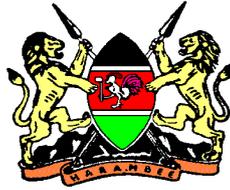


REPUBLIC OF KENYA



**THE PRESIDENCY
MINISTRY OF DEVOLUTION AND PLANNING**

PARTICIPATORY POVERTY ASSESSMENT V

NYAMIRA COUNTY SITE REPORT

ERANDI B CLUSTER

OCTOBER 2014

KENYA 
VISION 2030
Towards a Globally Competitive and Prosperous Kenya

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FOREWORD

Participatory Poverty Assessment (PPA) is a mechanism through which identified communities give their own definition and understanding of poverty. This PPA covered 47 counties unlike previous ones which covered selected districts.

The main objective of this exercise was to establish the impact of various Government policies, strategies, programmes and projects aimed at reducing poverty. It further sought to capture the voice of the poor in the communities with special focus on the impact of social protection initiatives. In particular the study covered the following broad issues: poverty dynamics and indicators; provisions of government services in health, education, agriculture, housing, and water and sanitation; and pro-poor initiatives and devolved funds.

The definition of poverty varies from one community to the other. From their point of view, poverty was generally defined as inability to meet basic human needs such as food, shelter, clothing, education and health.

The study found out that poverty level from a community perspective has been rising despite various pro-poor initiatives undertaken by the government over the years. It is worthy to note many in the clusters visited did not understand how the pro-poor initiatives operate. On crosscutting issues such as HIV&AIDS, drug and substance abuse, gender disparity on property ownership, degradation and poor governance on devolved funds and pro-poor initiatives were reported to be on the rise.

The findings from the study will be used as lessons learnt in designing County based programmes. For example, communities have come up with diverse coping mechanisms on poverty. Some of these include women merry-go-round and small scale business. This will be upgraded to other notable initiatives like table banking concept and training counties to benefit from UWEZO and other related funds. They will be a reference point in designing current and future interventions on reducing poverty and regional disparities. I call upon our internal and external stakeholders to utilize the respective PPA-V county reports to inform policy and decision-making.

**ANN WAIGURU, OGW
CABINET SECRETARY
MINISTRY OF DEVOLUTION AND PLANNING**

ACKNOWLEDGEMENTS

The Nyamira County Participatory Poverty Assessment is the first of its kind that has the County as the key reference point on poverty profiling since the promulgation of the Constitution of Kenya 2010 and ultimately the formation of County Governments after the general elections of 2013. It is derived from the 5th National Participatory Poverty Assessment (PPA-V) Report whose findings have been published simultaneously with the 47 County Reports.

Foremost, I take this opportunity to sincerely thank and acknowledge all individuals and institutions who collectively contributed their time and resources towards the production of this Report. In particular, valuable leadership and policy guidance was provided by Stephen Wainaina, the Economic Planning Secretary and Moses Ogola, the Director Social & Governance Department. The Social & Governance Department provided the secretariat that was charged with the responsibility of undertaking the exercise and finally the production of both the National Report and the County specific Reports covering the 47 Counties.

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Finally, the Ministry is grateful to the respective County Governments and their staff, National Government staff in the Counties, communities and their leaders as well as key informants especially in their role in community mobilization and laying of logistics for a successful poverty assessment exercise within their areas of operation. Specifically, we thank targeted communities for turning up in large numbers and participating with enthusiasm during Focused Group Discussions (FGD) sometimes often late into the evenings thus making the work of our facilitators a success.

ENGINEER PETER MANGITI
PRINCIPAL SECRETARY

EXECUTIVE SUMMARY

Participatory Poverty Assessment (PPA) is a mechanism through which identified groups of people give their own definition and understanding of poverty based on their own perspectives.

The overall objective of PPA-V is to contribute to Kenya's poverty reduction strategy by providing a richer and more informative database on the living standards, aspirations and needs of the poorer sections of the population especially with regard to social protection and social security. The survey sought the community perspective on poverty and provision of selected wellbeing services including agriculture, education, health, social protection, and devolved funds. In particular, perspectives of the community were sought on the awareness of the availability of services, accessibility and affordability.

This report presents the findings of the PPA V survey in Erandi 'B' Cluster of Nyamira County which was conducted in November/December 2013. Information from the cluster was provided by the community members through Focused Group Discussions (FGDs) and household questionnaire and was complemented by the information from key informants who were mainly technical experts in the subject areas of the survey.

Nyamira County covers an area of 899.4 km² and has a population of 598,252 persons (284,048 males and 311,204 females) according to the 2009 Kenya Housing and Population Census. The county inter-censal population growth rate is estimated at 1.83 percent per annum.

Erandi 'B' Cluster is a rural community in Nyamira sub-county, Ekerenyo division. The cluster has 210 households according to the fifth National Sample Survey and Evaluation Programme (NASSEP V) maps from Kenya National Bureau of Statistics (KNBS).

According to the Kenya Integrated Household Budget Survey (KIHBS) 2005/2006, the county was estimated to have 46.3 percent of its population living below the poverty line, which is almost the same as the national level of 46 percent. About 21.8 percent was food poor and 1.9 percent was hardcore poor.

Poverty in this community portrayed itself in many dimensions ranging from houses with leaking roofs, access to healthcare, and access to proper education, to affordability of food and proper diet.

The main causes of poverty include lack of markets for their produce, diseases, hailstones, poor soils and land fragmentation, among others.

The major health concerns in the community include diseases like malaria, HIV&AIDS, paralysis, cancer, heart diseases and malnutrition-related diseases (e.g. kwashiorkor).

Although the health facilities are not very inaccessible to the community, the health services have become more affordable due to free and subsidized services being offered by the government. There is need for the Government to bring health services closer to the people since majority of the people have to walk for distances of about 5-7 km to access health services.

Most of the education facilities are in good condition since the classrooms are permanent. The Constituency Development Fund (CDF) has done a lot in terms of construction of buildings, and painting and equipping classrooms with desks at primary level. The main concerns in the community are inadequate staff and cost of education.

The major cash crops in the county include tea, coffee, pyrethrum and banana as well as high potential in horticulture. The main food crops include maize, beans, cassava, sweet potatoes, vegetables, millet and sorghum. Farm inputs (seeds and fertilizers) are accessible to the community from the local market and majority of them pay for the fertilizers while a few get it at subsidized prices. Given that agriculture is the mainstay of the economy of Nyamira County, it plays a big role in poverty eradication. There is need to improve infrastructure especially rural access roads to enable easy access to markets and the people by agricultural officers.

The water resources availability varies significantly between seasons as well as across regions. Most parts of the county have two rainy seasons. Communities in different parts of the county have formed groups and established water schemes in order to counter the problem of inadequate supply of safe drinking water.

Several water and sanitation programs/initiatives have been put up in the County. These include construction of water dams, boreholes, springs and protection of the water catchments. The community uses harvested rainwater for domestic use or they fetch from the rivers.

Some of the sanitation facilities and hygiene methods used by the community include latrines, composite pits, washing of hands before meals and after visiting latrines, clearing bushes around the homesteads, sweeping the compound, treating drinking water, and taking a bath once a day.

Nyamira County has both permanent and semi-permanent dwelling premises. The most common types of houses are those with roofs constructed of corrugated iron sheets. The semi-permanent dwelling premises are a common feature in the rural areas and in slums settlements.

There are two types of cash transfer programmes in the community, namely, cash transfers for the elderly and for the persons with severe physical disabilities. The community has also benefited from several programmes and devolved funds such as Roads 2000, CDF, WEF, YEDF and Poverty Eradication Commission Revolving Loan Fund.

HIV&AIDS is a major health concern in the community and is one of the main causes of poverty.

Gender and disability mainstreaming are still a major concern to the community and strategies to address this need be formulated.

ABBREVIATIONS AND ACRONYMS

AMREF	Africa Medical Research Foundation
CBO	Community Based organization
CDF	Constituency Development Fund
CHW	Community Health Worker
CT	Cash Transfers
ECDE	Early Childhood Development Education
ESP	Economic Stimulus Programme
FBO	Faith Based organization
FGD	Focused Group Discussion
FPE	Free Primary Education
KCPE	Kenya Certificate of Primary Education
KCSE	Kenya Certificate of Secondary Education
KESP	Kenya Education Support Programme
KIHBS	Kenya Integrated Household Budget Survey
KKV	Kazi Kwa Vijana
LATF	Local Authority Transfer Fund
MDGs	Millennium Development Goals
NACC	National AIDS Control Council
NASSEP	National Sample Survey and Evaluation Programme
NCPB	National Cereals and Produce Board
NGO	Nongovernmental Organization
NHIF	National Hospital Insurance Fund
OVC	Orphans and Vulnerable Children
PEC	Poverty Eradication Commission
PPA	Participatory Poverty Assessment
PWD	Persons with Disabilities
RA	Research Assistant
STI	Sexually Transmitted Infection
TOWA	Total War against AIDS
VCT	Voluntary Counseling and Testing
WEF	Women Enterprise Fund
YEDF	Youth Enterprise Development Fund

CHAPTER ONE

INTRODUCTION

1.1 BACKGROUND

Participatory Poverty Assessment (PPA) is a mechanism through which identified groups of people give their own definition and understanding of poverty based on their own discourse. PPAs are aimed at understanding poverty from the perspectives of poor people including gaining a clearer notion of what their priorities are for improving their livelihoods.

Participatory approaches add value in policy formulation and planning by enriching understanding of the realities of poverty and formulation of policies which address the plight of the poor. They increase the confidence and 'voice' of the poor while also acting as a learning process for the non poor and often resulting in the creation of new networks. In addition, participatory approaches influence the images of poverty and public debate.

Participatory approaches to research and development can be traced to the late 1970s and early 1980s. During that period, scholars and development practitioners began to question the success of traditional development approaches that relied on "blue print" plans that were seen as top-down and had little or no participation of the local people. The argument was that the local people were not just recipients of projects but were also key players whose opinions were critical to the success of development programs. There were calls for public participation and a bottom-up approach to development programming.

Some examples can help illustrate the concerns and the thinking that prevailed then. Paul Freire's contribution to an alternative pedagogy and Ivan Illich's critique of schooling in modern societies showed the inter-linkage of the process of "knowing" and the process of "education" (Freire, 1982). This reaffirmed the fundamental linkage between knowing, learning and reflecting. Other scholars added that experience was legitimate knowledge thus expanding the basis of knowing beyond mere intellectual cognition and helped to develop the practice of "experiential learning" (Kolb, 1984).

The debate on "development" placed the question of participation as a critical variable: people's participation, women participation, community participation, etc. The concept of participation put the knowledge and skills of those who are critical participants and beneficiaries of the development process in the centre (Chambers, 1983). There were questions about the best way to involve largely non-literate populations in development discourse, and the main contention was whether development practitioners whose

knowledge base was based on academic excellence were in a position to carry out appropriate training and data collection processes with non-literate rural communities. The introduction of visuals as discussion aids was adopted to bridge the gap between the non-literate and the literate.

Various participatory methodologies that emphasized the use of visuals and focus group discussions came up including PRA, PUA, Rapid Rural Appraisal (RRA), Participatory Learning Methods (PALM), and Participatory Action Research (RAP) among others.

When the World Bank and other international agencies decided to carry out participatory poverty assessments in developing countries in early 1990s, the use of participatory methodologies got a big boost. Participatory methodologies were tested in many countries and accepted as the most effective study instruments in engaging the poor in dialogue with policy makers.

Four PPAs have been undertaken in Kenya so far. The first Participatory Poverty Assessment was carried out in 1994, and covered 8 districts (seven of the poorest districts and two low income areas in Nairobi).

The second PPA was carried out in 1996 and covered 7 districts. The purpose of this study was to provide a deeper understanding of poverty from the perspective of the poor and to fill gaps that quantitative studies could not readily explain. It also aimed at enhancing capacity of Government staff in the application of participatory methodologies used to study poverty. The study looked at people's perception of service delivery.

The third PPA carried out in 2001 covered 10 districts, with the objective of enriching the information collected countrywide for the preparation of the Poverty Reduction Strategy Paper (PRSP). The PRSP built on past efforts aimed at poverty reduction, and in particular the IPRSP which identified measures and strategies necessary to facilitate sustainable and rapid economic growth, improving governance, raising income opportunities of the poor, raising quality of life, and improving equity and participation.

The first three studies focused mainly on poverty diagnostics (characteristics of the poor and causes of poverty), but had no explicit link to policy and therefore did not adequately address the impact of pro-poor policies. These studies raised numerous concerns on service delivery and therefore could be seen as informing the interest in ensuring that policies are not only pro-poor but also that their impact is felt by the poor, thus laying useful foundation for the enquiries of both PPA-IV and PPA-V.

The fourth PPA was conducted in 2005/06 alongside the Kenya Integrated Household Budget Survey (KIHBS). The two studies were meant to complement each other. The

PPA-IV focused on three main areas of policy relevance: poverty diagnosis and dynamics; pro-poor policies regarding service delivery and wellbeing; and voices of the poor among the communities which included analysis of the impact of the various policies on the poor (Agriculture and Livestock Extension Services, Healthcare, Education, Water and Sanitation, Access roads). To complement the quantitative data, PPA-IV investigated the extent to which households in the communities have moved in and out of poverty in the past.

1.2 OBJECTIVES

The overall objective of PPA-V is to contribute to Kenya's poverty reduction strategy by providing a richer and more informative data base on the living standards, aspirations and needs of the poorer sections of the population especially with regard to social protection and social security. The fifth Participatory Poverty Assessment (PPA-V) focuses on two main areas:

- The impact of the various policies, strategies, programmes and projects aimed at reducing poverty and improving welfare; and
- Capture the voices of the poor among the communities with a special focus on social protection initiatives to inform policy planning and targeting.

More specifically, PPA-V assessment sought to:

- Gain a deeper understanding of the impact of the pro-poor initiatives based on the perceptions of the people themselves, especially the poor and vulnerable groups;
- Broaden the process through which policies will be developed by engaging ordinary citizens in real debates to come up with the best ways of reducing poverty and preventing people from falling into poverty;
- Identify and prioritize policies, strategies, programmes and projects which would support poor communities in their escape from poverty, focusing on social protection initiatives;
- Integrate the respective contributions of participatory and qualitative approaches in the M&E strategy for Kenya;
- Enrich the understanding of the lived realities of poverty and arriving at policies which make sense to those affected to ensure equity and improvement of wellbeing in a clean and secure environment; and
- Respond to the Bill of Rights and other articles (public participation) enshrined in the Constitution of Kenya 2010.

1.3 COUNTY/CLUSTER PROFILE

Nyamira County borders Homa Bay County to the north, Kisii County to the west, Bomet County to the southeast and Kericho County to the east. The County covers an area of 899.4 km².

According to the 2009 Kenya Population and Housing Census, Nyamira County had a population of 598,252 persons (284,048 males and 311,204 females), with an intercensal population growth rate of 1.83 percent per annum. The settlement pattern is greatly influenced by the rainfall patterns, topography, infrastructural development, proximity to urban centers, the availability of natural resources and security. However, majority of the County population is in the rural areas.

The two topographic zones in the county lie between 1,250m and 2,100m above the sea level. The low zones are swampy wetlands and valley bottoms, while the upper zones are dominated by hills. The high altitude has enabled the growth of tea which is the major cash crop in the county.

The county has a bimodal pattern of annual rainfall that is well distributed, reliable and adequate for a wide range of crops. Annual rainfall ranges between 1200 mm-2100 mm per annum. The long rains start from December to June and short rains from July to November, with no distinct dry spell separating them. The average normal temperature in the county is 19.4 °C which is favourable for both crop and livestock production.

1.4 METHODOLOGY

1.4.1 Selection of the Cluster

The selection of the cluster was done using two-stage purposive sampling that was superimposed on agro-ecological zones to cover common characteristics across similar zones. The aim was to capture as much variation as possible among the poor communities in a given County. The fifth National Sample Survey and Evaluation Programme (NASSEP-V) maps from Kenya National Bureau of Statistics (KNBS) were used to demarcate the boundaries of the selected clusters.

One cluster per county was selected for the detailed study in which specially designed participatory assessment tools were administered. In the cluster, a household survey was undertaken and a household questionnaire administered to selected households, especially those benefiting from cash transfers and those in extreme poverty.

1.4.2 Field Logistics

The PPA-V pilot study was conducted during the month of March/April 2012 and the main survey in this cluster was done in November/December 2013. Information from the cluster was provided by the community members through Focused Group Discussions (FGDs) and household questionnaire and was complemented by the information from key informants who were mainly technical experts in the subject areas of the survey. The main policy areas of focus were Healthcare, Basic Education, Agricultural Services and Inputs, Water and Sanitation, Housing, Cash Transfer (CT), Roads 2000, Devolved Funds such as Constituency Development Fund (CDF) and Kazi Kwa Vijana (KKV).

In preparation for the survey, the Research assistants (RAs) were introduced to the use of survey tools by the supervisors/trainers. Advertisement for Research Assistants (RAs) was done one week prior to recruitment through the District Development Officer (DDO) and District Statistics Officer (DSO). The recruitment interviews were conducted for two days. Out of the applicants who were interviewed, six (6) Research Assistants were selected to assist in data collection in the county.

The training for research assistants ran for two (2) days and data collection and report writing was done in four (4) days. During the training, RAs were taken through the introduction to Participatory Poverty Assessment and methodologies, guiding principles for participatory data collection and the data collection instruments.

To ensure the data collection instruments/tools were thoroughly understood, the research assistants conducted role plays. They were taken through the roles they were expected to play while in the field which included note taking, facilitating, observing and administration of the household questionnaires.

Other key areas covered during the training included data collection logistics, data storage, compilation of the site reports and the format of the cluster report.

1.4.3 Process, Study Instruments and Fieldwork

The study used PPA tools and instruments including semi-structured oral interview questionnaires, focus group discussions, key informant interviews and observations. The specific tools used included resource mapping, wealth ranking, Venn/chapatti diagrams and pair-wise ranking. The Village Resource Map was introduced before the introduction of other PPA tools so as to understand the community boundaries and the facilities within. Wealth Ranking was used to establish how the community categorizes itself economically. There was a deliberate attempt to identify households which were benefiting from cash transfers so that they could participate during the administration of the specific data collection check lists.

A checklist was mainly used to elicit specific information on selected policy areas from the community. It was divided into two sections namely Poverty Diagnostics and Assessment of the Impact of Pro-poor Initiatives. The trained RAs administered the tools/instruments under the guidance of the supervisors to ensure quality of the data collected. The data collection process was similar for all selected sample sites as well as the format for data recording and analysis. This standardization was critical for overall data analysis and report writing.

The key informants provided technical information about their particular areas of operation. Those interviewed included officers responsible for Public Health/Medical Services, Water, Agriculture/Livestock, Gender and Social Development, Basic Education, opinion leaders, DDOs and the District Commissioner.

1.5 REPORT ORGANIZATION/OUTLINE

This report presents the PPA-V survey findings in Erandi 'B' Cluster of Nyamira County. The report is divided into six chapters including chapter 1 which covers the Introduction. Chapter 2 highlights the survey findings on poverty and inequality in Nyamira County while chapter 3 presents findings on provision of public services in the selected policy areas (healthcare, basic education, agricultural services and inputs, water and sanitation and housing). Chapter 4 covers the findings on selected pro-poor initiatives (policies and programmes) such as Cash Transfers (CT), Kazi Kwa Vijana (KKV), Roads 2000, and devolved funds such as CDF, Women Enterprise Fund (WEF), Youth Enterprise Development Fund (YEDF) etc and other pro-poor interventions. Chapter 5 presents the crosscutting and emerging issues while Chapter 6 gives conclusions and recommendations.

CHAPTER TWO

POVERTY DIAGNOSTICS AND DYNAMICS

2.1 INTRODUCTION

According to the County Integrated Development Profile 2013, Nyamira County was estimated to have 46.3 percent of its population living below the poverty line, which is almost the same as the national level of 46 percent. About 21.8 percent were food poor and 1.9 percent was hardcore poor, meaning that they could not meet the basic minimum food requirements even if they spend all their income on food alone. The county's urban poverty stands at 13 percent while rural poverty stands at 46.3 percent. The majority of the population lives in rural areas.

Poverty in this community portrayed itself in many dynamics and its indicators were widespread ranging from houses with leaking roofs, to access to healthcare, access to proper education, affordability of food and proper diet.

This chapter discusses the issues and definition of poverty from the perception of the people of Erandi 'B' community, a rural cluster in Nyamira County. It also highlights the various dimensions and indicators of poverty as it manifests itself in the community. It further discusses the characteristics of poverty, causes of poverty, coping mechanisms and trend of poverty in the last ten years as reported by the community.

2.2 DEFINITION OF POVERTY

According to the community, poverty was defined in many ways including "*Obataka nokoremerwa endagera ne binto*" (poverty is lack of food), lack of access to proper education, lack of land for agriculture, poor road network, and inability to afford basic goods and services e.g. healthcare and clothing. A person who cannot afford safe drinking water and has many children was also considered to be poor.

2.3 CLASSIFICATION OF POVERTY

The community classified themselves into two categories in terms of poverty i.e. the very poor and the rich. To this community there were no poor people but all were considered to be very poor.

2.4 CHARACTERISTICS OF POVERTY

A Very Poor Person

Someone who portrayed the following characteristics was considered to be very poor:

- A person who keeps running to other people's homesteads to seek casual jobs;

- Someone with a house that has leaking roof;
- One who cannot afford proper healthcare;
- One with malnourished children and unkempt/shaggy hair;
- One with no or poor clothing;
- One who is unable to educate the children;
- One with many children; and
- One who keeps on following the rich to their houses to beg "*omotaka agotaka kobwati amonda gochi bwoye*".

A Rich Person

To this community someone who owns a car, dresses well, their children go to private schools, they can afford to hire casuals, eat well including chapatti, and can afford to install electricity is considered to be rich.

2.5 CATEGORIZATION OF POVERTY

In this community, there were a total of 210 households. Out of this, 207 (98.6%) households were classified as very poor. The very poor consume small portions of food and are never satisfied, they buy small portions of maize, have many children, cannot afford decent clothing, their children are malnourished, and have houses with leaking roofs. In this community, there were no poor households as all were considered to be very poor. The rich comprised of 2.4% of the total households in the community.

2.6 CAUSES OF POVERTY

- i) **Land fragmentation:** Land has largely been subdivided into small portions to accommodate the fast growing population in Nyamira County. This in turn has reduced the size of land for agricultural production. Available land can only cater for subsistence.
- ii) **Alcoholism:** Idleness and lack of employment has contributed a lot to alcoholism and hence high levels of poverty in the community;
- iii) **Diseases:** HIV&AIDS was found to be one of the causes of poverty in this community. HIV&AIDS is high among the youth due to prostitution and this has largely contributed to poverty since the active youth reduce their productivity and a lot of resources are used on treatment and management of the disease;
- iv) **Climate change:** Rainfall patterns have changed greatly leading to poor harvests;
- v) **Hailstones:** The area has been experiencing hailstones which spoil tea resulting to poor harvest;
- vi) **Poor soils:** Fertilizers are costly thus the community plant without fertilizer resulting to poor harvest;
- vii) **Lack of markets for their produce:** The market for farm produce is limited and middlemen exploit them thus making them poorer;

viii) **Poor road network:** This hinders access to essential services as well as transport of produce to the market resulting to increased poverty in the area.

2.7 IMPACTS OF POVERTY

Some of the impacts of poverty as identified by the community include:

- **Diseases:** Poverty in this community was found to be highly related to diseases like ulcers, kwashiorkor and even HIV&AIDS;
- **Depression:** Majority of the people were unable to afford basic needs thus leading to depression and mental illness;
- **Insecurity:** Poverty has led to increased robbery incidences in the community;
- **Deaths:** Due to diseases like HIV&AIDS are on the increase;
- **Immorality/prostitution:** The youth were found to engage in immoral acts to meet their basic needs;
- **Increased high dependency:** There is a lot of dependency on either one member of the family or on relief food;

2.8 COPING MECHANISMS

The following are some of the coping mechanisms and strategies employed by some community members to cope with poverty:

- Tea hawking (*Ogososa echaye*);
- Subsistence farming;
- Prostitution;
- Stealing especially the youth;
- Boiling bananas as alternative to ugali;
- Borrowing food from others;
- Engaging in casual labour in farms and homes of the rich in the community;
- Child labour; and
- Brick making.

2.9 ASSET OWNERSHIP, ACCESS AND DECISION MAKING

Members of this community own various assets which include motorbikes, land, cattle, chicken, furniture, utensils, house, bananas, tea, trees, car and goats. In this community, men owned majority of the assets like land, cattle, motorbike, furniture, house, tea, trees, car and goats. On the other hand, women owned chicken and utensils while children/youth owned chicken, bananas and goats. However, if the husband dies, all assets are owned by the wife.

In this community, men make most decisions on purchase and disposal of most of the assets. Women were found to only make decisions on purchase of utensils.

2.10 POVERTY AND GENDER

The table below shows how time and duties are allocated within the family in Erandi 'B' community.

GENDER ANALYSIS

TIME	DUTIES		
	MEN	WOMEN	CHILDREN
5.00 am	Waking up Take breakfast	Wake up Prepare breakfast Prepare children to go to school Take breakfast	Wake up Take breakfast Prepare for school
6.00 am – 7am	Go for casual work in tea estates for whites	Milk cows Take cattle to graze Fetch water	Go school
7.00 am-noon	Working in tea estates	Go to farms	In school
Noon-2pm	Working in tea estates Take lunch	Prepare lunch Take lunch	In school Take lunch
2pm-5pm	Working in tea estates	Clean utensils Collect firewood Fetch water for the cattle	In school up to 4pm Fetch water Go for evening studies till 8pm
5pm-8pm	Working in tea estates till 8 pm Come back home and take supper	Prepare supper Take supper	Take supper
8pm-5am	SLEEPING		

Generally, most of the household chores are done by women. Most of the men in the cluster work in tea estates. Women are also involved in some forms of economic activities besides household chores.

2.11 POVERTY TRENDS OVER TIME

According to the community, poverty levels have increased over the past 10 years. Overdependence on agriculture and poor soils has led to low yields thus making more people being poor. Crop diseases and hailstones have also affected agricultural produce which has aggravated poverty.

The following are some of the challenges being experienced by the community;

- High rates of unemployment among the youth;

- Poor road network in the area affecting transportation of produce to the market and access to essential services;
- Lack of markets for produce;
- Corruption by Government officials making it difficult to access government assistance;
- Lack of recreational facilities;
- Poor communication network (telephone services);
- Taking care of disabled children;
- Lack of public schools and health facilities within the community;
- Poor sources of clean drinking water in the community.

2.12 INTERVENTIONS TARGETING THE POOR IN THE COMMUNITY

Lutheran Church of Kenya which is located within the community has constructed and is running an academy where children from the area attend primary school. Kenya Tea Development Agency was also found to be maintaining roads within Erandi 'B', and UNICEF Kenya has table banking services within the sub-location.

Care Kenya is a nongovernmental organization operating in Nyamira and Kisii counties and is in the forefront in the fight against poverty. The organization has several programs running in Nyamira County and they include group saving and loans targeting men and women, Changua Maisha project (fight against HIV&AIDS) and banking on change targeting youth which is basically on youth savings. Group savings and loan program started in 2008 and has had a lot of impact on the people of Nyamira. The program started with ten groups in Nyamira town and currently has over 1,200 groups in all locations in Nyamira. The program creates awareness on record keeping, proper investment strategies, how to save, how to manage loans borrowed and how to develop group constitutions. The groups started by saving as little as Kshs 200 per month and currently the lowest amount saved so far is Kshs 346,000 with the maximum being Kshs 2.5 million.

This program has a lot of positive impact to the people in that they are able to put up better houses, can afford to pay school fees and can afford most of the basic needs e.g. food and access to better healthcare. It has also improved members self-esteem who no longer feel inferior due to their poverty status but rather can talk about it with confidence and how to get out of it.

2.13 RECOMMENDATIONS

- Employment creation especially for the youth;
- Provision of water for irrigation;
- Link the farmers to the markets;
- Development of rural access roads to enhance access to markets and services;

- Subsidize farm inputs; and
- The community should be trained on modern farming techniques.

CHAPTER THREE

FINDINGS ON PROVISION OF GOVERNMENT SERVICES

This chapter discusses the various government pro-poor initiatives offered in healthcare, basic education, agriculture, water and sanitation and housing. It looks into the provision of these services in terms of availability, accessibility, affordability, impacts, challenges and the recommendations given by the community and the key informants to improve delivery of the services.

3.1 HEALTHCARE

3.1.1 Introduction

According to the CIDP, the county has 254 health posts which include 5 public sub-county hospitals and one private hospital, 68 public nursing homes and 117 private clinics. The total hospital bed capacity for the entire county is 1,368. On accessibility, 0.8 percent of the county's population can access a health facility between 0-1 km, 78 percent can access health facility between 1.1-4.9 km while 21 percent can access health facility at more than 5 km.

In Erandi 'B' cluster; there was no Government or private health facility within the community and the nearest facility is 2 km away.

The study aimed at generating information on whether there were any health facilities in the study area, establish where the health facilities are located in the community, who runs/manages the facilities, whether people were aware of the kind of services offered, whether the services offered are free or paid for and if they are paid for, are they affordable, are there other health interventions which have led to improvement in the health standards of the community and people's perceptions about health services and whether the services have improved or declined during the past ten years and why and what are the recommendations for further improvement.

3.1.2 Major Health Concerns

The major health concerns in the County and particularly in Erandi 'B' include diseases like malaria, HIV&AIDS, kwashiorkor, paralysis, cancer, heart diseases and malnutrition related diseases. It was also reported that 5% of the population in the County is elderly thus age-related diseases like arthritis are becoming a concern. Other health concerns were found to be service related e.g. lack of health facilities in the area, inadequate drugs and understaffing in the health centers.

3.1.3 Provision of Health Services

The majority of the people in the County have to walk for distances of about 5-7 km to access health services. This therefore makes the facilities inaccessible to the

community. Besides the long distances, the roads are in poor conditions and impassable during the rainy seasons.

However, health services have become more affordable due to free and subsidized services being offered by the government. Some of the services offered for free include immunization, family planning, maternity and under-fives health services.

Other services offered include rehabilitation and counseling services, treated mosquito nets to pregnant mothers, laboratory tests, prenatal and postnatal care, drug dispensation and other outpatient services.

The following are some of the challenges being experienced in provision of and access to health services:

- The community has to walk long distances to access healthcare;
- Inadequate drugs in the health centers;
- Understaffing of health facilities leading to poor delivery of services.

3.1.4 Interventions towards Improvement of Health Services

- Community health workers train women on how to maintain cleanliness, advice on malaria prevention methods, and the importance of having latrines in the homestead;
- Free treatment for under-five e.g. immunization, polio and vitamin A supplementation, provision of ITNs for expectant mothers and children under the age of 5 years;
- Provision of cheap anti-malaria drugs;
- Employment of more skilled staff by the Government and training the existing ones;
- Equipping the existing health facilities by the Government;
- The Government has allocated more funds to be used to improve the existing health facilities in the County;
- Sensitization of the community by Ministry of Health staff about health issues like HIV&AIDS; and
- Mobile clinics.

3.1.5 Decision Making Process on Health Issues in the Family

The community classified health services into three categories i.e. curative, promotive and preventive healthcare. The decisions on curative healthcare are made by men while family planning, promotive and preventive healthcare decisions are made by women.

BOX 1: In reference to men, one woman had this to say in regard to family planning decisions: “Abarebi nkai bagolhi kobangera oroiboro” meaning “How can drunkards think of family planning?”

3.1.6 Ideal Family Size

Most community members reported that an ideal family size consists of three to four children. Others noted that one was at liberty to give birth to the number of children that God has blessed him/her with (*Nabo okonyora abana buna nyasae agosesenetie*). The ability to take care of the children in terms of provision of basic needs was also given as a consideration in decisions about ideal family size.

3.1.7 Relationship between Health, Household Size and Poverty

The community reported that health was a major contributor to poverty. They noted that one cannot be healthy if he/she is poor. This in turn affects the working capability. The bigger the household, the higher the poverty level and the more difficult it is to seek proper medical care. The community also noted that a large family size leads to poor living standards and more problems (*emechando obotaka boichire tata*). The community felt that it was important for the Government to invest first in health so as to improve the economy.

3.1.8 Opinion on the Status of Health in the Last ten Years

According to the community health services have improved especially child healthcare. Provision of free healthcare for under-five has greatly reduced child mortality. According to the MOH, child mortality rate has reduced over the years. The rate of mothers dying while giving birth has also reduced greatly due to free maternity services. Despite the reduction in child and maternal deaths, the community and the county at large is still in dire need of interventions to ensure zero deaths during birth.

3.1.9 Impacts of Health Services

Identified impacts of health services are:

- Putting up of more health facilities within Nyamira County has resulted to easy access to medical care;
- Healthcare services have been made more affordable thus better productivity by the people;
- Decreased child mortality and morbidity rates;
- Increased life expectancy;
- Maternal health has improved; and
- Awareness by the community on hygiene and importance of maintaining cleanliness within the household.

3.1.10 Recommendations

- The Government should put up a health facility within the community or establish a mobile clinic which can serve them in times of emergency;
- There is need to improve the services offered in the health facilities;
- The facilities should be fully equipped with personnel and other medical supplies to enhance service delivery to the people;
- Health facilities should be financed to take care of training of medical personnel including health workers;
- Sensitize the community on importance of alternative health financing by NHIF and encouraging them to enroll;
- Upgrade the health facilities to meet the increasing demand for health services;
- Improve on the physical infrastructure e.g. roads for easy access to the health facilities as well as maintaining the buildings; and
- The laboratories should be equipped with proper facilities;
- There is need to develop and improve the Health Information Systems from manual to web-based system.

3.2 BASIC EDUCATION

3.2.1 Introduction

According to the CIDP, the County has 553 ECD centres and 545 primary schools (399 public and 146 private). About 70% of the community can access the primary schools at less than 500 metres, 25% at between 500 metres to 1 km and only 5% at between 1.1 km and 2.9 km.

The County has 173 secondary schools (166 public and 7 private). Forty percent (40%) of the community can access secondary schools at less than 500 metres, 40% at between 500 meters to 1 km, 8% at between 1.1 km to 2.9 km, 6% at between 3 km to 4.9 km and only 6% at more than 5 km.

There are two public university campuses in the county, which are branches of the Kisii University. In addition, there are two private university campuses, namely, Kenya Methodist University and Busoga University of Uganda. There are also two science and technology colleges and 15 youth polytechnics as well as 8 accredited private colleges.

The survey sought information on location of the education facilities in the study areas including state (infrastructure) of the education facilities, provision of education services including who manages the facilities, accessibility, quality and affordability of the services. It also looks at interventions that have facilitated the improvement of education standards in the community and seeks opinions of various respondents whether there is a relationship between poverty and education in the community. It also looks at the status of education services in the study areas over the last ten years

and gives recommendations on how to improve the education standards of the communities.

3.2.2 State of the Education Facilities

The community reported that the state of education facilities is average. The majority of the classrooms are permanent though lack doors and windows. The Constituency Development Fund (CDF) has done a lot in terms of construction of buildings, painting and equipping the classrooms with desks at primary level. Some of the beneficiaries of CDF include Gianchore and Kebirigo primary schools which are centers of excellence.

At secondary level, CDF has built laboratories, computer laboratories and social halls as well as equipping the computer laboratories. Among the beneficiaries include Nyansabakwa, Nyaisa, Motagara (beneficiaries of laboratories and social halls); and Gekomoni, Kebirego Marindi, Nyakemincha, Sironga and Rangengo (beneficiaries of computer halls and laboratories).

3.2.3 Provision of Education Services

The providers of education services are both the Government and the private sector. In Erandi 'B' community, there is no public Early Childhood Development Education (ECDE) facility and primary school, and thus pupils have to walk for long distances to the nearest Government school. However, there was a secondary school and a private academy within the community.

The community reported that parents still continue to pay for tuition and remedial teaching at Kshs 900 per annum; PTA/BOG teachers and activity fee at Kshs 600 and examinations at Kshs 40-50 per paper.

Some of the challenges experienced in the provision of education services include:

- Understaffing i.e. high student-teacher ratio thus compromising the quality of education;
- The physical infrastructure in the community is still not to standard. Classrooms lack doors and windows and latrines are in bad shape;
- Despite free education and the increase in enrolment rates, some children still go to work in farms to supplement their family income;
- Funds to schools for FPE and SSE are never released on time thus affecting functioning and learning process in schools;
- Bursaries are only limited to few students thus leaving many needy children out;
- Poor road network hinders school attendance; and
- Lack of a primary school and Early Childhood Development Education (ECDE) centre in the community, forcing children to walk long distances to the nearest public school.

3.2.4 Interventions towards Improvement of Education Status

- Free Primary Education (FPE) and Subsidized Secondary Education (SSE) have made it easy and affordable for parents to take their children to school;
- Bursaries by CDF for needy children;
- CDF has helped in construction of classrooms, school laboratories, social halls and computer laboratories. It has also provided desks and assisted in equipping some computer laboratories;
- Sensitization by education officers on the importance of education and where to seek assistance when in need;
- Sensitization by provincial administration on the need to take their school age children to school since education is almost free and compulsory;
- Assistance by World Vision to orphaned and vulnerable children (OVCs) within Nyamira North sub-county and scholarships to the boy child;
- Workshops, study tours and benchmarking visits organized by various stakeholders in the County to learn from each other and motivate the teachers and the students; and
- Parents are allowed by the school management committee to pay any fee in kind i.e. by picking tea in the school.

3.2.5 Relationship of Education to Poverty

The community reported that poverty is directly related to education in that if one lacks education, chances of that person being poor are high. A poor person is unable to take his/her children to school, thus creating a cycle of poverty within that family. To them, low or lack of education increases the level of poverty. On the other hand, someone with education stands a better chance of getting out of poverty since he/she has the skills and knowledge required to carry out an activity which can generate him/her income.

3.2.6 Trend in Education in the Past ten Years

The quality of education has improved over time as well as transition rate from primary to secondary school. The enrolment rate has also increased due to the introduction of free primary education, subsidized secondary education and interventions by nongovernmental organizations towards education. Performance has also improved as well as the school infrastructure due to assistance from CDF.

The teacher-student ratio remains low thus compromising on the quality of education. This calls for the Government to employ more teachers.

Education facilities in the County have improved from semi-permanent to permanent buildings although much needs to be done to ensure the required standard is met and maintained.

3.2.7 Impacts of Education Interventions

- Free Primary Education and Subsidized Secondary Education have increased school enrolment and transition rates within the community and the County at large;
- School retention rate has improved;
- Literacy level within the community has improved. This in-turn has improved on their ways of doing things e.g. health seeking behavior, farming, diet and sanitation issues; and
- With better performance by students majority have been able to get jobs which help in poverty reduction.

3.2.8 Recommendations

- The Government should employ and deploy more teachers to ensure quality education;
- The Government should ensure that funds are released to schools on time to avoid disrupting the learning process;
- The Government should consider increasing the allocation for bursaries from CDF and the Ministry of Education to cater for more needy children;
- The Government should increase the amount of money allocated to FPE and SSE as it is not enough to cater for the required materials for quality education;
- The provincial administration should ensure that children go to school rather than going to work in farms since primary education is free. Action should be taken against parents who do not take their children to school;
- There is need for renovation of most classrooms and toilets in most of the schools to meet the required standards;
- The road network should be improved to facilitate accessibility of schools;
- The Government should introduce school feeding program so as to encourage retention; and
- The Government should construct at least one primary school and two ECDE centers in the community.

3.3 AGRICULTURAL SERVICES AND INPUTS

3.3.1 Introduction

According to the County Integrated Development Profile, the major cash crops in the County include tea, coffee, pyrethrum and banana. The County also has high potential in horticulture. The main food crops include maize, beans, cassava, sweet potatoes, vegetables, millet and sorghum. The average farm size for cash crops and food crops per household is 2.4 ha (meaning??). There has been subdivision of land into uneconomical units in some parts of the county while other land parcels in the possession of large scale farm holders remain unutilised.

Tea is sold to the Kenya Tea Development Agency or individual buyers while the other crops are grown for subsistence consumption. The current climate change has been

found to affect production since the area has started experiencing hailstone rains which destroy most of their produce. The County has several agricultural initiatives mostly supported by the Government geared towards promoting agriculture and alleviating poverty.

The study sought information on the agricultural services or inputs available in the area and the extent to which the households rely on them. It also investigated the nature of extension services provided, access, affordability and recommendations for improvement.

3.3.2 Provision of Agricultural Services

The community reported that they get their farm inputs (seeds and fertilizers) from Nyamira, Kisii, Nyansiongo and other major towns within and outside the County. Majority of the farmers pay for their fertilizer which goes for Kshs 4,500 at the agrovets. Only a few benefit from the subsidized fertilizer which goes for Kshs 2,500 per 50 kg bag.

Some farmers adopted seed bulking (use their previous harvest as seeds to plant). Storage of agricultural produce is mainly in the houses due to high rate of robbery in the community.

Agricultural produce is mainly for subsistence but a few people who have surplus sell the produce in the local markets. Produce like bananas are transported to Nairobi markets. Price is mainly set by the forces of demand and supply and marketing is by individual farmers.

However, there are several challenges being experienced which include:

- Inadequate fingerlings and feeds;
- Inadequate markets for fish;
- Inadequate storage facilities for farm produce and a cooling plant for fish and processors for bananas;
- Inadequate staff especially extension officers making it difficult to offer services to the community;
- Poor road network within the community making it difficult to transport farm produce and officers to reach farmers easily;
- Lack of transport facilities for government officers to visit the community e.g. vehicles and motorbikes;
- The current climate change e.g. hailstone rains spoiling most of the farm produce;
- Expensive farm inputs and lack of access to the subsidized inputs by majority of the community members;
- Natural calamities e.g. floods;
- Small pieces of land due to the growing population making it difficult to produce for commercial purposes;

- Location of some of the facilities such as cattle dips which are located far from the community;
- Delay in disbursement of subsidized fertilizers and farm seeds; and
- Poor soils which have become exhausted.

3.3.3 Intervention for Improving Agricultural Production

The following are some of the interventions towards improving agriculture in Nyamira County:

- **Njaa Marufuku Kenya Initiative:** This initiative was started in Nyamira in the year 2011 where the Ministry of Agriculture gives grants to farmers organized in groups. Groups requesting for funding make their proposals stating their activities and the proposals are presented to the selected committee. The best proposals are selected and funded. The program targets all groups of people i.e. the youth, men and women.
- **Small Holder Horticultural Empowerment Program Unit Project (SHEP UP):** The initiative was started in the year 2011 by the Ministry of Agriculture, Livestock and Fisheries. The program offers training and not financial assistance to farmers' groups on horticultural production free of charge. It targets both men and women. In the year 2012, five farmers' groups were trained which reduced to three groups in 2013. The program will end in 2015.
- **Agricultural Sector Development Support Program (ASDSP):** The program was initiated in the County in January 2013 and focuses on value addition of farm products. The initiators of this program involved farmers in selecting their priority areas in value addition. Dairy, bananas and local vegetables were selected in that order for value addition. The programme has not started yet but plans are underway.
- **Agri-Nutrition:** This program is funded by AMREF and trains on agricultural production and proper utilization of farm produce. Trainers of the programme are from the Ministries of Agriculture, Livestock and Fisheries and Health and the training is free of charge. The program targets all groups (men, women and youth).
- **Economic Stimulus Program (ESP):** The program was initiated by the Ministry of Agriculture, Livestock and Fisheries and dealt with fish farming. The Ministry gave training, constructed fish ponds for farmers, stocked the fish ponds with fingerlings, and supplied feeds to farmers for free within Nyamira County. The farmers were mandated to take care of the fish ponds. The Ministry managed to put up 975 fish ponds fully stocked in Nyamira County and the farmers put up other 772 after seeing the good work done by the Ministry. Of the 772 initiated by farmers, 75 of them are in schools. This program ended in July 2013 but Ministry staff still visit farmers to

see the progress and give advice and guidance where necessary. The fish produced is mainly for consumption purposes though a few farmers sell to the local market. The value addition done to fish before selling is frying.

- **Extension Services:** There were agricultural extension officers and livestock extension officers in Nyamira. These extension officers offer training to farmers on the best farming methods, proper storage of farm outputs and proper animal husbandry methods. Livestock officers train farmers on issues affecting livestock especially diseases, their control and how to improve production. They conduct farm visits, field days and demonstrations for free. However, these services have become demand-driven due to few extension officers.
- **Cattle Dips:** There are some cattle dips within Nyamira and the Ministry of Agriculture, Livestock and Fisheries has been key in providing pesticides for pest control. However, the number of livestock taken to the cattle dips has reduced because most farmers have purchased pumps and spray the animals at home. During focused group discussions, farmers reported that they have ceased to visit cattle dips due to the fact that most cattle dips are located far and they are overcrowded and chances of spreading animal diseases are high.
- **Slaughterhouse:** There were slaughterhouses within the county where farmers sell their livestock for slaughter and earn income.
- **Subsidized fertilizers and seeds:** The Ministry of Agriculture, Livestock and Fisheries provides subsidized fertilizers and seeds for planting to farmers in the entire Nyamira County. During the focused group discussions, it emerged that the community was aware of these subsidized farm inputs but there were no beneficiaries in Erandi 'B' community.

BOX 2: The key informant from the Ministry of Agriculture, Livestock and Fisheries noted that there are several groups calling themselves irrigation schemes but do not provide irrigation services to the community. Some of the groups include Nyabomite Drainage and Irrigation Scheme in Nyamira and Nyamage Drainage and Irrigation Scheme in Nyamaiya. However, he noted that there was one farmer doing irrigation and has benefited a lot from the project.

3.3.4 Relationship between Agriculture and Poverty

The community reported that given that agriculture is the mainstay of the economy of Nyamira County, it plays a big role in poverty eradication. Agriculture is directly related to poverty in that low agricultural produce leads to poor living standards and increased poverty while increased production reduces poverty. For instance, when farmers produce enough maize and tea there is enough to eat and sell, leading to better living standards and health of the people.

3.3.5 Status of Agricultural Services over Time

According to the key informant, agricultural services have improved over time. There is a lot being done and many agricultural initiatives have been started in Nyamira targeting poverty reduction. According to the community, agricultural production has declined over time due to the current climate change, exhausted soils, floods and hailstones rains being experienced.

3.3.6 Impacts of Agricultural Services

Agriculture has a positive impact to the livelihood of the community members and the county as a whole. These include:

- Better living standards;
- Improved diets; and
- Increased knowledge and better farming methods due to the training being carried out.

3.3.7 Recommendations

- The Government should purchase enough vehicles for agricultural officers for easy access to the community;
- The Government should employ more agricultural officers to be able to provide services to the people;
- More training on better farming methods should be offered to the people;
- There is need to improve infrastructure especially rural access roads to enable easy access to markets and by agricultural officers;
- Provide mini-processors in all sub-counties in Nyamira to process bananas and avocados;
- A cooling plant be put up in the County for farmers to store their fish; and
- Strategies should be put in place to curb tea hawking and more tea buying centers be built.

3.4 WATER AND SANITATION

3.4.1 Introduction

According to the CIDP, the County has 1,945 shallow wells, 2,521 protected springs, 694 dams, 3,301 unprotected springs and 7 permanent rivers. The distance to the nearest water point is from zero to four kilometres. The water resources vary significantly between seasons as well as across regions. The resources are plenty during the rainy season and scarce during dry periods. Most parts of the county have two rainy seasons. The long rains are typically from March to May while short rains are typically from October to November without distinct dry spell.

Communities in different parts of the county have formed groups and established vibrant water schemes in order to counter the problem of inadequate supply of clean drinking water. The schemes are funded through members' contribution and through sourcing of funds from government and donors. The water from the various sources has many uses including irrigation, domestic use by both human and animals as well as for use in industries. With regard to rainwater harvesting it is estimated that 2.2 percent of households have made provision for roof catchment systems.

The study sought information on the location of water and sanitation programs and projects in the study areas. It also sought to establish the types of water sources and sanitation facilities, availability, accessibility and affordability. In addition, information on the role of the community in the management of water services and the status in water availability was established.

3.4.2 Status of Provision of Water and Sanitation Services

Several water and sanitation programs/initiatives have been put up in the County. These include construction of water dams, boreholes, springs and protection of the water catchments. The community uses harvested rainwater for domestic use or they fetch from the rivers.

There is no water project that has been put up in the area by the Government or non-state actors. One of the water sources is overstrained due to the high population in that area.

Majority of the poor, in particular women and girls, spend a significant amount of time fetching water in the community thus denying them time to engage in other economic activities.

3.4.3 Types of Water and Sanitation Facilities

Some of the sanitation facilities and hygiene methods used by the community include latrines, composite pits, washing of hands before meals and after visiting latrines,

clearing bushes around the homestead, sweeping the compound, treating drinking water, and taking a bath at least once a day.

The community reported that they have the responsibility of practicing proper hygiene and ensuring that the water collection points are not damaged. The community was not consulted when the decision making on the location of these facilities was made.

3.4.4 Relationship between Environmental Degradation and Water Availability

The community was aware of the dangers of cutting down trees, polluting the environment through burning of either charcoal or garbage, and the effects it causes to water and water availability. They have been sensitized by the local administration on the importance of planting more trees to ensure rains are not affected and the need to use compost pits other than burning waste and garbage to avoid polluting the air.

3.4.5 Status of Water and Sanitation over Time

The sources of water and status of sanitation facilities have improved over time. Majority are aware of the dangers of drinking unsafe water and also failing to practice proper hygiene. Majority of the community members were found to be treating drinking water and at least had observed one or two hygiene measures e.g. washing hands before meals and after visiting latrines, having a latrine in the homestead and disposing of garbage properly by use of a dumping pit, sweeping the compound and keeping short grass to avoid mosquitoes.

3.4.6 Relationship between Water and Sanitation and Poverty

The community reported that water is life and without it one will live in more poverty. Without water one cannot carry out most of the domestic chores e.g. cooking, washing utensils and clothes, bathing and even watering the animals and plants and thus water is everything. Sanitation is essential since failure to practice hygiene might make one fall sick and a sick person cannot work and this hinders economic development.

Some of the challenges in the provision of water and sanitation services are misuse of public facilities e.g. public toilets; inadequate funds to put up water projects; inadequate land to construct dumping sites; and water sources are very far and are shared with domestic animals.

3.4.7 Interventions to Improve Water and Sanitation

There are a number of government and nongovernmental initiatives that have been put in place to help the community in Nyamira County. These include:

- IFAD Program in South Nyanza community water project based in Homa Bay. The program has done a lot in assisting in protecting the water catchments and other water related projects in Nyamira County;

- World Vision has constructed water dams and sanitation facilities e.g. toilets in schools and the public places;
- Care International protects springs in Nyamira County.

3.4.8 Recommendations

- The Government should put up a water project in the community;
- Public toilets should be put up in the area;
- There is need to increase funding for putting up water and sanitation facilities in the area; and
- Sensitize the community on importance and ways of water treatment.

3.5 HOUSING

3.5.1 Introduction

Nyamira County has both permanent and semi-permanent dwellings. The most common types of houses are those with roofs constructed of corrugated iron sheets. The semi-permanent dwellings are a common feature in the rural areas and in slum settlements. The type of housing and construction materials used gives a true picture of the degree of poverty or economic development of a community.

The study sought to establish the sources of building materials, type, affordability and their availability. Secondly, the study was expected to bring out the type of housing depending on the household head and the status of the housing in the study areas for the last ten years. The trend on housing was to show any improvement or decline giving the reasons for each and the recommendations on how to improve the housing sector.

3.5.2 Types of Building Materials

The types of building materials in this community include bricks, mud, blocks, grass, iron sheets, polythene, cement, sand and tiles. Bricks, block and mud are used for walls while iron sheet and grass are used for roofing. Polythene paper was found to be used for either roofing or walls.

3.5.3 Types of Houses and Household Leadership

In this community, there are two types of housing: permanent or semi-permanent. Permanent houses are made of brick or interlocking block wall with iron sheet or tiles for the roof. Semi-permanent houses are mud-walled with iron sheet or grass as the roof.

Female headed households mostly have mud walled with iron sheet or grass roofing with a few who own permanent houses. Majority of dwellings in male-headed households are permanent with only a few being semi-permanent.

Houses headed by physically challenged persons, OVCs, grandmother and the elderly are mainly grass thatched with mud walls.

3.5.4 Status of Housing in the Last Ten Years

According to this community, there has been improvement in the type of housing. This is shown by the reduced number of grass-thatched houses and the use of bricks and blocks for house construction. This change is attributed to the many development projects in the community. For instance, women have joined self-help groups which have helped them save money and put up better houses.

3.5.5 Sources of Building Materials

Most building materials are locally available apart from sand, cement and iron sheet that have to be sourced from the towns and other neighbouring counties.

3.5.6 Gender and Housing

The community reported that men are responsible for building houses for the family and therefore are the owners of the houses. Women on the other hand keep the houses clean.

3.5.7 Recommendations

- The Government should subsidize building materials to make them affordable.

CHAPTER FOUR

FINDINGS ON PRO POOR INITIATIVES AND DEVOLVED FUNDS

4.1 CASH TRANSFERS

The community reported that there are two types of cash transfer programmes, namely, for the elderly and for persons with severe physical disabilities.

Cash transfers for the elderly started in Nyamira County in June 2011 with 23 beneficiaries from each constituency, while CT for persons with severe disabilities was started in January 2012. Each beneficiary receives Kshs 2,000 per month and it is collected bi-monthly from the Post Office by the beneficiary or an identified caregiver.

Awareness on the cash transfer programme has been created by the Government through gender and social development department and chiefs' baraza in the entire County. Currently, West Mugirango has 153 beneficiaries for both programs.

The gender and social development department uses household targeting form as a key guide in selecting the beneficiaries. With the help of the village elders, the beneficiaries are identified in every sub-location. The person's living condition is considered i.e. building materials used, source of drinking water and lifestyle. With the money received, individuals are able to afford basics needs e.g. food, clothing, shelter and healthcare.

Several challenges are faced in implementing the programme such as:

- The number of the elderly and PWDs is high than the available funds and the number recommended to the department;
- Shortage of resources to monitor and supervise the utilization of the money by the beneficiaries; and
- Misappropriation of funds collected by the caregivers thus money not reaching the targeted persons (dishonest caregivers).

The community recommended the following:

- Increase the number of beneficiaries and the monthly payment;
- Allocate more funds for monitoring and supervising the progress of the programme; and
- The local administration should put in place proper mechanisms for identification of the right beneficiaries.

4.2 DEVOLVED FUNDS

4.2.1 Roads 2000

The Roads 2000 programme is an approach that involved the use of cheap local labour/manpower in doing local roads other than machinery. The initiative was found to be cheap compared to the use of machinery and provided jobs to the locals thus improving their living standards. The Roads 2000 initiative was a great success and involved the locals (men, women and the youth).

The selection for those who took part was done by Constituency Roads Committee that oversees roads construction at the constituency level. Each individual earned Kshs 300 per day. Roads 2000 greatly uplifted the lives of many people in the community. Women, men and youth were able to meet some of the family expenses and a few were able to boost their small businesses.

The challenges faced were low wages, inadequate funding and late remittance of funds leading to late payment of workers, and delayed work. There was also political interference from leaders.

The community recommends that the wage rate should be improved in line with the prevailing market rates and more funding allocated to the programme.

4.2.2 Constituency Development Fund

The Constituency Development Fund started in Nyamira County in 2003. It targets social sector projects e.g. building classrooms for schools, bursaries to OVCs and physically challenged, building hospitals, and putting up water projects and market stalls.

The selection of the projects to be funded is done as per the needs of the society with the help of the Constituency Development Committee which comprises of members from all locations.

The impacts of the programme include:

- Health facilities have improved over time;
- Education sector has improved through building of more classrooms;
- Pro-poor community projects have been put in place e.g. water projects and market stalls;
- Tertiary/village polytechnics that foster technical skills within the community have been put up; and
- It has helped reduce the number of needy children dropping out of school through provision of bursaries.

The main challenges faced are political interference from the leaders and sometimes, because of corruption, it is not clear how some projects are selected for funding.

The community recommends the following:

- Proper monitoring of CDF kitty;
- Professionalism should be encouraged;
- Increase funding to accommodate more projects across the county;
- Carry out campaigns to sensitize the people on how to access CDF money; and
- Openness and honesty to be encouraged to curb corruption.

4.2.3 Women Enterprise Fund

The fund was first rolled in Nyamira County in 2007. The fund is a loan to women organized in groups at an interest rate of 8% p.a. and each group receives a minimum of Kshs 50,000 which increases as the group continues to borrow. So far Kshs 3.09 million has been disbursed to 61 groups.

Groups are encouraged to make proposals through the office where selection of the qualifying group is done by a selected committee. The fund has empowered more women, improved the standards of living of most families and more table banking programmes have come up since women have managed to borrow funds and loan them out again with an interest to its members.

The main challenges faced are little awareness of the fund within the community, inadequate funds to advance to deserving groups, and inadequate funds for monitoring and following up on the progress of the beneficiaries.

The community recommends the following:

- Increase funding for WEF;
- Create more awareness to the community; and
- Reduce the many bureaucracies associated with application for the fund.

4.2.4 Youth Enterprise Development Fund

The Youth Enterprise Development Fund was started in Nyamira County in 2006 to address youth unemployment. The fund targets youth 18-35 years of age. It is divided into two components, namely, Loans and Youth Development.

The beneficiaries from the loans have to be in a group of not less than seven members. The group initially receives Kshs 50,000 which can go up to Kshs 400,000 upon repayment of the first installment. The fund has a grace period of three months before one starts to repay and repayment is between 1-6 years. An individual can only borrow Kshs 35,000 to start a business.

The Youth Development programme began in 2007 whereby youths are empowered in terms of information technology. The youth get access to computers in the ICT centers for free and are allowed to advertise their products online for free.

The facilities are open to all youth without any discrimination. An example of an ICT center in Nyamira County is Nyamaiya ICT centre. Apart from the ICT centers, youth polytechnics have been constructed and equipped to help nurture knowledge for those youths who do not join high school. In Nyamira, there are over sixty youth polytechnics.

To qualify for the YEDF, one has to be between 18-35 years of age and is required to develop a proposal and forward to the YEDF secretariat for evaluation.

The YEDF has made numerous impacts such as:

- Improvement of standards of living among the youth;
- Reduction in unemployment among the youth through entrepreneurship;
- Reduction in crime rates since the youth are positively engaged;
- Youth have taken farming as a form of employment thus increasing production; and
- Improvement in the education standards among the youth.

The main challenges faced are limited allocation of funds to meet the high demand, misuse of the funds by some youth, and insufficient funds to conduct monitoring.

The community recommends the following:

- Increase funding to YEDF to meet the high demand;
- The youth should be empowered socially, economically and politically;
- The youth should be trained on how to manage and utilize the funds borrowed prudently; and
- Setting up more facilities e.g. youth polytechnics.

4.2.5 Poverty Eradication Commission Revolving Loan Fund

The Poverty Eradication Revolving Loan Fund was started in Nyamira County in 2010/2011 with Nyamira Central sub-county receiving Kshs 4 million out of which Kshs 3.6 million went to groups as a revolving loan fund. Thirty six groups benefited from the fund with each receiving Kshs 100,000.

Interested groups make application through the office of the District Development Officer. The District Poverty Eradication Committee goes through the proposals and recommends those that meet the set guidelines. The fund has improved standards of living of the beneficiaries in the community.

The main challenges include insufficient funds to carry out monitoring and evaluation of the projects and to meet the high demand.

CHAPTER FIVE

CROSSCUTTING AND EMERGING ISSUES

5.1 HIV & AIDS

According to the Public Health and Sanitation Department report, the County's HIV&AIDS prevalence is estimated to be 5%. The county is expected to face various negative socioeconomic impacts of the scourge if interventions are not enhanced.

A major health concern in the County and particularly in Erandi 'B' is HIV&AIDS. HIV&AIDS was found to be one of the causes of poverty in this community. It is high among the youth due to prostitution and this has largely contributed to poverty since the active youth reduce their productivity and a lot of resources are used on treatment and management of the disease. The community felt that there is need for enhanced sensitization on health issues such as HIV&AIDS.

5.2 GENDER AND DISABILITY MAINSTREAMING

Women constitute 52% of the county population. Although forming the majority of the population, they are generally left out of decision-making processes through lack of representation. Policies, plans and strategies rarely take into consideration gender roles and responsibilities.

In this community, men owned majority of the assets like land, cattle, motorbikes, furniture, house, tea, trees, car and goats. On the other hand, women owned chicken and utensils while children/youth owned chicken, bananas and goats. However, if the husband dies, all assets are owned by the wife. In this community, men make most of the decisions on purchase and disposal of most of the assets. Women were found to only make decision on purchase of utensils.

The community health workers train women on how to maintain cleanliness, advice on malaria prevention methods, and the importance of having latrines in the homestead.

The decisions on curative healthcare are made by men while family planning, promotive and preventive healthcare decisions are made by women.

Female headed households are mostly mud walled with iron sheet or grass roofing with a few who own permanent houses. Majority of male headed households are permanent with only a few being semi-permanent. Houses headed by physically challenged persons, OVCs, grandmothers and the elderly are mainly grass thatched with mud walls.

The PWDs in the county are estimated to be 10,104 which is 1.6 % of the total population. Although they are discriminated against and seen as dependants, they have a lot of potential to contribute to development. The county faces a number of challenges towards integrating the PWDs in development among them being lack of rehabilitation centres. With the available data for the PWDs, there is need for proper planning and mainstreaming them in development programmes and to provide them with windows of opportunities to access devolved funds such as CDF, Women Enterprise Fund and Youth Enterprise Development Fund.

5.5 HUDUMA CENTRES INITIATIVE

The community was not aware of the project. However, the area assistant chief was aware of the projects and its operation and promised to hold a baraza to sensitize the community on the same.

5.6 OTHER DEVELOPMENT PROGRAMMES

- The International Fund for Agricultural Development (IFAD) Programme in South Nyanza community water project based in Homa Bay has done a lot in assisting in protecting the water catchments and other water-related projects in Nyamira County;
- World Vision has constructed water dams and sanitation facilities e.g. toilets in schools in Nyamira County. It has also helped vulnerable children in education and provision of other basic needs; and
- Care International protects springs in Nyamira County and has also helped in training groups on basics skills of business management as well as monitoring and evaluating of projects.

The main challenges faced in implementing these programmes are the poor road network that hinders most organizations access to the community, majority of the community members are poor and are in need of support and thus most organizations find it difficult to meet each and every person due to limited funds, and duplication of efforts and poor coordination by many organizations.

There is need to organize a stakeholders' forum to address the issue of duplication and coordination of efforts and to put up better rural access roads.

CHAPTER SIX

RECOMMENDATIONS AND CONCLUSION

6.1 RECOMMENDATIONS

- Low interest loans by the Government to finance agriculture should be introduced;
- There is need to introduce cash transfers for orphans, elderly and PWDs in the community;
- Agricultural services should be provided to the community e.g. extension services and cattle dips be revived;
- Establish a public school and a health facility within the community;
- Markets should be established so that community members can sell their produce;
- The Government should put up a health facility within the community or establish a mobile clinic which can serve them in times of emergency;
- The health facilities should be fully equipped with personnel and other medical supplies to enhance service delivery to the people;
- Health facilities should be financed to take care of trainings of medical personnel including health workers;
- Sensitize the community on importance of alternative health financing by NHIF and encouraging them to enroll;
- There is need to develop and improve Health Information Systems from manual to web-based system;
- The Government should introduce school feeding program so as to encourage retention;
- The Government should purchase enough vehicles for agricultural officers for easy access to the community;
- There is need to improve infrastructure especially rural access roads to enable easy access to markets and by agricultural officers;
- Provide mini-processors in all sub-counties in Nyamira to process bananas and avocados; and
- The Government should consider subsidizing building materials to make them affordable.

6.2 CONCLUSION

It is important for the government and other development partners to think of other means and ways of addressing the issue of poverty and food shortages in the country. This could be done either through empowering individuals with knowledge and not through giving relief food. Majority have become lazy and unwilling to work waiting for donor and government support. Relief should only be given in instances when a

disaster occurs unexpectedly. The Government services are generally available and accessible in the community but the satisfaction levels vary.
The community needs awareness creation on various issues such as HIV&AIDS, devolved funds, health and enrolment for NHIF.