



**REPORT OF THE HEALTH OF PEOPLE AND ENVIRONMENT IN
LAKE VICTORIA BASIN (HoPE-LVB) PROJECT - DISSEMINATION
AND STRATEGIC PLANNING FOR SCALE-UP WORKSHOP**

**11th -12th February, 2015
Imperial Hotel, Kisumu, Kenya.**



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1. INTRODUCTION

The Health of People and Environment in the Lake Victoria Basin (HoPE-LVB) Project workshop for Dissemination and Strategic Planning for Scale up, organized by Pathfinder International Kenya, was held in Kisumu from 11-12 February 2015.

HoPE-LVB project is a trans-boundary project covering Kenya and Uganda. Phase I of the project (2011-2014) was implemented by Pathfinder International, in partnership with Ecological Christian Organization in Uganda and OSIENALA (Friends of Lake Victoria) in Kenya using a population, health and environment (PHE) integrated, rights-based approach. The project's aim was to reduce threats to biodiversity conservation and ecosystem degradation in the Lake Victoria Basin while simultaneously increasing access to contraception and sexual and reproductive health (SRH) services to improve maternal and child health (MCH) within project communities. HoPE-LVB is funded by USAID, the John D. and Catherine T. MacArthur Foundation, and the David and Lucile Packard Foundation.

This workshop brought together 67 participants including health and conservation practitioners, donors, government and community representatives, policymakers, research and learning institutions, and project team members from Kenya and Uganda. The objectives of the meeting were to:

- Demonstrate benefits of applying a cross-sectoral, integrated approach to sustainable development
- Share learning, results and challenges from implementing the pilot phase of the HoPE-LVB project which was focused on developing a scalable model of integrated population health and environment (PHE) interventions
- Expose participants to systematic approaches to scaling up interventions
- Gather recommendations for scaling HoPE-LVB's successfully tested interventions by going through a process of developing a scaling up strategy
- Gauge interest and potential commitment to new partners to support expanded implementation of HoPE-LVB's sustainable development approach

The meeting built on participants' experiences to develop a strategy for scaling up HoPE-LVB's successfully tested interventions and to facilitate increasing collaboration across sectors in order to strengthen the implementation of the integrated PHE approach.

2. OPENING

The meeting was officially opened by the HoPE-LVB Director and Pathfinder Uganda Country Representative, Ms. Lucy Shillingi, who welcomed participants, and called for their active engagement throughout the process. She emphasized the importance of this meeting, as insights garnered from the participants would be crucial in designing strategies for scaling up in Phase II of the HoPE-LVB project. She then invited several participants to provide their keynote remarks as follows:

Mr Nzomo Mulatya, the Deputy Director Program Coordination, National Council for Population and Development (NCPD) and Chair of the National PHE Network in Kenya, thanked Pathfinder International for organizing this meeting. Mr Mulatya expressed his appreciation for the PHE approach emphasizing that it is one of the key solutions that we can use to build a better, more sustainable Lake Victoria Basin region and Kenya. As the Chair convening the Kenya PHE Network, NCPD has been providing a platform for opportunities for promoting learning and experience-sharing in PHE between HoPE-LVB and other initiatives and NCPD plans to continue supporting the legitimization of PHE for increased support at the county level within the context of the Devolution.

“It is about time we found sustainable solutions to end local challenges; this requires the mobilization of all sectors and the involvement of all sectors.....”

*- Isaac Abuya, Chief of Staff,
Homa Bay County*

Dr. Isaac Abuya, Chief of Staff and Representative of the Governor-Homa Bay County, expressed his concern for the intertwined challenges facing his county: HIV/AIDS, rapid population growth, high infant and child mortality, lack of livelihood opportunities for the large youth population, biodiversity degradation among other worrying indicators. He appreciated HoPE-LVB's work in the county and called for mobilization of other partners to form effective partnerships to support interdisciplinary solutions, using HoPE-LVB as a model where relevant.

Hon. Andrew Toboso, Member of Parliament Butere constituency and Chairperson for the Parliamentary Network on Population and Development (PNPD), noted how health and environment are intertwined and that one can't have one without the other. He stressed that the HoPE-LVB model provides an excellent model for sustainable development around the Lake Basin, stressing that cross sectoral integration is “the way to go”.

Hon. Dr. Elizabeth Ominde Ogaja, the Minister for Health Services- Kisumu County, expressed her appreciation for being part of this meeting, noting that cross-sectoral integration is one of the approaches the county is trying to adopt. She stressed the youthfulness of the population and how they have critical health needs which are not being met. She also emphasized the impacts of a poorly managed environment on health were a concern around the Lake Basin. Reiterating the importance of cross-sector integration, the Minister called on other organizations which use a single-sector approach to shift to more holistic and sustainable approaches such as PHE.

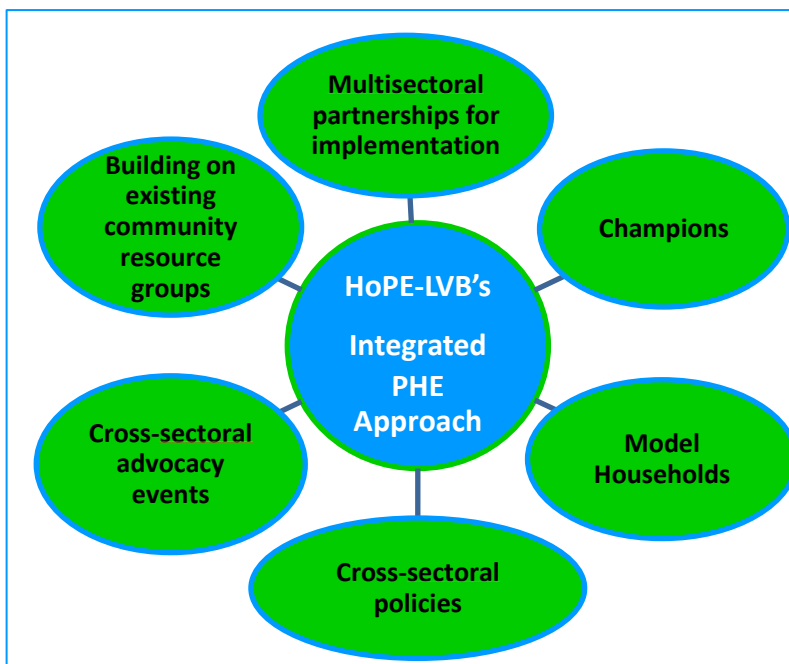
Dr. Doreen Othero, East African Community Lake Victoria Basin Commission (EAC LVBC) Regional Program Coordinator for PHE, talked about how proud she was of the HoPE project's achievements. She said LVBC identifies with the HoPE-LVB project because the “Commission believes that sustainable development is better realized if multi-sectoralism is embraced” and that the fisheries and trees must be conserved. She further announced LVBC's intent to formally engage with Pathfinder and that the two organizations will soon be signing a memorandum of understanding that will help determine how best to advance the shared goal of integrated sustainable development. She also promised to continue advocating for institutionalization of PHE nationally and beyond Kenya's borders in order to contribute to the achievement of post-2015 Sustainable Development Goals within East African Community members states.

3. CONTEXTUALIZATION OF PHE AND ITS ADDED VALUE- CASE OF HoPE-LVB

Dr. Godfrey Ogonda, Program Director, OSIENALA (“Friends of Lake Victoria”), gave an introduction to PHE including the environmental and social context of this approach. PHE is an approach combining health education and services with community based natural resource management, alternative livelihood and biodiversity conservation initiatives.

He further highlighted how this integrated approach has an edge over single sector approaches as it addresses multiple community needs simultaneously, promotes gender equity, empowers communities to provide sustainable solutions to the challenges they face, creates opportunities for multi-disciplinary partnerships and is cost effective.

This session was followed by an overview of the HoPE-LVB project’s Phase 1 (pilot) approaches and interventions presented by the Kenya Project Manager- **Mr. Antony Omimo** and the project’s results and accomplishments by **Ms. Millicent Kodande**, the Monitoring and Evaluation Officer. The pilot phase sought to develop and demonstrate/test a model for PHE integration in LVB sites that could be adapted and scaled up by communities, as well as by local, national and regional governments.



The HoPE-LVB project used a mix of approaches implemented with a youth and gender empowerment focus. The key groups targeted to work across the different sectors included: women’s groups and young mothers, youth groups comprised of fishers and farmers, beach management units (BMUs), teachers and children (in schools), Community Health Volunteers (previously Community Health Workers), government health providers and environmental workers at sub-county and county levels, as well as policy makers. While the majority of groups already existed at the community level when HoPE began, they were not necessarily working across the domains – for example, women’s groups had not been working in natural resources/reforestation and BMUs had not been referring to health facilities for family planning information and services before HoPE.

The HoPE-LVB “model household” was a key component of the approach, appreciated by many. It depicts an end goal of homesteads that have adopted the PHE model in all aspects, and in so doing reaping the benefits of the integration. It is the primary measurement of PHE integration at community level. Using pre-determined criteria, the community and project staff select households that develop into model households. Household members are trained on multiple activities that illustrate behaviors that help families avoid disease and thrive without taking a toll on their environment and natural

resources. They are provided with a small basic seed grant as deemed necessary. The model replicates by diffusion, where the initial household trains a minimum of 5 neighbors to adopt the various PHE practices. By the end of Phase I, 279 model households had been established.

Similarly the health facilities in project sites recorded improved provision of the contraceptive method mix (variety of contraceptives within facilities), with a total of 5,645 new clients benefiting from family planning services. The number of babies born in facilities (facility-based delivery) increased markedly, especially among young mothers under 24, thanks to community-based health education efforts and solar panels provided by the project to aid night deliveries. Evidence of improved sustainable fishing practices and the widespread building and adoption of energy-saving jikos (stoves) were also highlighted.

The project team highlighted the value additions resulting from the integrated approaches of the HoPE-LVB project such as:

- Enhanced knowledge and skills about health, population and environmental linkages at individual, family and community levels
- Social awakening / consciousness on P,H, and E issues
- Improvement and diversification of livelihood sources
- Capacity building benefits (training village health teams or VHTs, supplying solar lights and boat engines, etc.)
- Improved gender outcomes by reducing women dependence on men, bringing women into natural resource management and encouraging men's openness to family planning use
- Leveraging resources and promoting cross-sectoral collaboration— brings with it expertise and experiences that benefit target communities
- Bridging the gap between existing structures e.g. district officials and sub county, district health team and VHTs, etc.

Having successfully implemented the pilot phase of the project, the team is in the process of embarking on the second phase which is focused on expanding interventions to new areas and working with existing and new community-based and institutional partners to embed the approaches more widely in the policies, plans, budgets and workplans of governmental and non-governmental organizations.

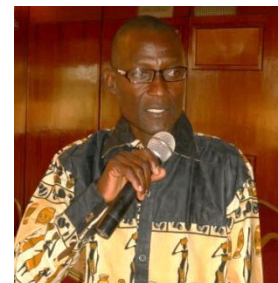
4. PERSPECTIVES ON THE HOPE-LVB PROJECT FROM COMMUNITY, SUB-COUNTY AND COUNTY LEVELS

After Pathfinder's presentations and subsequent discussions, opportunities were provided to hear the voices of community members and leaders at various levels who participated in the first phase of the Project. Some key excerpts from their remarks appear below which are complemented by those of many more stakeholders. These appear in the project's Mid Term Review (MTR) report undertaken in mid-2014. The MTR report is available upon request from the HoPE LVB team.

HoPE-LVB empowers young mothers' groups to advocate for integrated health and conservation practices and conduct community dialogue sessions surrounding the intersection of population, health and environment

"If not for HoPE-LVB, at my tender age, I would have already given birth to 8 or more children who I would not be able to take care of. I am currently using contraception and have a kitchen garden which gives me enough to feed my husband and four children and is also a source of income. HoPE-LVB has showed me the way and so I will continue using my knowledge to enlighten my fellow community members....." **Maureen Aoko, young mother, Rakwaro.**

Gor Odeny, Area Chief, Karachuonyo: *"Since HoPE-LVB introduced the PHE approach in my community, our way of living has improved, more people have built latrines with tippy taps, and I can see increased cohesion as the community members have developed a habit of learning from each other."*



**Gor Odeny - Community level
PHE Champion**

HoPE-LVB strives to reduce contraceptive stock outs in health facilities while empowering health providers to promote proper sanitation practices.

Dr. Ephraim Ocholla, MOH Sub County Medical Officer, Rachuonyo North. *"It took HoPE-LVB's intervention for me to realize that we cannot solve the challenges of health without addressing those facing the environment. In my sub-county, the community units in the areas where HoPE-LVB worked, have registered improved health indicators compared to those with solely single-sector interventions."*

Dr Isaac Abuya, Chief of Staff, Governor's office Homa Bay County: *"My county has been intimately involved in the HoPE-LVB project since its inception. I understand the benefits of the project's integrated approach and would like to see the project continue. For more impact, I encourage the project team to involve political leadership more, both at county and national levels to avail resources for such interventions, don't spread yourself thin".*



**Isaac Abuya, PhD-Chief of Staff, Homa Bay
County Government**

Maurice Oduor, the Regional Coordinator, Nyanza North, NCPD and Chair for the Homabay County PHE Steering Committee gave an overview of the work of the committee reiterating the committee's main agenda as: to enhance policy environment for cross-sectoral collaboration and PHE integration, enhance institutional capacity to implement integrated PHE development strategies and to increase community awareness and adoption of PHE integration. Initiated in June 2013, the committee has made some significant milestones earning them a national award in 2014.

Beach Management Unit Regional Chairman and Rakwaro BMU Chairman, Mr. Tom Guda, also present in the workshop, appreciated and pledged to continue supporting HoPE-LVB's work toward achieving sustainable fishing practices

The participants of the workshop were in agreement that the interventions tested by HoPE-LVB merit scaling up.

5. SCALING UP THE HOPE-LVB MODEL – THE EXPANDNET/WHO FRAMEWORK AND NINE STEP APPROACH

The second part of the meeting was focused on the guidance and principles of successful scale up and how those can be brought to bear in the expansion and institutionalization of successfully tested HoPE-LVB approaches. This activity was facilitated by **Dr. Alexis Ntabona** and **Ms. Laura Ghiron** of ExpandNet, which is a global network of professions who are working to advance the practice and science of scaling up, who have been collaborating with HoPE-LVB since the outset. With support from USAID, most recently via the Pathfinder International led Evidence to Action (E2A) Project, ExpandNet has provided technical support to the project to “Begin with the end of scaling up in mind” by applying the ExpandNet/WHO tools and approaches which were presented during the meeting.

After a brief presentation of the ExpandNet/WHO framework, meeting participants engaged in group work to apply the first six steps of the Nine Step Approach to developing a scaling up strategy. These are:

- Assessing the scalability of *the innovation* and planning to take necessary action
- Assessing the *user organization* and implications for scaling up
- Assessing the *environment* and planning for necessary action
- Assessing whether the *resource team* has to the appropriate attributes to support scaling up and planning for change
- Make strategic choices to support *expansion/replication* or horizontal scaling up
- Make strategic choices to support *policy/political/legal* or vertical scaling up
- Determining the role and nature of *diversification*
- Determining the role of *spontaneous* scaling up
- Assembling the *scaling-up strategy*

With a greater understanding of the scaling up process, the participants were separated into seven working groups, to respond to a set of strategic questions and develop recommendations/strategies for how to scale up the HoPE-LVB innovation. Unfortunately time constraints did not allow exploration of Steps 7 and 8. Step 9, undertaken after the meeting, entailed compiling and streamlining the 300 plus recommendations that came from participants into a concise strategy which are as follows:

Scaling up strategy for expanding and institutionalizing HoPE-LVB integrated population, health and environment approaches

RECOMMENDED ACTIONS:

RESPONSIBLE PARTIES:

Step 1: Planning actions to increase the scalability of the innovation

Strengthen key aspects of the HoPE model such as table banking/micro-finance/village savings and loan (VS&L), HIV, school-based programs, male involvement in model households and Family Planning, WASH, Aid to Trade approaches and more	Initial HoPE Project team and new implementation partners
Articulate the key steps of implementing the various components of the HoPE model as well as best practices, and evidence of success. Package these into toolkit/guidance and disseminate using social media, meetings, stakeholder forums, technical working groups, mass media, etc	Initial HoPE Project team
Document the costs, processes and time required to achieve the success of HoPE pilot on behalf of the project, community and government	Initial HoPE Project team
Consider data collection in a village/sub county that has not had HoPE interventions as a control group	Initial HoPE Project team and new implementation partners
Review what went well in Phase I of HoPE-LVB Project to determine what should be expanded and what could be dropped.	Initial HoPE Project team

Step 2: Increasing the capacity of the user organization to implement scaling up

Interested and relevant governmental partners (i.e. MOH, MOE, MOAFL, MOENRM, NEMA, KWS, KFS, KFO, etc) at sub-county, county and national levels learn about and become engaged in planning, implementing, monitoring and evaluating HoPE integrated approaches to cultivate ownership	HoPE champions at sub county, county and national levels
Work with workshop participants within allied and/or relevant non-state actor organizations (i.e. Green Belt Movement, World Vision, Nature Kenya, APHIAplus, LVEMP, EngenderHealth, VI Agroforestry, FHOK, NRHS, DSW, WWF, Osienala, Red Cross, Plan International, MSI, PSI-K, Adventist Relief Agency, Anglican Development Services, etc) who work in expansion areas to raise interest in collaborating to implement HoPE model of integrated PHE approaches and to join PHE network	HoPE scaling up workshop participants in collaboration with HoPE Project team
Embed HoPE model integrated approaches in county government planning and budgeting processes	Homa Bay and Siaya county governments first, followed by other counties who learn from them
Build on the Community Strategy platform and start expansion in sub-counties where there are already functional community units to build in environmental conservation components	MOH from sub district, to sub county, to county to national levels, new HoPE partners
Orient the Kenya Institute of Education and Ministry of Education at county and national levels on HoPE integrated approaches to encourage institutionalization of PHE in school curricula and programming, with a special focus on age-appropriate Comprehensive Sexuality Education (CSE) and services	National and HB county MOE, KIE with support from HoPE champions and sub location implementers

Step 3: Assessing the environment and planning actions to increase the potential for scaling-up success

Strengthen understanding and implementation of HoPE integrated approaches at various levels through County Assemblies and development partners and at national level through Parliament, the Governors Forum, by establishing joint committees, etc	Senior participants of Feb 2015 scaling up workshop (i.e. MP, Homa Bay Chief of Staff, Siaya MOH, etc) and other supporters. HoPE champions at various levels participate in advocacy activities
Build support for legislation/acts that favor integrated PHE approaches to mitigate gaps created through devolution and to minimize threats of electoral change	Senior participants of Feb 2015 scaling up workshop (i.e. MP, HB Chief of Staff, Siaya MOH, etc) and other supporters. HoPE champions at various levels participate in advocacy activities
Line ministries at county and national level, parliamentarians and the county executive committees support popularization and allocation of funding to implement environmentally-friendly alternative (to fishing) sustainable livelihood opportunities (especially for women and youth)	MOH, MOALF, Directorates of youth and gender,
Avoid politicization of PHE in upcoming election cycles/campaigns. Ensure incumbents in areas where implementation of the HoPE integrated PHE approach is underway are sufficiently briefed and supportive	HoPE/PHE champions at all levels need to ensure this.
Use the Population Policy under the Ministry of Devolution and Planning as a platform for articulating PHE integration along the lines of HoPE model	NCPD HQ in Nairobi can lead and facilitate
Invoke Article 43 and 46 of the Constitution in calling for implementation of PHE programmes	All HoPE champions

Step 4: Increasing the capacity of the resource team to support scaling up

Establish relationships, partnerships and MOUs (i.e. create consortia) among organizations working in areas of P, H, or E who have expressed interest to expand/replicate and institutionalize HoPE-LVB approaches	All interested organizations should express interest to collaborate with HoPE Project team or with other interested groups
Build capacity of an expanded pool of partners (e.g. among line ministries, community group leaders, NGO partners, etc) who can support and implement PHE approaches and existing partners expand and deepen their work	HoPE Project team (including trainers) can coordinate and help mobilize trained community members, district and county level and other partners
Mobilize community-based trained HoPE resource persons (i.e. BMU, women's groups, youth, CHVs, model households, etc) as the training team to provide training of trainers and act as demonstration sites	HoPE Project team (including trainers) can coordinate and help mobilize trained community members, district and county level and other partners
Bring in scholars for internships to fill human resource gaps	HoPE project team

Step 5: Making strategic choices to support institutionalization (vertical scaling up)

Harmonize/integrate county workplans and reporting systems across different sectors	County officials in all sectors and administrative/executive units, with leadership from Homa Bay
County Executive and NCPD Regional Directors work together as County PHE hubs to coordinate, map partners, encourage implementation of HoPE approaches, develop and implement an advocacy strategy for institutionalizing HoPE approaches	County executives and NCPD Regional Directors with support from NCPD Nairobi and Ministry of Planning and Devolution

Existing and new HoPE Champions from community, subcounty, county, national and regional levels advocate for PHE integrated approaches in bills, sectoral policies, county integrated development plans, annual operational plans/workplans, and related budgetary allocations at all levels as a strategy addressing food security, sustainable development, Vision 2030, climate change resilience, and youth focus as rationales (e.g. EAC LVBC, First Lady's "Beyond Zero campaign", JOYWO, Siaya first Lady etc)	Workshop participants, HoPE champions, and other PHE supporters
County-level PHE champions advocate for inclusion of HoPE integrated approaches in sector-specific bills, planning, budgeting and monitoring/reporting mechanisms (i.e basket funding) for their full implementation	County level PHE champions/PHE steering committees, NCPD county coordinators
Ministry of Planning & Devolution and NCPD, as chair of Kenya PHE Network, convene multisectoral, inter-ministerial stakeholder learning opportunities for legitimization of PHE at national and county levels and fundraising	Ministry of Planning and Devolution supports, convened by NCPD
HoPE champions advocate for creation of a new county level PHE Minister post and formation of PHE multisectoral joint committee/technical working group who would coordinate work of non-state partners	HoPE champions at county level, subcounty level where implementation is underway and community advocacy
Support vocational schools and institutes of higher learning to incorporate HoPE integrated approaches and PHE principles into their curricula	LVBC helps support, U of Nairobi helps lead, together with HoPE team and other champions
HoPE champions identify and use existing resources to advance EAC LVBC's work to popularize and institutionalize PHE approaches throughout LVB countries	LVBC, champions and HoPE team
Obtain policy commitment at county levels to allow referrals by trained non-CHV community groups	County champions and HoPE team
Universities (i.e. Universities of Nairobi, Maseno, Great Lakes, Masinde Muliro etc) can support capacity building, documentation and dissemination of PHE best practices, in collaboration with and support from NCPD	University of Nairobi helps lead together with HoPE team and other champions
National Environmental Management Agency (NEMA), in its coordination of the inter-ministerial county Technical Environmental Committees, use that platform to advance expansion of HoPE approaches	NEMA champions
Advocate that PHE be included as a priority in existing sustainable development interventions promoted by international organizations like UNESCO, UNFPA, UNDP, UNEP, Medium Term Expenditure Framework, to encourage donor investment	National level champions who are represented in such planning including NCPD, and others
Learn from Millennium Villages experience with system strengthening and use as an entry point	HoPE team and Columbia Global Centers Africa - Columbia University colleagues
Create an annual National PHE Day and embed PHE concepts in other annual event days such as National Population Day, National Environment Day, etc	NCPD and HoPE team begin the discussions
Step 6: Making strategic choices to support expansion/replication (horizontal scaling up)	
Accelerate adoption of key HoPE approaches in new, neighboring geographic areas, including model households, use of energy saving technologies, tree planting, etc, in ways that ensure county and sub county government ownership from the outset	HoPE partners and champions in Siaya and Homa Bay
Confine activities to 1-2 counties to affect the whole county before further expansion	HoPE team, champions and new partners

Disseminate existing HoPE tools (i.e. integrated PHE curriculum) to support expansion efforts and develop new ones	HoPE team, champions and new partners
Consider "upstream" LVB locations as strategic expansion sites for early adoption and implementation of HoPE PHE approaches (e.g. Budalangi, Nandi Hills, etc) to minimize erosion, and pollution and siltation of the Lake.	HoPE team, champions and new partners
Appeal to private sector entities who have P, H or E activities (i.e. Dominion Farms, etc) as a means to address their corporate social responsibility agendas for contributing inputs and/or form social marketing alliances	HoPE team, champions and new partners
Work with sub counties as the unit of HoPE implementation, while simultaneously ensuring high county level involvement. Possible expansion sites for example could be Bondo, Mbita, etc.	HoPE team, champions and new partners
Develop a cadre of PHE master trainers among NGOs and at the sub-county and county levels who can expand/cascade HoPE approaches to new locales.	HoPE team with new and existing partners
Introduce HoPE interventions and results from Homa Bay to Siaya's MOH-led Community Initiative Action Group-Kenya (CIAG-K)	HoPE team with new Siaya partners
Create monitoring tools and reviews to ensure integrated PHE approaches in service delivery are ongoing and that key indicators of each affected sector are represented therein	HoPE team can help lead in close collaboration with line ministry partners
NCPD at county and national level identify and encourage partners to implement HoPE PHE approaches in new areas	NCPD Nairobi and county coordinators
Arrange exchanges wherein other counties come to observe and learn from Homa Bay counterparts' experience	Homa Bay PHE Steering Committee, Siaya partners with support from HoPE team
Expansion sites should be selected where transportation costs and community mobility will not create high implementation costs	Homa Bay PHE Steering Committee, Siaya partners with support from HoPE team
Select new sites based on interest, prior investment by partners, and proximity to existing sites;	Homa Bay PHE Steering Committee, Siaya partners with support from HoPE team
Work at sub county level, with sub locations from one sub county teaching sub locations from another sub county (e.g. Rachuonyo North teaches West Rachuonyo where 24 functional health facilities exist trained by the USAID/PEPFAR funded APHIAplus Nyanza-Western project and World Vision or Mbita in Suba; Bondo where Plan International and APHIAplus Nyanza-Western have been working with Beach Management Units. etc)	Sub county level champions, HoPE team, with advice from county PHE Steering Committee and new partners

6. CLOSURE

Ms. Lucy Shillingi, HoPE-LVB Project Director, and Country Representative, Pathfinder International Uganda, provided some final reflections on the resounding support and productive insights contributed by stakeholders present. She also challenged participants to be ambassadors of PHE in their various localities.

The Honorable Andrew Anyanga Toboso, Member of Parliament, Butere and Chairman-Parliamentary Network on Population and Development, gave closing remarks. He spoke of the need to work together to improve the ecosystem and human health around the Lake Victoria Basin, commended Pathfinder International for leading the good work, and further pledged to continue advocating for institutionalization of PHE in the National Assembly.

“I will be your champion in Parliament to talk about the need to conserve the Lake Victoria Basin, while promoting good health practices.....” - Hon. Andrew Toboso,, MP Butere; Chairman Parliamentary Network on Population and Development



To provide input to the above-mentioned recommendations in the Kenya scaling-up strategy developed at this meeting, or for more information about HoPE-LVB, please contact Ms. Millicent Kodande at MKodande@pathfinder.org.

ANNEXES

1. Meeting agenda
2. Strategic questions that guided small group discussions/recommendation-making
3. List of participants

Annex 1

The Health of People and Environment in the Lake Victoria Basin (HoPE-LVB) Project Workshop for Dissemination and Strategic Planning for Scale up

11 - 12 February, 2015

Imperial Hotel, Kisumu, Kenya

Meeting objectives:

- Demonstrate the benefits of applying a cross-sectoral, integrated approach to sustainable development;
- Share learning, results and challenges from implementing the pilot phase of the HoPE-LVB project which was focused on developing a scalable model of integrated population, health and environment (PHE) interventions;
- Expose participants to systematic approaches to scaling up interventions;
- Gather recommendations for scaling up HoPE-LVB's successfully tested interventions by going through a process of developing a scaling up strategy;
- Gauge interest and potential commitment of new partners to support expanded implementation of HoPE-LVB's sustainable development approach.

Day 1: Wednesday 11 February, 2015

MCs: Antony Omimo: Project Manager, HoPE; Dr Godfrey Ogonda - Program Director, Osienala

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| 8:00 – 8:30 | Arrival and Registration (Sharon, Vincent, Millicent, Christine, Desmond) |
| 8:30 – 9:00 | Welcome, introductions, overview of meeting objectives and agenda
(Presenter: Lucy Shilling, HoPE LVB Project Director/Country Representative-Uganda, Pathfinder International) |
| 9:00 – 9:45 | Opening Remarks (5 min each). Facilitator: Pamela Onduso, HoPE-LVB Adviser - Pathfinder International Kenya <ul style="list-style-type: none">• Director General, National Council for Population & Development (NCPD) Dr. Josephine Kibaru-Mbae (Kenya PHE Network Chair)• HIV/AIDS Technical Specialist, Program Coordinator-Population Health & Environment - East African Community Lake Victoria Basin Commission (EAC-LVBC) - Dr. Doreen Othero• Kisumu County Governor - H.E. Jack Ranguma• Homa Bay County Governor - H.E. Cyprian Awiti (HoPE project site)• Member of Parliament, Chairman Parliamentary Network on Population and Development (PNPD) – Hon. Andrew Toboso Anyanga |

9:45 - 10:15	Film screening: HoPE in the Basin - Presenter: Millicent Kodande, HoPE
10:15 - 10:30	Morning tea break
10:30 - 12:00	<p>Panel 1: Overview of HoPE-LVB Phase I - accomplishments, results, lessons and challenges</p> <p>Moderator: Lucy Shilling, HoPE Project Director, Pathfinder-Uganda</p> <ul style="list-style-type: none"> • Dr. Godfrey Ogonda, Deputy Director Programs, Osienala presents an overview of PHE and why it creates added value (10 minutes) • Casianes Olilo, Kenya Marine & Fisheries Research Institute (KEMFRI) presents HoPE fisheries baseline results (2014) (5 min) • Antony Omimo, Pathfinder-Kenya Project Manager discusses HoPE-LVB Phase I interventions, achievements, tools, key lessons learned and challenges faced (15 minutes) • Millicent Kodande, Pathfinder Kenya M & E Officer, addresses methods, sector-specific and integrated quantitative and qualitative results, and findings of an external mid-term review (20 minutes) • Questions/Discussion (40 minutes)
12:00 – 13:00	<p>Panel 2: Perspectives on the HoPE model and expansion possibilities from community, sub-county, and county leaders and project champions</p> <p>Moderator: Nzomo Mulatya, NCPD-Nairobi (5-7 minutes/presenter)</p> <ul style="list-style-type: none"> • Maureen Aoko, young mother's club leader and model household, Rakwaro • Daniel Gor Odeny, Area Chief, Karachuonyo • Dr. Ephraim Okal Ocholla, Sub County Medical Officer of Health, Rachuonyo North • Maurice Oduor Ofula, Regional Coordinator, Nyanza South, NCPD/Ministry of Devolution & Planning • Tom Guda, Kenya & East Africa Region Beach Management Unit (BMU) Chairman; Rakwaro BMU Chair • Isaack Abuya, Chief of Staff, Governor's office Homa Bay county <p>Discussion (15 min)</p>
13:00 – 13:45	Lunch break
13:45 – 14:15	<p>Scaling up the HoPE-LVB model – the ExpandNet/WHO framework and nine step approach for developing a scaling up strategy</p> <p>Presenters: Laura Ghiron and Dr. Alexis Ntabona, ExpandNet (20 min)</p> <ul style="list-style-type: none"> • Questions/discussion (10 mins)

14:15 – 15:45 pm	<p>Group work applying the nine step approach and developing a scaling-up strategy for HoPE-LVB with reporting back in plenary</p> <ul style="list-style-type: none"> • Groups assigned and introduction to exercise (5 mins) • Introduction to Steps 1-3 in plenary – (3 mins each – total 10 mins) • CONCURRENT GROUP WORK: <ul style="list-style-type: none"> ▪ Provide recommended actions to increase the scalability of the HoPE innovation (Step 1) – 3 groups (30 mins) <ul style="list-style-type: none"> ○ Facilitators: Dorah Taranta, Laura Ghiron, Caroline Nalwoga ▪ Provide recommended to increasing user organization capacity to implement the innovation (Step 2) – 3 groups (30 mins) <ul style="list-style-type: none"> ○ Facilitators: Antony Omimo, Lucy Shilling, Vincent Ohuru ▪ Provide recommended actions for assessing the environment and increasing potential for scaling-up success (Step 3) – 2 groups <ul style="list-style-type: none"> ○ Facilitators: Pam Onduso, Sharon Atieno, Alexis Ntabona • Reporting out on recommended actions, responsible parties and discussion (45 mins)
15:45- 16:00	Tea break
16:00– 16:45	<p>Applying the nine step approach and developing a scaling-up strategy for HoPE-LVB (continued)</p> <ul style="list-style-type: none"> • Increasing resource team capacity to support the scaling-up process (Step 4) <ul style="list-style-type: none"> ○ Facilitators: Vincent Ohuru and Laura Ghiron ○ Group work and then plenary (20 mins) report back (20 mins)
16:45 – 17:00 pm	Reflections on the day – Isaack Abuya and Lucy Shilling

Day 2: Thursday 12 February, 2015
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8:00 – 8:30	Morning Tea
8:30 – 8:45	<p>Recap of proceedings from Day 1 Facilitator: Sharon Atieno</p>
8:45 – 9:15	<p>Reaching consensus on key recommendations from the prior day Facilitators: Alexis Ntabona and Antony Omimo</p>

9:15 – 10:15	Making strategic choices to support institutionalization (Step 5) Facilitators: Millicent Kodande and Laura Ghiron <ul style="list-style-type: none"> • Introduction (5 mins) • Group discussions (25 mins) • Plenary report back and discussion (25 mins)
10:15 – 10:30 am	Tea break
10:30 – 11:45 am	Making strategic choices to support expansion/replication (Step 6) Facilitators: Antony Omimo and Alexis Ntabona <ul style="list-style-type: none"> • Introduction (5 mins) • Group discussions (30 mins) • Plenary report back and discussion (40 mins)
11:45 -12:30 pm	Plenary discussion around reaching consensus on key recommendations from today's discussions and generating commitments for moving forward to expand and institutionalize Facilitators: Lucy Shillingi and Alexis Ntabona
12:30 – 12:45 pm	Existing HoPE-LVB plans for Phase II and next steps resulting from this strategy development exercise Presentors: Lucy Shillingi and Antony Omimo
12:45 – 13:00 pm	Closing remarks Dr. Doreen Othero EAC LVBC and Hon. Andrew Toboso, MP Butere
13:00 – 14:00 pm	LUNCH – guests depart at their leisure

Applying the ExpandNet/WHO Nine step approach for developing a scaling up strategy to HoPE-LVB PHE interventions

Defining “the innovation”

An innovation is new in the setting where it is being introduced. It can consist of a technology or clinical practice; community or individual behaviors or values; a managerial or other institutional practice; or any other desirable set of interventions ranging from simple to more complex.

The HoPE Model core package consists of the following key components/activities which are implemented/led by a dedicated, multisectoral team:

- Needs assessment about population, health and environmental issues through interaction with community members; local, county and national ministry staff from a range of facilities/services/sectors; and other stakeholders
- Training and ongoing support to strengthen capacity of community leaders and governmental health and environment-related ministerial personnel from local to county level to work on PHE integrated activities (e.g. community dialogues)
- Training and ongoing supportive supervision of facility-based providers via in-service training on FP/RH, MNCH, commodities management, conducting outreaches/in reaches, and monitoring
- Training, equipment and supplies provision and ongoing supportive supervision of community groups including women's, youth including young mothers, village health teams/community health workers, farmers and fisher folk/beach management unit groups to implement and share information on: 1) environmental conservation/natural resource management and alternative livelihood practices (e.g. sustainable agroforestry and fisheries practices, tree nurseries, apiaries, alternative energy saving approaches, etc); and 2) health issues including reproductive health including healthy timing and spacing of pregnancies, maternal healthcare including antenatal care and facility-based delivery, WASH, and immunization.
- Establish a model household cluster strategy to demonstrate, disseminate and supervise implementation of PHE approaches among community members

- Ongoing advocacy by the project team in collaboration with project-oriented champions, and community groups' members for expanding implementation of integrated PHE approaches
- Participatory monitoring and reporting by community and service providers

Step 1: Planning actions to increase the scalability of the innovation

The innovation refers to integrated PHE interventions that are to be scaled up. The innovation refers to a package of interventions, often consisting of several components.

1. Is the evidence presented convincing enough to know that the integrated HoPE-LVB model is both effective and feasible for replication?

Is evidence regarding the added value of integration sufficient to cultivate buy-in for both health and environment sectors?

If not, what other evidence should be collected or should the evidence be better presented? For example, should cost-effectiveness be documented and if so who could do that and how would it be done?

2. How different is **implementation** of integrated HoPE-LVB interventions from predominant single-sector approaches or ways of working in existing service systems, and what are the implications of this for scaling up to new areas and institutionalizing the approach?

Can the model be further simplified? Are there components that are not needed? How could the innovation be done better? What else might need to be done?

3. How can one ensure that the values introduced in the HoPE approach (e.g. human rights, gender and youth focus, quality of care) become part of general service delivery to ensure long run sustainability?
4. An integrated model is considered highly desirable by many stakeholders, but it requires a major paradigm shift. What can be done to facilitate such a shift and to facilitate implementation on a large scale? What needs to be done to integrate this approach into the existing service systems?

Step 2: Increasing the capacity of the user organization(s) to implement scaling up

The user organization(s) refers to the institution(s) that seek to or are expected to adopt and implement the HoPE approach on in new areas and for new populations and to institutionalize it in programs, systems, laws, budgets etc.

1. What key governmental institutions and initiatives (and at what levels) should be brought on board to play a strong role in scaling up the HoPE integrated model? What should be done to involve them?
2. Beyond existing HoPE-LVB sites and partners, are there additional NGOs who could support or implement the HoPE package of interventions? If so, suggest specific organizations. How can a sense of ownership be built and sustained among them?
3. Given that external inputs were available during the pilot phase, but are not routinely available in the user organizations, what steps are needed to mobilize such inputs from within and outside the health and environment sectors?
4. Are there impending changes within the health or environmental sector organizations (i.e. personnel changes, funding issues, reorganization, health reform, decentralization, elections) that might affect the success of scaling up? What can/should be done to ensure that scaling up can proceed in spite of these changes or to mitigate/eliminate any negative effects to the extent possible?

Step 3: Assessing the environment and planning actions to increase the potential for scaling-up success

*The environment refers to the conditions and institutions which exist or are happening **OUTSIDE** the user organizations but that fundamentally affect the prospects for scaling up (i.e. elections, health sector reforms, donor priorities, and many more).*

The following are key dimensions of the environment that could influence scaling up efforts:

- Health sector/system
- Environmental sector (incl. fisheries, agriculture, water, natural resources, etc)
- Education sector
- Other relevant government institutions (i.e. Ministry of Finance/Planning)
- Socioeconomic, gender & other socio-cultural determinants
- Policy setting
- People's needs and rights
- Funding agencies
- Other

1. Where in the above-listed various sectors of the environment can support be mobilized to facilitate scaling up?
2. What kind of obstacles may be encountered in the various environments? What can be done to reduce or avoid these obstacles?

Step 4: Increasing the capacity of the resource team to support scaling up

The resource team for HoPE-LVB refers to the individuals and organizations who were involved in the pilot and/or who seek to promote and facilitate wider use of HoPE-LVB approaches. Resource teams can act formally or informally in this role.

1. What should be done to bring additional members into the resource team who have understanding of and/or credibility with the governmental and NGO user organizations?
2. What are your recommendations for who should join the resource team - by either becoming a champion or implementing partner - to advance the scaling up process?
3. What can be done to ensure that needed funding, support and stability of the resource team will be available over the scaling up period?

Step 5: Making strategic choices to support vertical scaling up (institutionalization)

Vertical scaling up refers to the policy, political, legal, regulatory, budgetary or other health or environmental systems changes needed to institutionalize the innovation at the national or sub-national level.

1. How can the HoPE model be institutionalized? That is, what changes are needed in terms of budget allocations, pre-service education or training, logistics, information systems, human resources, or policies, etc. to facilitate expansion and ensure sustainability of HoPE's integrated PHE approach?

What are appropriate approaches to advocate for the needed changes, who should organize the necessary advocacy, and at what levels?

How can the necessary resources for such advocacy be mobilized? (Consider how this question should be reformulated given that you might give it to a separate group and it needs to stand by itself)

2. Are there any existing cross sectoral collaboration mechanisms (beyond policies), including planning and budgetary processes, to which scaling up of the HoPE model could be linked and operationalized? How should this be accomplished?

Step 6: Making strategic choices to support horizontal scaling up (expansion/replication)

Expansion or replication is also referred to as horizontal scaling up. Innovations may be replicated in different geographic sites or can be extended to serve larger or different population groups.

1. How many sites and at what administrative levels should HoPE model interventions be expanded, over what time period? Answer this question in light of how feasible would the proposed expansion be given the characteristics of the model, the capacity of the user organizations and the resource team, and the larger environment.

Consider whether the innovation should be introduced in stages or should multiple components be introduced together simultaneously? What are your recommendations?

2. What are the resource requirements for scaling up the innovation? (e.g. materials, infrastructure, skilled staff, training, etc)? What are the implications of this for how far and how fast scaling up should proceed?
3. Monitoring the process and outcome of scaling up is essential. Key questions for monitoring are:
 - Are the central components of the model being maintained (fidelity of the innovation?)
 - What adaptations are taking place and how do they affect outcomes?
 - What bottlenecks/problems are being encountered and what is being done to address them?
 - Are desired outcomes maintained?

To what extent can existing management information systems/service statistics be used to monitor these aspects? If not what additional monitoring should be implemented, by whom and at which levels?

PARTICIPANT LIST**HoPE-LVB Dissemination and Strategic Planning for Scale Up Meeting**

			Table
	Name	Position/Agency	#
		Member of Parliament- Butere, Kenya	
1	Hon. Andrew Anyanga Toboso	Chair -Parliamentary Network on Pop & Devpt	1
2	Harron Wanjohi	Env Planning Officer-Nat Env Mgmt Agency/Nbi	1
3	Maurice Oduor Ofula	Reg Pop Coord - NCPD, Nyanza South	1
4	Dr. Anne Khasakhala	Snr Lecturer, Pop Studies Research Inst - Univ of Nairobi	1
5	Jez Korero	Sub-county Agricultural Officer, Homa Bay	1
6	Peter Agunga	Area Chief Rakwaro/PHE Champion, Homa Bay	1
7	Pamela S.A. Onduso	HoPE LVB Adviser - Pathfinder Kenya	1
8	Japheth Zachariah Bolo	County Director of Fisheries - Siaya	1
9	Vincent Omoth Ohuru	PHE Assistant - HoPE LVB Kisumu office	1
10	Dr. Isaack Abuya	Chief of Staff – Homa Bay county	2
11	Dr. Doreen Othero	Regional Program Coord, PHE EAC LVBC	2
12	Leonard Oloo Ofula	County Director - NEMA Siaya	2
13	Nzomo Mulatya	Deputy Director, PHE Network Chair-NCPD	2
14	Andrew Soi	County Director of Forestry - Siaya	2
15	Peter Ombweke	Kenya Wildlife Services County Director, Siaya	2
16	Millicent Kodande	M & E Officer, HoPE LVB Kisumu office	2
17	Lucy Shillingi	HOPE LVB Director, Pathfinder Uganda Rep	2
18	Hon. Dr. Elizabeth O. Ogaja	County Minister for Health Services, Kisumu	3
19	Brian Odhiambo	PA/Minister of Health- Kisumu county	3
20	Immanuel Kilinda Kilei	Legal Counsel-Kisumu county	3
21	Rodrick Kundu	Director-Lake Victoria Env Mgmt Proj (LVEMP)	3
22	Enock Obwolo	County Pop Coord-Western Kenya, NCPD	3
23	Bernard Ondiek	M & E Officer, Kisumu Medical & Edn Trust	3
24	Wycliffe Nyaundi	GIZ	3
25	Gordon Owino Otieno	Sub-county RH Coordinator - Suba	3
26	Dr. Florence Diemo	Sub county Medical Officer of Health - Bondo	3
27	Sharon Atieno	Advocacy & Comm Officer-HoPE LVB Kisumu	3
28	Dorah Taranta	Program Manager - HoPE LVB Uganda	3
29	Dr Jacob B. Khaoya	Snr Coord Outreach, Marie Stopes Kenya Nbi	3
30	Esther Mugure Thuo	Principal Env Planning Officer - NEMA Nairobi	4
31	Samwel K Tanui	County Pop Coord, Nyanza North (Siaya) -NCPD	4
32	Dr. Ephraim Okal Ocholla	Sub County MOH, Rachuonyo North	4
33	Wyclife Wando Okumu	Prog Off -Agric Sector Devpt Suppt Prog Kisumu	4
		Chairman, East Africa & Kenya National Beach Management Unit Network	
34	Tom Guda		4

35	Peter Kagwe	Project Manager-Kisumu, TUPANGE project	4
36	Dr Godfrey Ogonda	Deputy Director Programs, OSIENALA	4
37	Richard Otieno Juma	KWS Warden/Dominion Farms Tour Guide	5
38	Boniface Makalasia Kwesa	Director, Kakamega Env & Educ Program	5
39	Emily Mateche	Project Officer-Nature Kenya, Siaya	5
40	Christine Kanana	Lake Region Manager-World Vision Kenya	5
41	Derryk Omuodo	Project Advisor, SHAPE LVB - Nyanza RH Society	5
42	Casianes Olilo	Kenya Marine & Fisheries Research Institute	5
43	Christine Night Odero	PHE Assistant, HoPE LVB Kisumu office	5
44	Tresiah Maina	Gender Livelihoods & Advocacy Manager, Green Belt Movement	6
45	George Okenyu	Zonal Team Leader, ViAgroforestry - Bondo	6
46	Dr. Maureen Adudans	Health Systems Specialist/Regional HIV Adviser, Columbia Global Centers- Africa	6
47	Paul O Opiyo	County Project Coordinator, Western Kenya CDD & Flood Mitigation Project	6
48	Muma Edelquin Opiyo	Project Coordinator, SHAPE LVB NRH Society	6
49	Howard Akimala	Partnership & Comm Mgr/PHE focal point DSW	6
50	Carolyn Nalwoga	M & E Specialist, HoPE LVB- Uganda	6
51	Daniel Gor Odeny	Area Chief Karachuonyo, PHE Champion, H.Bay	6
52	Joshua Okundi	Project Coord, Buogi Mak Buogi, Homa Bay	7
53	Wilson Oduor Otieno	Project Coord, Karibuni Ndhiwa CBO, Homa Bay	7
54	Maureen Aoko	Young Mother, Model Household advocate Rakwaro	7
55	Millicent Onyango	HTC provider- Youth Fighting AIDS in Kenya (YOFAK)	7
56	Samwiri Mugaya	Ecological Christian Organisation (ECO) Uganda	7
57	Phillip Agwanda	County Director of Fisheries, Homa Bay	7
58	Henrieta Wandindi	SHAPE LVB Nyanza RH Society	7
59	Dr Cheryl Margoluis	Senior Tech Adviser – PHE, Pathfinder HQ-USA	7
60	Jill Matakwa Adhiambo	Proj Coord, Family Health Options Kenya(FHOK)	7
61	David Omolo Okeyo	Env Officer- Suba Env & Empowerment Kenya	7
62	Dr. Alexis Ntabona	Consultant, ExpandNet	floating
63	Desmond Tirop	Finance & Admin Officer-HoPE LVB Kisumu off	floating
64	Antony Omimo	Program Manager - HoPE LVB Kisumu office	floating
65	Laura J. Ghiron, MPH	ExpandNet secretariat, Vice President- Partners in Expanding Health Quality and Access	floating
66	Emmaculate Akoth	Office Assistant, HoPE LVB Kisumu office	floating
67	Morris Mikala	Admin Driver – HoPE LVB Kisumu office	