At the central level of MOPHS, the JICA Adviser on Community Strategy continued with her efforts emphasizing on creating a platform for Community Health Strategy (CHS) policy in the country and leading all stakeholders to the right and common direction. As a result, the foundation has been built to review, evaluate and revise the CHS policy, operational tools and its implementation status in a participatory way with a wider range of audiences than ever. With strengthened leadership and management capacities of the Department of Primary Health Services and the Division of Community Health Services, coordination and collaboration mechanisms are now in place to review/develop community-based health information system tools, training manuals and curriculum, and to develop and propose a new CHS model. Furthermore, the national CHS evaluation was conducted and its positive outcomes were disseminated to confirm ‘we/CHS are on the right direction’.

In addition, the first-ever CHS national convention hosted by MOPHS was organized and held to share evidence, the best practice, challenges, lessons learned and recommendations. The convention was also an attempt at a participatory policy review and revision based on the findings from the convention by involving various stakeholders and communities at all levels. Such achievements were made as a result of the established platform with collective efforts, commitment and determination to improve health status (and beyond) in the Kenyan community.

In the field of school health, the JICA Advisor to the division of child and adolescent health (DCAH); MOPHS completed his assignment in December 2010. During the year under review, documentation of the project activities and outputs was undertaken in order to provide the DCAH with resources for scaling up of the comprehensive school health activities nationwide. A digital video documentary of school health activities in Kilifi and Msambweni districts was prepared as was a handbook on implementation. The Project also procured and donated two vehicles to support school health activities in the two districts mentioned herein.

In terms of achievements, the central level realized strengthening of its capacity for planning, supervision, monitoring and evaluation of comprehensive school health program activities. At the school level, a lot of improvement was noted in areas such as water and sanitation, values and life skills as well as child rights, protection and responsibilities. There was evident availability of hand washing facilities and use of soap by pupils, water supply and appropriate waste water disposal mechanisms, hygienic conditions of latrines with appropriate distances from classrooms with privacy and safety measures put in place. A reward scheme was introduced in the program to recognize the best performing schools in the pilot sites in Coast province.

In the 6th Annual Operation Plan, Nyanza province prioritized several interventions among them rolling out of the CHS with focus on High Impact Interventions and technical supportive supervision, and strengthening information collection, analysis and use at community and district levels. These interventions were intended to achieve the province’s common goal for 2010/2011. In pursuit of this common goal, the JICA Project in Nyanza undertook bold measures for plat forming of existing Projects (taking into account the aspects of policy, planning, financing, human resource, information and M&E), to create synergy and the enabling environment, and with this approach, integrate these Projects into service delivery in partnership with other stakeholders. This approach was reinforced by the Project’s vision of “Servant Leadership” that is underpinned by capacity development and networking among health workers.

The work of the Project progressed through the activities of the working groups on Project Coordination, Unity-Communication-Advocacy-Networking, Training Management and Field