Opportunities for transition to clean household energy in Kenya

Application of the WHO Household Energy Assessment Rapid Tool (HEART)

ENYA

Gladys Ngeno Nickson Otieno Karin Troncoso Rufus Edwards



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Abbreviations and acronyms

GDP	gross domestic product
GIZ	German Corporation for International Cooperation
HAP	household air pollution
HEART	Household Energy Assessment Rapid Tool
KES	Kenyan shilling
WASH	water, sanitation and hygiene

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Preface

Household air pollution (HAP) from inefficient fuel combustion is one of the most important global environmental health risks today. Almost 3 billion people, mainly in low- and middleincome countries, still rely on solid fuels (wood, animal dung, charcoal, crop wastes and coal) burnt in inefficient, highly polluting stoves for cooking and heating. Widespread use of polluting cookstoves causes almost 4 million premature deaths annually among children and adults from respiratory illness, cardiovascular diseases and cancer, as well as serious injuries from scalding, burns and poisoning.¹

The WHO guidelines for indoor air quality: household fuel combustion (2014) provide technical recommendations for policy-makers and specialists working on energy, health, environmental and other issues to ensure health benefits from the clean energy transition.

In support of the implementation of the guidelines, WHO has developed a tool, the Household Energy Assessment Rapid Tool (HEART), to identify relevant stakeholders, and map out a country's policies and programmes on household energy and/or related health impacts. The tool is being pilot-tested as a guide to conducting rapid situational assessments of countries' readiness to address access to clean energy technologies. It is used to gather and synthesize information on household energy use and its public health impacts and to stimulate an informed dialogue on the impacts of household energy interventions, shared responsibilities and coordinated actions, country-specific barriers to implementation and opportunities for the public health sector to accelerate a transition to clean household energy.

The rapid assessments do not take the place of the detailed economic evaluations required to identify national energy priorities, national and global work on mapping disease incidence nor the social and political considerations required in implementing major social interventions in public health. They do provide a broad overview of the current household energy and health situation, identify key stakeholders and will ultimately support intersectoral cooperation. This report presents the results obtained with HEART in Kenya.

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