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## **Challenges and Expectations in the Third World Applied Nutrition Research: the Kenyan Experience**

by

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### **Introduction**

Rural Outreach Program (ROP), a non-profit organization based in Kenya, has conducted many applied nutrition research projects in the country. Kenya being a third-world country is beset with typical problems of these countries, starting with poverty, among others. Poverty is a major contributor to poor nutrition and food insecurity for the majority of the population. ROP is involved in a wide range of projects, but mainly those that support the provision of clean water and improvements in food and nutrition security, health care, employment and income generation. In the food and nutrition field, ROP has implemented research projects in micronutrients such as vitamin A since its intake is affecting food intake among under-fives while people affected by HIV/AIDS tend to suffer deficiency. In this connection, ROP has been running research projects to assess the reliability and sustainability of local foods in providing adequate vitamin A to the target populations. The Program has also conducted a base-line assessment of the effects of HIV/AIDS on household nutrition and food security in parts of western Kenya. All these research activities have provided ROP and its staff with insightful experiences and recommendations for implementation. In the next sections we will review some of the challenges and expectations faced by ROP in applied nutrition research.

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## Poverty

Poverty and poverty eradication in Kenya are now tired passwords. Despite all the prescriptions and models emanating from the Bretton Wood institutions (World Bank and IMF) since the 1990s, little has changed in the country's economy. In 2004, it is reported to have grown by a meagre 1.8 % vis-à-vis a population growth rate of 2.9 %. Unemployment is still very high even with the new government's promise to create 500,000 jobs annually, retrenchments are still rampant, insecurity is well out of control and transport, communication and power costs are expensive for business driving them out of the country to cheaper destinations. At the same time, in 2004 over 3.3 million Kenyans are facing starvation due to bad weather conditions.

Communities in rural areas are as affected as those in urban areas, if not worse. For some households the food situation is really dramatic. This is sometimes due to large family sizes with inadequate resources to support new-born children, more so in places where family planning services are lacking or the community is ignorant of the need to use devices. Cases of basic infections that would require very simple medical attention are common but would require the health services personnel to be part of the research team. This brings us to the challenge of developing a multidisciplinary approach in community research. Such approaches are ideal but not easy to implement. In addition, more often than not, available research funds are specifically allocated for data collection, without any side funds to deal with immediate problems that could be tackled on sight, like vitamin A supplementation, distribution of mosquito nets and simple drugs to treat the under-fives, pregnant, lactating women and other vulnerable groups in the community.

Unemployment contributes directly to the poor economic status of families in third-world countries. Without a reliable income, many families are forced to resort to extreme measures for daily survival. For women, the problem is compounded where husbands have migrated to urban areas in search of employment opportunities. Women in this case become both care-givers and breadwinners for their families. This is quite a challenge for researchers because most data on food and nutrition concern mothers. In this regard, it is important the researchers plan the interviews in such a way that they respect their (mothers) time schedules and avoid stressing them further.

## HIV/AIDS

The latest statistics indicate that HIV/AIDS infections in the country have fallen from 15 to 8 %. This is good news, considering that the country has

already lost 188,000 people through AIDS and related ailments. In fact, the drop in the infection figures implies that so far, only Kenya and Uganda have registered any real drop in HIV/AIDS infection in Africa. However, the foregoing information has not in any way modified the terrible effects of the disease in affected communities. To conduct a research on HIV/AIDS and involving communities, is truly a humbling experience, especially as one witnesses the devastating effects of the disease on families and particularly on children.

It is agonizing when confronted with a fresh grave of a young family head who has just been buried, a bed-strapped wife with full-blown AIDS symptoms, and looking on forlornly are three, eight and twelve year-olds with their age-stricken grand-parents.

Obtaining information in such a situation is difficult, if not outright insensitive. HIV/AIDS, as many people now agree, is more than just a medical problem. It is a social as well as an economic problem. The stigma that is associated with HIV/AIDS also makes data collection very difficult. Few families are ready to disclose the disease and they will to a great extent cover up the causes of deaths. This has affected the credibility of HIV/AIDS infections and prevalence figures. Hence efforts to address the problem suffer from a lack of credible information for decision-making. The long and short of this is that research on HIV/AIDS must have a budget component allocated to cover the basic needs of affected families: drugs, food items, clothes and other requirements. Research is not all about figures: it is about people. Of course such short-term support is not sustainable in the long term. However, governments must be advised of the reality and they surely can no longer hide their face and remain indifferent to the suffering of people.

### **Culture**

There is no society without a culture. Culture is dynamic and in some cases can also be a barrier to development. Culture defines and distributes responsibilities to various members of the society. There are cultures that allow polygamous marriages; others have customs and traditions that support wife-inheritance, early marriages for young girls, circumcision rites for both genders, etc. However, there are specific cultural practices that affect nutrition and food intake of community members. Polygamous marriages tend to be a drain on family resources, and children born in such families are unlikely to have quality nutrition and health care. They suffer from numerous diseases and do not grow to achieve their potential due to inadequate care in their early years.

Other cultural practices are so stifling that in some cases mothers in particular, are not allowed to give out information without the consent of their

husbands. Some communities promote the boy-child education at the expense of the girl-child; the outcome of such gender-biased education, is a community with women folks who are poorly educated, and are not empowered to act as agents of change to improve nutrition and general livelihood for their families.

### **Research Fatigue**

Let me quote a statement once made by a mother who felt that scientists were somehow becoming a bother to her peace: "Why are you asking me what I ate yesterday, how is that important to you? You people come here, asking us a lot of questions then you go away and there is no help we get from you".

The above statement captures vividly the dilemma a researcher encounters in the field, especially in applied research. Some communities have become "research-fatigued". There are many groups of people asking all sorts of questions in the community, and the sad part of it is that, until very recently, it was not even considered necessary to explain to the community the purpose and the outcome of the research. This has created disillusionment and apathy among communities who have participated in many research projects that have not in any way benefited their overall quality of life. If anything, their situation has moved from bad to worse.

Research, unfortunately or fortunately, will be here for a long time to come. But some fundamental changes are needed to motivate communities to participate in it. It is true that to design and implement a community-based project, which at the same time generates scientific findings that add to the overall information and knowledge base of a science like nutrition, is quite a challenge. But it is an obvious fact that what interests the scientists might not necessarily be in line with the community needs. The challenge is to ensure that research is designed to include community concerns and that needs are well catered for while at the same time ensuring that the scientific aspects of the research are not watered down.

It is crucial that research involves community members whenever possible, including government and other opinion leaders (such as faith-based leaders, youth and women leaders as well as school heads). The study would likewise insist that only local people are used in data collection and as guides when these skills are available locally. The project can also substantially minimize operational costs when using local people as far as accommodation and transportation expenses are concerned, as they can operate from their homes and

within walking distances. It would be prudent for the research team to share with the community the research findings with emphasis on aspects of the study which are relevant and useful to the community.

### **Conclusion**

To get the communities to participate in research, giving them feedback has an ultimate effect of building confidence between community members and scientists. It is an open secret that so many good research findings have taken place in third-world countries, but very few get to reach the people who actually need to use them. Therefore, when a researcher decides to share the findings, at least with the studied community, he does, in a small way, contribute to the paradigm shift that is quickly beginning to interest many researchers in the developing countries: taking the university to the community as the way forward for future research. That is exactly one of the driving forces behind ROP's work. We set out to take the university to the people.

### **REFERENCES**

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