

Millennium development goals: Examining Kenya constraints in achieving the eight goals

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ABSTRACT

This paper examines Kenya's performance in achieving the famous millennium development goals. The paper provides the government and other stakeholders with proper understanding of the constraints of achieving the millennium development goals as well as reflecting the phase and the passion of the country in achieving this important development goal. The paper further seeks to stress the importance of this goal in reducing poverty in the country. The paper has cited some key factors undermining achieving of the millennium development goals in Kenya. Major recommendations that can contribute towards achieving of the millennium development goals have also been made.

Key words: Millennium Development Goals, Development, Poverty, Gender, Universal education.

1.0 Introduction

Millennium development goals are eight international development goals that all 189 United Nations member states by year 2000 had committed themselves to achieve by the year 2015. (Todaro and Smith 2009:22) The millennium development goals include the following (Todaro and Smith 2009:2009)

- i) Eradicate extreme poverty and hunger
- ii) Achieve universal primary education
Promote gender equality and empower women
- iii) Reduce child mortality rates
- iv) Improve maternal health
- v) Combat HIV/AIDS, Malaria and other diseases
- vi) Ensure environmental sustainability
- vii) Develop a global partnership for development

1.1 The Extent to which Kenya has achieved the millennium development goals

1.1.1. Eradication of extreme poverty and hunger

The United Nations committee On Economic, Social and Cultural rights defines poverty as a human condition characterized by the sustained or chronic deprivation of the resources, capabilities, choices, security necessary for the enjoyment of an adequate standards of living. (World Health Organization 2008:6). People living on less than \$1 a day a viewed as poor. (Todaro and Smith 2009:23) National level poverty measure include Gross Net Products (GNP) per capita, which is said to ignore other dimensions of poverty (While 2008: 26).

This definition of poverty is multi- dimensional and necessary in gauging the extent to which Kenya has attempted to eradicate poverty. Kenya's efforts address poverty can be traced back to the time of independence in 1963 sessional paper no 10 of the year 1965. (Oyugi 2008: 119) The determination to tackle poverty is captured in the fact that poverty was identified as major constraint to human development. As confirmed by Oyugi (2008:119) the multi-dimensional aspect of poverty implies that no uniform standards are available for measuring poverty, but some groups in the population often have combination of predicaments associated with poverty such as, low income, illiteracy, premature death, early marriage, large families, malnutrition illness among many other predicaments that lock out those affected into low standards of living.

At independence, Kenya was characterized by various disparities incomes and other indicators of well being. The government undertook to adverse the disparities but forty years after independence, disparities in income, wealth and well being still persist. (Kiringai 2006:12). These disparities are a clear indication that Kenya has not significantly reduced poverty level. There are 34 districts in Kenya that have at least one location with more than 70% of the total population below poverty line. In 2006, the absolute poverty varied from a low of 11 percent in Kajiado district, to a high of 94 percent in Turkana district all in the same district and yet all are in the same province. (GOK 2008:4). It is stated that 56% Kenyan people live in poverty (Chesoni 2006:224). Poverty in Kenya

is experienced in rural and urban areas; over 70% of Nairobi's population alone lives in informal settlements (Chesoni 2006:24)

1.1.2 Achieving of universal primary education

Education empowers a person to participate in the development process. It inculcates the knowledge and skills needed to improve the income earning potential and in turn the quality of life (KNBS, 2008:46).

Having promised to eliminate poverty disease and ignorance at independence in 1963, and subsequently through sessional paper No. 10 of 1965 on African socialism and its application to planning in Kenya, the government has continued to invest heavily in education (Wainaina 2006:159).

Since 1963, education in Kenya has expanded and there have been attempts to address the numerous challenges facing education through commissions. These commissions have yielded reports such as Ominde report of 1964, Kamunge report of 1988, the sessional paper no. 1 of 2005 and on Policy Framework for Education Training and Research (Wainaina 2006:159).

To tackle the problem of access of free universal primary education the Kenya government introduced free primary education in 2003, (Wainaina 2006:159) with free primary education enrollment at both public and private primary schools increased by 23 percent from 6.2 million in 2002, before free primary education, to 7.6 million in 2005 (7.3 million in public schools and 0.3 million in private schools) with 350,000 million in non-formal schools (Wainaina 2006:163). The success of free primary education in increasing enrollment has raised Gross Enrollment Rate (GER) 104.8 percent (girls 101.6% and boys 108.0%) compared to 95 percent in 2002.

Although a lot has been done with the aim of achieving free primary education about 1.5 million children of school age are not in the formal school system (Wainaina 2006:165). An estimate of 1 million of these children live in ASALs and urban slums (Wainaina 2006:163).

The Kenya National Bureau of Standards (2008:46) indicates that in some parts of Kenya there are people who have never attained literacy like in Garrisa 19.5% only are literate, Mandera has literate rate of 15.6% while in Wajir 62.9 have never attended school (KNBS 2008:60).

1.1.3 Promoting gender equity and empowerment of women

After independence constitutional provisions on citizenship discriminated against women. Specifically section 90 and 91 of the old constitution bestowed on Kenyan men the automatic right to pass on citizenship not only to spouses but also to their children as well. As identified by Chesoni (2006:225) the following are the primary forms of gender-based inequality in Kenya:

- Legal and judicial inequality
- Discriminatory and/or gender-blind policies, policy making and law making processes
- Inequality in access to and control of resources
- Unequal representation and access to decision making
- Gender-based violence
- Discriminatory and harmful socio-cultural practices and norms
- Inequitable access to social services and amenities.

Young women face discrimination in the area of employment when sex based discrimination designate them in areas and fields that aren't as marketable as those that their male counter parts are equipped for (Chesoni 2006, 223). Women of child bearing age are also discriminated against and penalized some employers for being pregnant (Chosen 2006:223). This discrimination affects the country since women being a bigger percentage of Kenyan population are rendered economically weak as a result of this seclusion. Women also being the parents are also crucial in developing human capital. When they are disadvantaged economically and in education then their children are likely to suffer more the impact of this gender based type of discrimination. Kenya has however made efforts in uplifting the standards of girl child education through construction of more girls' secondary schools.

By the year 2005 women in parliament and local authorities accounted for only 8.3% of the seats in national assembly (GOK, 2005:16) Further a review of data in civil service employees showed that women made up 24.3% in September 2002 of employment Job group A-D which is junior category .(GOK 2005:16). The situation is

changing with government appointing a number of women to key positions in the cabinet, civil service and state corporations.

1.1.4 Reducing child mortality rates

UNICEF (2007:1) indicates that about a third of all child deaths in Kenya occurring in the first months of life are linked with inadequate care during pregnancy and birth. UNICEF (2007:1) further reveals that about a half of all births in Kenya occur without skilled attendance. The reality is that many children do lose life at younger age. Some of primary causes of child death identified are malaria, diarrhea, respiratory infections and HIV/AIDS, with malnutrition as overlaying factors in 50-60% of deaths (UNICEF 2007:1).

1.1.5 Improving of maternal health

Improving of maternal health is key to saving children and the mother's life. Kenya committed itself to spend on health in the Abuja declaration, but the Kenya government revenue over the same period share of health on the overall government budget stagnated at around 7.3% (UNICEF 2007:2) Infant mortality has remained high in some areas, for instance in Nyanza province in 2003 it was 133 per 1000 live births with under 5 child mortality rate 206 which also markedly above the national overage of 115 and 152. Kenya has therefore not attained adequate success in improving maternal health and reducing child mortality rates.

1.1.6 Combating HIV/Aids, Malaria and other diseases

Results from the 2008-09 Kenya Demographic Health survey indicate that 6.3 per cent of Kenyan adults aged 15-49 are infected with HIV/Aids. HIV prevalence increased from 5% in 2003 and in 2007 and then declined to 4% in 2008 (KNBS, 2010:215)

The national Aids control council estimates that there were more than 3 million people infected by HIV by the year 2005. (GOK 2005:22) The government of Kenya revealed the national Health Sector Strategic plan for the period 1999-2004 whose vision is to create an enabling environment for the provision of sustainable quality health care that is acceptable, affordable and accessible to all Kenyans, in this regard HIV/Aids, Tuberculosis and Malaria control have remained the priority programmes. (GOK 2005:98)

Kenya launched a national HIV/Aids strategic plan 2000-2005 in December 2000 with key components in the document including priority areas for the control of HIV/Aids as well as mechanism for the mitigation of social-economic impact at individual, family, community, sectoral and national levels (GOK 2005:98).

The 2003 KDHS recorded knowledge and awareness about HIV/Aids at 98% among women and 99% among men's (GOK 2005:100) This indicator implies the country has registered significant achievement in combating HIV/Aids even though those at age 15-19 years have lower knowledge and awareness (GOK 2005:100).

Combating malaria has remained a major challenge in Kenya. 70% percent of Kenyans live in malaria prone areas and at risk of infection (GOK 2005:22) Each year, an estimated 6,000 pregnant women suffer from malaria-associated anaemia, 4,000 babies are born with low birth weight as a result of maternal anaemia and 4,000 babies are both with low birth weight as a result of maternal anaemia and 34,000 children below the age of five years die from malaria (GOK 2005:23) The government strategy with the aim of reducing the level of malaria infection and consequent deaths in Kenya by 30% (GOK 2005:23) To achieve this goal the government has continued supplying long lasting insecticide-treated nets coupled with increasing access information, education and communication to all people at risk of malaria (GOK 2005:23) By the end of 2008, an estimated 16 million nets had been documented as distributed in Kenya through multiple channels since 2002, targeting children under five and pregnant women (KNBS 2010:164).

1.1.7 Ensuring environment sustainability

Poverty coupled with rigid urbanization poses the greatest threat to environmental sustainability. The impact includes falling living standards, polluted air and water, unsanitary living conditions, increasing informal settlements, rising wood fuel demand, and increased soil erosion and land degradation. (NEMA 2007:12) The high and increasing demand for wood fuel has continued to pose a major threat to existing forest and other terrestrials ecosystem resources (GOK 2005:24) Since 1930, Kenya has lost about 65% of its originally standing wood volume while the total area under protection (gazetted) by 2005 stood at 1.7 million ha (1.7%) against the recommended level of 10% (GOK 2005:24).

Despite the efforts of Kenya to ensure environmental sustainability challenges continue to be posed by illegal encroachment, excision, charcoal burning, illegal cultivation, poaching of timber, and frequent fire breaks among others (GOK 2005:24).

1.1.8 Development of global partnership

Internal efforts to attain the MDGs must be supported by the international community in terms of development, finance, access to markets and removing the burdens of external debts(GOK 2005:29). Kenya has experienced a general relative decline in the flow of official development assistance (ODA) (GOK 2005:29). The decline is usually occasioned by donor perception that Kenya is a reluctant reformer and that the governance situation has continued worsening (GOK 2005:29) Kenya has continued to put measures in place to address governance , the following are some Kenya measures put in the place. (GOK 2005:29).

- Enacting the anti-corruption and economic crimes act, 2003
- Enacting of the public offices ethics acts 2003.
- Enacting the public audit act 2003.
- Enacting the public procurement and disposal act.
- Enacting the privatization act and the government financial management act.

With the promulgation of the new constitution and carrying out more reforms there may be some improvement in ODA flows.

1.2.1 Lead constraints to achieving millennium development goals in Kenya

As already discussed the MDGs goals can be achieved if most of the constraints discussed below are addressed. Kenya has gone close to attaining the universal primary education to all, for example in some parts of Kenya such as Nairobi province, while Central province literacy level is 95% (KNBS 2010:33). The fact that since 2003 when free primary education was increased literacy levels have increased tremendously is an indication that with efforts applied to overcome the key constraints the MDGs goals can be achieved. The following are some of the key constraints to achieving MDGs in Kenya.

1.2.2 Kenya's economic policy

The history of Kenya's economy indicates the country has continued to experience mixed economic growth. Kenya experienced 6.6% average annual growth in 1960s to 2.4 per cent in 1990- 2000, while GDP slowed down to 1.7 percent in 2008. (KNBS 2010:2) The unsatisfactory performance is attributed to poor macro- economic policies (GOK 2001:25) Declining levels of investment have hampered achieving MDG's in Kenya .Between 1982 and 1992, total consumption to GDP ratio was 84.2 percent and the economy achieved an annual economic growth rate of 4 percent and over 1992 to 1999 the consumption rate rose to 96.6 per cent while the growth rate declined to 2.4 per cent (GOK 2001:25) Increasing consumption has declined investment and hence reduced growth. In order to effect economic recovery, a reduction in consumption is critical and necessary, so that the decline in investment can be reversed (GOK 2001:25) The reality is the funds required to promote education, combat HIV/AIDS, reduce child mortality rate will need to come from Kenya, since borrowed money and donor aid is not sustainable.

The failure of Kenya to change the economic policies has forced the country to remain unable to raise enough wealth to finance MDGs. Nyong'o (2007:28) points the following weaknesses in Kenya's economic policy:

'In manufacturing Kenya failed to transform from inward oriented activity to an export oriented internationally competitive producer, instead liberalization led to import penetration without a commensurate expansion in exports. Agriculture has failed to adjust to a high value added activity.'

If the government commits itself totackling weaknesses related to it's economic policies there could be economic breakthrough which can lead to achieving the millennium development goals. Kenya in her vision 2030 aims at achieving a national GDP growth rate of 10 per cent by 2012 by tapping the potential in her six major economic pillars, namely tourism, Agriculture and livestock,, Wholesale and Retail Trade, Manufacturing, Business Process outsourcing and financial services.(GOK, 2008:58) The nation's vision 2030 reveals the capabilities of this country to realize the millennium development goals if the country embraces sound economic policies.

1.2.3 Constraints related to Kenya's Climate and physical geography

Some of the constraints that may prevent Kenya from achieving the MDG's are related to physical geography of the country. Sachs (2005:57) cites this factor as major cause of economic stagnation. In his attempt to

demonstrate the correlation between development and geography Sachs (2005:57) argues that Americans inherited a vast continent rich in natural resources, with great soils and ample rainfall immense navigable rivers, and thousands of miles of coastline with dozens of natural ports that provide a wonderful foundation for sea based trade. Over 80% of Kenya's land may be classified as arid and semi-arid with very low agricultural potential (Syagga 2006:318)) This challenge causes hunger, water borne diseases and poverty especially among the rural population. Todaro and Smith (2009:73) agree that climatic condition generally lower productivity of certain crops, weaken forest, weaken workers health and lower their level of productivity and efficiency. This constraint can be addressed by borrowing development policies of countries like Israel which have high level of soil science technology and a shift to irrigation fed agriculture. Researchers such as KARI, KEPHIS, KEMRI and AMREF can strive to promote health and relevant farming method suitable to Kenya's geography.

1.2.4 Constraint of tremendous load of debt

Big debt being serviced by Kenya plays a major role in preventing Kenya from achieving the millennium development goals. Heavy debt serving can drastically reduce funds available to domestic programs including those designed to alleviate poverty and reduce environmental degradation. (Todaro and Smith, 2009:514-515) According to the head of debt management Mr Kitili the Kenya's total national debt is expected to rise to 1.33 trillion (\$1.7 billion) in 2012 from current 1.3 trillion. (The Daily Business Friday 21st October 2011) This heavy debt leaves the country in a fiscal trap hence crippling the country's efforts to realize the millennium development goals. Rather over relying on borrowed funds, the country should seek for sustainable development coupled with appeal for debt cancelation where possible.

1.2.5 Political instability

For Kenya to achieve the MDGs will need to maintain political stability by maintaining peace and security with the country and with the neighbors cases of internal chaos such as witnessed in the 2007 post election chaos and the current Al shabaab threat is bound to undermine the confidence in national investors have in the country as well as destroy the key industries such as Tourism and Agriculture. African upcoming economic tigers such as Botswana have tried to maintain national unity and that is comparatively free of destructive tribal and cultural divisions. (Presidential Task force, 1997:15).

1.2.6 Bad governance

Absence of good governance is a major constraint to achieving of millennium development goals. Kalema (1997:28) identifies the following as essentials of good governance.

- Transparency of systems and process
- Accountability of public servants
- Capacity to provide service
- Institution to enable the capacities and ensure accountability and transparency

MDGs cannot be realized without institutions mandated to carry out tasks related to particular goals are put in place and held accountable. Institutions whether judicial, govern institutions such as NEMA, KACCA among others must be strengthened and the state must demonstrate commitment to rule by law and dedication to service delivery. Corrupt public officials should be prosecuted and not protected.

1.2.7 Corruption

Corruption will remain a major constraint to achieving MDGs since most of scandals witnessed in Kenya deprived the country of vast amount of resources that could be utilized in achieving the goals. Corruption also continues to undermine efficiency of service delivery. The following are some major constraints associated with corruption

- Raising the cost of doing business
- Discouraging investors
- Raising costs of carrying out government projects. (Kahkonen, Meagler and Van Bastelaer 1997:49)

With the vice of corruption it remains difficult to accomplish meaningful projects related to MDGs such as education, health, environmental management among other MDGs related programs since money will be lost. Project such as education have been robbed by corrupt public officials.

1.2.8 Inequality

With some Kenyan lacking some of the services such as universal free primary education and adequate health services we cannot boast of making progress in achieving MDGs. Inequalities are perpetuated when state powers

are used to exercise differences in the sharing of political and economic welfare. (Okello and Gitau 2006, 3) Gross inequalities in incomes, access to state to state institutions and power affect the welfare of sections of the nation. As earlier indicated the free primary education has not benefited people in ASALs, areas of North Eastern Kenya have a low enrollment rate and marked high level of illiteracy. (Wainaina, 2006:167) The government should seek ways of correcting any historical related inequalities by allocating more resources to uplift areas left behind in matters of development such as education, child mortality rates among others. Attention should also be paid to the plight of the minority and vulnerable groups such as orphaned children and widows.

1.2.9 Some aspects of cultural beliefs and practices

Certain cultural beliefs and practices remain a constrain to achieving of MDGs. The cultural perception that a child as a blessing and security during old age influences community attitudes towards family planning initiatives. (GOK and UNICEF, 1998:25) High population growth rate is one of the main challenges undermining economy of developing countries like Kenya. In large family set up children may not get adequate nutrition and quality education especially among the economically challenged families. Practices which touch on coitus, initiation rituals and widow inheritance may undermine combating of HIV/AIDS by promoting the spread of the scourge. Gender bias in education for girls is deeply rooted in culture and tradition and it infringes on girls right to development as this denies the education affecting their career prospects and participation in decision making for. (GOK and UNICEF, 1998:25)

2. Conclusions

Kenya has been keen about achieving the millennium development goals, however unless adequate measures are put in place to address the lead constraints raised it may take long to achieve the millennium development goals. The following measures are remaining key to achieving the millennium development goals in Kenya.

- **To address poverty and Hunger**

The most important measure to reducing poverty is to create sustainable jobs in the economy coupled with developing human resources to ensure the poor are enabled to utilize job opportunities created through economic growth. (Presidential Task Force 1997:47) Factors enhancing poverty among the rural people in Kenya such as low agricultural productivity and poor marketing and mismanagement and collapse of agricultural finance corporation, agricultural development corporations should be addressed. (GOK 2001:19) The management of these organization should be depoliticized while the management team is recruited competitively.

Agricultural productivity should be increased through investing in healthy and improved seeds and provision of agricultural extension services. Market promotions and development through promotion of value adding inform of storage and processing should be encouraged. Credit and financial services should be provided by the government and NGOs with aim of reducing poverty among the rural and urban poor.

To tackle hunger their should be efforts to provide food to under five years, pregnant women and lactating mothers. (GOK 2005:5) school meals, supplemental feeding for vulnerable groups and emergency feeding for vulnerable groups should be maintained. (GOK 2005:5)

- **To achieve universal primary education**

To achieve this goal in Kenya the areas identified as gaps should be addressed. One major challenge is ensuring that universal primary education is offered to those in ASALs. It is indicated that areas such as north eastern province have the highest percentage of those without education and significant drop was observed between 2003 and 2008 -09 for both genders in the province. The government should support low-cost boarding schools in this areas coupled with improving quality education, equality and access to education. (Presidential Task Force, 1997:28). There should be efforts to develop a support program for orphaned and vulnerable children especially the HIV/AIDS orphans. The government should approach the donor community to funds free primary education coupled with engaging private sector in funding primary education

- **Promoting gender equality and empowerment of women**

This goal is viewed as one of effective ways of combating poverty, hunger, and of stimulating sustainable development. (GOK 2005:7). To achieve the millennium development goal there should be an affirmative action

put in place to ensure more female students join schools and universities even with lower points than their male counter parts. This should go hand in hand with the strengthening of national policy on gender and development which identifies key forms of gender based discrimination. (GOK 2005:18) More funds should be allocated to ministry responsible for gender to ensure there are adequate funds for sensitization and institutional strengthening especially institutions related to gender issues. The donor community should also be approached to assist financially and by building capacity of the needed personnel to combat gender based discrimination and to enhance skills for women empowerment.

- **Reducing child mortality**

Reducing child mortality will require to allocate funds for prevention and encourage prevention intervention such as breast feeding, use of insecticides treated nets, to reduce malaria infections.(GOK 2005:9) Funding should also be sourced from donor communities, and budget allocation increased to funds curative aspects of intervention such as oral rehydration therapy, antibiotics, for sepsis and pneumonia, anti malaria and new born resuscitation (GOK 2005:9) HIV/AIDS prevention and care should also be given attention in order to reduce child mortality, free medical services for children are necessary.

- **Improving maternal health**

Improved maternal health is measured through maternal mortality ratio and the population of births attended to by skilled personnel.(GOK 2005: 10). The government should provide free medical services to expectant mothers especially premarital and ante natal clinical services. There should be a strong government policy to guide delivery care to enable free delivery at hospitals to reduce services of traditional birth attendance.

- **Combating HIV/AIDS and other diseases**

Combating HIV/AIDS and other diseases will require efforts of the government and donors to allocate adequate funds for the purpose of effective response. More resources should be channeled to innovative interventions such as expanding early diagnosis and including counseling on behavior change to reduce the spread of HIV. (GOK 2005:11) Funding of youth intervention, public sector condom program, mass media, blood safety and safe infections should be prioritized.(GOK2005:12). To prevent malaria, there should be funded campaign to encourage the public safety measures such as hygiene in the compounds and usage of treated nets. The government should also increase hospitals and staff to treat and prevent malaria. Funding research and program of relevant drugs should be prioritized.

- **Ensuring environmental sustainability**

This initiative requires government to integrate principles' of sustainable development into country policies and programmes, and to reverse the loss of environmental resources.(GOK 2005:15). The community should be involved in planting trees, while the government and private sector fund campaign and strengthening of the institutions that respond to environmental degradation such as NEMA, Kenya forest services among others. There should be efforts to use green energy as solar energy and wind energy coupled with reducing the cost of cooking gas through reduced tax to encourage using gas rather than using charcoal and fire wood. The government should continue researching in order to come up with cheaper alternative energy to avoid over relying on wood fuel and charcoal.

- **Developing a global partnership**

This measure requires the government to address the key issues that bring about isolation and donor community related misunderstanding. The government should pay attention to issues of governance by strengthening institutions of good governance such as the Kenya Anti Corruption Commission Authority. The country should embrace democratic values and human rights ethos. By co-operating with donor community the country may be able to secure funds as grants, loans and even debt cancellation in which case the development of nation will be highly favored

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