

Adaptive strength in working with people and their stories to shifting local narratives to support combating Acute Malnutrition in ASALs in Kenya

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INTRO AND OBJECTIVE

Participatory Story Telling (PST) is a form of community theatre that engages USAID Nawiri primary participants through storytelling narratives of drama, folksongs, poems and songs. USAID Nawiri uses Participatory Story Telling to engage communities at Community Conversations sessions targeting Caregivers of Children under 5, Pregnant and lactating women, adolescent girls, and young women in the semi-arid lands of Marsabit county in Kenya.

METHODS

PST scripts depicting causes of malnutrition, social and community norms around malnutrition in Marsabit county developed and integrated with Maternal Infant Young Child Nutrition messages. 20 community conversation sessions were conducted integrated with Participatory Story Telling messaging reaching out to 1531 USAID Nawiri project participants, including male partners of caregivers.

Community conversation platforms creates enabling environment for community members to discuss causes and concerns revolving certain health areas. Thereafter, supported to develop community actions that are followed up by local community facilitators, ensure actions are taken up and tasks resolved. Discussions are recorded by Community Facilitators in the village black book for tracking uptake of new behaviors and actions developed.

Nawiri frontline providers who include (Community Health Promoters, SILC Field Agents, , and Business Mentors) are part of the dialogue sessions, who later follow up and track new behaviors at HHs and Nawiri anchor group sessions.

RESULTS

Adoption of feeding practices among caregivers of CU5 has started shifting. Initially, Caregivers would only feed children under 5 with what the family will consume in the day. This narrative has changed, attributed to Caregivers testimonies, community feedbacks and role modelling amongst positive deviants in PST sessions. Caregivers have adopted a new feeding practice, feeding children under 5, with 3-5 times meal a day.

CONCLUSION

Despite Participatory Story Telling, being a time costly affair and a new strategy in Northern Kenya it builds on already existing cultural practices. We urge programs to embrace it in community dialogue sessions.

This will create enabling environment to navigate on perennial causes of malnutrition, address social norms and harmful cultural practices. This provokes dialogue in a patriarchal society since all story telling narratives are co-created and performed with local language.



Participatory Story Telling session in a community conversation sessions in manyatta Galthelian Torder, Korr ward, Laisamis Sub County, Marsabit

