**KEY MESSAGES**

- Most people spend 1/3 of their adult lives at work. By leveraging the workplace as a connector to people, we can bring access to and knowledge about healthy nutrition to millions of people around the globe through workforce nutrition.

- Major opportunities to further refine and expand workforce nutrition policies in Kenya include incentivising and setting minimal nutritional standards for healthy food provisioning at or near the workplace, including nutrition indicators in labour inspections, and further strengthening parental entitlements and breastfeeding policies as per international recommendations.

- With supportive national policies, as well as accompanying minimal accountability and compliance mechanisms in place even greater impact can be achieved.

**SETTING THE SCENE**

Malnutrition in all its forms, from undernutrition and overnutrition to micronutrient deficiencies, is a global public health burden. Globally, it is estimated that 2 in 3 women of reproductive age are affected by nutrient deficiencies. In Kenya, the burden of malnutrition is marked by high rates of child stunting (18%) and micronutrient deficiencies among women of reproductive age as well as an increasing prevalence of overweight among adult men and women (17% and 37% respectively). Drought and high food prices have worsened food and nutrition security across the country. There is a continued need to engage all actors and options to address the malnutrition burden the world faces, especially at workplaces. On average, people spend one-third of their adult lives at work, whether formal or informal; therefore, the workplace offers an important opportunity to increase access to and knowledge about healthy nutrition. Workforce nutrition is an opportunity to deliver proven benefits for employers, workers, and communities. A definition and framework for workforce nutrition can be found [here](#).

In recent years, Kenya has taken some critical steps to enable improved nutrition for the wider population by introducing the Kenya Nutrition Action Plan (2018-2022), towards identifying the role of employers in supporting workforce nutrition and improving maternity entitlements in national implementation frameworks and strategic plans. Further improved action in the policy arena would include explicitly mentioning the role of the employer and drafting, implementing, and ensuring accountability mechanisms against these policies are in place. Such action could help start or scale up existing workforce nutrition programmes and contribute to addressing the Sustainable Development Goals, including SDG 2 (zero hunger), SDG 3 (good health and wellbeing), SDG 5 (gender equality), and SDG 8 (decent work and economic growth).

**WIN-WIN-WIN APPROACH**

As elaborated in a [GAIN evidence brief](#), poor-quality diets and insufficient food quantity are linked to reduced work capacity. This suggests that reducing malnutrition can be a win-win-win approach: improving individual lives, business outcomes, and national economies. Individual outcomes observed as a result of workforce nutrition programmes have

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included increased job satisfaction, reduced sick days, higher consumption of healthy foods, and increased duration of exclusive breastfeeding, amongst others. Business outcomes are reduced absenteeism, enhanced productivity, reduced medical costs, and significantly lower rates of accidents and mistakes, which together could lead to an increase in the national Gross Development Product\(^8\). In Kenya specifically, the loss of workforce productivity is estimated to cost Kenya approximately US$38.3 billion in GDP from 2010-30\(^9\). Thus GAIN, as part of the Workforce Nutrition Alliance, urges regulators and policymakers in Kenya to support employers by drafting, implementing, and monitoring public policies for improved workforce nutrition.

**IMPROVING WORKFORCE NUTRITION-RELATED POLICIES**

An outline of the four nutrition pillars for workforce nutrition and the related existing policies in Kenya is presented in Table 1. Through a comprehensive policy analysis, the table highlights opportunities to further employer-driven approaches for improving nutrition among formal worker populations. Even greater impact can be expected when expanding existing policies to cover workers in supply chains (as opposed to only those directly employed by the company) as well as establishing minimal accountability and reporting requirements against these policies.

**Table 1: Existing policies and opportunities to further strengthen policies on Workforce Nutrition in Kenya based on analysis of national labour and nutrition policies**

<table>
<thead>
<tr>
<th>Nutrition theme</th>
<th>Existing workforce nutrition related policy components</th>
<th>Opportunities for further strengthening policies on workforce nutrition</th>
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| Healthy Food at Work | - The Employment Act (2007) speaks of employees to be ‘properly fed’ by the employer. Employers may, depending on the contract provisions, either ensure provision of proper quality food (Section 33(1)) or provide food rations (Section 74(1)(j))\(^12\). | - Incentivise employers to provide subsidised healthy food options available at or near the workplace.  
- Apply and incentivise minimum nutritional standards for food provisioning based on the national Dietary Guidelines\(^13\).  
- Consider incentivising fortified and/or biofortified foods wherever possible in worker meals and/or rations.  
- Ensure workers’ representation in food management committee. |
| Nutrition education  | - Section 4.3.2(b) discusses the necessity for strengthening health promotion and education through workplace-based strategies; section 7.2 states that the private sector is expected to support implementation of non-communicable disease prevention and control initiatives at their workplaces\(^5\). | - Incentivise employers and worksites to reinforce government awareness campaigns on healthy eating and good nutrition and other contextualised healthy eating services among their workers. |
| Nutrition-focused Health Checks | - Section 3.1 discusses the importance of strengthening nutrition support systems in workplaces; and references to institutionalising routine assessment and monitoring of nutritional status at community, health facility and workplace levels\(^6\).  
- Sec 5(3)(b), 6(1) of the Health Act (2017) recognises free and compulsory maternity care\(^14\). | - Include and standardise nutrition-related indicators in the health examinations of labour inspectors and ensure that health-relation information is disseminated to workers following examinations\(^15\).  
- Specify that employers subsidise workers’ health check costs and/or nutrition counselling (either for all workers or at least those at risk, as identified by health checks). |
| Breastfeeding Support | - Sec 29 of Employment Act (2007) and Section 9, Employment Rules (2014) provide for maternity leave of 12 weeks at full pay. Sec 29 provides paternity leave for two weeks at full pay.  
- Sec. 71(1), Health Act (2017) provides for well-equipped lactation stations in the workplace; Sec 72 mentions breastfeeding breaks up to one hour per day.  
- Reference to breastfeeding and maternal wellbeing at workplaces\(^10\),\(^11\) with guidelines and implementation frameworks available for ‘Securing | - Extend maternity leave to 18 weeks as per International Labour Organization recommendation 191. Consider further extending paid parental leave for supporting spouses (e.g. maternity leave) to two months.  
- Require non-dismissal policy of women who announce their pregnancy through to at least 1 month post maternity leave.  
- Promote male empowerment and participation in breastfeeding (awareness) programmes as a greater component to be prioritized for inclusivity. |

\(^{11}\) USAID. Kenya Nutrition Profile. February 2018.  
\(^{14}\) The Health Act, No.21 of 2017. (2012).  
\(^{15}\) The Health Act, No.21 of 2017. (2012).  
\(^{18}\) The Breast Milk Sub Substitute Bill, 2019  
\(^{19}\) The Breast Milk Sub Substitute Act 2021.
A CALL TO ACTION

The government of Kenya has taken several positive steps regarding workforce nutrition-related policies by highlighting the need to strengthen health promotion and education through workplaces and to promote nutrition assessments at workplaces, as well as by improving breastfeeding and maternity entitlements.

Further refining and expanding existing policies to encourage minimal but broad workforce nutrition standards would help address the burden of malnutrition. Essential considerations include incentivising employers to provide subsidized healthy meal options at or near the workplace and applying minimum nutritional standards for food provisioning based on national Food-based Dietary Guidelines. Additional refinements could consider the uptake of nutrition indicators in Labour Inspection checklists of Occupational Safety and Healthy training institutions for health surveillance and the extension of parental leave as per international recommendations. Finally, an even greater impact could be achieved by expanding the coverage of existing policies to include workers in supply chains (as opposed to only those directly employed by the company) as well as ensuring minimal accountability and compliance mechanisms.

When combined, these actions towards reducing malnutrition may be a win-win-win approach: improving individual lives, business outcomes, and national economies. When prioritised by the government, such concerted efforts with partners enhances learning and addresses critical challenges. Thus, national governments should continuously strengthen the capacity of counties to integrate and follow-up on workforce nutrition standards in their plans and legislations.