented in county senior management teams and women’s voice during and recognition in these meetings is sought.	Isiolo	Good	Men and women’s voice equally recognized during management meetings	Multisectoral committees at sub-county and ward level recognize and plan for ensuring gender representation
		Marsabit	Poor	Deliberately ensured equal representation for all gender in county senior management teams, and women, voice sorts	Ensure gender representation in the sub-county and ward committees
3	Leadership/ senior managers take gender equality-related questions and challenges seriously and discuss them openly.	Isiolo	Weak	Gender equality-related questions and challenges discuss them openly by senior management	Gender issues discussed openly in the multisectoral committees at sub-county and ward levels
		Marsabit	Strong	Encouraged leadership and senior management to take gender issues seriously	Same as for 1 above
4	Gender analyses are systematically conducted, including an examination of gender roles and responsibilities; disparities in access to and control over resources; and gendered roles in decision making processes.	Isiolo	Good	Gender roles and responsibilities assessed as part of the gender analysis in the county	Gender analysis findings at the county level disseminated at the sub-county and ward levels considering the community level implications of the findings
		Marsabit	Poor	Ensured gender analysis systematically conducted and finding utilized for decision making	N/A
5	Gender audits are systematically	Isiolo	Good	Gender audits are systematically conducted, including an	Gender audits conducted up to

	conducted, including an examination of gender representation and decision making, at various institutions.			examination of gender representation	the ward and sub-ward levels
		Marsabit	Poor	Ensured gender audit are systematically conducted and findings used in decision making at various institutions	N/A
6	County address gender disparities in roles and responsibilities, time, control over resources, decision making power, and inequitable socio-cultural norms, and benefit women, men, girls, and boys equitably.	Isiolo	Good	Gender disparities in roles and responsibilities, time, control over resources, decision-making power, etc., are addressed	N/A
		Marsabit	Poor	Encouraged County address gender disparities through gender analysis and implement action plan	Same as for 1 above
7	Budgeting and financing consider gender issues (e.g., gender analysis, gender-related social behavior change activities, gender training, leadership and negotiation skills for women, time and labor-saving technologies, maternity policy, breastfeeding policy, travel policy that supports traveling child and support, etc.).	Isiolo	Good	Gender issues are included in the budgeting and financing processes	Public and multisectoral committees at sub-county and ward levels sensitized on how to integrate gender issues when consulted on budgeting issues
		Marsabit	Weak	Ensured sector budgeting considers gender issues, implemented, and tracked	Same as for 1 above
8	County M&E system includes gender-sensitive indicators to monitor change in gender disparities, including roles and responsibilities, time, access to and control over resources, decision-making power and monitor for unintended consequences.	Isiolo	Good	Gender-sensitive indicators to monitor change in gender disparities included in the county M&E systems	N/A
		Marsabit	Good	Ensured county M&E system include gender-sensitive indicators and are tracked	Include gender-based indicators in the subcounty and ward-level monitoring and report tools,

## General risk management for shock responsive programming

In Isiolo County, this capacity area was scored “good.” The county had adequate risk management policies, processes and tools that are used to identify and address risks. The county has a risk management plan, that also addresses gender risks. The risk management plan is sometimes (not always) reviewed, and some financial resources are available to support the risk mitigation implementation plan. The county has a dedicated risk management unit/team which receives adequate support to carry out its functions. The county planned to develop a financed risk mitigation plan and provide more support to the existing risk management unit/team to manage risks and, at the community level, implement the risk mitigation plan for adoption and use at the subcounty and ward levels.

The overall performance in Marsabit County in this capacity area was “good.” A risk management policy or strategy to provide a framework for risk mitigation and promote the inclusion of mitigation in planning and budgeting processes is not in place at the county level. County efforts will support capacity building of community structures in identifying, addressing, and reporting risks in various sectors.

**Table 3-15: General risk management for shock responsive programming**

#	Capacity statement		Capacity score	Goal statement as drafted by the counties	Implications for cascading capacity efforts up to the community level
1	County has an effective risk management policy, accompanied by processes and tools to identify and mitigate risks.	Isiolo	Good	N/A	N/A
		Marsabit	Weak	Developed County Risk Management Policy processes and tools to identify and mitigate risks	Build the capacity of the subcounty and ward committees to identify, mitigate and report community-level risks in various sectors
2	County has a risk-mitigation plan that is regularly reviewed, updated and supported with an adequate budget.	Isiolo	Good	Risk-mitigation plan regularly reviewed, updated and supported with an adequate budget	Risk-mitigation plan includes community-level implications and results disseminated to the subcounty and ward level
		Marsabit	Good	Strengthened risk mitigation plan with adequate budget, reviewed and updated	Same as Marsabit (1) above
3	County proactively identifies risks in the external environment and puts in place measures to minimize the impact of external events such as political changes, social unrest, ongoing conflicts, poor physical infrastructure, natural disasters or humanitarian crises.	Isiolo	Good	External environment risk identified and put in place measures to minimize the impact of ongoing political, social and conflict mitigation interventions	N/A
		Marsabit	Good	Ensured county proactively identifies risk in external environment to	Same as Marsabit (1) above

				minimize impact of external events	
4	Risk management responsibilities are assigned to relevant staff. County has a dedicated risk management unit/team that effectively manages grant risks.	Isiolo	Good	County provides more support to a dedicated risk management unit/team that effectively manages grant risks	N/A
		Marsabit	Weak	Strengthened risk management unit/team through adequate budget	Same as Marsabit (1) above

**Environmental sustainability**

The Isiolo County scored “good” on environmental sustainability. There are modest financial resources provided for by some (not all) sector budgets for environmental sustainability programming. All sectors need to be supported to integrate environmental sustainability in all the activities undertaken, including budgeting processes, program implementation and regular reporting. At subcounty and ward levels, there will be the need for public awareness on environmental sustainability issues and to advocate for the same in budgeting processes. The subcounty and ward multisectoral communities should also ensure that their plans and reports to MSP-N integrate environmental sustainability issues.

The Marsabit County performance was “poor” in environmental sustainability. It was evident from the discussions that environmental sustainability was not an integral part in planning, budgeting and resource allocation processes and decisions, as well as in monitoring frameworks and efforts. These areas need to be strengthened at the county level and corresponding efforts put at the community level to ensure subcounty and ward-level committees are oriented on environmental sustainability integration into the plans and decisions they make for all sectors.

**Table 3-16: Environmental sustainability**

#	Capacity statement		Capacity score	Goal statement as drafted by the counties	Implications for cascading capacity efforts up to the community level
	Environmental sustainability considerations (such as efforts to reduce the environmental burden of agriculture and food production, decreasing food waste and improving the adaptation capacity of food systems to environment and climate change, etc.) are considered in the financial flows/budgets.	Isiolo	Good	The budgeting process considers environmental sustainability issues	Public awareness and orientation of the ward and subcounty levels on inclusion of environmental sustainability in the budgeting process and planning at those levels
		Marsabit	Weak	Strengthened environmental sustainability consideration in all sectors with adequate financial flows and budgets	Enlighten and orient the ward committees in considering environmental sustainability in all decisions concerning community development

Environmental sustainability considerations implemented.	<b>Isiolo</b>	<b>Good</b>	Environmental sustainability considerations implemented	Ward and subcounty multisectoral plans include aspects of environmental sustainability
	<b>Marsabit</b>	<b>Poor</b>	Strengthened environmental sustainability considerations are implemented to mitigate climate change	Same as Marsabit (1) above
Environmental sustainability actions are monitored and integrated in the quarterly/annual reports.	<b>Isiolo</b>	<b>Good</b>	Quarterly/annual reports integrate issues of environmental sustainability actions	Ward level reports to the MSP-N through the sub-counties include needs, progress, and challenges on environmental sustainability
	<b>Marsabit</b>	<b>Poor</b>	Strengthened environmental sustainability, action in all sectors is regularly monitored and integrated reports	Same as Marsabit (1) above

## Multisectoral structures at subcounty and ward levels

### Potential multisectoral structures at subcounty and ward levels

In Isiolo County, the subcounty and ward development committees are potential multisectoral committees that can be used for overseeing, directing, and coordinating multisectoral nutrition efforts at respective levels. The subcounty development committee is coordinated by the development committee chair and reports to the subcounty administrator. The same is mirrored at ward level where the development committee chair reports to the ward development committee, who reports to the subcounty administrator through attending subcounty level meetings and submitting monthly reports. In some instances, ward administrators are summoned to the county level for meetings on specific issues of concern.

Ward Development Committees (WDCs) are relatively new establishments. For instance, Garbatulla’s WDC was established a year preceding the PICA assessment and is not an official entity, given delays passing in parliament the draft Isiolo’s 2015 Ward Development Act, which will pave the way for the implementation/enforcement of the act. Current WDC membership is voluntary, with appointments by word of mouth and committees operating without TORs. The main duties of the WDCs are to mobilize community members for activities and approve, contribute to and plan for the new/incoming county government and partner projects.

In Marsabit County, some wards have ward development committees, chaired by the ward development committee chair, and work under and closely with the ward administrators. The existing ward development committees, however, do not have a drafted functional TOR and report regularly (mostly monthly) to the subcounty administrator on their developmental plans, activities, progress and

challenges. The composition of the existing ward development committees is not guided by any county policy of officially provided guidance. It is haphazard and the planned quarterly or monthly meetings are rare given the vastness of the wards and no funds to support the committees.

## Sectoral representation at ward levels

In Isiolo County, all sectors at county level are present at the subcounty level, though as you go down to the ward level, not all sectors/departments are present. Table 3-17 shows present sectors at the ward level in the sampled wards. The number of sectors/departments present at the ward level differ from ward to ward, with some wards having more sectors/departments than others. The ward department heads report to the ward administrator on ongoing and planned activities and challenges experienced. The ward administrator's role is to ensure that various departments have a conducive working environment.

In Marsabit County, only few sectors are present at the ward level as shown in the **Table 3-17**, which indicates the need for more sector representation at the ward level. The ward administrators work closely with sector/departmental representatives in initiating and implementing new programs and mobilizing communities for public participation and program engagements.

**Table 3-17: Sector representation at the ward levels in Marsabit County**

Department	Garbatulla		Merti		Maikona ward		Kargi/South Horr ward	
	Department Officer	Ward structure	Department Officer	Ward Structure	Department Officer	Ward Structure	Department Officer	Ward Structure
<b>Agriculture</b>	Agricultural officer	Agriculture office	None	None	Ward agricultural officer	Based in Kalacha irrigation scheme	Ward agricultural officer	No office, mobile
<b>Livestock</b>	In charge of livestock	Office of livestock	Veterinary officer	-	Animal health assistants	None	Animal health assistants	Mobile staff - Operating from ward admin's office
<b>Water</b>	Water officer	Office of water	-	-				
<b>Health</b>	Health facility-in charge	Health facility	Health facility-in charge	Health facility	Health facility in charges / clinical officer	Health facility	Health facility in charges / clinical officer	Health facility
<b>Land</b>	Officer in charge of land	-	-	-				
<b>Education (ECDE)</b>	ECD subcounty officer	ECDE centers	Divisional Education Officer (DEO)	Education office				
<b>Revenue</b>					Revenue clerks	Ward admin's office	Revenue clerks	Ward admin office



## Conclusion on institutional capacity and priorities moving forward

Adapted HOCAI process findings highlight priorities and opportunities for capacity strengthening at county and other lower levels. These capacity strengthening plans will be implemented by the counties with support from development partners. A lot of effort is required in strengthening the multisectoral approaches at the county, subcounty and ward levels and ensuring a cascade of integrated set of multisectoral interventions down to the subcounty, ward and community levels.

## Budget Analysis

The assessment aimed to understand how county expenditures are tracked and reported.

### Tracking of nutrition financial budget and flow

In Isiolo County, at the departmental level, there are no tools in place to track financial spending and changing needs for nutrition—this presents a critical challenge in monitoring the same. Nutrition-specific interventions spending is still domiciled at the health department and could only be identified with the help of the KIIs with health directors. The nutrition-specific interventions spending puts more and direct effort towards Integrated Management of Acute Malnutrition (IMAM) specific components at the county level. This is so, even though there is no direct allocation to the health department from the county treasury for the same. Nutrition budgets remain integrated within health programs of promotive, curative, rehabilitative and public health nature.

Most of the nutrition-sensitive intervention spending was observed at the select key five ministries with health and agriculture leading in allocations for FY 2017–18 to FY 2020–21. The CIDP heavily mentions nutrition-sensitive efforts in the eight-point plan and the budgetary implications are shown; however, during the implementation, the expenditure is not tracked for feedback for subsequent budget processes.

In Marsabit County, the KIIs and FGDs conducted indicate unavailability of any tracking tools for nutrition-related spending at the time of the assessment. Budget analysis is only done at the county level for the current fiscal year to guide the CIDP five-year strategic plan. This, coupled with partner budget tracking exercises like the UNICEF Nutrition tracking tool, augment budgetary and fiscal data and information flow, albeit subtly. The allocations and expenditures are mapped at the returns of the IFMIS from the county finance and planning department augmented by various county departments.

## Trends in nutrition financing

### Sources of funding for the county

The Isiolo County sources funds from its own revenues and national government's exchequer that incorporates a few grants from DANIDA, WBG and UNICEF. Within the analysis period for the fiscal years under assessments, the counties also received conditional grants from development partners. For example, as seen in Table 3-18 below, for the FY2017–18, the counties received an amount of: Kshs.873.41 million from the World Bank loan to supplement the financing of County Health facilities; Kshs.2.75 billion as a World Bank loan for Transforming Health Systems for Universal Care Project; Kshs.1.05 billion as a World Bank loan for National Agricultural and Rural Inclusive Growth Project; Kshs.762.98 million from DANIDA for Universal Health Care (UHC) in Kenya Devolved System Programme (KSDP); Kshs.985.8 million from the European Union (EU) for Devolution Advice and Support; Kshs.4 billion for KSDP "level 2" grant;

and Kshs.7.84 billion as other loans and grants. All these conditional grants were contained in the County Allocation of Revenue Act (CARA), 2017.<sup>14</sup>

**Table 3-18: Funding from different sources in the fiscal years 2017–18**

Sector-purpose	Amounts (Billion Kes.)	Fiscal Period	Source(s)
Health - Supplement the Financing of County Health facilities	0.87	FY2017–18	WBG
Health - Transforming Health Systems for Universal Care Project	2.75	FY2017–18	WBG
Agricultural - National Agricultural and Rural Inclusive Growth Project	1.05	FY2017–18	WBG
Health - Universal Healthcare in Devolved System Programme	0.76	FY2017–18	DANIDA
Devolution - Devolution Advice and Support	0.98	FY2017–18	EU
Devolution - KSDP “Level 2” Grant	4.0	FY2017–18	EU
All sectors - Other Loans and Grants	7.84	FY2017–18	EU

The Isiolo County analysis covers FY 2017–18 to FY 2019–20. The combined nutrition-sensitive and nutrition-specific budgets amount to Kes. 8.8 billion for the last four fiscal years to date. These are aggregates from trade, health, education (ECDE), agriculture and water as shown in the figure below. These are the aggregates that this report tracks to specific line items and sectoral budgetary programs.

In Marsabit County, on the average allocations by nutrition responsiveness by sector, agriculture, water-WASH, education, and health had a relatively higher allocation in the sum of both nutrition-sensitive and nutrition-specific allocations. Health had Kes. 199 million, agriculture Kes. 425 million and water Kes. 153 million for FY 2020–21. All these allocations mainly came from the county government, but also include integrated components of capital grants from the WBG and DANIDA. Government (national exchequer to the county treasury) funded the budget to the tune of Kes. 951.1 million and Kes. 990.5 million for FYs 2017 and 2018–2019, respectively, while the dual sources in FY 2019–2020 allocations are at Kes. 400 million differences. Finally, FY 2020–2021 sees capital grants-external sources exceed government allocations. This is shown in Figure 3-2.

<sup>14</sup> Isiolo County ADP 2017

Figure 3-2: Marsabit County Allocations by Funding Source

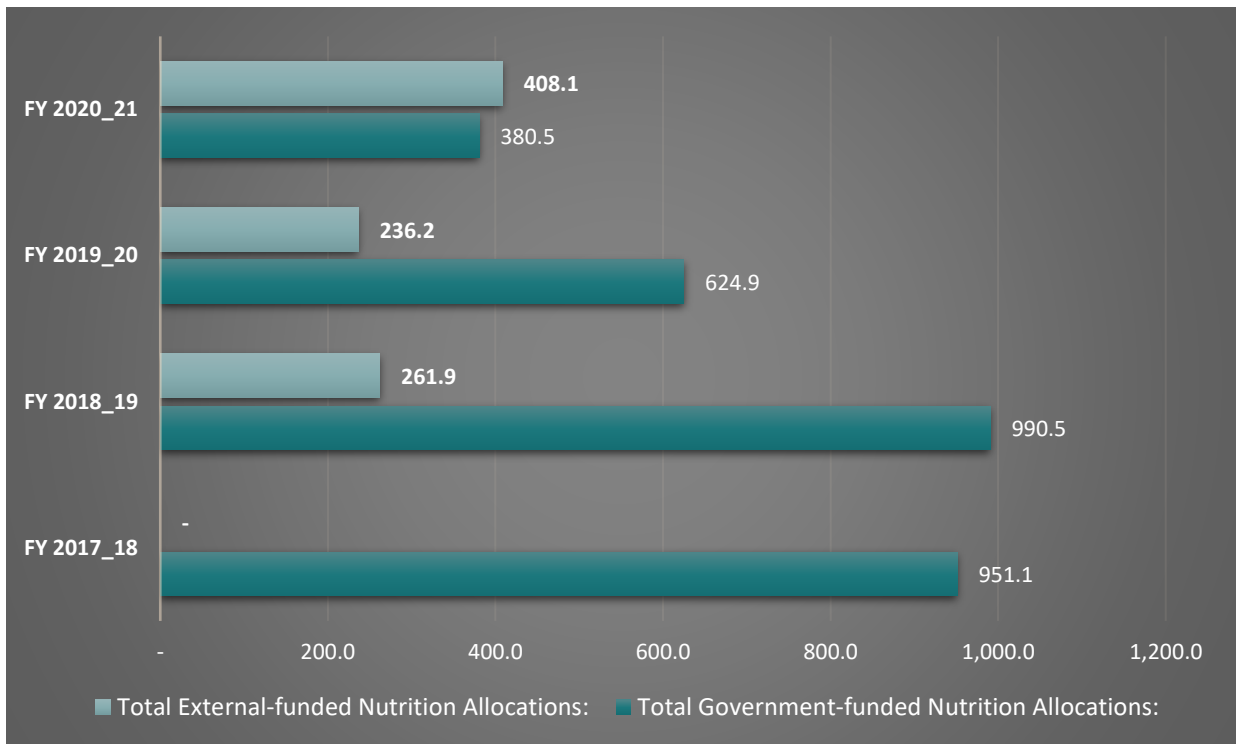
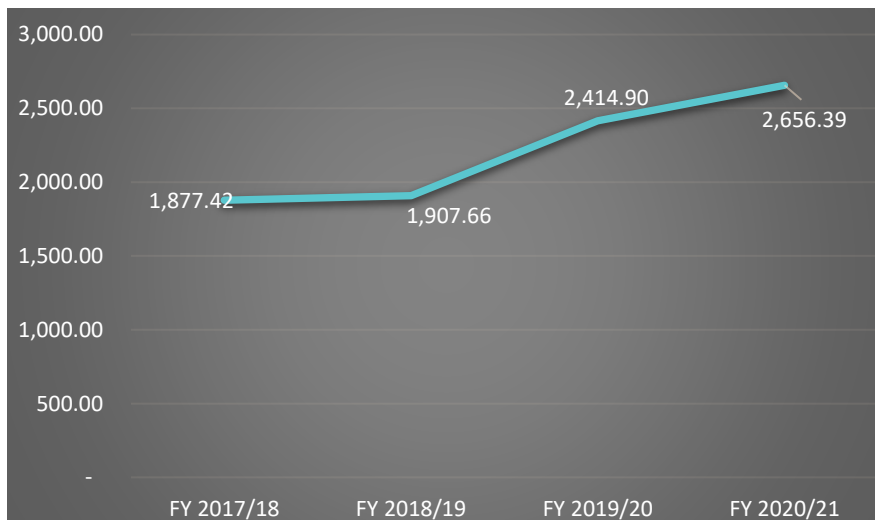


Figure 3-3: Isiolo County Nutrition-Specific and Nutrition-Sensitive Aggregate (Kes millions)



As shown in Figure 3-3, the allocations have been on an upward trend from Kes.1.88 billion for the FY 2017/18 to Kes 2.66 billion for the current FY 2020/21 for all five selected nutrition-integrated departments selected for the analysis.

To illustrate the costs of recurrent expenditures among select departments in Isiolo County, Table 3-19 below clearly illustrates the costs of staff details (including capacity development) against the total cost for the four fiscal periods. This could be used to illustrate the relevance and essence of deeply investigating recurrent costs at departmental levels for their responsiveness to nutrition promoting services and activities, in the absence of which we risk ignoring at least 32% of potentially relevant budget allocations.

Table 3-19: Isiolo County recurrent nutrition expenditures distributed by department

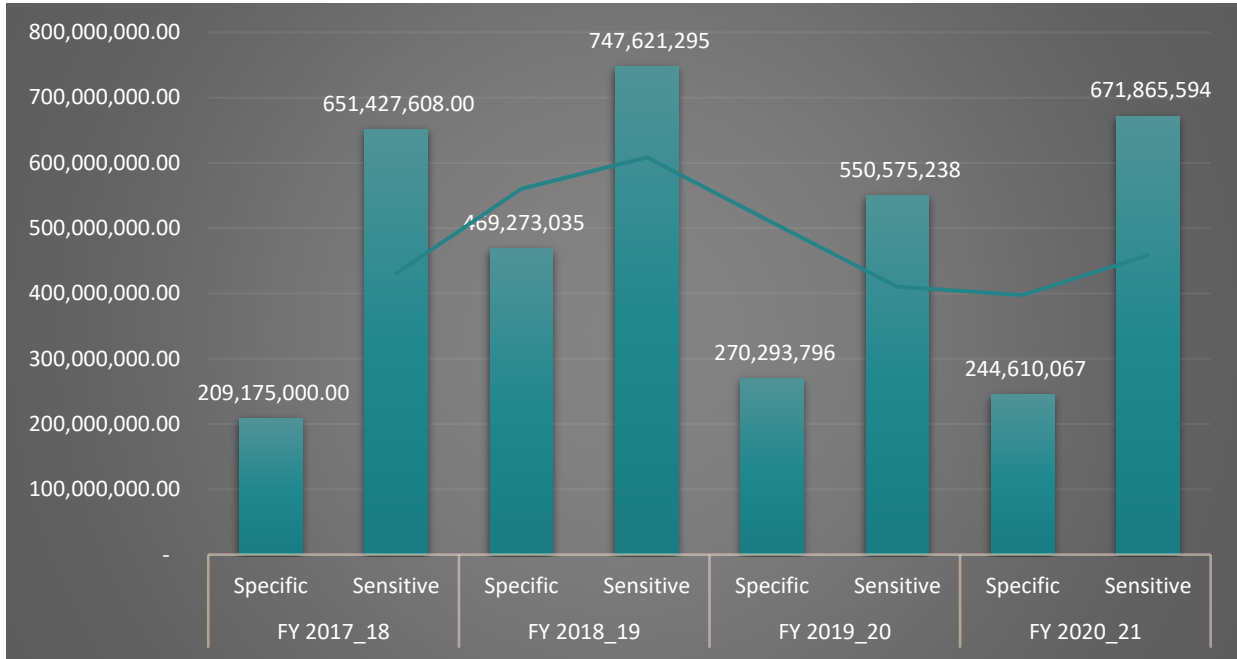
Department	FY 2017/18	FY 2018/19	FY 2019/20	FY 2020/21
Agriculture	119,602,349	126,543,893	126,519,764	139,171,740
Education ECDE	172,315,407	179,803,901	185,565,227	204,121,750
Trade	12,928,217	10,901,772	10,323,697	11,356,067
Water	22,454,263	24,474,744	25,446,823	27,991,505
Health care	620,014,845	716,289,086	770,926,507	848,019,158
Dept Aggregate	1,877,423,538	1,907,655,659	2,414,898,911	2,656,388,803
Proportion to Total costs	33.0%	37.5%	31.9%	31.9%

Most recurrent and development expenditures of related ministries are at or below 30% weighting. This is understandable because the purpose of those allocations is for specific other priorities like school feeding to curb famine and enhance school retention, with nutrition being an incidental outcome of the initiative. Other examples include water efforts within households and institutions, irrigation schemes, local market constructions, abattoirs, inpatient services at hospitals, MCH, CCC and TB chest clinic medical services, plus agricultural research in horticulture.

## Trends in nutrition budgetary allocations

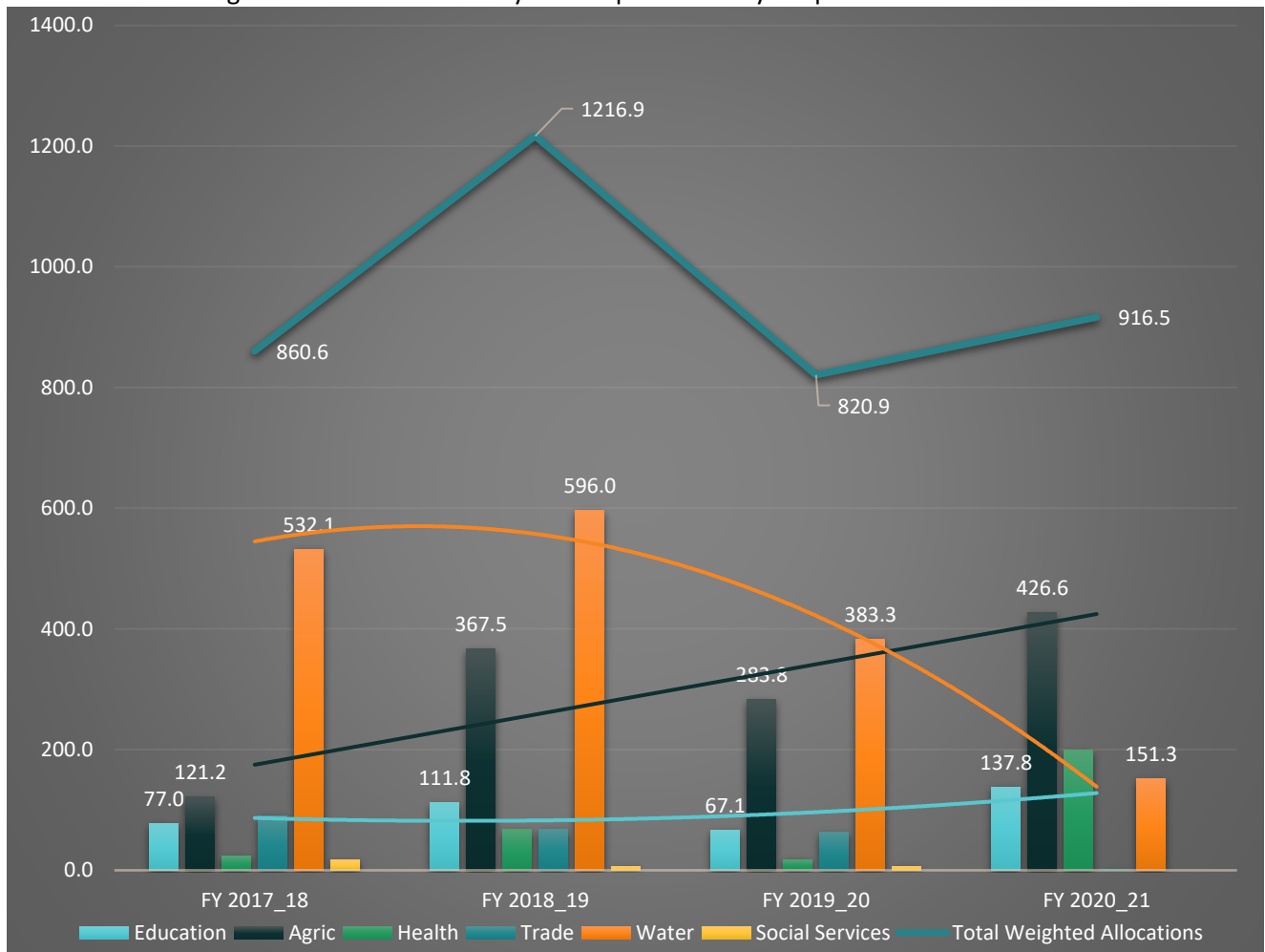
In Marsabit County, despite lacking an official budget tracking tool, fiscal policy documents like the County Annual Development Plans (CADPs), CIDP, Program Based Budgets (PBBs) and annual budget statements exist for the fiscal years under analysis. That notwithstanding, it was found that there were aggregated annual amounts for the departments selected analyzed for the four years under analysis by this assessment (this is shown in Figure 3-4). Depicted in this figure are the aggregated amounts for all the departments. These amounts are segregated based on their rate of responsiveness and relevance to tackling nutrition interventions, and thus acute malnutrition. The allocations aggregated for the sensitive and specific allocations are seen to have peaked in the FY 2018/19 at Kes. 469 million and Kes. 747 million for “specific” and “sensitive,” respectively. This was a total of Kes. 1.22 billion for that budget year. In general, there was a general decline in the specific allocation over years and a general increase in sensitive allocations.

Figure 3-4: Marsabit County - Trends - Sensitive vs. Specific Allocations



For the aggregate allocations for all sectors versus the individual sectors, the FY 2017/18 had Kes. 860 million for the five years in total and high of Kes. 1.2 billion for the following fiscal year 2018/19 and closing the fiscal run at Kes 0.9 billion for the current fiscal year 2020/21 (Figure 3-5). This is an oscillation around Kes. 900 million in aggregate per as shown by the trend line towering the individual departments as selected for analysis. It is apparent from Figure 3-4, most of the nutrition allocation comes from the agriculture and water sectors.

Figure 3-5: Marsabit County Trends per Sector by Ballpark Allocations



### Adequacy of nutrition financing (resource gap)

In Isiolo County, Table 3-20 compares the annual budget versus the CNAP budget to show the resource gap. CNAP budget is the benchmark for the multisectoral budget and as shown in Table 3-20, Isiolo has had a nutrition deficit budget in the current and previous financial years and was the case for all the departments. The deficits were also found to be on the increase in the overall and much more relative massive increase in the education sector. There was a general decline in deficit in the water and agriculture sectors, an indication that nutrition is getting more allocations in these sectors, and that the fund's adequacy is becoming more favorable over time.

Table 3-20: Sectoral nutrition budget allocation vs. CNAP budget in Isiolo County

Sector	Annual budgets vs. the CNAP budget				Annual budgets vs. the CNAP budget			
	2019/2020				2020/2021			
	Actual budget	Actual nutrition weighted	CNAP budget (B)	Variance (A-B)	Actual budget	Actual nutrition weighted (A)	CNAP budget (B)	Variance (A-B)
Education	270,883,755	40,632,563	48,000,000	(7,367,437)	297,972,132	44,695,820	102,000,000	(57,304,180)
Agriculture	251,098,572	37,664,786	123,405,000	(85,740,214)	276,208,428	41,431,264	84,800,200	(43,368,936)
Health	1,232,150,569	184,822,585	245,002,300	(60,179,715)	1,355,365,627	203,304,844	275,762,040	(72,457,196)
Trade	49,783,026	7,467,454	30,200,500	(22,733,046)	54,761,329	8,214,199	44,540,938	(36,326,739)
Water	164,018,637	24,602,796	102,300,400	(77,697,604)	180,420,501	27,063,075	85,020,030	(57,956,955)
Annual Aggregate	1,967,934,559	295,190,184	548,908,200	(253,718,016)	2,164,728,017	324,709,203	592,123,208	(267,414,005)

In Isiolo County, the budget allocations at county level are largely not standalone but are integrated for major contributing departments.<sup>15</sup> This means that sector leads, mostly directors, are unable to estimate what proportion of their budget goes towards nutrition promotion and/or malnutrition services and activities. Allocations are shared as ballpark figures and qualitative analysis is necessary to secure informed/expert opinions on weightings to assess whether they can be seen or perceived as responsive to acute malnutrition. As shown in Table 3-21 below, weighted nutrition annual budgets and the CNAP budgets in key sectors are compared to indicate adequacy of nutrition-related spending for two consecutive financial years (2019/2020 and 2020/2021). Overall, the budget allocated for nutrition fell short of the CNAP targets and the deficit was reduced between the two consecutive financial years. Consistently in Marsabit, only the health and education sectors had no budget deficits but instead a surplus to CNAP allocation targets.

<sup>15</sup> In the concept of *nutrition contributing* budget line items, it is important to understand that all line items are either *Stand Alone* or *Integrated*. This means that they are either 100% relevant to nutrition or lesser than that portion which is referred to as *Integrated* and a *Sensitive Allocation*. The selected five departments for this analysis were assessed to be having a very high budget sensitivity to nutrition with most being integrated as sensitive and specific allocations to nutrition.

Table 3-21: Annual budgets vs. the CNAP budgets for Marsabit County

Sector	Annual budgets vs. the CNAP budget							
	2019/2020				2020/2021			
	Actual budget	Actual Nutrition Weighted (A)	CNAP budget (B)	Variance (B-A)	Actual budget (A)	Actual Nutrition Weighted (A)	CNAP budget (B)	Variance (B-A)
Education	121,393,702	67,058,702	103,299,000	36,240,298	402,137,554	137,697,500	172,300,200	34,602,700
Agriculture	462,017,321	283,787,608	99,566,000	(184,221,608)	538,684,815	426,598,340	123,276,000	(303,322,340)
Health	1,630,596,917	17,451,074	173,233,250	155,782,176	1,893,527,878	52,355,859	199,320,000	146,964,141
Trade	71,900,000	62,600,000	-	(62,600,000)	97,600,000	16,756,000	-	(16,756,000)
Water	1,745,974,263	383,738,651	22,193,000	(361,545,651)	483,718,213	151,342,364	13,000,000	(138,342,364)
Social Services	150,032,400	7,501,620	-	(7,501,620)	98,300,730	4,915,037	4,318,550	(596,487)
<b>Annual Aggregate</b>	<b>4,181,914,603</b>	<b>822,137,655</b>	<b>398,291,250</b>	<b>(423,846,405)</b>	<b>3,513,969,190</b>	<b>789,665,100</b>	<b>512,214,750</b>	<b>(277,450,350)</b>

## Funding mechanisms

### Isiolo County

Mostly, the county Ministries, Departments and Agencies (MDAs) escalate budgeting line items up from the subcounty-level considerations as submitted by budgeting experts, operational staff making their budget requests for their own programs and projects. The considerations at play for all involved begin with need established from both the existing workload in nutrition under IMAM and projected expenditures from the ADP. For donors and external partners, there are own workplans and budget for a specified number of years. There are also continuous nutrition situational monitoring workload-based SMART surveys among other considerations. The workload for nutrition is largely the responsibility of the county government, with nutrition domiciled under the health department, which is a devolved function, operationally and hence in resourcing as well. Workplans, outcomes of the county technical forums in nutrition, and generally CNAP established targets.

Donors and external (non-county) budget players consider the outcomes of the county nutrition technical forums, the CNAP workload and output targets and smart surveys from continuous nutrition surveillance at the county level, among others. Most sector leads and their partners have been involved in planning, operational, monitoring, and evaluation- and research-related activities in the nutrition subsector of the county. Some of the key sector leads have been drawn into budgeting specifically for nutrition organized by key nutrition stakeholder organizations locally at the county level. This was by both county government and donor agencies.

Others were involved in more nutrition-specific budgeting activities as shown in ADP, CIDP, CNAP and IMAM guidelines. These documents play a bigger role in advocacy at this stage and level of influence. There have been training workshops attended by staff both within and outside of the county, and on



nutrition-specific interventions, or nutrition-sensitive sectors. There is also a good number of staff who have not attended and as such have lacked opportunities for capacity development in nutrition planning, operations, research, and budgeting. These captioned activities span over several sensitive departments as inclusivity is determined by what the planners regard as necessary in the scope of certain departments to combat GAM at the county level.

## Marsabit County

Most departments have a systematic manner of approaching the budgeting process in a uniform way across departments. The reports shared among county departments and sub-departments end up as augmented budget plans and annual PBBs well itemized to reflect each department's needs. The line items presented are moderated according to the CADP, which is itself anchored to the CIDP. These policy frameworks borrow from the economic blueprint of Kenya Vision 2030. The departments consider the needs observed, requested line items from the ground and recurrent expenditures. Amounts dedicated to nutrition are generally requested by the nutrition sub-department/sections, with minimal line items being funded. The workload from previous years informs projections that must be unit-costed and then budgeted for, prior to submission to the county treasury.

Public participation in such exercises is prevalent during the last quarter of the previous fiscal year, to allow for the inclusion of public views, opinions, and related budget submissions. What typically goes to nutrition is subject to a department's submission and therefore highly influenced by the respective

'The county does community engagement—we come up with their priorities. In Marsabit the main priority is water, so I ride on their capital investment to achieve my nutritional needs.' –Director, Agriculture Sector

planning officer's awareness of nutrition issues, realities, key concepts, and related interventions.

Potential county donors obtain data on county workloads from KDHS 2014, World Bank Group projections over the

same, the DHIS2 primary data platform, the CNAP at county level and related unit costings for nutrition interventions. Some donors engage in their own needs' assessment research and evaluation exercises from baselines, feasibility studies, costing, and budgeting exercises. Most nutrition field donors focus on available secondary data to estimate costings, budgeting and rolling out estimates. PICA process conversations suggest that donors, development partners and NGOs usually involve the county in related budgeting processes and funding mechanisms, as they estimate the funding necessary for nutrition from external sources.

In articulating budgeting challenges, key county informants alluded to the lack of competence amongst participating staff, limited knowledge of priorities settings and limited exposure, i.e., weak capacity to develop realistic budget plans. A related weakness shared was the lack of relevant computer package skills and experience (including spreadsheets) and related budgeting tools. PICA discussions also highlighted challenges of turning a blind eye to cross-cutting issues, including climate change and gender.

## Advocacy for nutrition financing

In Isiolo County, the coverage achieved with currently available resources is low and has to do with limited resources and lack of awareness as conversations with key players revealed. There is, therefore, a need to escalate the extent of funding to the facets of IMAM, and other nutrition-specific and nutrition-sensitive interventions, including WASH. The county has allocations to departments, but it is mostly perceived that nutrition is a health docket responsibility even though other departments at the county level also unknowingly play a key role in achieving nutrition outcomes, especially the agriculture and water sectors. Due to rising awareness on the concept of nutrition-specific and nutrition-sensitive budget responsiveness to nutrition, each key sector leads from county MDA directors to chief officers, and ward and subcounty administrators including MCAs have escalated advocacy, albeit subtly. This is because of low health and nutrition awareness among these groups. Most sector leads and county administrators have done advocacy at the county level, and mainly through the audience with budgeting authorities, but the soft skills to make convincing cases seem to be missing.

Support is needed at allocation levels. The county government should have a good relationship with partners to get support to increase budget in funding.'

—Merti, MCAs

'Has been involved in advocating to have health to get major share of the county budget, to stop relying entirely from the partners who are the ones with bigger support for nutrition.' —Garbatulla, SC administrator

In Marsabit County, the directors reported that they have been pushing for programs-based budgeting, where programs are given

budgets. Most of the county development activities are funded externally by donors and NGOs, because departments are given barely 30% of the county's allocation—95% of it goes to salaries and wages. Only about 5% is left for development. This is counterproductive for nutrition given that the allocation for nutrition by the county, as shown in Figure 3.2, has been on the decline.

The advocacy efforts for increased funding mainly entail engagement with the county assembly or, in some cases, the partners or potential donors. At the executive level, finance and the economic planning departments are targeted. The CNAP is a critical advocacy tool but does not provide concrete guidance on how to convince and influence the funding allocation, a soft skill that is missing in the county. It was evident and apparent from the KIIs, which identified that the main advocacy work should go back to the community. Children should be looked after, and the community should prioritize children's care and nutrition.

## Conclusion on the budget analysis for Isiolo and Marsabit

In the two studied counties, external sources of funds had been increasing over time—matching and even exceeding the declining government allocations for nutrition. This situation is precarious and unsustainable. While nutrition-sensitive allocations are on the rise generally, nutrition-specific allocations are on the decline, with contributions to the former being mainly through the agriculture and water sectors. County government allocations for nutrition are distributed among departments represented on the MSP-N, which lack effective tracking mechanisms and tools. This further contributes to the challenge of determining the adequacy of funds allocated for nutrition, with a strong, common feeling from anecdotal evidence that overall nutrition-related budgets remain highly inadequate. The CNAP remains a valuable tool for nutrition advocacy, while "soft" advocacy skills to influence budget allocations at higher levels of the executive and county assembly remain limited and require attention.

## Political and Economy Analysis

Social and economic effects on health and nutrition are now evident. Based on the differential probability analysis undertaken using KDHS data in Kenya, the study confirms the hypothesis that undernourished children are more susceptible to recurring illness (an increased risk to 4.1% points) and an increased risk of fever and malaria (increased risk equal to 1.8% points). This is according to the Kenya cost of hunger report.<sup>16</sup>

The study further estimated that in 2014, out of the 2.4 million incremental episodes of illness related to undernutrition, 2.1 million were associated with a higher risk of children being underweight. The estimated cost for underweight was Ksh 13.1 billion or US\$ 148.51 million. In addition, morbidities related to low birth weight were estimated at 52,194 episodes, with the associated cost at approximately Ksh 4.8 billion or US\$ 54.1 million.

### Power analysis

The focus of the power analysis was on understanding the nature of power relations and how these factors affect or are affected by the institutions (formal and informal) and the existing governance structure involved in addressing the challenge of acute malnutrition in the county. This involved the analysis of actors, interest groups and structures to show where power in the county lies, how it is distributed and possible conflicts of interest on both nutrition-specific and nutrition-sensitive interventions. The power analysis was mainly done to understand the government commitment to support nutrition interventions within the county. The analysis assessed which political offices and positions in the county had a higher capability to influence the important decision in nutrition; who and/or what might have been influencing county politicians to advocate for nutrition funding; and what was hindering progress in achieving nutrition outcomes at the county level. Targeted for information collection were the directors and departmental/sector leads, subcounty and ward administrators and the chairs of the subcounty and development committees.

### Isiolo County

It was established that in Isiolo County, the governor's office, county secretary's office, the cabinet and the county assembly, and special program department have a higher role in influencing critical decisions in nutrition. This is because the county relies on these offices for budget allocation as well as advocating for nutrition funding. The county assembly is one of the highest offices with an oversight role, legislation, and policy direction. Members of the County Assembly (MCAs) are critical in the approval of the budget for different departments. MCAs can present and advocate for important issues to the county assembly for their implementation.

Nutrition matters require the goodwill of the high-level office—the governor—and that sometimes it is captured in the governor's manifesto. The governor's office has the mandate to channel the funds to all the sectors in the county. The office has significant capability to influence nutrition decisions. The governor welcomes investors and development partners to the county, while the county executive members oversee planning and allocate budgets for different departments. Departmental heads can influence the county executive to allocate resources for departmental priorities. The department's chief

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<sup>16</sup> Cost of Hunger Study in Kenya. <https://reliefweb.int/report/kenya/cost-hunger-social-and-economic-impact-child-undernutrition-kenya>

officer, being an accounting officer for their specific departments, determines budget allocations for nutrition.

The assessment also established the external influence from the national government through the administrative office such as the county commissioner and the deputy county commissioner through the chief's office. There was also a feeling that external influence such as the National Assembly representative, women representative and the county senator can also influence the county executive to increase funding for nutrition.

'All leaders in political positions can influence important decisions in nutrition and in departments decisions in general. Leaders present their grievances while governor is the overall leader in the county.' –Member of County

Key figures in the community like the chiefs, CHVs and opinion leaders can also be used in bringing gaps identified at the community to the higher levels of leadership. Departmental Leaders are also used in airing views of their

The ward administrator is a key county grassroots position, especially in knowing the needs of the communities he or she serves.

Reasons why county politicians advocate for nutrition funding: Challenges such as persistent drought, especially during drought seasons, make county politicians advocate for nutrition funding. In the recent past, there has been an increased urge by county politicians to bail their people out of the drought situation. Another reason why county politicians advocate for nutrition funding include numerous petitions by the locals. When the community strongly insists on particular needs, there is a probability that these needs will be actualized by the political leaders and the development partners at the local level. The pressure by the community to see certain nutrition outcomes can push the county politicians to advocate for nutrition funding. Lack of knowledge among opinion leaders and lack of priority for nutrition may hinder advocacy by county leaders for nutrition financing.

Despite heavy investments by the national government, county government, development partners and other key stakeholders to curb malnutrition, including insecurity in the county, significant impacts on nutrition outcomes have not been realized. Seasonal insecurity, especially at the borders, and migration in search of water for livestock are key drivers of acute malnutrition, and especially the lack of diversified diets for children. The climatic conditions, vastness of the county and social-cultural issues among communities also influence nutrition outcomes.

'It is through the chief officers and CECs that nutrition can actually get a fair share of funding and attention. County assembly nutrition and health committees are key in moving the nutrition agenda forward.' –Isiolo County Director

*'When steps are made and we reach somewhere, unfavorable climate takes us back and have big negative impact. The ineffective use of resources allocated for nutrition is also another challenge. Another critical challenge is corruption.'* – Committee Chairperson of Isiolo County Assembly

## Marsabit County

From the interactions with top leadership, it was evident that nutrition is a top priority given that Marsabit County has lagged in achieving optimal nutrition outcomes. The greater Laisamis and North Horr sub-counties are always in need of emergency nutrition support due to poor nutrition indicators. The office of the governor and the county assembly has expressed in

The county assembly is the one that allocates funds and oversees the county expenditures, it is the only organ that supersedes even the governor's opinion.' –Marsabit County Director of Public Administration

'The situation on the ground, as far as nutrition is concerned, when put in the right picture, influences allocation of funding. During the public participation process, the community is only interested in infrastructure development and so little is done in areas of nutrition. Public participation needs to be guides because when there is a problem on the ground that is what is catered for at that moment.' – Director preventive/promotive health services.

speeches that nutrition is a top priority and they have budgeted for it in almost all the departments, albeit not sufficiently. The Members of County Assembly (MCAs) have been on the frontline in making important budgetary planning and resource allocation decisions at the county assembly. The passing of the budget largely depends on county leaders in the county assembly, and this means that potential solutions to multisectoral nutrition budget gaps will have to finally be approved/passed by the same leaders.

It was also key to investigate who and/or what might influence county politicians to advocate for nutrition funding. The long dry spell that characterizes the ASAL environment and drought situation is a major contributor of the public voice. It is apparent that the community members pressurize the political representatives to advocate for more funding to be allocated to more critical livelihood issues including responding to drought and emergency responses to disease outbreaks. The above factors prompt the county leadership to be more vocal as a form of showing concern for the plight of their voters. This can be an entry point for multisectoral nutrition advocacy where communities are capacity built to articulate nutrition issues to the leaders alongside seemingly more pressing emergency issues. In addition, there is the constant conflict that arises due to conflict for livestock pasture and water and cattle rustling harm nutrition – and this is also a concern for the politicians.

Various factors hinder the achievement of favorable nutrition outcomes. Prevalence of malnutrition within the county has been over the emergency threshold over the years and several efforts have been put in place to avert the situation. Infrastructural and connectivity challenges in reaching remote areas on the county, especially in areas where GAM rates are high; inaccessibility to markets to purchase or even sell livestock; recurrent drought; illiteracy level where almost 80% of people in Marsabit County were known to be illiterate; little or no information on nutrition; inadequate dietary diversity are some of the drivers to poor nutrition outcomes.

Issues like persistent drought makes county politicians to advocate for nutrition funding more so the times when drought occurs. There is that urge on the county politician's part to seek to bail their people out of dire situations like drought when it occurs and hence, they end up advocating for nutrition funding. Marsabit County

Further, it was established that some policies including those related to multisectoral nutrition have not been adequately implemented and this limits their potential impacts.

The low level of development is one problem, it's hard to know if our county is growing economically or if its stagnant. Pastoralism is slowly reducing as a way of life because livestock are dying because of drought and natural disaster. The other thing is lack of proper planning in advance, we only try to treat the symptoms and not the cause itself. We do not give nutrition and the priority it deserves - Marsabit County Director of Public Administration

## Economic drivers for multisectoral approaches to nutrition

Information on the economical drivers of nutrition was drawn from the sector directors, sub-county, and ward administrators, as well as chair of sub-county and ward development committees.

### Isiolo county

In Isiolo county, majority said that the Departments of Agriculture, Livestock and Fisheries has had greater impact on nutrition, having partnered with various partners (including WFP, VSF and UNICEF) in undertaking various livelihood projects including cash transfers, provision of seeds and fishing projects. It was anecdotally reported that the introduction of special funds for women, PWDs and youth has also had a significant effect on nutrition outcomes. These groups access revolving funds as a group, and this contributes to their economic stability. Other mentioned interventions that have made improvements in nutrition include programs such as community restocking for communities who have lost livestock and capacity building of health workers on social behavior change. Additionally, Isiolo county has partnered with various NGOs such as Living Goods to boost nutrition and primary health care programs and the Boma in implementing micro-enterprise programs through empowering women to invest in business.

Majority of key informants also mentioned some economic investments in the county that had not caused appreciable improvements in nutrition. These resource intensive infrastructural projects included building of county offices, county chambers, county stadium—all at the expense of other public investments, including nutrition. It was felt that county projects such as the Isiolo abattoir, which will take a long time to be completed (as indicated at the time of this report), has the least effects on nutrition issues, given the level of its use by the community. Some projects were not comprehensively done and therefore had none or limited impact. Point in case was the construction of health facilities which were not accompanied by staffing or the provision of health and nutrition commodities.

To ensure the county economic improvements lead to significant improvements in nutrition, majority of participants agreed that the county could lobby for partner's support; increase budget financing for nutrition; continue partnering with external donors for technical and financial support; ensure funds are utilized well; and increase the emphasis on improving nutrition outcomes. There were also suggestions that WDCs be focal in multisectoral nutrition at the community level. The WDCs can pass the right information to the ward administrator, who informs higher offices for more attention. This process should be supported and emphasized to accelerate the impact at the community level. Participants also emphasized the need to invest in preventing hunger rather than remedying the effects of hunger and motivating (give incentives) and capacity building of community health volunteers (CHVs) for broader

multisectoral nutrition interventions, rather than only focus on health sector interventions. CHVs could also be utilized to carry out a multisectoral needs assessment at the community level.

## Marsabit County

In Marsabit County, the majority of the participants agreed that the economic development efforts that have had significant improvements in nutrition outcomes include the tarmacking of the road from Isiolo to Moyale, a game changer that has transformed the transport system for these areas in accessing services and improving business opportunities due to ease in mobility; investments in rainwater harvesting in places such as Saku and Moyale; diversification of agriculture including the introduction of kitchen gardening among the pastoralists, albeit driven mainly by NGOs; provision of revolving group funds for women, people with disabilities and youths; and a program implementing safety nets cash transfer programs where people get money to buy food to improve nutritional status. The school feeding program that was started by the county government in the past five years has impacted the nutrition status of school-age children from poor backgrounds as well as subsidized money spent on food by families—hence, use of the money for other needs.

Several economic developments that were reported to have had the least significant improvement on nutrition included investments in infrastructural projects like the construction of offices and a stadium which were perceived to have been done at the expense of other important programs, such as nutrition-sensitive programs. Charcoal burning was also reported to have limited significance on nutrition due to the minimal income it generates. This illegal economic activity also has a long-term negative environmental impact. For the construction of North Horr to Kalacha road, about Kshs 60 million was spent and the nature of the road by the time of the assessment was in great disrepair.

## Social drivers in multisectoral nutrition

This section looks at community-level social perceptions on drivers of change for nutrition. Key informants were the directors and sector leads, subcounty and ward administrators and the chairs of the subcounty and ward development committees.

## Isiolo County

Participants highlighted that women were least involved in decision-making in the families, despite their key role in household nutrition. For example, when animals were to be sold, they are not consulted. Cultural gender issues were also identified, where women are not endorsed for senior political positions.

In response to the question on how women involvement in political processes at the county could be increased/improved, majority of the key informants suggested the need to give women equal representation at the cabinet level or higher decision-making levels by giving specific slots to women for political seats. The county policies should be made to guide women's involvement in the decision-making levels and to protect their place in decision-making at the county level. Participants proposed that women should be encouraged by funding them to vie for political seats. It was also highlighted that the county government, together with various stakeholders, should come up with clear interventions such as awareness creation whereby women are made aware of their role within the society plus firmly following the affirmative action requirement.

It was also proposed that women and young girls need to be mentored on leadership roles—empowering them by giving them knowledge and skills as they play a bigger role in raising children—and supported and involved in all decision-making processes, from the household level to county levels.



Other gender-related support identified was training mothers to take care of their children; introducing kitchen garden in areas where there is water; provision of grants and capacity building on saving and investments for women groups and vulnerable mothers; discouragement of early marriages at all levels; and encouraging and supporting girl's education.

'Girl child education will create natural women leaders and promote women empowerment. Affirmative action on 1/3 gender rule, e.g., during recruitment, community empowerment is needed in Isiolo County. Gender-related policies and laws need to be enforced.' –KII with County Director of Agriculture

## Marsabit County

The general cultural practice in Marsabit County is to undermine women's roles in the decision and political processes. There is a need to heighten awareness creation and transform the county systems to give opportunity to all and promote equity and equality for those who have been marginalized. There was an emphasis to do vigorous campaigns and lobby the elders and the institutions to understand and convince the Marsabit County community that women are important players in society, and especially in developing and promoting sustainable livelihoods. The key informants recognized that this starts with eliminating bad cultural beliefs about women and guarding against FGM and early marriages. It was also apparent that investment in the education system is another important milestone that gives every girl child an opportunity to go to school to improve their lives. It is well understood that maternal education and child malnutrition are related.

It was well recognized among the participating key informants that for women to participate in political leadership, there should be a planned and deliberate awareness creation whereby women are made more aware of their role within the society. This should be done firmly through various means including affirmative action. It was apparent that empowerment should be done through the allocation of development projects; for example, by putting some five to 10 women together and giving them contracts as part of economically empowering them. It was also realized that on their part, women must also be aggressive and take their space in the political offices and in leadership, competing where the posts are competitive. The one-third rule should be considered, and women in influential offices should push for the policies to avert malnutrition.

## Conclusion on Political Economy Analysis

### Isiolo County

The awareness of nutrition among the top leadership is still limited to nutrition as a health facet but not an issue that needs a multisectoral approach. While the governor, county secretary, chief officer and MCAs are likely positions of influence in Isiolo County, external positions such as county commissioner, national assembly representatives, women representatives and county senators are also key to target with advocacy and awareness on multisectoral nutrition. Political leaders are more responsive to community demands related to emergency needs such as drought and disease outbreaks—this can be used as an entry point for multisectoral nutrition advocacy. Gender is a long-standing social issue of concern that will need longer-term action including strengthening relevant policy implementations.



## Marsabit county

Lack of political goodwill is one of the major factors hindering the progress of achieving nutrition outcomes in Marsabit County. It was clear that although there seems to be great commitment and support towards nutrition within the county leadership in Marsabit, there is a need for improved advocacy so that nutrition is not only given priority in planning but also in resource allocation. The advocacy should target politicians and leaders, especially the MCAs and the governor’s office. Economic development drivers are known and can be augmented to cause positive change in support of livelihoods, and eventually the nutrition status of children. The social drivers, mostly gender perspectives, are well identified and peculiar for Marsabit—and with the prevailing efforts with room for improvement.

## PICA Recommendations for Isiolo County

To foster focus and accelerate community-level impact in promoting the reduction of acute malnutrition in the county action, much of the support from partners (including Nawiri) should be saturated at the ward and sub-ward level while building the capacities of the county and subcounty systems. In the finding’s sections of the HOCAI, the implications for cascading the county-level actions at the subcounty and ward levels have been given for each respective gap statement and actions planned. The budgeted planned actions will be implemented by the formed multisectoral platform for nutrition in the county. This platform, however, needs to be represented at and robustly linked to the subcounty, ward and sub-ward systems for effective community-level impact.

Specific recommendation for institutional capacity strengthening as per the findings, observations, deliberations, and reflections from the adapted HOCAI process, budget analysis assessment and PEA study are as shown in Table 3-22 below.

**Table 3-22: Recommendations for Isiolo**

#	Summary findings	Recommendations
<b>A</b>	<b>Institutional strengthening at county, sub-county, ward, and sub-ward levels</b>	
<b>1</b>	The county conducted the adapted HOCAI workshop, identified the gaps and opportunities in the various capacity areas, and agreed on the action plans to strengthen county capacity to address acute malnutrition, but actions budgeting process to be completed at the county	Technical and resource support to County MSP-N to complete HOCAI budgeting process and commence the planned actions to strengthen the capacity of the county, sub-counties, and wards in multisectoral nutrition
<b>2</b>	Sectoral nutrition targets exist but the actions not well mainstreamed to optimize nutrition sensitivity, e.g., nutrition education not streamlined into other sectors other than health	Sector by sector orientation, as well as group (all sector together) orientation, on streamlining of their respective policies, strategies, and actions to be more nutrition sensitive. This will be accompanied by attendant revision of sector/departmental functions, TORs and job descriptions of nutrition focal persona and training of staff <sup>17</sup>
<b>3</b>	The MSP-N is functional at the county level but not formally recognized and not robustly linked to the possible subcounty and ward-level multisectoral systems	Formalize the MSP-N (official recognition by the governor and the county assembly) and strongly link it up with subcounty, ward and sub-ward levels multisectoral platforms and structures (potentially the respective development committees) in facilitating and coordinating

<sup>17</sup> Group orientation might be beneficial to let them understand they are working for a common agenda (while stating their individual roles and responsibilities) and to reinforce each other’s activities.

	Not all sub-counties and wards have functional development committees as potential multisectoral platforms to be linked to and work collaboratively with the MSP-N	nutrition-sensitive and nutrition-specific actions at all levels in the county  Where not present, support the formation of the multisectoral systems/structure at the sub-county, ward, and sub-ward levels; and ensure as many relevant sectors are as possible are represented and active
4	Sub-county, ward, and sub-ward multisectoral systems are critical in yielding community-level impacts in nutrition	Strengthening ward-level multisectoral nutrition actions through supporting the ward structures (possibly the ward development committees) to spearhead the collaboration and coordination of different sectors working at ward and sub-ward levels. The implications for cascading capacity efforts up to the community level given in this report to provide viable entry points.
5	The processes executed and lessons learned in strengthening multisectoral nutrition in the context of this county may be lost and not benefit other counties (in Kenya) and countries	Document the capacity assessment and strengthening processes, tools used, and the guidelines/frameworks developed for future adaptation within and without Nawiri program areas. Potentially, relevant products that can be published are: <ul style="list-style-type: none"> <li>i. An adapted HOCAI manual for strengthening multisectoral nutrition capacity for use in other counties (in Kenya) and countries; including the costs involved in the first and subsequent HOCAI processes</li> <li>ii. Guidelines/frameworks for strengthening community-level (ward and sub-ward level) multisectoral systems for nutrition</li> <li>iii. Critical lessons learned in supporting community-level initiatives in multisectoral nutrition</li> </ul>
6	Isiolo County MSP-N is now familiar with adapted HOCAI, and the process can be conducted at the county level more effectively considering the previous lessons learned and at a relatively lower cost compared to the initial HOCAI	Conduct subsequent adapted HOCAI processes during and after capacity strengthening efforts to gauge progress and further inform more actions in multisectoral nutrition to improve and sustain improvements in addressing the challenge of acute malnutrition
7	Varied approaches and planned HOCAI-generated actions by the two counties of Marsabit and Isiolo provide an opportunity for a wealth of lessons to be learned and shared between the two counties and beyond	Use the baseline and subsequent HOCAI processes to promote inter-county learning on capacity strengthening through sharing of lessons learned, challenges and best and novel practices/approaches in talking about the challenge of acute malnutrition sustainably
B	<b>Budget Analysis</b>	
1	There is no budget resource allocation and tracking tools in Isiolo County other than ad hoc efforts similar to the present exercise of using the STRING tool	Identify and adopt the suitable tool for Isiolo County and advocate for its use to track budget allocation, expenditures and facilitate the provision of feedback to the budgeting process
2	The funding for nutrition is on an increasing trajectory overall, and this is positive for the county albeit no tangible results to account for	Integrate into the nutrition tracking, regular analysis of nutrition spending and monitoring if funding is used for the right planned purpose.
3	When compared with CNAP budgets as a benchmark, the funding allocation for nutrition in Isiolo County is inadequate	Continue advocating for more funding for nutrition, both sensitive and specific components in all the relevant sectors. This should include advocating for the specifically identified line items respective to program gaps

4	Water and agriculture departments were experiencing a reduced budget deficit in two preceding budget years, and this was a sign that there were relatively better funded for nutrition compared to other departments	Increased leverage for nutrition-sensitive funding and learn lessons from the water and agriculture departments on how to reduce the nutrition budget deficits
5	Limited capacity development among key nutrition-affiliated staff on nutrition budget tracking processes	Capacity development to departmental staff on nutrition budget tracking processes as well as the tools that will be adopted by the county. The selected tools must be usable by planning cadre and departmental and sector leads
6	Soft advocacy skills to influence budget allocation at higher levels of executive and county assembly and to complement the CNAP document as an advocacy tool are limited	Capacity build (training) of the MSP-N members on advocacy skills to augment their positions of influence in planning and budget allocation for multisectoral nutrition
C	<b>Political and economic issues linked to nutrition</b>	
1	There is low awareness of multisectoral nutrition among key political leaders and there is limited prioritization of nutrition as a development agenda	Scale up awareness and advocacy for multisectoral nutrition especially among the governor, county secretary, chief officer and MCAs (through the relevant county assembly committees). The focus should be on the importance of passing relevant bills related to nutrition and increasing funding for nutrition in the relevant sectors.
2	External influencers on development issues in the county include the county commissioner, national assembly representatives, women representative, and county senators	Extend and contextualize awareness and advocacy for multisectoral nutrition to target county commissioner, national assembly representatives, women representative, and county senators
3	Pressing community needs strongly articulated and presented by the community to politicians are key in influencing action by the county	Capacity builds the communities and the relevant community structures to articulate multisectoral nutrition issues during public participation and when presenting other key pressing needs
4	Unfavorable climate diminishes the impact of developmental progress made at the county through triggering migration, limited access to diverse diets and limited meal frequency	Policy and decision-makers as well as partners to focus on supporting approaches that promote resilience to drought including scaling up support for agropastoralism.
5	Gender issues have been well identified as a critical social concern that needs the attention of the highest authority in the county and by all departments	Augment the implementation of gender and gender-related policies, and scale up the advocacy and awareness from top leadership and politicians to departmental staff and the community level

## PICA Recommendations for Marsabit County

To foster focus and accelerate community-level impact in promoting the reduction of acute malnutrition in the county, much of the support from partners (including Nawiri) should be saturated at the ward and sub-ward levels while building the capacities of the subcounty and county and systems. In the finding’s sections of the HOCAI, the implications for cascading the county-level actions at the sub-county and ward levels have been given for each respective gap statement and actions planned. The budgeted planned actions will be implemented by the MSP-N, the semi-legitimate multisectoral platform for nutrition in the county. This platform, however, needs to be represented at and robustly linked to the subcounty, ward, and sub-ward systems for effective community-level impact.

Specific recommendations for institutional capacity strengthening as per the findings, observations, deliberations, and reflections from the adapted HOCAI process, budget analysis assessment and PEA study are as shown in Table 3-23 below.

**Table 3-23: Recommendations for Marsabit**

#	Summary findings, observations and upcoming issues	Recommendations
<b>A</b>	<b>Institutional strengthening at county, subcounty, ward and sub-ward levels</b>	
1	The county conducted the adapted HOCAI workshop, identified the gaps and opportunities in the various capacity areas, and agreed on the action plans to strengthen county capacity to address acute malnutrition, but actions budgeting process to be completed at the county level.	Technical and resource support to County MSP-N to complete HOCAI budgeting process and commence the planned actions to strengthen the capacity of the county, sub-counties, and wards in multisectoral nutrition
2	Sectoral nutrition targets exist but the actions are not well mainstreamed to optimize nutrition sensitivity, e.g., nutrition education not streamlined into sectors other than health	Sector by sector orientation, as well as group (all sector together) orientation, on streamlining of their respective policies, strategies, and actions to be more nutrition sensitive, and this to be accompanied by attendant revision of sector/departmental functions, TORs and job descriptions of nutrition focal persona and training of staff <sup>18</sup>
3	The MSP-N is functional at the county level but not formally recognized and not robustly linked to the possible subcounty- and ward-level multisectoral systems  Not all sub-counties and wards have functional development committees as potential multisectoral platforms to be linked to and to work collaboratively with the MSP-N	Formalize the MSP-N (official recognition by the governor and the county assembly) and strongly link it up with subcounty, ward and sub-ward levels multisectoral platforms and structures (potentially the respective development committees) in facilitating and coordinating nutrition-sensitive and nutrition-specific actions at all levels in the county  Where not present, support the formation of the multisectoral systems/structure at the subcounty, ward and sub-ward levels; and ensure as many relevant sectors as possible are represented and active
4	Sub-county, ward, and sub-ward multisectoral systems are critical in yielding community level impacts in nutrition	Strengthening ward-level multisectoral nutrition actions through supporting the ward committees to spearhead the collaboration and coordination of different sectors working at ward and sub-ward levels. The implications for cascading capacity efforts up to the community level given in this report to provide viable entry points.
5	The processes executed and lessons learned in strengthening multisectoral nutrition in the context of this county may be lost and not benefit other counties (in Kenya) and countries.	Document the capacity assessment and strengthening processes, tools used, and guidelines/frameworks developed for future adaptation within and without Nawiri program areas. Potentially, relevant products that can be published are:  i. An adapted HOCAI manual for strengthening multisectoral nutrition capacity for use in other counties (in Kenya) and countries; including the costs involved in the first and subsequent HOCAI processes  ii. Guidelines/frameworks for strengthening community-level (ward and sub-ward level) multisectoral systems for nutrition

<sup>18</sup> Group orientation might be beneficial to let them understand they are working for a common agenda (while stating their individual roles and responsibilities) as well as reinforce each other's activities.

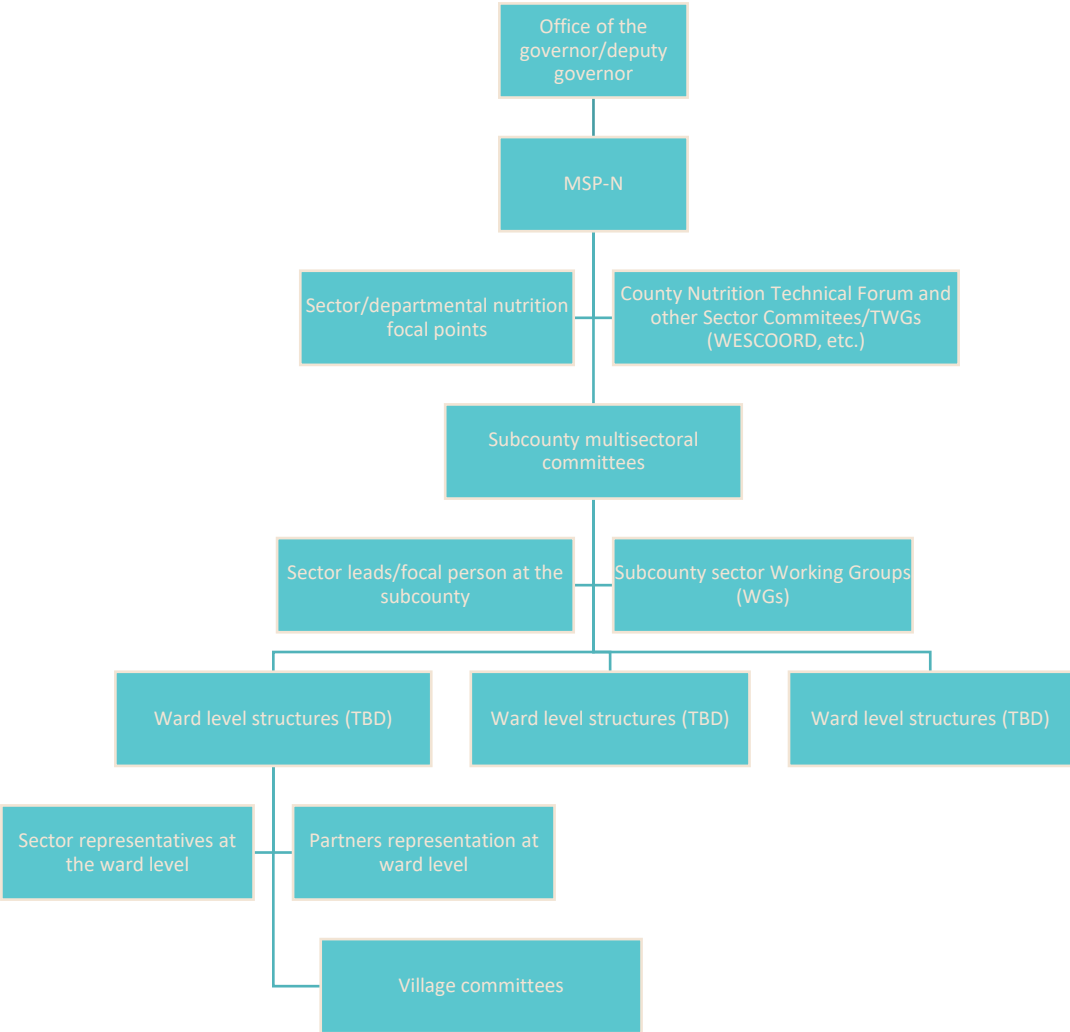
		iii. Critical lessons learned in supporting community-level initiatives in multisectoral nutrition
6	The Marsabit County MSP-N is now familiar with adapted HOCAI, and the process can be conducted at the county level more effectively considering the previous lessons learned and at relatively lower cost compared to the initial HOCAI	Conduct subsequent adapted HOCAI processes during and after capacity strengthening efforts to gauge progress and further inform more actions in multisectoral nutrition to improve and sustain improvements in addressing the challenge of acute malnutrition
7	Varied approaches and planned HOCAI-generated actions by the two counties of Marsabit and Isiolo provide an opportunity for a wealth of lessons to be learned and shared between the two counties and beyond	Use the baseline and subsequent HOCAI processes to promote inter-county learning on capacity strengthening through sharing of lessons learned, challenges and best and novel practices/approaches in talking the challenge of acute malnutrition sustainably
<b>B</b>	<b>Budgeting and financing for nutrition</b>	
1	Lack of budget resource tracking tool (s) beyond the IFMIS returns with the national treasury	The advocacy, vouching for and formulation of nutrition budget tracking tools with county government and county nutrition stakeholders. The tool should reflect the multifaceted approaches by a multisectoral stakeholder consortium and all the plausible budget line items that go with such operations.
2	External sources of funds are increasing with time to match and exceed government allocations for nutrition, a situation which is precarious and unsustainable. There was no indication of donors co-budgeting with the county for informed funding level and appropriate mechanism of supporting nutrition	Partners and external donors to introduce funding conditions such as matching of their contribution by the county, at a rate way above their contributions. For instance, a funding of Kes 100 million only if there is a corresponding county commitment of Kes 150 million (50% more).
3	Nutrition-sensitive allocation is on the rise, while generally the specific is on the decline with the contribution for the former being mainly in agriculture and water sectors	MSP-N to leverage the agriculture and water sectors to scale up nutrition-sensitive interventions due to relative substantial funds allocation to these sectors
4	Lack of basic capacity development among key nutrition-affiliated staff on nutrition budget tracking processes and tools	Capacity development to departmental staff on nutrition budget tracking processes and tools. The selected tools must be usable by planning cadre and departmental and sector leads
5	There is a need for staff to learn about the importance of nutrition resource tracking and how to interpret analytical output of the tools developed so as to be able to advocate for nutrition	Capacity development on nutrition resource tracking tools outcomes interpretation and advocacy notes on the same
6	Funds allocated for nutrition are either inadequate, adequacy determination difficult or not even well aligned to have significant nutrition impact	In tandem with efforts and advocacy for increasing funds for nutrition, there is a need to specify the actual nutrition lines and ensure the use and tracking of funds for nutrition in all the relevant sectors
7	While CNAP is a valuable tool for nutrition advocacy, the “soft” advocacy skills to influence budget allocation at higher levels of executive and county assembly are limited	Capacity build (training) of the MSP-N members on advocacy skills to augment their positions of influence in budget allocation for multisectoral nutrition
<b>C</b>	<b>Political economy issues linked to nutrition</b>	

1	<p>The political positions with greater propensity to positively influence policy change, planning and resource allocation to nutrition are the governor and the members of county assembly</p> <p>A significant change brought about by devolution is the resource availability at the county level and the semi-autonomy in decision-making, including in planning and resource allocation through the responsible committees in the county assembly</p>	<p>Intensify advocacy for multisectoral nutrition among the top leadership and politicians, notably the governor (and the deputy) and the MCAs through the relevant thematic/sectoral committees as well as in the specially organized advocacy forums</p>
2	<p>Politicians are more concerned with issues that affect the community in significant ways, namely the severe drought and the attendant effects such as conflicts, acute lack of food and outbreak of diseases</p>	<p>Multisectoral nutrition advocacy among top leadership and politicians to use the issues that are of utmost concern to them as entry points, including drought, nutrition and health emergencies and conflicts</p>
3	<p>There are identified potential economic drivers for nutrition, as well as development efforts, that are perceived not to have or have negative effects on the peoples' livelihoods such as the much resource-intensive building of sports stadium</p>	<p>Awareness and lobbying for developmental initiatives with higher propensity to positively change nutrition outcomes and advocate against priorities that have little or no effects on the livelihoods</p>
4	<p>Efforts to support women's equal representation at the cabinet level or decision-making levels are ongoing but hampered by persisting cultural believes and attitudes</p>	<p>Intensify advocacy on the role and importance of women's involvement in leadership and decision-making, as well as dispelling negative cultural attitudes towards women</p>

## Proposed MSP-N Structure for Isiolo and Marsabit Counties

The MSP-N should pursue full legitimacy and recognition by reporting to the office of the governor or the designated county official in an acting capacity and closely link and work closely with the County Nutrition Technical Forum (CNTF) and other sector working groups (WGs) or committees. The MSP-N membership is by the directors of the represented department/sector. The day-to-day multisectoral nutrition functions as outlined in their TORs should be executed by the appointed sector/departmental nutrition focal points— reporting to the respective directors. At the subcounty level, a multisectoral platform will be implementing some of the MSP-N directives and decisions through collaboration with current partners and the departmental leads while guiding and supporting the ward multisectoral structures. Ward level multisectoral structures (discussions are ongoing with the counties to determine the correct structure) will work with the village-level committees to ensure that the sectors/departments and partners are responsive to context-specific community needs and approaches. This proposed structure is schematically represented in Figure 3-6, shown below.

**Figure 3-6: Proposed MSP-N structure from the county level to the community level**



# Appendices

## Appendix 1: Adapted HOCAI Participants from Isiolo and Marsabit Counties

Isiolo County			Marsabit County		
Name	Department /Sector	Designation	Name	Department/Sector	Designation
<b>Bishar Mohammed</b>	Water	Director, Water	<b>Rufo Liban</b>	MOH – Nutrition	Subcounty Nutrition Officer, Saku
<b>Sadia Halakhe</b>	Trade	Trade Officer	<b>Hassan Charfi</b>	Agriculture	Deputy County Director
<b>Florence Mwangangi</b>	Agriculture	County Director-Agriculture	<b>Roba Qalicha</b>	Economic Planning	Assistant Director
<b>Dr. Wario Galma</b>	Health	CEC-Health	<b>Hussein Hassan</b>	Fisheries	Senior Fisheries Officer
<b>Saida Abdirahman</b>	Health	County Nutrition Coordinator	<b>Hassan Halakhe</b>	MOH - Preventive & Promotive Health	Director
<b>Halima Hassan</b>	Gender	Director-Gender County Govt	<b>Janet Ahatho</b>	Environment & Natural Resources	Director
<b>Galgalo Ali</b>	Education	County Director-Education	<b>Kulamo Bullo</b>	Tourism, Gender, Culture & Social Services	County Executive Committee Member
<b>Dr. Joseph Muriira</b>	Livestock	County Director-Veterinary	<b>Galgalo Waqo</b>	Social Services	Director
<b>Felix Muthomi</b>	Fisheries	County Director-Fisheries	<b>Shakhe S. Katelo</b>	Water	Director
<b>Kiarie Anthony</b>	Communication	County Director-Communication	<b>Issack Hassan</b>	Education, Skills Development, Youth and Sports	Director
<b>Gabriel Manyinsa</b>	Economic planning	Social Economist	<b>Hussein K. Wario</b>	Trade, Industry and Enterprise Development	Director
<b>Mohamed Dokata</b>	Livestock	County Director-Livestock Production	<b>Tari Doti</b>	Executive	Deputy County Secretary
<b>Mustafa Wachu</b>	Administration	Chief Officer Public Admin	<b>Orge Bajji</b>	Civic Engagement & Public Participation	Director
<b>Dr. Lawrence Mwangela</b>	Agriculture	CEC-Agriculture, Livestock and Fisheries	<b>Stephen Riungu</b>	Livestock	SADLP
<b>Dr. Ahamed Galgalo</b>	Administration	County Secretary	<b>Elmi, Abdinasir</b>	Nawiri	Nawiri
<b>Dokata</b>	Livestock	County Director Livestock	<b>Nairobi Team</b>		
<b>Mustafa Wachu</b>	Administration	Chief Officer, Public Admin and IT	<b>Everlyn Matiri</b>	Nawiri	
<b>Tume Salad</b>	Gender	Gender Commissioner– National Govt. Isiolo Office	<b>Linner Cherotich</b>	Nawiri	
<b>Martin Waweru</b>	Nawiri	Nawiri	<b>Shadrack Oiye</b>	Lead consultant,	
			<b>Nelson Kamau</b>	VQC team	
			<b>Francis Oduor</b>	VQC team	



## Appendix 2: Adapted HOCAI Five-Day Program

### Isiolo County and Marsabit County Institutional Capacity Assessment in Addressing Acute Malnutrition

#### Using Holistic Organizational Capacity Assessment Instrument (HOCAI)

Time	Activity	Facilitator and notetaker	Important considerations
<b>Day 1: Introductions of the workshop, orientations to the process (Isiolo and Marsabit teams together) and policies, programs and frameworks</b>			
8:30–8:45am	Participant’s introduction and workshop norms		
8:45–9:00am	Welcoming statements from Nawiri and the counties		PowerPoint presentation
	Purpose and agenda of the workshop		
9:00–9:15am	Institutional capacity assessment principles		
9:15–9:30am	Introduction to the PICA and HOCAI process		PowerPoint presentation
9:30–10:00am	Guide to participants on self-assessment in the HOCAI process		PowerPoint presentation
<b>10:00–10:30am Tea break</b>			
10:30–11:30am	Guide continuation and mock HOCAI process		PowerPoint presentation, and the HOCAI tool in MS Excel
<b>At this point, Isiolo County and Marsabit County teams break into different rooms</b>			
11:30–1:00pm	HOCAI process: <b>Policies, programs and frameworks</b>		
<b>1:00–2:00pm Lunch Break</b>			
2:00–4:00pm	Continuation: <b>Policies, programs and frameworks</b>		
<b>4:00–4:15pm Tea Break</b>			
4:15–5:15pm	Continuation: <b>Policies, programs and frameworks</b>		
5:15–5:30pm	Day 1 closure and announcements		The two teams may be required to come together
<b>Day 2: HOCAI for resources and infrastructure and coordination and partnerships</b>			
8:30–8:45am	Recap of the previous day, challenges in the previous day and proposed solutions		
8:45–10:00am	HOCAI Workshop continued		
<b>10:00–10:15am Tea break</b>			
10:15–1:00pm	HOCAI workshop continued		
<b>1:00–2:00pm Lunch break</b>			
2:00–4:00pm	HOCAI continued		
<b>4:00–4:15pm Tea break</b>			
4:15–5:15pm	HOCAI workshop continued		
5:15–5:30pm	Day 2 closure and announcements		
<b>Day 3: HOCAI for resources and infrastructure and coordination and partnerships</b>			
8:30–8:45am	Recap of the previous day, challenges in the previous day and proposed solutions		
8:45–10:00am	HOCAI process: <b>Evidence-based decision-making</b>		
<b>10:00–10:30am Tea break</b>			
10:30–1:00pm	HOCAI process: Evidence-based decision-making		
<b>1:00–2:00pm Lunch break</b>			
2:00–4:00pm	HOCAI process: <b>Cross-cutting issues</b>		
<b>4:00–4:15pm Tea break</b>			

4:15–5:15pm	Continuation: <b>Cross-cutting issue</b>		
5:15–5:30pm	Day 3 closure and announcements		
<b>Day 4: Review of action plan and budgeting</b>			
8:45–10:00am	Completion of capacity areas not completed		
<b>10:00–10:30am Tea break</b>			
10:30–11:00am	Review of the action plan		
11:00–1:00pm	Budgeting for the action plan		
<b>1:00–2:00pm Lunch break</b>			
2:00–4:00pm	Continued budgeting for action plan		
<b>4:00–4:15pm Tea break</b>			
4:15–4:30pm	Day 4 closure and announcements		
<b>Day 5: Self-validation</b>			
9:00–9:30am	Recap of the entire HOCAI process		PowerPoint presentation
9:30–10:00am	Validation of the HOCAI action plan and budget		
<b>10:00–10:30am Tea break</b>			
10:30–12:15pm	Validation of the HOCAI action plan and budget		
12:15–1:00pm	Way forward and workshop closure		
<b>1:00–2:00pm Lunch and departure</b>			

## Appendix 3: Lessons learned in the adapted HOCAI process – Post process review

The participatory process elicited some lessons for consideration for future capacity assessments. Some critical ones are as listed below:

### Lessons related to the adapted HOCAI tool

1. Participants felt it was easier to list some possible actions/activities to address gaps identified in the assessment after the consensus on the gap statement rather than come back to this later. This also saved time in action planning.
2. Some activities under different capacity areas were found to be linked
3. Few amendments on the adapted tool would be required before subsequent use. These include simplifying the language used for some capacity statements and capacity indicators for easier comprehension by participants, rearranging some capacity indicators in order of strength and some typos. An example is under gender capacity area (5.1.3). Some verifications were repeated, hence increasing redundancies.
4. Some participants felt that the difference between the different levels was not clear, hence a challenge in building consensus along some capacity statements. It is advised that if in doubt/no consensus, the participants should choose a lower level as a representation of the worst-case scenario that would trigger the more robust response. It was urged that it was better to over respond owing to a lower score than under respond.

### Lessons related to the adapted HOCAI process

1. During assessment and action planning stage, splitting a county team into groups to work on the various components quickened the process. But this meant that full team participation in some capacity statements were missed unless the split teams converged in plenary to review each other's work.
2. It is important to note proposed activities on real time as they emerge from the self-assessment deliberations. This will ensure linkages in the thought process as well as saving time (back and forth) during the action planning session. Notably, the highlighted activities should inform discussions during action planning.

It was important to have a good representation of Nawiri staff from different focus areas (M&E, gender, learning, systems strengthening). This allowed for deeper reflections. Nawiri teams should come up with a plan on how they will support next steps (capacity strengthening) in a collaborative manner, including monitoring progress.

