

REPUBLIC OF KENYA



SIAYA COUNTY GOVERNMENT

THE COUNTY EXECUTIVE COMMITTEE

OFFICE OF CECM, DEPARTMENT OF HEALTH AND SANITATION

CABINET PAPER NO:/2021

DATE: 5TH MAY 2021

SUBJECT	NURTURING CARE FOR EARLY CHILDHOOD DEVELOPMENT IN SIAYA COUNTY
DECISION EXPECTED	COUNTY GOVERNMENT OF SIAYA ADOPTS NURTURING CARE FOR EARLY CHILDHOOD DEVELOPMENT PROGRAM AS A COUNTY GOVERNMENT PROGRAM AND COMMITS A BUDGET TO SUPPORT ITS IMPLEMENTATION

(i) DEFINITION OF TERMS:

Term	Definition
Early childhood	Refers to the period from prenatal to eight years of age, and it is the most intensive period of brain development throughout the lifespan” (WHO & UNICEF, 2012). This period is the most critical time for the growth and development of the child and needs the utmost attention and appropriate care.
Early Child Development	The cognitive, physical, language, socio-emotional and motor development of children from conception to eight years of age.
Early learning	Refers to young children learning through play, the active exploration of their environment and, most importantly, through interactions with the significant adults in their lives.
Responsive caregiving	Refers to the capacity of caregivers to observe and respond in a timely and appropriate manner to children’s movements, sounds and gestures and verbal requests.

The future of any society depends on its ability to foster the health and well-being of the next generation. Today's children will become tomorrow's citizens, leaders, workers, and parents. When we invest wisely in children and families, the next generation will pay that back through a lifetime of productivity and responsible citizenship.

In Kenya, various sectors have developed policies or other legal instruments aimed at promoting this emerging global trend. For instance, the Ministry of Health has prioritized NCfECD in the Kenya Newborn, Child and Adolescent Health Policy 2018 and Community Health Services Policy; the Ministry of Education has developed the National Early Childhood Education Policy 2018 and through the Ministry Parliament has enacted The early Childhood Education Act, 2021; and the Ministry of Agriculture has developed the Kenya Agri-Nutrition Strategy which is a road map that will accelerate the implementation of Agri-Nutrition related components in the National Food and Nutrition Security Policy (2012). These national policy and institutional frameworks provide enabling environment for scaling NCfECD in the country.

Siaya County is one of the first Counties in Kenya that has prioritized investment in NCfECD through increased multisectoral coverage of quality programming that incorporates health, nutrition, security and safety, responsive caregiving, and early learning.

(iii) **BACKGROUND:**

Science and Evidence have demonstrated that early childhood interventions early in life are important because they help mitigate the impact of adverse early experiences which if not addressed lead to poor health, poor educational attainment, economic dependency, increased violence and crime, greater substance abuse and depression, all of which add to the cost and burden in society. Research also indicates that in low and middle-income countries, 43 percent of children under five years of age are at risk of poverty, poor health, poor nutrition, and other adversities, which threatens their ability to reach their developmental potential. In Kenya, results of a study showed that 59 percent of children under five years of age were at risk of poor development based on a composite indicator of stunting, extreme poverty, or both.

In 2017, data from District Health Information Software (DHIS) and National Education Management Information System (NEMIS) indicated that children in Siaya County were also at risk of poor developmental outcomes due to factors such as poor nutrition, stunting, wasting, high prevalence of HIV & AIDs, low preschool enrolment and low uptake of essential healthcare services either due to the commodity stockouts, ignorance or irresponsive caregiving. Owing to the latter situation, in May 2018, the County Government of Siaya led by H.E the Governor initiated the process of scaling up Nurturing Care for ECD in Siaya County targeting the first 1000 days of life. The County Government adopted a model dubbed "*Smart Start Siaya Model*" which is Government-led, involving high level leadership engagement with representation from all the relevant sectors and organizations. The Smart Start Siaya Nurturing Care program is patronized by the First Lady and coordinated by a High Level Multi-Sectoral Team. Siaya County Government recognizes that all the components of nurturing care (responsive caregiving, opportunities for early learning, health, nutrition, and security and safety) cannot be implemented by one sector alone. The Smart Start Multi-Sectoral Team appreciates that opportunities for nurturing care exist across all

Table 1: Salient County Government Sectorial Roles

Sector	Role in Scaling Up Nurturing care Approaches
Department of Health	<ul style="list-style-type: none"> • Ensure women and young children have access to good-quality health and nutrition services • Provide amenities for ECD at health facilities • Make health and nutrition services more supportive of nurturing care • Increase outreach to families and children with the greatest risk of sub-optimal development • Establish specialized services for families and children with developmental difficulties and disabilities • Collaborate with other sectors to ensure a continuum of nurturing care throughout life course
Department of Education	<ul style="list-style-type: none"> • Integrate nurturing care practices, hygiene and nutrition in early childhood programmes • Engage families in early childhood programmes through social services • Integrate children who have additional needs and reach out to the most vulnerable • Embrace school feeding programme as a component of early learning to enhance ECD • Develop ECD infrastructure to support pre-primary learning • Support all ECD programs and services • Support the inclusion of all children, including those with special needs in their ECDE programmes and services • Sponsor pre-school teachers for training, including on special needs • Pay pre-school teachers including special needs education pre-school teachers. • Support barrier free infrastructure for ECD and ECDE. • Promote traditional cultural values and practices that promote healthy growth and development of all children, including those with special needs. • Register ECD & ECDE centers for development purposes.
Water Department	<ul style="list-style-type: none"> • Provision of clean and safe drinking water and water for sanitation in all ECD infrastructure and to support ECD programmes. • Build capacity in water management / conservation at community level. • Promote uptake of safe water and sanitation
Department of Agriculture	<ul style="list-style-type: none"> • Ensure food security and utilization of appropriate feeds • Provide technical advice to communities on proper crops and animal husbandry to improve nutrition among communities • Promote good agronomic practices in the County • Link support with conditions promoting Nurturing Care for ECD
Department of Roads and Public Works	<ul style="list-style-type: none"> • Supervise the provision of proper housing and other ECD infrastructure • Create access to ECD centers and health facilities • Provide construction plans and supervise construction of ECD and ECDE centers • Help in the design of appropriate and affordable equipment for young children • Ensure there is access to quality of ECD and ECDE physical facilities

	in the county.
3	Construction ECD Centers in the County with suitable amenities to facilitate early childhood education. Currently, there are a total of 1,104 ECD Learning Centers in the county of which 700 are public while 404 are private.
4	Development of legal, policy and institutional frameworks anchoring NCfECD interventions - The Siaya County Health Services Act, 2019, County Investment and Development Plan, Sectoral Strategic and Annual Work Plans, The Siaya County Community Health Bill and The Reproductive Maternal Neonatal Child Adolescent Health Bill which all contain nurturing care interventions.
5	In terms of human resource Nurturing Care champions have been identified and empowered to reach families and communities across the county. This has enhanced awareness creation of NCfECD activities and interventions as they have embedded nurturing care awareness creation and education in their routine engagement with the caregivers and communities.
6	Integration of Nurturing Care in most service delivery platforms has substantially been achieved through the multi-sectoral approach and workforce capacity has been built at all levels to cascade nurturing care information and services which has ensured that families and communities are reached through varied channels including mass media.
7	Nurturing care communication campaigns have been successfully conducted within the county and beyond. This has made the county to be a champion in Nurturing Care in the region and is currently the reference point and role model in the LREB Region on Nurturing Care.

(v) PROPOSED AREAS OF INTERVENTION

The following are key areas of intervention for purposes of sustaining the implementation of Nurturing Care for Early Childhood Development which the County Executive Committee is urged to approve for immediate implementation:

1. Direct and provide approval to all Departments to prioritize and allocate stand-alone budgets for nurturing care activities in the relevant sectoral budgets.
2. Direct all Departments to prepare and adopt a long-term financing strategy built on any available funding streams that support the components of nurturing care.
3. Provide approval for establishment of a high-level Nurturing Care Multi-Sectoral coordination mechanism with clear terms of reference and domiciled in the Office of the Governor to oversee implementation of Nurturing Care for ECD in the County.
4. Direct all Departments to mainstream Nurturing Care for Early Childhood Development interventions in relevant policies, legislations, development plans, programs and activities.
5. Grant authority to the Department of Health to recruit / appoint or deploy one officer to specifically coordinate Nurturing Care for ECD in the County alongside others to be appointed or deployed at sub county level to support mentorship on nurturing care and implementation within the sub counties.

Siaya County to be a center of excellence and a living University in Nurturing Care for ECD. Plans are also underway to have Siaya County support the **Lake Region Economic Block (LREB)** Counties in scaling up NCfECD. The County, therefore, needs to show its commitment by providing designated budgets and other resources to support nurturing care initiatives and ensure that all our children realize their full potential.

7. Donor support is increasingly becoming complementary as most development partners now make their support conditional on governments making budgetary provisions of the donor supported programs in their budgets. With this changing landscape in donor funding, NCfECD shall soon be suffocated of partner support if it is not mainstreamed into County Government planning and budgeting.
8. Investing in Nurturing Care for ECD is the best way that a county can boost shared prosperity, promote inclusive economic growth, expand equitable opportunity, and end extreme poverty and inequality.

(vii) **RISKS / EFFECT ON OTHER SECTORS:**

1. It is not anticipated that any risks or serious effects shall be visited on other sectors consequent to the approval sought in this Cabinet Paper. This is so because all the sectors involved are already participating in one way or the other in the Nurturing Care for ECD Program. On the contrary, all sectors covered by the Nurturing Care Framework will stand to benefit from additional resources, funding and support for promotion of nurturing care and the multi-sectoral action needed to further operationalize the Nurturing Care Framework.
2. It is further anticipated that the gains made through Nurturing Care for Early Childhood Development will translate to future realization of sustainable development goals and more so the County will have citizens who are productive and able to improve economic growth.
3. However, allocations of budgets by line Departments and realignment of functions to accommodate Nurturing Care for ECD program will minimally affect some of the programs of the Departments.

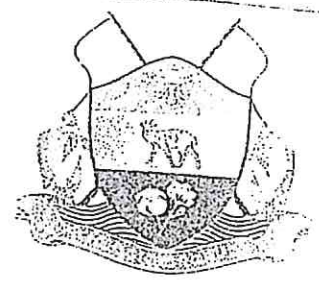
(viii) **FINANCIAL IMPLICATION:**

Traditionally, financing of ECD services is derived from public coffers, private investment, and households. These diverse financing and delivery systems support wider reach of quality services for Siaya County's young children. Costing studies undertaken recently in Kenya estimate unit costs of between KES. 1400.00 – KES. 2400.00 per child per month to provide childcare and pre-primary education services.

However, it is known that Departmental resources available in the County are scarce and thus the initial proposal is that each Department should allocate at a minimum of **Ksh. 1,000,000** in their respective annual budgets specifically for Nurturing Care for Early Childhood Development interventions to support the implementation of the activities as outlined in the nurturing care strategic plan. *(See attached Budget and Work Plan).*



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28 JAN 2021
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COUNTY GOVERNMENT OF SIAYA

Nurturing Care for Early Childhood Development Strategic Plan 2020 – 2024

"If we change the beginning of the story, we change the whole story."

February 2020

VISION 2030

[S] SMART START SIAYA

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FOREWORD

commitment to the development of her newborns and children and is aligned with the county's goal on attaining universal health coverage (UHC) in the next 5 years.

The Strategic interventions outlined in the strategic plan address the child comprehensively, focusing on the health and development needs during the newborn and early childhood period, and addressing the needs of the primary caregiver beyond his/her health. In parting with the traditional focus, this strategy integrates early child development initiatives into one unified framework, reinforcing the importance of the continuum of care. This strategy was developed over a period of six months through a highly consultative process. The process, guided by the integrated ECD Multi Sectoral Committee involved review of the ongoing interventions by different partners, sectors and community-based initiatives. The process also involved key informant interviews with stakeholders from the various departments of the County Government, development partners, non-governmental institutions, civil society groups including faith based organizations, and county child health focal officers.

The Strategy seeks to provide guidance to all stakeholders on the priority interventions for early childhood development in Siaya County. Furthermore, the strategy will provide direction on the coordination and scale up of Nurturing Care for ECD.

On behalf of the leadership of the County Government of Siaya, we commit to be part of the movement to create an inclusive and sustainable world, starting with investing in the earliest years to realize the right of every child to survive and thrive, to build a more sustainable future for all. It is my hope that we will have a well-coordinated approach in our interventions that translates into better health outcomes and improved health status of the population in Siaya County.

H.E. Cornell Rasanga Amoth
Governor of Siaya

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ACRONYMS

AIDS	Acquired Immune Deficiency Syndrome
ADS	Anglican Diocesan Services
ANC	Antenatal Care
AWP	Annual Work Plan
CBCPM	Community Based Child Protection Mechanism
CHAs	Community Health Assistants
GAP	Global A
TOT	Training of Trainers
ASRH	Adolescent Sexual and Reproductive Health
BCG	Bacillus Calmette Guerin (Tuberculosis)
CBOs	Community-based organizations
CGS	County Government of Siaya
CHMT	County Health Management Team
CHVs	Community Health Volunteers
CRC	Convention on the rights of the children
CRS	Catholic Relief Services
CRVS	Civil Registration and Vital Statistics
CS	Caesarian Section
CSOs	Civil Society organizations
DPT	Diphtheria Pertussis Tetanus
ECD	Early Childhood Development
EPI	Expanded Programme on Immunization
FBOs	Faith-based organizations

RMNCAH	Reproductive, Maternal, Newborn, Child and Adolescent Health
SBA	Skilled Birth Attendance
SCHMT	Sub-County Health Management Team
SDGs	Sustainable Development Goals
TBA	Traditional Birth Attendant
TFR	Total Fertility Rate
TWGs	Technical Working Groups
U5MR	Under-5 mortality
UHC	Universal Health Coverage
UN	United Nations
WASH	Water, Sanitation and Hygiene
UNAIDS	United Nations Programme on HIV/AIDS
UNCRC	United Nations Convention on the rights of the child
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
WHO	World Health Organization

quality, equity, and dignity. The strategic plan addresses findings from a desk review, key informant interviews, and a stakeholder prioritization exercise in setting forth strategic objectives that directly align with local and global commitments to the wellbeing of children in the early years of their lives.

The implementation of this strategic plan will require increased investment to achieve broad reaching sustainable impact with a focus on multi sectoral initiatives targeting the communities and families. The County Government through the integrated multi sectoral committee will coordinate the implementation of these interventions and will ensure high performance and financial accountability to achieve the anticipated outcomes. This will be accomplished through strategic and collaborative partnerships with key sectors, civil society, development partners, private sector, and community and also through expanding avenues of resource mobilization.

	realize their abilities, are able to cope with the normal stresses of life, work productively and fruitfully, and make a contribution to their communities.
Nurturing Care	This is the set of conditions that provide for children's health, <u>nutrition</u> , <u>security</u> and <u>safety</u> , <u>responsive caregiving</u> and <u>opportunities for early learning</u> . Nurturing children means keeping them safe, healthy and well nourished; paying attention and responding to their needs and interests, encouraging them to explore their environment and interact with caregivers and others.
Social determinants of health	The conditions, in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life.
Whole-of government approach	Public-service agencies working across portfolio boundaries, formally and informally, to achieve a shared goal. This produces an integrated government response to particular issues. It aims to achieve policy coherence in order to improve the effectiveness and efficiency of policies and programming
Whole-of society approach	It is the economic, social, political, and cultural attributes and opportunities associated with being women and men.

90m

children need nurturing care – the conditions that promote health, nutrition, security, safety, responsive caregiving and opportunities for early learning.

The Sustainable Development Goals have embraced young children's development, seeing it as key to the transformation that the world seeks to achieve by 2030. Embedded in the SDGs on hunger, health, education and justice are targets on malnutrition, child mortality, early learning and violence - targets that, together with others, outline an agenda for improving early childhood development. The UN Secretary-General's Global Strategy for Women's, Children's and Adolescents' Health, 2016–2030, synthesized the new vision under the objectives of Survive, Thrive and Transform. Never before has the opportunity for energizing investment in early childhood development been as good as it is now. Global institutions - including UNICEF, the World Bank Group, UNESCO and the World Health Organization have prioritized early childhood development in their programmes of work. It is more urgent than ever that we work together in a unified way towards common goals. This plan will help to guide the actions we must take to achieve results.

The promulgation of the Constitution in 2010 was a major milestone for the children of Kenya, as it recognizes some fundamental human rights, in keeping with the UN Convention on the Rights of the Child (UNCRC) and the African Charter on Rights and Welfare of Children (ACRWC) and other international and regional treaties. Implementing the global SDG agenda requires a shift from a focus on reducing mortality to ensuring that women, newborns, children and adolescents not only survive, but also thrive and realize their full potential. As the Government aligns with this new agenda, sustained, quality integrated effective interventions implemented at every level of care for the women, newborns and children are necessary for success. Kenya has made strides in developing a comprehensive Newborn, Child and Adolescent health strategy which has enshrined NCFECD as one of the high impact interventions. Although all counties in Kenya acknowledge and appreciate the importance of nurturing care for ECD, most of them struggle with the "how" to scale up the initiative. So far, Siaya County is privileged to be the first County in Kenya to initiate the scaling up of Nurturing Care for ECD, thereby taking the role of a model county and a living university.

In line with the recommendations in Lancet 2016 Series and the Global Strategy for Women's, Children's and Adolescents' Health (2016-2030), the County Government of Siaya through support from partners, began integrating nurturing care into the health

Rationale and Scope of the NCFECD Strategic Plan

The time has come to redefine early childhood development — linking separate fields of study, translating scientific evidence into practical, integrated interventions across health, nutrition, education and protection, and taking a more holistic approach to drive results for children. The purpose of the Nurturing Care for ECD Strategic Plan is thus to provide a detailed roadmap of action and framework for multisectoral engagement to support the effective implementation of the ECD interventions in Siaya County. The strategic plan seeks to ensure implementation of quality integrated services for all children of Siaya County. The Lancet Series (2016) on early childhood development stress the need for holistic programs and the need for urgent increase in multi-sectoral coverage.

This strategic plan provides the Smart Start Siaya Program with a proactive frame of reference to operationalize its mandate and guides the organization in achieving the envisaged vision of a county in which every child is able to develop their full potential and no child is left behind.

Process of developing the strategic plan

The development process of this document is a result of consultative meetings with County health leadership, the office of the First Lady, the multi-sectoral team partners, and community representatives. An in-depth literature review of relevant international, national and county government policy documents, guidelines, strategies and reports was conducted to inform the process. A consultant was brought on board to consolidate the views of the stakeholders and put the documentation together.

Table 1: Essential services Indicators from MICS and KHIS2 data

Performance Indicators	Siaya 2011& 2014%	Siaya 2019%	National KDHS 2014%	WHO targets %
Utilization of Essential Services				
Women receiving 1 st ANC services	80.8 (DHIS 2, 2014)	78 (KHIS 2,2019)	90	100
Antenatal care visits four times or more (%)	39.5 (DHIS 2, 2014)	53 (KHIS 2,2019)	58	100
Skilled birth attendance (%)	59.3(DHIS 2, 2014)	66 (KHIS 2,2019)	61	80
Postnatal care (PNC) in 2 days (%)	ND	50 (KHIS 2,2019)	53	100
Uptake of modern Contraceptives Methods (mCPR)	45(DHIS 2, 2014)	59 (KHIS 2,2019)	58	80

New Born and Child Health

Nurturing care for ECD programmes by promoting responsive caregiving have the potential to reduce childhood morbidity and mortality. Although Siaya County has made significant improvements in early childhood development (ECD) indicators, childhood mortality is still much higher compared to other counties in Kenya

Table 2: Mortality Rates in Siaya County

Performance Indicators	Siaya 2011& 2014	Siaya 2018	National (Kenya) KDHS 2014	WHO targets
Health status				
Neonatal Mortality (per 1,000 live births)	39 (MICS4 2011)	??(No survey)	22	16
Infant Mortality (per 1,000 live births)	111(MICS4 2011)	??(No survey)	39	20
Under 5 Mortality (per 1,000 live births)	159(MICS4 2011)	99 (KEMRI HDSS,2018)	52	Below 25

Causes on newborn and child deaths in Siaya County

Understanding the causes newborn and child deaths is important in ensuring prioritization of high impact interventions that address causes of high morbidity and mortality of newborns and children. The leading causes of newborn and child deaths in Kenya are preventable through implementation of well-known cost-effective evidence based integrated interventions. In Kenya, leading causes of newborns death are

Immunization is key to reducing morbidity, mortality and disability from the vaccine preventable diseases among children below five years. Currently 74% of health facilities in Siaya County are offering immunization services. Although the Coverage of fully immunized children has improved over time, the performance is still below the required national target of 95 percent.

Table 3: Immunization Indicators

Indicator	2017	2018	2019
BCG Coverage	64.9	73.4	74.3
DPT/Hep+HiB3(DPT 3 Coverage)	62.7	79.6	75.8
Percentage of Pregnant women given Tetanus Toxoid 3+	30.2	39.9	41.7
Proportion of children under one year who are fully immunized	66.5	82.3	72.7

Integrating Nurturing Care in HIV setting

The number of women of child-bearing age, living with HIV is increasing in numbers because of expanded access to life-saving treatment. Unfortunately, the levels of infection among young women have persisted despite availability of programmes aimed at preventing further transmission. Recent Kenya HIV Estimates Report (2018) revealed that Siaya County has increased number of new HIV infections amongst adolescents. The county is also experiencing high increase of teenage pregnancy and teen mothers. The need to scale up nurturing care for ECD can therefore not be underestimated if the children born of the teen mums are to survive and thrive. Remarkable progress has been made with regard to Early Infant Diagnosis (EID). However, more needs to be done to ensure no child born by HIV positive mothers turn positive. Responsive care giving would ensure that HIV positive mother take necessary measures to safeguard the child.

Table 4: Early Infant Diagnosis (EID)

	2015	2016	2017	2018	2019
	6.8%	5.4%	3.7%	2.3%	1.5%

Table 5: Children on ART in Siaya County as at December, 2019

Below 1 year	45
1 to 3 years	3135

boys and 40,210 girls). The teacher - child ratio currently stands at about 1: 43 against the international standard of 1:25/30.

Table 7: Trends in ECD learners enrolment progression

SUBCOUNTY	2013	2014	2015	2016	2017	2018	2019
	BOYS GIRLS	BOYS GIRLS	BOYS GIRLS	BOYS GIRLS	BOYS GIRLS	BOYS GIRLS	BOYS GIRLS
ALEGO USONGA	5428	6031	6701	7371	7738	8125	7571
	5382	5979	6643	7317	7704	8089	7507
GEM	5931	6590	7322	8054	8456	8679	7550
	5946	6606	7339	8037	8439	8561	7572
UGENYA	3600	4000	4444	4888	5138	5395	5887
	3427	3807	4229	4651	4884	5129	5651
UGUNJA	2204	2448	2719	2996	3146	3403	4190
	2243	2492	2768	3051	3303	3468	4212
BONDO	5456	6062	6735	7418	7789	8178	7504
	5415	6016	6684	7356	7724	8110	7452
RARIEDA	5792	6435	7149	7863	8261	8474	7760
	5764	6404	7863	7830	8222	8333	7816
TOTAL	28411	31566	35070	38590	40528	42255	40462
	28177	31304	35526	38242	40276	41690	40210
GRAND TOTAL	56588	62870	70596	76832	80804	83945	80672

Child Protection Safety and Security

Siaya County has invested in Social protection and social insurance (Safety Net programs) whereby they are supporting households living with and taking care of orphans with the aim of promoting household food consumption and food security.

Table 8: Household receiving support social protection

Indicator	2017	2018	2019
Households receiving cash transfer support	-	-	7970
Orphans receiving support from the Government	-	-	23910
Children receiving Hospital Insurance Subsidy	-	-	1500

Status of birth Registration in the County

Every child has the right to a name and a nationality and the right to protection from being deprived of his or her identity. Birth registration is a fundamental means of securing these rights for children. Although birth registration coverage stands at 78%, birth certificates issuance is still very low due to factors such as low human resource, caregiver's inability to pay the requisite fee for processing of birth certificates, weak

<p>program</p> <ul style="list-style-type: none"> ▪ Presence of CHVs covering all the households in Siaya County ▪ Highly motivated early childhood initiative workforce ▪ Committed Nurturing care implementing partners (PATH, CRS, KMET, Child fund, ADS Nyanza, Plan Int.) ▪ Presence of health leadership structures in the county, i.e. SCHMTs and CHMT ▪ Government's commitment to provide incentives to CHVs ▪ Integration of nurturing care into the health system and riding on available platforms – for sustainability 	<ul style="list-style-type: none"> ▪ Lack of mechanisms for ascertaining quality of nurturing care messaging at household levels. ▪ Lack of a digitized system to propagate Nurturing care messages to caregivers ▪ Lack of a system to update home visiting workforce knowledge and skills ▪ Lack of protective gears for home visiting workforce ▪ Inadequate health care workers and preschool teachers. ▪ Low utilization of maternal and child health care services (Antenatal care, skilled delivery, immunizations, postnatal care). ▪ Inadequate awareness on importance of early birth registration ▪ Farmers do not prioritize child healthy feeds ▪ No child playing spaces
<p>Opportunities</p>	<p>Challenges</p>
<ul style="list-style-type: none"> ▪ Presence of active leadership, governance structures at all level of implementation of nurturing care approaches ▪ Investing in ECD = High Return on Investment. ▪ Presence of active leadership/governance structures at health facilities (committees and boards) ▪ Political goodwill as a driver in health interventions ▪ Existing funding opportunities by; National government County government and Implementing partners ▪ Existing supportive community health structure ▪ Increasing interest in investing in ECD on the part of international donor partners. ▪ Devolution of resources and responsibilities at the County ▪ Good relationship between National and County Government ▪ The opportunity to lead the LREB in scaling NCFECD. ▪ Presence of county legislature, to facilitate domestication of health-related laws/regulations and drafting of new laws, if necessary ▪ Existing laws on child protection ▪ Existence of large number of unemployed but qualified HCWs and ECDE teachers ▪ Presence of NGOs, CSOs, CBOs, FBOs in the community participating in various social issues affecting ECD either directly or indirectly. ▪ Existing legal and administrative framework like the Constitution and other legislations ▪ Enabling policies and other international documents like Vision 2030 and SDGs ▪ Increase in emphasis on research and development 	<ul style="list-style-type: none"> ▪ Inadequate information and lack of awareness about nurturing care and early learning ▪ High rates of teen pregnancy. ▪ Mental health issues and psychological distress caused by environmental conditions can render caregivers incapable of responsive care ▪ Minimal participation of males in Nurturing care: Cultural norms surrounding Male involvement with their young children can prevent them from establishing nurturing, responsive relationships. ▪ Little access to specialist support e.g. Pediatricians, Physiotherapists, Occupational therapists ▪ Inadequate data and information on nurturing care scale up best practices ▪ High poverty levels leading to inadequate nutrition, shelter, education, water and sanitation. ▪ Unregistered children ▪ High number of unregistered children ▪ Minimal resources to support all vulnerable children- Social Protection, Hospital insurance subsidy ▪ Inadequate supplementary feeds to give to malnourished children

Education Department	<ul style="list-style-type: none"> Integrate nurturing care practices, hygiene and nutrition in early childhood programmes Engage families in early childhood programmes Integrate children who have additional needs and reach out to the most vulnerable Supports all ECD programs and services within their jurisdiction. Supports the inclusion of all children, including those with special needs in their ECDE programmes and services within their jurisdiction. Sponsors pre-school teachers for training, including on special needs Pays pre-school teachers within their jurisdiction, including special needs education pre-school teachers. Supports barrier free infrastructure for ECD and ECDE.
The social and child protection departments	<ul style="list-style-type: none"> Guarantee identity citizenship for every child Shield families and children from poverty Link benefits to services that support nurturing care Protect children from maltreatment and family dissolution Provide and support legal services. Creates awareness on children's rights and their welfare. Promotes protection and care of disadvantaged and disabled children. Documents and maintains data on disadvantaged and disabled children Provides alternative care approaches. Facilitates networking and forming linkages.
Water Department	<ul style="list-style-type: none"> Provision of clean and safe drinking water and water for sanitation. Builds capacity in water management/conservation at community level. Promote uptake of safe water and sanitation
Monitoring and Planning Department	<ul style="list-style-type: none"> Ensure transparency and Accountability in use of resources for ECD Organize regular performance review meetings Maintains the necessary data on ECD for planning purposes Develop and maintain inventory of vulnerable children in the county Harmonize indicators and reporting on NCFECD
Department of Finance	<ul style="list-style-type: none"> Allocates funds for ECD activities. Provides funds across the ministries for ECD programs. Provides guidance in the creation of alternative funding strategies.
Department of Agriculture	<ul style="list-style-type: none"> Ensures food security and utilization of appropriate feeds Provides technical advice to communities on proper crops and animal husbandry. Promote good agronomic practices in the County Link support with conditions promoting Nurturing Care for ECD
Department of Roads and Public Works	<ul style="list-style-type: none"> Provide proper housing and infrastructure for ECD Create access to ECD centers and health facilities. Provide construction plans and supervises construction of ECD and ECDE centers. Help in the design of appropriate and affordable equipment for young children. Ensure there is access to quality of ECD and ECDE physical facilities.
Department of Gender, Culture and Social Services	<ul style="list-style-type: none"> Promotes traditional cultural values and practices that promote healthy growth and development of all children, including those with special needs. Registers ECD & ECDE centers for development purposes.
Universities and research institutions	<ul style="list-style-type: none"> Promote and undertake research on the dynamics in children and in ECD and ECDE. Offer higher training for ECD and ECDE including personnel for special needs education for ECDE. Provide consultancy and advisory services to stakeholders.

CHAPTER 3: STRATEGIC FRAMEWORK

Introduction

The Nurturing Care in ECD Strategic Plan 2020-2024 seeks to provide a road map for involving decision-makers to support resource allocation, utilization and policy action for integrating nurturing care approaches in Siaya County. It consists of the following sections; vision, mission, goal, guiding principles, strategic objectives, interventions and activities.

Vision

A County in which every child is able to develop full potential and no child is left behind

Mission

Promote, protect and safeguard the rights of young children through provision of integrated services that promote adequate nutrition, good health, responsive caregiving, safety, security and provide opportunities for early learning.

Goal

Enable all the children in Siaya County, up to 5 years of age, grow and develop to their full potential

Responsiveness, Team work, Morality, collaboration, Child friendliness, Honesty, Integrity, Professionalism, Confidentiality, Fairness, Inclusiveness, Transparency, Accountability,

Strategic Objectives

The following are the strategic objectives that this plan is expected to achieve over the 2020 – 2024 period;

- 1) To improve policy and programme environment for implementation of NCfECD integrated approaches at all levels
- 2) To strengthen multi-sectoral collaboration, coordination and partnerships for NCfECD integration at all levels
- 3) To develop appropriate Communication, Advocacy and Resource Mobilization strategies for implementation of integrated NCfECD activities at all levels in the county.
- 4) To improve the institutional capacity to implement integrated NCfECD activities at all levels
- 5) To document best practices of all NCfECD /initiatives undertaken at all levels of implementation
- 6) To increase use of data for evidence based decisions to scale up interventions for nurturing care

Strategic Interventions

The table below presents the strategic interventions and corresponding activities that will be implemented during the plan period to achieve the objectives of this strategic plan. It is important to note that the County has already made several strides in scaling up nurturing care as outlined in the Situation analysis and SWOT above. The ongoing Nurturing Care interventions in the County will be strengthened to ensure the gains are sustained alongside other interventions prioritized in this strategic plan.

Strategic Objectives	Strategic Actions	Activities
		<ul style="list-style-type: none"> pulpit exchange • Strengthen community actions on nurturing care • Engagement meetings for involvement of community groups and leaders involved in planning, budgeting, implementing and monitoring activities • Identify and link vulnerable and stressed caregivers with a number of community support services and structures including professional counselling services, CHVs, Community-based peer counsellors, health facilities, respite care support services, support groups, and bereavement counselling • Mapping of community-based Child protection mechanisms • Capacity building of existing/ new community-based child protection structures • Promote linkage of the CBCPM with the formal child protection systems and supporting multi-sectoral collaboration for child protection • Build skills and capacities of children protection centres for them to actively participate and engage with decision makers. • Train community child protection champions in to influence quality of service delivery through effective advocacy • Commemoration of international events World Orphans Day, International Day of the Girl Child and Day of the African Child also The Kenya Children Assembly all to promote Child Rights and Child protection awareness. • Empower vulnerable households targeting HIV AIDS, OVCs and Ageing caregivers on parent and caregiver support, and children with disabilities for intervention • Map out/ Conduct a survey to establish the current child protection status by Wards. • Map out and Develop an inventory of all children below 5 years with special needs by Wards
<p>To improve the institutional capacity to implement integrated NCfECD activities at all levels</p>	<ul style="list-style-type: none"> • Strengthen Services 	<ul style="list-style-type: none"> • Institutional capacity assessment for NCfECD implementers/actors including the private sectors • Update existing service delivery guidelines and SOPs • Capacity building of all early childhood providers within different sectors on NCfECD • Capacity building of community health volunteers on provision of NC at household, and referral of children with developmental delay • Facilitation of Play Box sessions at health facility • Provide mentorship to early childhood initiatives practitioners (Nurses, Clinical officers, Community

Strategic Objectives	Strategic Actions	Activities
		<ul style="list-style-type: none"> on children of Siaya and implications ◦ Carryout operational research ◦ Conduct research in Bondo Sub county on Evaluation of the feasibility and effectiveness of a health facility-based combined with home-based early childhood development (ECD) intervention ◦ Disseminate research findings to all key stakeholders ◦ Publish research findings and lessons learnt on Nurturing Care ◦ Build the capacity of M & E team and support to develop a framework for monitoring NC indicators at all levels ◦ Develop a functional M & E systems and MIS that link all the different departments

Implementation Matrix

A detailed implementation matrix was created for each activity in line with the strategic objectives. The implementation matrix also called an action plan illustrates in detail how each item in the strategy will be implemented in practice. The Implementation matrix is hereto attached and is available as Annex 1

CHAPTER 4: NCfECD STRATEGY INSTITUTIONAL MANAGEMENT

Introduction

This chapter highlights the institutional arrangements for the successful implementation of the NCfECD Strategic plan 2020 – 2024. The development of this Plan was identified as a need by the County Department of Health to ensure that all the components for scaling up NCfECD was budgeted for. Implementation of this plan will require a coordinated and integrated approach by various stakeholders at different levels including the communities. It gives the institutional framework; stakeholders roles and responsibilities; governance and coordination; funding and sustainability; dissemination and communication of the strategy.

- Develop annual work plans and budgets from the NCfECD
- Implement NCfECD annual work plans and budgets
- Provide technical guidance to the overall NCfECD approaches implementation recommend strategies for integrating these approaches in the existing county level policies and institutional frameworks;
- Participate in national and county policy and advocacy forums for NCfECD
- Participate in resource mobilization ventures to support NCfECD Programs;
- Implement lobbying and advocacy for NCfECD programs among policy and decision maker stakeholders;
- Share best practices and lessons learned at county, sub county and facility levels.

Funding and Sustainability of the NCfECD Strategy

The NCfECD strategy will be funded largely by the county government and Private Sector. As a mitigation measure, the county Smart Start Siaya Team will mobilize resources from other sources including development partners to supplement the internal efforts. The Team will organize round table discussions with development partners to mobilize support and buy-in and receive necessary support for the implementation of the strategy.

Dissemination and Communication of the NCfECD Strategic Plan

Dissemination and communication of the NCfECD strategy is essential for increased access, awareness and ownership of the document. Most importantly, effective communication of the strategy through web-based tools, mass media and inter-personal communication channels will enable exchanges among key FP stakeholders.

The County department will update its database and create a link on their website using existing Communication, Advocacy and Public Education Strategies to specify the strategic objectives, expected results, targeted audiences, key messages, channels and feedback mechanism to communicate this strategy. This will ensure that the NCfECD (2020-2024) is better accessed, understood and owned by stakeholders.

- ii. *End term Evaluation* will be conducted at the end of the five – year period to take stock of the NCfECD strategy. It will inform stakeholders on whether there was value for money in the implementation of the plan and specifically establish the success rate of the plan in achieving its strategic objectives.

Data Management

The County Health Department through the Smart Start Siaya will collaborate with Partners to monitor and supervise the analysis and packaging of data for tracking the implementation of the NCfECD strategy. Key components include review of support supervision tools, support to Sub counties to conduct quality assurance activities in facilities, implementation of social accountability mechanisms to provide feedback on the quality of Nurturing care services and collection of routine data on NCfECD indicators. The NCfECD strategy indicators will also be tracked and utilized to enhance NC approaches implementation at both county and facility levels. Research findings on innovative approaches and technologies will be conducted by the county and other stakeholders.

Dissemination of M&E findings

Monitoring and Evaluation results of progress and performance reports including challenges and lessons learnt from implementation of NCfECD strategy will be shared at county and sub county levels. Monitoring and Evaluation results shall be disseminated to key stakeholders through annual reports, mid-term and impact evaluation review workshops/seminars.

Strategic Actions	Expected Outcome	Activities	Expected Output	Output Indicators	Target for 5 years	Target					Budget (M/n)					Responsible
						Y1	Y2	Y3	Y4	Y5	Y1	Y2	Y3	Y4	Y5	
Partnerships for NCFECD integration at all levels strengthened		Hold quarterly multisectoral meetings at all levels to enable integrated care and across sector coordination.	Quarterly multisectoral meetings conducted	No. of quarterly multisectoral meetings	20	4	4	4	4	4	0.5	0.5	0.5	0.5	0.5	MST
						4	4	4	4	4	1	1	1	1	1	MST
						4	4	4	4	4	0.3	0.3	0.3	0.3	0.3	MST
						4	4	4	4	4	0.3	0.3	0.3	0.3	0.3	MST
To develop appropriate Communication,		Undertake resource mapping for sources of NCFECD funding	Resource Mapping of NC sources conducted	Resource Mapping report	1	1					2					MST

Strategic Actions	Expected Outcome	Activities	Expected Output	Output Indicators	Target for 5 years	Target					Budget (Mn)					Responsible
						Y1	Y2	Y3	Y4	Y5	Y1	Y2	Y3	Y4	Y5	
		Orient Faith leaders' consortium members on Moments That Matter and Concepts of Nurturing Care	Faith leaders' consortium-oriented members on Moments That Matter	No. of Faith leaders' consortium members oriented on Moments That Matter	100	20	20	20	20	20	1.5	1.5	1.5	1.5	1.5	MST
		Identify and link vulnerable and stressed caregivers with a number of community support services and structures	vulnerable and stressed caregivers identified and linked with a number of community support services and structures	No. of community-based referrals by CHVs	2000	40	40	40	400	400						County government
		Mapping of community-based Child protection mechanisms	community based Child protection mechanisms mapped	No. of community-based Child protection mechanism identified	100	20	20	20	20	20	2	2	2	2	2	County government
		Capacity building of existing/new community-based child protection structures on NC	existing/new community-based child protection capacity built on NC	No. of existing/new community-based child protection structures capacity built	500	10	10	10	100	100	2	2	2	2	2	MST
		Commemoration of international events World Orphans Day	Commemoration of international events	No. of Commemoration for international events	20	4	4	4	4	4	5	5	5	5	5	MST
Strengthen	Strengthened	Institutional capacity assessment for	Institutional capacity	Capacity	2	1	1				2	2				MST

Strategic Actions	Expected Outcome	Activities	Expected Output	Output Indicators	Target for 5 years	Target					Budget (Mn)					Responsible
						Y1	Y2	Y3	Y4	Y5	Y1	Y2	Y3	Y4	Y5	
Monitoring progress	To increase use of data for evidence-based decisions to scale up interventions for nurturing care	Mobilize Caregivers to initiate kitchen gardens	Caregivers mobilized to initiate kitchen gardens	No. of kitchen gardens initiated by caregivers	250	50	50	50	50	50	1	1	1	1	1	MST
		Systems strengthening of the existing structures in childcare case management and referrals	Increased referrals of child case care management	No. of referrals of child case care management	300	60	60	60	60	60	1	1	1	1	1	MST
		Document best practices	Best practices documented	Annual report on NC	1	1	1	1	1	1	4	4	4	4	4	MST
		Hold meetings to share best practices on NCFECD	Meetings to share best practices on NCFECD conducted	No. of meetings	4	1	1	1	1	1	1	1	1	1	1	1
		Develop a functional M&E system and MIS that links all the different departments	A functional M&E system and MIS that links all the different departments	Functional M&E system	1	1					3					MST
		Develop an M&E plan to provide regular quarterly updates on progress	An M&E plan to provide regular quarterly updates on progress developed	No. of M&E quarterly progress reports	1	4	4	4	4	4	1	1	1	1	1	MST

Strategic Actions	Expected Outcome	Activities	Expected Output	Output Indicators	Target for 5 Years	Target					Budget (Mn)					Responsible	
						Y1	Y2	Y3	Y4	Y5	Y1	Y2	Y3	Y4	Y5		
		dimensions of all five domains of nurturing care															
		Data collection and packaging for advocacy, accountability and increasing investment	collection and packaging for advocacy, accountability and increasing investment conducted	Policy briefs on NC	4	1	1	1	1	2	2	2	2	2	2		MST
		Conduct Mid-term evaluation for NCFECD SP	Mid-term evaluation for NCFECD SP conducted	Mid-term evaluation report								4					MST
		Conduct End-term evaluation for NCFECD SP	End-term evaluation for NCFECD SP	End-term evaluation report	1					1						5	
	To document best practices of all NCFECD /initiatives undertaken at all levels of implementation through research	Develop a research agenda to prioritize research topics for integrating NC	A research agenda to prioritize research topics integrating NC developed	Research Agenda for NC	1							3					
		Map out resources for carrying out research on key priority areas for integrating NC	Resource Mapping of NC research conducted	Mapping report	1					1							MST
		Conduct Baseline Survey to asses emerging issues on children of Siaya and	Baseline Survey to asses emerging issues on children of Siaya and	Baseline report	1					1							MST

Annex II: Monitoring and Evaluation Framework

Strategic Action	Outcome	Output	Key Performance Indicator	Baseline	Target		Focus on families and communities
					Mid-Term Period Target	Final Target	
Lead and Invest	Improved Policy and programme environment for implementation of NCFECD approaches at all levels	NC approaches integrated into existing policies and guidelines for Siaya county NC relevant content integrated in county and sub county sector plans	No. of policies with integrated NC approaches	0	2	Lead and Invest	
			sub county sector plans with NC activities	0	10		
			Available ECD policies and guidelines disseminated	0	15		
			Allocation of domestic resources for scaling-up interventions which support nurturing care, including the private sector annually	Budget expenditures for NC	0		2.5
			Stakeholders mapping conducted	NC stakeholders database	0		1
			Quarterly multisectoral meetings conducted	No. of multisectoral meetings	0		10
			Quarterly Stakeholders meetings conducted	No. of stakeholders meetings.	0		10
			A joint costed work plan developed	joint costed work plan for NCFECD	0		3
			Quarterly Work plan performance review	No. Work plan performance review meetings held	0		10
			Resource Mapping of NC sources conducted	Resource mapping report	0		1
Focus on families and communities	To develop appropriate Communication, Advocacy and Resource Mobilization strategies for implementation of integrated NCFECD activities at all levels in	Resource Mapping of NC sources conducted	A digital mechanism for sharing nurturing care messages with caregivers including significant males developed	0	1	Focus on families and communities	
			An advocacy tool kit for NC developed	0	1		
			NCFECD tool kit disseminated	0	10		

Strategic Action	Outcome	Output	Key Performance Indicator	Baseline	Target	
					Mid-term period target	Final target
Monitoring progress	To increase use of data for evidence-based decisions to scale up interventions for nurturing care	community health volunteer capacity built on provision of NC at household, and referral of children with developmental delays	NO. of community health volunteer capacity built on provision of NC at household, and referral of children with developmental delays	0	750	
		Play Box sessions at health facility facilitated	No. of Play Box sessions at health facility	0	100	
		Mentorship to early childhood initiatives practitioners provided	No. of early childhood initiatives practitioner mentored	0	750	
		GAP and Replicator TOT's trained on Household Livelihoods improvement	No. of Replicator TOT's trained on Household Livelihoods improvement	0	125	
		Caregivers mobilized to initiate kitchen gardens	No. of kitchen gardens initiated by caregivers	0	125	
		Increased referrals of child case care management	No. of referrals of child case care management	0	150	
		Best practices documented	Annual report on NC	0	1	
		Meetings to share best practices on NCFECD conducted	No. of meetings	0	1	
		A functional M&E system and MIS that links all the different departments	Functional M&E system	0	1	Monitoring progress
		An M&E plan to provide regular quarterly updates on progress developed	No. of M&E quarterly progress reports	0	1	
Consensus meeting to agree on indicators for monitoring	List of NC indicators	0	1			

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SMART START SIAYA YEAR ONE BUDGET REQUEST TO CABINET

No.	Activity	Expected output	Output indicators	Budget (KES)
1	Review all policies with child development initiatives & incorporate components for Nurturing care for early childhood development (NCFECD)	Nurturing care approaches integrated into existing policies and guidelines for Siaya county	No. of policies with Integrated NC approaches	1M
2	Integrate nurturing care relevant content in county and sub county sector plans	Nurturing care relevant content integrated in county and sub county plans	Sub county sector plans with NC activities	2.5M
3	Dissemination of available ECD policies and guidelines	Available ECD guidelines disseminated	No. of dissemination meetings	2M
4	Map and define roles for NCFECD stakeholders	Stakeholder mapping conducted	NCFECD stakeholders	1M
5	Develop & implement a joint costed work plan	A joint costed work plan developed	Joint costed work plan for NCFECD	0.5M
6	Review work plan performance on quarterly basis	Quarterly work plan performance review	No. of work plan performance review meetings	1M
7	Hold quarterly multi sectoral meetings for strengthened coordination across all sectors	Quarterly multisectoral meetings conducted	Minutes of MST MEETINGS	1M
8	Program administration support			1M
Total				10M