

# Annual Report, 2004 - 2005



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## ONLY THROUGH COMMUNITY

This is the motto of St. Martin-CSA, which gives us great joy but also asks from us a lot of patience, perseverance and trust in God's providence. Every time a child with a disability receives medical treatment and every time an AIDS orphan is successfully brought back to school with the help of the community we see that a small miracle has happened: the miracle of people who have grown in solidarity and love for other people, who face major challenges in life. It is as in the gospel of the multiplication of the bread<sup>1</sup>, where Jesus invited the disciples to promote solidarity and to trust in people's capacity of sharing. When it was becoming late, the disciples wanted to send away the people, who had come to listen to Jesus, because they did not see how they themselves could feed such a mass of people. But, Jesus showed them that in that large crowd there were some resources available: some loaves and some fish. They only needed to organize the crowd and make them share the little that was there. And, interestingly there was enough for everybody! There was even food in excess.

Organizing the communities and making them share the resources available is exactly what we mean by ONLY THROUGH COMMUNITY. However, this is not an easy task: it is like swimming against the current, where people prefer to be given than to share, where the culture is to be paid for every small effort one is making, rather than to volunteer one's services. In this annual report you read about many volunteers, who have been trained, and about many children and adults, belonging to vulnerable groups, who have been assisted. It does not reflect though the immense efforts that have been put into the mobilisation of the community to obtain these results. It does not report about the times staff and volunteers went to churches to appeal to Christians to provide for a needy child or family, but were coming back tired and disappointed. It does not list the times that staff or volunteers had to revisit a community to remind them of their promises, which sometimes turned out to be empty. ONLY THROUGH COMMUNITY asks for great patience, perseverance and trust that the miracle of the multiplication of the bread can happen every time again and again.

But, ONLY THROUGH COMMUNITY also generates a lot of joy. Of course the beneficiaries, who are assisted through the community, enjoy the love, attention and help they get from their neighbours. You can easily see the changes happening in their lives: from a state of desperation into a life where there is hope again. But, interestingly, it is not only the beneficiaries who become happy. The experience the past years shows us that volunteers as well as staff enjoy and experience happiness as well: happiness about the changes they have observed in the lives of the beneficiaries, but moreover happiness about the changes they are able to detect in themselves and in each other: a process of personal growth, growth in love and solidarity with others. It is this happiness that motivates the volunteers and gives them strength to continue and it is this happiness that makes the staff to sacrifice so many extra hours. Slowly we begin to understand better why Jesus is telling us: ....*"invite the poor, the crippled, the lame and the blind; and you will be happy.."*<sup>2</sup>.

We wish you much happiness in reading this report, trying to read between the lines in order to understand our efforts to work ONLY THROUGH COMMUNITY.

*Team of Directors:*

**Fr. Gabriele Pipinato**

**Mrs. Ans van Keulen**

**Mr. Thomas Kihara**

**Mr. James Njoroge**

*Nyahururu, 01-06-05*

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<sup>1</sup> Mark. 6, 30-44

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<sup>2</sup> Luke 14,12-14

# 1. Introduction

The year covered in this report, April 2004 until March 2005, was characterised by an increased emphasis by all programmes on implementing the St. Martin approach: ONLY THROUGH COMMUNITY. One major step forward in this direction was the establishment of a specific department on community mobilisation, which was given the task to harmonise and improve recruitment, induction, formation and motivation of volunteers and improve strategies to involve and mobilise communities. Also training of staff and volunteers on implementation of the approach was intensified.

This same year saw a sharp rise in the number of volunteers involved in various levels of the organisation. Close to 1,000 volunteers were engaged in different community activities of St. Martin-CSA.

An increased interest in the approach and spirit of St. Martin-CSA was noticed, marked by a high number of visitors from inside and outside the country, requests for attachments and several invitations to give advice and formation in other churches and organisations.

The year also saw the construction of the HIV+ orphans Home completed and the establishment of management structures to run this home effectively.

The same trend of last year to strengthen the management of the organisation was continued. This was realised by the creation of support departments, such as human resource as well as properties management and the strengthening of staffing of other departments (Public Relations and Training and Facilitation).

Plans to strengthen income-generating projects were developed and are in the process of implementation. These plans are expected to be completed next year, when henceforward financial return from the projects is projected to increase.

This report outlines the variety of activities that St. Martin-CSA undertook in this financial year. The report starts with a general chapter on managerial and administrative issues, followed by a chapter for each individual programme. Also two cases are presented to illustrate the work St. Martin-CSA did the past year.

## 2.1. New departments

Three new supporting departments were established to reduce the workload of the team of directors and to enhance effectiveness and efficiency:

- Department for Human Resources
- Department for Properties Management
- Department for Community Mobilisation

The Department for Community Mobilisation was put in charge of all community volunteers, while at the same time it was to ensure that all activities in the organisation were done in line with the St. Martin approach: 'ONLY THROUGH COMMUNITY'.

The recruitments were started and the new staff members are expected to start working at the beginning of the new financial year.

## 2.2. Infrastructure

### *Office facilities*

The expansion of the management and administration capacities of the organisation made the existing office space in Nyahururu too small. As a temporary solution, the Management Board decided to move The Community Programme for People with Disabilities to the Orphans' Home, which would initially not occupy all spaces available, as plans would be made for construction of new additional office facilities. The vacated offices were put in use for administrative purposes.

### *Other St. Martin facilities*

In January 2005 the St. Martin Hostel, constructed at the site of Tabor Hill Spirituality Centre and sponsored by Manos Unidas of Spain, became operational. It contains 15 double rooms, a dining and classroom and is for exclusive use of St. Martin-CSA. It has reduced the congestion in Tabor Hill and has greatly improved the availability of accommodation for training and formation undertaken by St. Martin-CSA.

The construction of the home for HIV+ orphans in Nyahururu was completed in March 2005 and named: 'Talita Kum Children's Home'<sup>3</sup>. This project was sponsored by AES of Italy, the Nyahururu

<sup>3</sup> Name was derived from the words "Talita Kum", which mean "Little child get up", spoken by Jesus when raising a girl from the dead (Luke 8, 54).

community and European well wishers. A community of the Dimesse sisters has moved into the home and will manage the project.

Plans have been prepared for the renovation and re-construction of Boston House, a St. Martin owned property in Nyahururu town meant for commercial purposes. The project is to prepare an attractive multifunctional commercial space, which can house the St. Martin curio shop, a cafeteria, leather workshop and St. Martin exhibition, all targeting tourists and visitors from the North.

The house of Thiru Farm, another St. Martin property, was partly renovated and is currently in use as a staff house.

Four semi-permanent houses were constructed in 3 different St. Martin properties in order to have people accommodated for care taking purposes.

### *Transport facilities*

A double cabin Toyota pickup was purchased to facilitate the transportation of goods. This brings the number of transport facilities available for fieldwork to 8 cars and 10 motorcycles (table 2.1, page 9).

## 2.3. Human resources

### *Workforce in numbers*

As at 31<sup>st</sup> of March 2005, the organisation had a paid workforce of **86** people: **73** permanent staff (including 3 vacant positions) and **13** casual workers (table 2.2, page 9 and annex 1). These numbers were an increase compared to a figure of 70 (63 permanent and 7 casual) last year. Staff additions were mainly done in the supporting services, while programme staff numbers were consolidated:

- Newly established departments: 3 (still vacant)
- Training and facilitation: 1
- Public relations: 1
- Income generating projects (Leather work and curio): 2
- Casual watchman and driver put on contract: 2
- Study leave: 1

### *Expatriate workers*

This year a second lay missionary from the missionary office of Padua started working in St. Martin-CSA in the Public Relations department. She will remain for 3 years. This brings the total number of people from the

Padua Missionary Office to three: 1 priest and 2 lay missionaries. The Central Mission Board of the Netherlands (CMC) sent a junior volunteer for a 2-years period to strengthen the marketing of the curio shop and leatherwork products. This was in addition to another CMC placement, already working in the management of the organisation. The expatriate physiotherapist in the Community Programme for People with Disabilities, sent by CUAMM, was replaced by a new person from Italy. In total 6 expatriate workers were present in St. Martin during the year under reference. Two young volunteers from Mission and Youth in the Netherlands were attached to the St. Martin programmes in order to have an experience in missionary work in the South.

A volunteer architect from the Netherlands joined St. Martin for a 6-months period to provide free technical services to the construction projects of St. Martin-CSA.

#### ***Trainee positions and regular volunteers***

Six selected university graduates were attached to the St. Martin programmes in trainee positions. They had the chance to learn about the St. Martin approach and spirit, had an experience with vulnerable groups of people and gained co-ordinating skills. Five of them were later employed in various vacancies that had arisen.

Fourteen positions were available for 'regular volunteers'. These were 4 more positions as compared to last year. Regular volunteers are secondary school leavers, who are offered a one-year internship in one of the programmes or departments, through which they can gain working experience. At the same time they offer fulltime services in the organisation. During the year under reference 18 persons worked under such arrangement (annex 1).

#### ***Volunteer committee members***

All programmes were managed by committees, consisting of 11 representatives of the community, with the board in charge of the entire organisation. In the HIV/AIDS programme an additional 2 base groups operated under the management committee to take care of regional affairs in Ng'arua and North Kinangop zones respectively. A new committee was constituted to manage the HIV+ orphans' home. By the end of this period under reference a total of 89 people

volunteered at the management level, while 8 positions were vacant (table 2.3, page 9).

During the year of reference three committees were dissolved and re-constituted as per the policy stipulating a term of service of 2 years. These were the committees for HIV/AIDS and Active Non-Violence and the Management Board. A total number of 21 members were re-placed in the management committees with newly recruited ones.

## **2.4. Constitutional and policy developments**

### ***Financial committee***

A financial committee was constituted and installed consisting of all committee and board treasurers. Its terms of reference include, among others: budget approval, monitoring and evaluation of expenditures against budgets and conducting regular checks and controls. The presence of this committee will empower the treasurers, and consequently the community, to have a direct stake in the financial management affairs of the organisation and will strengthen the organisation's financial decision-making and controls.

### ***Position of the base groups***

A policy was prepared to govern the base groups, which have been very beneficial in the planning and overseeing of regional programme activities. The policy stipulates issues such as size and composition, appointment of members, election of leaders, answerability and roles and tasks.

### ***Policy on construction***

A construction policy was developed, which include regulation on approval of building plans, tendering among contractors, acquiring bill of quantities, contract preparation as well as certification of completion of construction.

### ***Policy inventory and handbook***

All policies of St. Martin-CSA were included in an inventory and regulation was developed on how amendments were to be documented. A small-size policy handbook was printed for staff and committee members for easy reference.

## 2.5. St. Martin-identity

Strengthening of St. Martin-CSA's identity has been given priority during the year under reference.

### **Identity handbook**

A draft identity handbook was written outlining Vision, Mission, Approach, Organisational structure and Philosophy ('Spirit of St. Martin'). This handbook will be further revised the year to come and will serve as reference material for all who would like to know more of the organisation.

### **Induction of new staff and committee members**

Induction courses were organised for new staff and committee members in order to make them easily internalise the St. Martin-CSA identity. A small newly revised handbook was prepared for committee members for reference purposes.

### **Spiritual formation team**

A spiritual formation team was formed, consisting of 25 staff and committee members, which was charged with the responsibility of forming other staff, committee members and particularly community volunteers in the 'spirit of St. Martin'. This formation is being done as part of other more technically oriented courses and helps volunteers and staff to more easily internalise the 'heart' of the St. Martin-CSA identity and gain the motivation to do the often difficult work in the community. This spiritual formation team started its own preparation and formation through a series of training activities and retreats.

### **St. Martin approach**

The approach used in St. Martin-CSA and previously referred to as 'Community-based approach' was baptised 'St. Martin approach' to avoid confusion with approaches used by other organisations which are also referred to as 'Community-based approach', but which are remarkably different. The word 'St. Martin approach' underlines its uniqueness and stands for the continuous involvement of the community and volunteers in all undertakings (ONLY THROUGH COMMUNITY).

## 2.6. Public relations

The Public Relations department, which was affected by high staff turn-over the previous

year stabilised this period and started working on a one-year strategic plan.

Several promotional materials were prepared such as a calendar, diaries (pocket size and desk size) and the 4 monthly Asante newsletter (1,500 copies). The department updated its mailing lists and improved on the photo filing system. A data base of all community volunteers was prepared as well.

The department was involved in general awareness about the work of St. Martin-CSA in 15 public gatherings and represented the organisation in several government committees. The number of visitors to St. Martin-CSA steadily increased over the year. The department received 61 groups of visitors, both local visitors (religious/church groups, government groups/representatives) as well as foreign visitors. In July 2004 the First Lady of Kenya visited the organisation. This high number of visitors indicates the growing interest of outsiders into the spirit and approach of St. Martin.

The department maintained relationships with different collaborating and supporting partners (majority based in Europe), relevant local Government Departments and local non-government organisations working in similar fields (annex 2).

## 2.7. Community involvement

As stated in 2.1. a specific department was established to enhance community involvement in all programmes and co-ordinate all issues concerning community volunteers.

The network of community volunteers expanded from a number of 511 volunteers last year to a number of 839 this year (table 2.3, page 9). These volunteers worked at the grass root level with different vulnerable groups of people after having undergone a process of training and formation. An improved induction course was developed by the training and facilitation department for this group of volunteers in order to facilitate proper internalisation of the St. Martin-CSA identity. This will be implemented in all programmes in the course of next year.

Seven Volunteers' Days were held mid November 2004, during the St. Martin's week. These events were to re-kindle the volunteers' motivation.

Community involvement was fostered in various ways. In the Community Programme for People with Disabilities, for 509 beneficiaries, community and family support was sought to cater for the medical and social needs of children with disabilities. Five major fund drives were organised to finance the operation of children.

General donations were done to St. Martin-CSA by the community worth **KSh. 289,000/=**. More than half of this value was made of clothes and shoes. Also foodstuff was donated, stationery and small livestock.

## 2.8. Capacity building

The department for Training and Facilitation was only established in January 2004 and aimed at *increasing the capacity among staff and volunteers to manage and implement social development programmes that can empower community to involve and care for vulnerable groups of people.*

A one-year strategic plan was developed and implemented successfully. As part of this plan various training courses were conducted for purposes of capacity building as well as induction into the St. Martin spirit and approach (table 2.4.). A major challenge faced by the department was the poor attendance by part of the committee members due to engagement in their outside jobs. Also the availability of training venues hampered the organisation of courses. The latter has been eased by the opening of the St. Martin hostel in Tabor Hill.

In addition to indoor training courses, the training and facilitation capacity of the department was provided on consultancy basis to outside groups (table 2.5.). Remarkable was the special interest of Maralal diocese (Barsaloi parish) into the spirit and approach of St. Martin-CSA, which led to various training and visit activities.

## 2.9. Income generating activities

The organisation has been operating 2 income generating projects, which include the renting out of offices (Boston House), which gave a profit of **Ksh. 614,104/=** and the St. Martin Curio shop which had a profit of **Ksh. 610,681/=**. The curio shop was not open to the public, but only to St. Martin visitors. Plans have been developed to renovate and re-construct the building that is housing the shop and to add a cafeteria,

exhibition room and toilets in order to make the shop attractive for tourists. This project will commence in the course of next year.

## 2.10. Finances

### **Sources of income**

During the year under reference, St. Martin-CSA received financial contributions from different partners, totalling to **Ksh. 31,113,773/=** (table 2.6.). Well wishers from Europe donated **KSh. 20,221,010/=**

Beneficiaries themselves raised **KSh. 1,118,479/=** as own contribution towards the assistance they required, while the community donated **Ksh. 424,220/=** towards assisting beneficiaries.

### **Expenditures**

Total expenditures amounted to **Ksh. 56,705,324/=** (table 2.6.), of which a significant part went into two major construction projects (Orphans' Home and Hostel): **Ksh. 23,831,080/=**.

### **Audit**

Last year's financial administration was audited by Costa Luis & Co. and their report will be out soon. A copy can be made available on request.

## 2.11 Future plans

### **Constructions**

- Renovate and expand the house in Flora farm (Thiru) for accommodating small groups for training/meeting.
- Renovate and re-construct Boston House to create attractive multifunctional space for commercial purposes.
- Develop plan and construct additional office space in St. Martin owned plot opposite St. Martin main offices.

### **Human Resource Management**

- Follow-up recruitment of new departmental heads, recruit new staff if vacancies arise, recruit regular volunteers where required, initiate recruitment of new trainees in 2006.
- Recruit new committee members for existing and arising vacancies.
- Induct new staff, trainees, regular volunteers and committee members.
- Produce handbook for staff.
- Facilitate the attachment of students.

### ***Mission and identity***

- Continue formation process of spiritual formation team.
- Organise retreats and spiritual formation for staff and volunteers.
- Finalise formulation of core values.
- Write revised copy of Identity Handbook.
- Organise St. Martin's Week.

### ***Training and Facilitation department***

- Organise courses on 'Induction into St. Martin identity', 'St. Martin approach' 'Counselling', 'Leadership and Financial Management', 'Orientation on the job-market (for regular volunteers/trainees)'.  
• Organise and facilitate workshops for the programmes on 'Participatory Evaluation' and 'Strategic Programme Planning'.

### ***Capacity building***

- Continue sponsoring the 3 staff undertaking diploma courses on 'physiotherapy' and 'social ministry'. Two will complete.
- Send one staff member for a post graduate diploma course on 'Leadership and Management of NGOs' in BRAC Bangladesh.
- Sponsor one social worker for diploma course through distance learning, as pilot (through PREMESE Nairobi).

### ***Public Relations Department***

- Make a new strategic plan for department.
- Publish a 4-monthly newsletter, St. Martin diary (pocket and desk size), a calendar for 2006 and promote the same.
- Promote local donations, through the system of 'friend', 'supporter', etc.
- Receive local and foreign visitors.
- Increase collaboration and networking with the local government, administration, churches, other NGOs.

### ***Community Mobilisation Department***

- Make a one-year strategic plan.
- Harmonise and improve recruitment, induction and motivation of community volunteers (through policy development and implementation of the same).
- Produce Kiswahili handbook for community volunteers.
- Mobilise communities for supporting beneficiaries and improve strategies.
- Organise St. Martin's Days for volunteers.

### ***Income generation***

- Furnish and re-design curio shop, employ a shopkeeper and open the curio shop on a daily basis. Promote shop among potential customers.
- Furnish and equip the cafeteria, develop menu, employ and train staff.
- Develop plans for upgrading other part of Boston House.

### ***Financial department***

- Facilitate annual audit
- Follow-up functioning financial committee

## Statistics

Table 2.1. Transport facilities as per March 2005

| Type                           | Number   |
|--------------------------------|----------|
| Toyota vans                    | 2        |
| Land rovers                    | 3        |
| Toyota landcruiser (ambulance) | 1        |
| Toyota pick-up                 | 1        |
| Suzuki                         | 1        |
| <b>TOTAL</b>                   | <b>8</b> |
| Yamaha/Suzuki motorcycles      | 10       |

Table 2.3. Volunteer workers as per March 2005

| Type                 | Number     |
|----------------------|------------|
| Committee members    | 71         |
| Base group members   | 18         |
| <b>SUBTOTAL</b>      | <b>89</b>  |
| Regular volunteers   |            |
| CSA                  | 3          |
| CPPD                 | 4          |
| CPHAADA              | 3          |
| CPANV                | 1          |
| CPSNC                | 2          |
| CPSMC                | 1          |
| <b>SUBTOTAL</b>      | <b>14</b>  |
| Community volunteers |            |
| CPPD                 | 342        |
| CPHAADA              | 307        |
| CPANVHR              | 120        |
| CPSMC                | 70         |
| <b>SUBTOTAL</b>      | <b>839</b> |
| <b>TOTAL</b>         | <b>942</b> |

Table 2.2. Staff positions as per March 2005, the level, function and numbers.

| Level                | Function            | No.       |
|----------------------|---------------------|-----------|
| <u>Management</u>    | Director            | 1         |
|                      | Vice-Director       | 1         |
|                      | Ass. Vice-Director  | 2         |
| <u>Supporting</u>    | HR manager          | 1         |
|                      | Properties manager  | 1         |
|                      | Head Com. Mobil.    | 1         |
|                      | Accountant + Ass.   | 4         |
|                      | Cashier             | 1         |
|                      | Secretaries         | 2         |
|                      | Public Relations O. | 2         |
|                      | Trainer/facilitator | 2         |
|                      | Drivers             | 5         |
|                      | Office attendant    | 2         |
|                      | Security staff      | 4         |
|                      | Gardener /caretaker | 2         |
|                      | <u>Programme</u>    |           |
| CPSC                 | Co-ordinators       | 2         |
|                      | Social worker       | 3         |
|                      | House parents       | 3         |
|                      | Teachers (centres)  | 2         |
|                      | Study leave         | 1         |
| CPPD                 | Co-ordinators       | 2         |
|                      | Social workers      | 5         |
|                      | Physiotherapists    | 4         |
|                      | Study leave         | 1         |
| CPHAADA              | Co-ordinators       | 2         |
|                      | Social workers      | 3         |
|                      | Counsellors         | 3         |
| CPANVHR              | Co-ordinators       | 2         |
|                      | Community lawyer    | 1         |
|                      | Social workers      | 1         |
|                      | Study leave         | 1         |
| CPSMC                | Co-ordinator        | 2         |
|                      | Social worker       | 2         |
| <u>Projects</u>      |                     |           |
| Leather/Curio        | Manager             | 1         |
|                      | Teacher             | 1         |
| <b>SUBTOTAL</b>      |                     | <b>73</b> |
| Casuals <sup>4</sup> | Watchmen            | 5         |
|                      | Drivers             | 4         |
|                      | Gardener/caretaker  | 3         |
|                      | Office attendant    | 1         |
| <b>SUBTOTAL</b>      |                     | <b>13</b> |
| <b>TOTAL</b>         |                     | <b>86</b> |

<sup>4</sup> Among the casuals are 3 positions for socially disadvantaged groups, currently occupied by people with disabilities

Table 2.4. Capacity building in St. Martin-CSA from 01-04-04 until 31-03-05

| Period   | Course  | No. part. | Facilitator                      |
|--|---|-----------|----------------------------------|
| 8 <sup>th</sup> of April 04                      | Induction course new staff                    | 12        | Training/F depart.               |
| 26-28 <sup>th</sup> of May 2004                  | Orientation on job market for reg. volunteers | 10        | „                                |
| 4-5 <sup>th</sup> of June 2004                   | Induction course new committee members        | 25        | „                                |
| 7-26 <sup>th</sup> of June 2004                  | Counselling course                            | 18        | „                                |
| 28-30 <sup>th</sup> of July 2004                 | Working with self-help groups (refresher)     | 23        | „                                |
| 17-21 <sup>st</sup> of Aug 2004                  | Leadership and financial management           | 18        | „                                |
| 1 <sup>st</sup> -2 <sup>nd</sup> of Oct. 2004    | Induction course new committee members        | 27        | „                                |
| 16-18 <sup>th</sup> of Sep. 2004                 | Counsellors' debriefing                       | 13        | „                                |
| 28 <sup>th</sup> Sept. – 1 <sup>st</sup> Oct. 04 | Report writing, data mgt & impact assessm.    | 28        | „                                |
| 6-8 <sup>th</sup> of Oct. 2004                   | Report writing for social workers             | 21        | „                                |
| 26-28 <sup>th</sup> of Oct. 2004                 | Training design for HIV/AIDS staff            | 13        | „                                |
| 1 <sup>st</sup> – 4 <sup>th</sup> of Feb. 2005   | Training of Facilitators, phase I             | 12        | „                                |
| 4 <sup>th</sup> – 5 <sup>th</sup> of Feb. 2005   | Induction new staff and committee members     | 26        | „                                |
| 14-15 <sup>th</sup> of Feb. 2005                 | Induction ANV prison volunteers               | 11        | „                                |
| 22 <sup>nd</sup> – 25 <sup>th</sup> Feb. 2005    | Training security personnel                   | 14        | „                                |
| 4-5 <sup>th</sup> of March 2005                  | St. Martin approach course                    | 36        | „                                |
| 16-18 <sup>th</sup> of March 2005                | Training of facilitators, phase II            | 12        | „                                |
| Sept. 02 until Aug. 05                           | Diploma 'Physiotherapy'                       | 1         | Medical Training College Nairobi |
| Aug. 03 until July 05                            | Diploma 'Social Ministry'                     | 1         | Tangaza College Nairobi          |
| Aug. 04 until July 06                            | Diploma 'Social Ministry'                     | 1         | Tangaza College Nairobi          |

Table 2.5. Training / facilitation on consultancy basis for outsiders by St. Martin training department

| Period                        | Course                               | Target group                                 | No. part. |
|-------------------------------|--------------------------------------|--|-----------|
| June 2004                     | Leadership and Justice and Peace     | J&P commissioners<br>Marmanet parish         |           |
| 17-20 <sup>th</sup> Jan. 2005 | Leadership                           | Diocesan youth leaders                       | 25        |
| 9-11 <sup>th</sup> Feb. 2005  | St. Martin approach in other context | Barsaloi parish leaders<br>(Maralal diocese) | 64        |
| 16-19 <sup>th</sup> Mar. 2005 | Project planning and micro-credit    | Barsaloi group leaders<br>(Maralal diocese)  | 10        |

Table 2.6. Annual financial report for St. Martin-CSA (1<sup>st</sup> of April 2004 until 31<sup>st</sup> of March 2005)

| <b>INCOME (KSh.)</b>               |                   | <b>EXPENDITURES (KSh.)</b>  |                   |
|------------------------------------|-------------------|---|-------------------|
| <b>Funding partners</b>            |                   | <b>Staff salaries</b>   | 10,386,314        |
| AES                                | 6,411,098         | <b>Running costs<sup>5</sup></b>                                  | 9,163,359         |
| CUAMM                              | 5,145,797         | <b>Training costs</b>   | 2,401,765         |
| Missionary Office Padua            | 4,814,071         | <b>Direct assistance to beneficiaries (medical and schooling)</b> | 4,323,061         |
| Manos Unidas                       | 3,255,133         |   |                   |
| Cordaid                            | 1,766,025         |   |                   |
| PAT                                | 1,738,180         |   |                   |
| CMC/AMA                            | 1,533,669         |   |                   |
| Atantemani                         | 1,449,450         |   |                   |
| Kindernothilfe                     | 1,437,513         |   |                   |
| Others                             | 3,562,837         |   |                   |
| <b>SUBTOTAL</b>                    | <b>31,113,773</b> |   |                   |
| <b>Well wishers Europe</b>         | <b>20,221,010</b> | <b>Constructions</b>  | <b>23,831,080</b> |
| <b>Local well wishers</b>          | <b>424,220</b>    | <b>Assets/equipments</b>  | <b>4,811,730</b>  |
| <b>Contributions beneficiaries</b> | <b>1,118,479</b>  |   |                   |
| <b>Net Profit from projects</b>    | <b>1,224,785</b>  |   |                   |
| <b>Others</b>                      | <b>1,890,204</b>  | <b>Others</b>   | <b>1,788,015</b>  |
| <b>TOTAL</b>                       | <b>55,992,471</b> | <b>TOTAL</b>  | <b>56,705,324</b> |

<sup>5</sup> Including: fuel and maintenance, meals and accommodation, public transport, telephone/water/electricity, stationary, consumables, maintenance offices.

# 3. People with Disabilities

## 3.1. Introduction

This report covers the first year of a new 3 years strategic plan, which is implemented in collaboration with CUAMM the main funding partner. Over the one-year period, the programme was able to work with the community addressing the needs of people with disabilities in terms of medical and social rehabilitation. The programme was involved in the schooling and treatment of people with disabilities. This was made possible through the community volunteers who guided the community in identifying the beneficiaries and laying the way forward in their rehabilitation.

Through the efforts of these communities, within the target areas, people with disabilities who are above 18 years of age joined secondary schools and training institutions to become self reliant in future. More parents of children with disabilities realized the need to form support groups to boost their efforts in supporting their children.

Increased awareness and community capacity to deal with disabilities led to early intervention in the medical and social rehabilitation of children with various disabilities.

## 3.2. Context

With the introduction of free primary education, the government made it possible for parents to send their able children to school hence creating better opportunities for parents to address the needs of children with disabilities. The special units in schools for children with disabilities also benefited from the new government policies on education by provision of funds from the government. This assisted in the improvement of boarding facilities in some of these units and also in the provision of food. Different organizations and bodies working with people with disabilities welcomed the programme whenever approached. This created good forums for discussion of issues to do with disabilities.

Rights and needs of people with disabilities have now been addressed in many political forums unlike before. A new Act on Persons with Disabilities was developed and gazetted in January 2004, but up to now not passed by parliament. It includes chapters such as: rights and privileges of persons with disabilities, national development fund for

persons with disabilities as well as relief and incentives.

Cultural and religious barriers reduced over the period with more people accepting and perceiving disabilities positively.

Communities also came together to assist the people with disabilities and their families. Even when food shortages occurred due to climatic reasons, communities from high yielding regions donated food for the people with disabilities.

The political climate in areas that used to have living constraints due to tribal clashes continued to improve. Many families in such areas started re-establishing permanent settlements thus enhancing the follow-up of people with disabilities by the programme. The programme feels it has to give special attention to such areas because of the economic hardships in the areas and because settlement efforts could result in neglect of people with disabilities.

## 3.3. Objectives

In this chapter the programme outlines the achievements made against each objective. The objectives stated are for a three years period.

*Objective 1: 400 people with disabilities will have received maximum medical and social rehabilitation. (Children and those above 18 years in the programme)*

A total of **164** people with different types of disabilities were maximally rehabilitated by the end of this first year against a target of 134 (table 3.1.), the majority being neurological cases. Among the 164, **124** are under 18 years of age while **40** are above 18 years.

*Objectives 2: 180 parents, 420 church leaders 210 volunteers, 75 community rehabilitation workers (CRWs) and 180 regular teachers will have increased capacity on how to manage disabilities.*

The programme trained 107 parents against a target of 60 for the period. The training courses were carried out in two phases at different venues near the parents' localities. The number only covers those who managed to undergo both phases of training. This positive achievement is in stark contrast with the training attendance in previous years and is attributed to the decentralisation of the

courses, which brought them more close to the people.

## STATISTICS

Table 3.1. Number of maximally rehabilitated people with disabilities per impairment, shown against total number in the target area.

| Impairment  | N. of pple  | Max. rehab. |
|---|-------------|-------------|
| Neurological  | 359         | 49          |
| Sensory impairment  | 228         | 18          |
| Mental impairment   | 222         | 31          |
| Genetic deformity<br>(Down syndrome,<br>Muscular dystrophy) | 202         | 40          |
| Orthopedic  | 149         | 6           |
| Delayed milestones due<br>to malnutrition                   | 93          | 6           |
| Burns   | 58          | 6           |
| Multiple disabilities                                       | 56          | 0           |
| Others  | 186         | 8           |
| <b>TOTAL</b>  | <b>1553</b> | <b>164</b>  |

Table 3.2. Number of persons with disabilities with different disabilities referred for specialised treatment and those who were operated.

| Type of disability | No. referred | No. operated |
|--------------------|--------------|--------------|
| Orthopeadical      | 139          | 34           |
| Neurological       | 22           | 7            |
| Birth defects      | 5            | 5            |
| <b>TOTAL</b>       | <b>166</b>   | <b>46</b>    |

The programme also trained **128** church leaders against the target of 140 for the period under reference. These were leaders of Christian denominations found within the target area.

**26 new volunteers** from the communities were given basic training on disabilities, while an additional number of 127 volunteers previously recruited were also trained in refresher courses. This was against 70 volunteers targeted in the period.

**26 Community Rehabilitation workers (CRWs)** completed a three-phase training on disabilities over the period. The target number for the period was 25 CRWs. **52 regular teachers** were also trained against a target of 60 teachers.

*Objective 3: 30 support groups (20 existing and 10 new) of persons with disabilities (or parents of children with disabilities) will have successfully implemented a project for their own benefit (or for the benefit of their children with Disabilities)*

The programme worked with 29 support groups over the period. Out of these, 8 were new groups formed during the period. The total number of groups with income generating projects (IGP) was **13**. 26 groups accessed training and/or micro credit facilities through a sister programme for Savings and Micro-credit (CPSMC)

*Objective 4: 125 People with disabilities will have been enabled to enrol in primary schools, secondary schools or training institutions.*

During the period under reference the programme managed to enrol a total of **18** children with disabilities from financially constrained families into learning and training institutions by providing financial assistance. An additional **19** children were admitted in school through mobilisation of parents and community, even without any financial assistance from the programme: making a total of 37 against a target of 42 children.

*Objective 5:- Increased awareness among 100,000 people of the general public on the plight of people with disabilities.*

Awareness on disabilities was created to the general public through:

- *Writing of articles in the local press.* The programme managed to write 4 articles on disabilities in a local newspaper and three others in 'Asante', the St. Martin CSA newsletter. The articles covered different topics on disabilities.
- *Church awareness.* This was done in 21 churches of different Christian denominations within the target area, with an estimated number of over 500 participants. During the awareness the following was covered: definition of disabilities special needs of people with disabilities and also volunteerism in working with children with disabilities.
- *School awareness.* This was done in 19 primary schools, 1 polytechnic and 9 secondary schools within the target area. A total of **5,004 students** and 200 teachers were reached in this awareness.

- Awareness was also created in two public meetings where the actual number of participants could not be established.

### 3.4 Activities

#### 3.4.1 Planned versus realized activities

##### **Medical rehabilitation**

The programme operated 7 Occupational Therapy (OT) centres and 17 sub-centres. However, 2 sub-centres had to be closed towards the end of the year for lack of children in need of OT services. Social workers continued making follow-up on the children with disabilities in those areas. The services in the centres were provided on monthly basis. Over the period the physiotherapy department managed to attend to an average of **124** persons with disabilities per month hence giving an average of **149** treatments per month. As part of rehabilitation, parents in the centres were educated on how to make simple aids and appliances for their children with disabilities. The community assisted in making these aids and appliances using locally available materials.

The programme facilitated visits for 166 children to various hospitals in the country for specialised treatment and 46 operations were done with financial assistance from the programme and the community (table 3.2.).

##### **Social rehabilitation**

The social department conducted a total of **1,735** home visits to **945** persons with disabilities over the period. During the visits, the social workers gave advise on the activities of daily living (ADLs) to the parents/guardians of children with disabilities. They also mobilised the communities to assist in making simple aids and appliances recommended by the occupational therapy department and ensured that persons with disabilities continued attending medical clinics and referral appointments as advised.

##### **Training**

Training on disabilities was conducted over the year to different target groups within the area of operation. The community groups targeted were:

- Parents of children with disabilities
- Church leaders
- Community volunteers
- Community Rehabilitation workers
- Regular teachers (primary & secondary schools)

Trained community volunteers became Community Rehabilitation Workers (CRWs) after a more intense training on all types of disabilities. All the training was facilitated by volunteer facilitators of different professions e.g. medical experts, special education teachers and social workers. The St. Martin staff also facilitated. After the completion of training, CRWs worked in the field (visiting and advising persons with disabilities) and submitted reports to the programme on their progress.

Most parents' seminars were not residential. They were done in two one-day phases in a venue near their homes. The communities around the venues assisted by providing lunch to the participants. In the trainings, causes, types, prevention and management of disabilities were the major topics covered.

##### **Community Mobilisation**

Communities living where People with Disabilities had been identified were mobilised to assist them. During the period under reference, families of 509 people with disabilities were visited and assisted in involving the community to foot medical bills and pay school fees for the beneficiaries. The Community Mobilization department managed to organize and conduct 5 major fundraising activities for people with disabilities.

#### 3.4.2 Other activities

- A meeting for head teachers of schools with special units for children with disabilities was held. Issues to do with the running of the units were deliberated.
- Inter programme meetings were held to harmonise the activities of CPPD and CPSMC in support groups.
- Food donations were received from the communities and distributed to the special units within the target area.
- Staff and management committee members visited media houses to look into possibilities of creating awareness through the mass media.
- Programme inter-departmental trainings on disabilities were carried out throughout the period.

#### 3.5. Constraints and recommendations

- Low attendance of members in support group meetings. It is recommended to research on reasons for low attendance

and to further motivate parents to be active in the support groups.

- Neglect of some children with disabilities by their parents. It is recommended that the District Children's Officer be involved in extreme cases and the programme to intensify awareness on disabilities.
- Vast area for community mobiliser to cover, hence many cases not adequately covered. A fully independent Community mobilization department will be formed to address issues of community participation
- Deteriorating condition of some children with disabilities due to despair of their parents. It was recommended that more counselling and home visits be done to such parents by the staff and volunteers.
- Isolated cases of parents who are not involved in church or community activities hence poor rapport within the community. This hampers community support for the child with disabilities. Intensified community mobilization will enable all needy people to be involved.
- Uncooperative parents. Regular home visits and parent refresher seminars will boost their morale.
- Paralysis and/or death of some persons with disabilities after operations discouraged their parents. Intensive counselling before and after operations to enable parents make informed decisions and avoid unrealistic expectations.
- Malnutrition especially in dry places in the target area. It is recommended that communities be mobilised to provide food for persons with disabilities.
- Low understanding of the St. Martin Approach in some communities resulting in dependency syndrome. The programme should intensify awareness on the St. Martin Approach.
- Negative community responses in terms of repayment of hospital bills especially after the death of a child. Programme to consider waiving hospital bills for deserving cases and come up with a clear policy on bills repayment.
- Conflicts and subsequent break up of some support groups already formed. The programme to organize regular refresher courses to the members on support group management.

### 3.6. Organization

#### 3.6.1 Staff changes

During this reporting period, the programme had 11 members of staff and 4 regular volunteers (table 2.2). The programme co-ordinator left the organisation and was replaced by an interim co-ordinator, through internal promotion, who was later confirmed to the position. An Assistant Co-ordinator was appointed after having served as a trainee for 6 months. Two regular volunteers left after completing their term of contract and were replaced. The expatriate physiotherapist left after serving for one year and was replaced with a new one through CUAMM.

#### 3.6.2. Capacity building

Various courses, designed to upgrade staff competence, were carried out during this period (table 2.4).

One staff member remained in college throughout the year, where she is still pursuing physiotherapy training.

#### 3.6.3. Networking and Collaboration

The need and importance of networking and collaboration has been a paramount issue especially where impact assessment and cost reduction are concerned. The programme worked with government departments, private and public health institutions, organizations for the welfare of persons with disabilities, Public schools with special units for children with disabilities and church organizations (annex 2).

### 3.7. Impact

*Goal of the programme: an increased capacity in the community that can reduce incidences of disabilities and improve the social, medical and economic status of people with disabilities.*

Many lives have been saved through surgical operations, and many smiles restored. About **164** children with disabilities were maximally rehabilitated through removal of growths, cleft lip/palate operations, clubfeet and amniotic disease operations as well as deformities.

With the high numbers of community members trained: parents of children with disabilities, church leaders, volunteers and teachers, the welfare of children with disabilities greatly improved in many ways, e.g. better socially integrated in schools and

community (less isolation), improved nutrition and hygiene at home or medical treatment realised through community contributions. In the reporting year alone, **37** children with disabilities, who would have otherwise never seen a classroom, joined various schools and training institutions.

On average **13** support groups representing about 130 families engaged in viable Income generating projects, which enabled them to take better care of their children with disabilities. Many more are actively saving with the micro-credit programme anticipating small loans to start projects in the near future.

Though no detailed data are available, the programme observed that due to increased awareness in the community on causes and types of disabilities, many cases are now identified and reported at an early stage when medical interventions can have good results. There is now more hope that children, born with disabilities, can be rehabilitated up to the maximum possible.

The local communities continued to support the special units for children with disabilities by providing food and clothing. This was also extended to the very poor families in the village. Community members paid them regular visits and met their very basic needs like tidying up of the children and providing food and clothing. All are indications of an increased community capacity to manage those with disabilities.

A need was identified to quantify community contributions so to be able to gauge well the impact of awareness activities in the community.

### **3.7. Future plans**

During the remaining two years of the project period, most of the activities started in the first year will continue as planned. The programme will:

- Work closely with the community mobilization Department to solicit funds for equipping the Physiotherapy centres
- Continue with awareness in churches and other public gatherings.
- Organise regular refresher courses for parents of people with disabilities and Traditional Birth Attendants.
- Continue with social work, community mobilization and Physiotherapy activities.
- Establish a workable collaboration with churches and other organizations in the dry areas to start food programmes to address the problem of malnutrition among young children.

Charles Maina was born in 2001 and after assessment was found to have cerebral palsy. He was identified by the area volunteer and referred to St. Martin offices for further intervention and assistance.

The parents brought the child the first time but did not turn up for any other appointment for period of six months. During this time, the volunteer continued visiting the parent and advised her on the importance of attending physiotherapy clinics. When the programme social worker went for home visits in that area, the volunteer referred the mother to her. The social worker counselled the parent and referred her once again to the physiotherapy department.

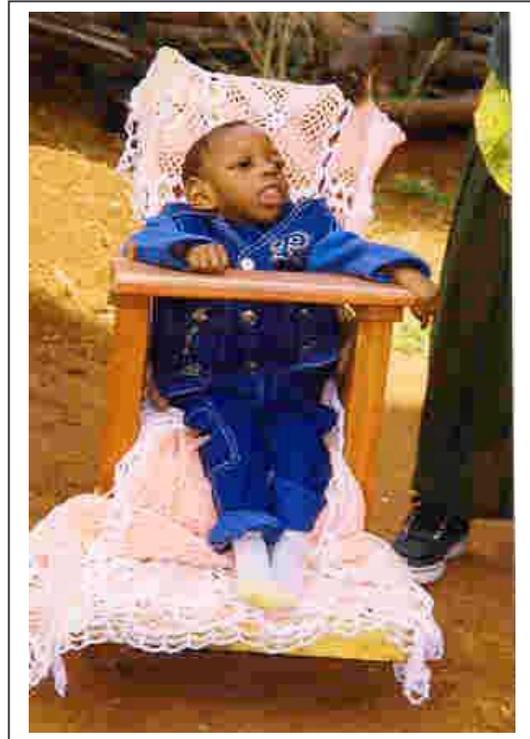
The mother stayed for another three months without attending OT clinic, but after some time she finally accepted to heed to the advise of the programme staff and started bringing the child for exercise.

She at one time gained courage and confessed that her reluctance had been occasioned by pressure from the grandmother not to expose the child nor seek any form of rehabilitation saying that the situation was God's will, which is unquestionable. A church leader from the area was approached and talked to the grandmother in order to make her change her attitude.

The mother later on accepted to follow the directives of the physiotherapy team and was shown the exercises that she would be doing at home in addition to attending regular physiotherapy clinics. She was also shown how to make a special chair and a walking trolley for Maina and teach him how to use them. The area volunteers mobilized the community around to assist in making the recommended aids. Progressively Charles learned to walk step by step with the help of the walking trolley and is now able to walk freely.

The mother joined the area support group and became an active member. She realised that there are many parents having a child with a disability and that this is not something to be ashamed about. That in fact many such children can progress in their life, despite their physical limitations. Out of this experience she decided to volunteer herself and try to assist other parents.

Today, Maina is independently mobile and interacts freely with other children. He is waiting to join nursery school though he still needs to improve on his speech. But, with a lot of patience and encouragement from his mother he will certainly be able to reach far.



## 4.1. Introduction

This period under reference is the second year in a 3-years strategic plan of the programme, jointly sponsored by Kindernothilfe of Germany and Cordaid of the Netherlands (2003-2006). During the period, the programme was able to successfully rehabilitate 24 children. 5 new arrivals on the streets were taken back home immediately. This makes a total of **29** children successfully reintegrated.

With the new approach that the programme took in relation to rescue cases, great interventions have been made in this area. Children, especially girls who have been raped or defiled have received assistance in counselling to manage their trauma. More to this, several convictions were made on the perpetrators of these acts (rape and defilement). Good collaboration was obtained from another programme of St. Martin (that for Active Non-violence and Human rights) as well as from government institutions notably, the Nyahururu Police station and the District Children's Office.

## 4.2. Context

### **Government involvement**

During the period, there was less government involvement in street children issues as compared to previous year, when children were massively removed from the streets countrywide and put in reception centres. Many such children went back to the streets. As a result, also in Nyahururu town, the period recorded an increase in number of children in the streets.

The local authorities convened meetings with relevant stakeholders to discuss strategies to curb the increase. St. Martin-CSA was mandated with the task to monitor, report and advise the select committee on street children issues.

The programme received good support and collaboration from the Children's Department under the Ministry of Home Affairs, through the District Children's Office. This was in making follow-up on children, who were rescued in cases of defilement, domestic violence and other forms of child abuse. The implementation of the Children's Act of 2001 enhanced the operations of this department. Issues related to children were addressed in a more efficient way.

### **Free primary education policy**

The free and compulsory primary education policy developed by the new government administration continued to be effected. This helped to keep a large number of children in schools who would have otherwise been desperate and probably in the streets. The number includes the children who were formerly in the Non-Formal School of St. Martin-CSA. However, since most schools do not offer lunch to the children, those from very poor families occasionally absented themselves from schools or dropped out all together to look for manual jobs like selling paper bags or fruits within Nyahururu town. This they would do to supplement their families' income and help put food on the table.

### **HIV/AIDS**

HIV/AIDS in the target areas (Laikipia West and Nyandarua Districts) has and still continues to wipe out families at an alarming rate. Orphaned children are left with their weak grandparents who can hardly take care of the said children. In some cases, the said children tested HIV positive. The orphans often dropped out of school due to hunger, desperation and lack of care, and ended up in the streets.

## 4.3 Objectives

Targets given in this chapter are for a three-years period.

*Objective 1: 75 rehabilitated street children, permanently removed from the streets of Nyahururu.*

**29 children** were reintegrated back into the community against a target of 25. Out of these, **5** were new arrivals on the streets, who only stayed a few days before being taken back home. The other 24 children successfully underwent rehabilitation in the programme's centres and were placed back in the community (table 4.1). They all joined school at the primary level of education.

**42** children were still in the centres at the end of the reporting period and in the process of rehabilitation (table 4.2).

## STATISTICS

Table 4.1: Reintegrated children and where they were placed

| Where placed                                    | Number of children |
|---|--------------------|
| Reunited with parents                           | 10                 |
| Joined relatives                                | 11                 |
| Placed with foster parents                      | 1                  |
| Host parents                                    | 2                  |
| Fresh arrivals in the streets brought back home | 5                  |
| <b>TOTAL</b>                                    | <b>29</b>          |

Table 4.2: Children under rehabilitation in various programme centres as per March 2005.

| Programme centres               | Number of children |
|---------------------------------|--------------------|
| Drop-in centre for boys         | 15                 |
| Rehabilitation centre for boys  | 13                 |
| Rehabilitation centre for girls | 13+1 boy           |
| <b>TOTAL</b>                    | <b>42</b>          |

Table 4.3: Former Non-Formal School children and their whereabouts.

| Whereabouts of former Non-Formal school children | Number of children |
|--|--------------------|
| In formal primary schools                        | 90                 |
| Joined primary schools far away                  | 26                 |
| Joined secondary school                          | 2                  |
| Admitted in Drop-in centre                       | 2                  |
| Dropped out                                      | 4                  |
| <b>TOTAL</b>                                     | <b>124</b>         |

Table 4.4: Courses conducted for volunteer showing Number of participants of participants

| Course                                    | No. of courses | No of pple |
|---|----------------|------------|
| Debriefing for teacher counsellors        | 1              | 11         |
| Contact person orientation course         | 1              | 10         |
| Community volunteers courses              | 4              | 80         |
| Workshops for comm. vols                  | 2              | 39         |
| Retreat for comm. vols. & contact persons | 1              | 38         |
| <b>TOTAL</b>                              | <b>9</b>       | <b>178</b> |

The boy in the rescue centre for girls is a HIV+ child, for who no other suitable place was found.

During the period, 7 children dropped out of the rehabilitation centres and returned to the streets while 2 children went back to their homes. These children had not completed the rehabilitation process. At the same time, 4 children who had earlier dropped from the centres were readmitted. Most of these children drop out due to desires of the easy life they get from the streets for example handouts of money, food, easy access to drugs (most commonly sniffing glue) and the inability to live in an institution with rules and regulations.

*Objective 2(a): 150 parents with potential street children from the targeted problematic areas will have been guided and counseled on responsible parenthood.*

During the period, the programme targeted 50 parents. However, 25 parents were reached through guidance and counseling. Some of these parents were identified by the community leaders who had been trained in a one-day workshop while others were identified by the programme staff while in the field.

*Objective 2(b): 150 parents from the non-formal school will have been guided and counselled on responsible parenthood and will have acquired entrepreneurial skills.*

The programme targeted all parents of the non-formal school. As the non-formal school was closed after the introduction of free primary education, the programme only followed the parents of the children who were re-integrated into the formal schools.

The parents reached through guidance and counselling this period were **69**, being the parents of the 90 children still being monitored in the formal schools (see objective 4).

During the period under reference, the number of parent self-help groups for income generation dropped from 3 to 2, which now have a total of 49 parents. Only one of the remaining two self-help groups was active with members who met regularly and who kept savings with the sister Programme for Savings and Micro Credit.

*Objective 2(c): 150 teachers of public primary schools in the targeted problematic areas will have increased awareness on the causes in schools, making children to run to the streets.*

In the period under reference, **50** teachers in public primary schools were targeted for awareness rising. However, **14** teachers of Subukia Primary School were reached. 3 other schools could not allocate time for the awareness because they were preoccupied with preparation of the national examinations at the end of the year 2004. However, these schools will be visited in the coming period.

*Objective 3: 50 community volunteers from the targeted areas and 60 contact persons from areas where children have been reintegrated empowered to address problems making children to go (back) to the streets.*

17 community volunteers and 20 contact persons were targeted for training during the period. However, **80** community volunteers and **10** contact persons were identified and trained. The programme recruited and trained a bigger number of community volunteers than contact persons. This is because, fewer contact persons availed themselves for the training despite a bigger number having been recruited.

*Objective 4: 200 children from financially disadvantaged families of Nyahururu slums having received non-formal education and as such prevented from running to the streets.*

With the closure of the Non-Formal school which was occasioned by introduction of free primary education, rigorous follow-up was carried out to ensure that former Non -Formal school children remained in formal schools. By the end of the period, **90** children formerly of the non-formal school attended classes consistently in formal schools and sat for the end of term I examinations that coincide with the end of this period (March 2005). This number is much lower compared to the figure of **124** recorded at the time of the closure of the non-formal school. The difference of 34 children is mainly made up of children who moved with their parents to far places, where no follow-up could be done (table 4.3).

During the period, **3** children undertook vocational training in different trades. These were children who did not join formal schools because they felt they were past the age. Two were taking tinsmith and metal work while the third one, a girl, was undertaking a course in tailoring.

## 4.4 Activities

### 4.4.1 Planned Versus realized activities

#### **Street work**

Regular day and night visits were carried out in the streets by the programme staff.

During these visits, social workers:

- Established friendship with the street children for the purpose of inviting them to the rehabilitation centres. **15** boys were admitted into the Drop-in centre in this way.
- Identified sick street children and referred them for medical care at the dispensary. Complicated cases were referred to the District General Hospital. (In the period under reference street children received free medical care on **64** different occasions).
- Detected fresh arrivals on the streets and organize to return them to their homes immediately. **5** children were identified this way over the period.
- Provided counselling and spiritual formation to children who were fully resident on the streets and educated them on personal hygiene.
- Organised football matches which were used as a forum to observe trends in the street. The bigger boys in the streets were formed into a team 'Super Boys' which played in two main tournaments within Nyahururu town; Mayor's Cup tournament and C.C.R (Centre for Conflict Resolution) tournament.

#### **Rehabilitation**

The drop in centre for boys received **15** children for rehabilitation during the year. Some of these were found on the streets during street work while others were committed to the programme through the children's court or through the D.C.O (District Children's Office). Out of these 15 children, **4** ran off to the streets and were later readmitted.

The rehabilitation process took about 6-8 months but there were several cases that took considerably more time due to lack of conducive homes to place them. In the centres, the needs of each individual child are considered when planning the way forward for him/her.

During this period the following rehabilitation activities were carried out in the centres:

- Counselling done by programme staff and volunteers.

- Non-formal learning provided by teachers.
- Recreation activities such as games, long and short trips, crocheting, needlework and educative video shows.
- Formation on Christian values and social norms. This helps the children to fit in the community after re-integration.
- Other household activities like cooking, cleaning and washing clothes were carried out by the children and this gave them a sense of participation and responsibility.

During the period under reference, the programme staff carried out **59** home visits and **101** follow-up visits to children already placed with families.

During these visits they;

- Identified and ascertained the situations at homes of children admitted in the centres and reasons of their running to the streets.
- Counselling the parents/relatives with whom the children were going to stay after re-integration.
- Encouraged the parents, who in most cases were financially unstable, to save little by little, search for manual work or start small businesses e.g. poultry keeping, selling groceries etc.
- Prepared foster parents in all aspects in order to receive the rehabilitated children with tender loving care in their homes. The child, who was fostered during the period under reference, could not go back to the relatives as the home was not found conducive (mother is mentally retarded, father a drug addict).
- Searched with the fostering sub-committee for stable, willing and suitable foster families (foster parents usually cater for all basic needs of the child).
- Identified suitable schools where the child would go after reintegration; schools that were nearby or boarding schools with reduced fees and where good education is offered.
- The visits made to these schools also helped in identification of contact persons who could assist the social workers in making follow-ups on these children.
- Social workers, housefathers/mothers, teachers in the rehabilitation centres, co-ordinator and committee members (when available) met fortnightly to look into the progress of the children as their future prospects were discussed.

### **Rescue cases**

St. Rose Rescue and Rehabilitation centre for girls received **13** girls that were taken in as rescue cases. Most of these were referred to the programme through the children's office, the Nyahururu Police station and members of the community. These girls underwent rehabilitation while in the centre to help them cope with the trauma of rape, defilement and other forms of child abuse. This was done as some of their cases were pending in court.

The rescue cases handled by this component were:

- Rape and defilement including incest.
- Child labour (the most common form being girl house helps)
- Children found in conflict within their own families (usually domestic violence)
- Children in conflict with the law who were committed to the centre through the children's court.

The following activities were done in the rescue centre:

- Counselling done by programme staff and members of staff from the sister programme of Active Non-violence and Human Rights.
- Formal learning provided at a neighbouring school, Maina Primary School. This is because, prior to being admitted in the rescue centre, most of the girls were already attending school. There were **10** girls attending formal education over the period. The other **3** could not join formal school immediately and hence went through non-formal learning in the centre.
- Identification of a contact teacher in the school to help in the follow-up and monitoring of the girls while they were in school during the day.
- Attending of court proceedings for girls whose cases were pending in court. These were the girls who had been raped or defiled. This was done with the assistance of the sister programme of Active Non-violence and Human Rights. Over the period, **2** convictions on the perpetrators were passed. **15** court sessions were attended in the period.
- Recreation activities such as games, long and short trips, crocheting, needle works and educative video shows to keep the minds of the girls occupied as well as act as a stress reliever.
- Formation on Christian values and social norms to help them fit back into the society upon reintegration.

### **Awareness and Guidance and Counselling component**

- 14 teachers of Subukia Primary school were reached and given awareness on alternatives to corporal punishment and reasons making children to run to the streets.
- Community leaders identified 4 parents of potential street children who were counselled. 21 others were identified through community volunteers.
- 6 group-counselling sessions were held for former Non-formal school parents during which issues of child upbringing and domestic violence were handled. 239 individual counselling sessions for the parents were also held over the period.
- Home visits to the parents and regular parent meetings helped to monitor their progress.
- 47 meetings of the parents' self help groups were also carried out during which they made collections for savings and deliberated on group activities and way forward.

### **Non-Formal School (N.F.S) component**

By the end of the period under reference, 90 children had attended formal school through out the first three months (term I) of year 2005. Good support was received from the contact teachers who helped the programme in making follow-ups on these children. This enhanced the collaboration between the programme and the schools where the former non-formal school children were enrolled.

The following activities were undertaken for this component during the period under reference.

- 81 visits to the schools were conducted during the period under reference.
- 282 visits in the homes of the children were conducted over the period.
- Individual counselling sessions for the children with the help of contact teachers.
- 5 group-counselling sessions for all the children were held over the period during school vacations. The children were brought together and engaged in sports activities, games and art and craft. These helped them to relax and relieve stress.

### **Community Capacity building component**

In the period under reference 9 capacity building workshops were conducted for

teachers, community volunteers and contact persons.

### **4.4.2 Other Activities**

- The programme conducted a midterm participatory evaluation process in August 2004. This was aimed at gauging the progress and impact of the programme in the community given that it had reached the midpoint in its second 3-year phase.
- Programme staff members attended two different workshops organised by COCESCI (Coalition of Organisations for Capacity building Enhancements for Street Children Initiatives) in October and November 2004
- An exposure visit was made to two street children rehabilitation homes in Nairobi and Thika in November 2004.
- 16 children formerly of the non-formal school were selected to benefit from a pilot project by the government helping Orphans and Vulnerable children to get uniforms and lunch.
- A community mobilisation exercise to raise secondary school fees for two boys was held in two different communities where the children came from. The community responded positively by agreeing to conduct fundraisings for them.
- The programme attended an Area Advisory Council meeting organised by the District children's office in March 2005. This is a council that addresses the matters of children within the area. The programme is a member of this advisory council.
- The programme attended a stakeholders meeting in March 2005 organised by the Nyahururu District Office to discuss the issue of children living on the streets.

### **4.5 Constraints and Recommendations**

- Low turn up of parents at group counselling sessions hence follow up of problematic cases became difficult. The programme to look into ways of motivating the difficult parents to attend meetings and counselling sessions.
- Reduced group activities and low turn up in group meetings for parents. This has led to the near collapse of this self-help group. It is recommended to look into ways of involving these parents into starting individual income generating activities besides the self-help groups.

- Low turn up of contact persons in the capacity building workshops. Most of these people came from very far places. Look into alternative ways of following up reintegrated children in far places e.g. using the community or children organisations in the areas.
- Difficulties in *following up* non-formal school children who joined schools in places far from Nyahururu. **26** children fall into this category. The programme should recruit reliable contact teachers from these schools to help in the follow-ups of these children.

## 4.6 Organization

### 4.6.1 Staffing

The programme ran with employed staff as well as volunteers (table 2.2 and 2.3). During the reporting period, there was no major reorganisation of staff.

The trainee that joined the programme during the period completed her 6 months contract and left. Also the regular volunteer positioned at St. Rose girls' rescue and rehabilitation centre left after completing her one-year contract. Another volunteer was recruited and took up her position.

### 4.6.2 Networking and collaboration

- The **Nyahururu Police Station** assisted with rescue cases where rape, defilement and other forms of child abuse were reported.
- In **Heaven's Eyes street children programme** collaborated with the programme in ensuring non-duplication of activities within Nyahururu town.
- The **District Children's Office** together with the **Probation Office** assisted in committing children to the programme's centres. They followed up court cases involving children and recommended some to the programme.
- Other stakeholders like **PACE** (Pan African Christian Exchange) Ministries, **Nyahururu Municipality**, were involved in discussions organised by the Provincial Administration (by the District Officer) on matters dealing with children on the streets (annex 2 for more).

## 4.7 Impact

Goal: *To reduce the number of street children in Nyahururu town.*

The number of children in the streets at the end of the previous reporting period was 46. There was a considerable increase during the months September to December 2004, with the number rising to around 70. This was mainly due to the reduced government intervention in matters relating to street children, as compared to the time when the new government took office. More children came to the streets in the absence of threats and harassment from the local authorities.

The increase in numbers was attributed to influx of children from other towns like Nairobi, Nakuru and Nyeri. The number of boys over 15 years on the streets remained relatively higher at 55. There were no street girls below the age of 15 years in the period. The only girls on the streets were 6 aged above 17 years and were no longer posing as street girls but as commercial sex workers.

In relation to the increase in number of children, the programme's intervention helped to check this number through admissions into the rehabilitation centres. The period experienced large numbers of children in the centres throughout, beyond the capacity of the centres. Furthermore, new arrivals on the street were immediately repatriated to their homes.

The follow-ups conducted to the former non-formal school children (all falling in the category of potential street children) indicated that only 4 of them came to the streets when they were out of schools either during school vacations or during weekends. Two of these were admitted in drop-in centre. The other two only appear on the streets during the day. The counselling done on the children and their parents helped maintain these children at home

Awareness, guidance and counselling offered by the trained teachers of the targeted public primary schools played a substantial role in maintaining the children in schools. However a few children still came to the streets during the day due to lack of food.

## 4.8 Future plans

In the remaining period of the project, the programme plans to undertake the following

### **Rehabilitation component**

- Continue to rehabilitate and integrate street children with greater emphasis on developing their talent.

- Mobilize communities to identify more possible foster parents
- Organise courses for community volunteers and foster parents.
- Continue recruiting contact persons in the community to help follow up reintegrated children

***Awareness, guidance and counselling component***

- Intensify awareness for teachers in public primary schools
- Intensify guidance and counselling for parents with potential street children
- Follow up teachers trained by the programme to monitor the implementation of alternatives to corporal punishment.

***Community capacity building component***

- Conduct follow-up workshop for community volunteers in April 2005.
- Conduct 3 group-counselling sessions for parents of former non-formal school children between April and November 2005 and follow up their self-help groups.
- Continue follow up to children formerly in non-formal school.
- Collaborate with the sister programme for Savings and Micro credit to assist the parent groups from Maina village.

## 5.1 Introduction

The period under reference forms the first year in a 3-years (2004-2007) strategic plan, sponsored partly by CMC-AMA from Netherlands.

The goal of the programme is to *reduce the number of incidences of violence and increase the community capacity to deal with issues of justice, peace and human rights.*

During the period under reference, the programme was able to attain most of its objectives. One significant achievement was the campaign against rape and sexual violence on women, an activity that led to sensitisation and awareness to the community on how to react and act on the same. As a result, many cases that were reported to the office had been successfully handled both by the community (volunteers) and the office.

## 5.2 Context

The one-year period under reference went almost concurrently with the second year of the new government administration. The new government gave support to and encouraged human rights education to be carried out to the police and the prisons' staff. It also put effort to decongest prisons and reduce the number of prisoners from the prisons by way of community service orders for minor offenders. A number of those were committed to St. Martin-CSA for work and this gave the programme the opportunity to interact and create rapport with the prisons' administration as well as play a key role in the rehabilitation process of minor offenders.

Even though the new government has been committed to issues of human rights, the year was marked by 3 reported cases in the target area of police brutality or torture with death as result. This shows that the reality and practice at the grassroot level has not yet sufficiently improved.

## 5.3 Objectives

The targets, against which achievements are discussed below, were set for a 3-year period.

Objective 1: Legal aid and counselling  
*120 cases of human rights abuses will have been dealt with successfully through counseling and/or legal aid.*

In the period under reference, Bega-kwa-Bega legal unit handled **49** cases of human rights abuse, against a one-year target of 40 (table 5.1.), with the majority being rape and defilement cases (21). Five cases were completed through legal aid, while the majority of cases are still pending in court (table 5.2.). Counselling was done to all cases of domestic violence as well as rape and defilement. In 11 cases (mainly domestic violence) only counselling was done and/or mediation.

Volunteer lawyers in Nyahururu town took up 5 cases for defence in court.

Objective 2: Community capacity building  
*90 human rights campaigners from the target community will have been empowered to create awareness during 3 campaigns to be undertaken by the programme on issues of human rights violation.*

In the period under reference, **68** human rights campaigners were trained from the 6 zones targeted. Sixty of them were actively involved in planning, organizing and carrying out of the year's campaign, 'BREAK THE SILENCE, SAY NO TO RAPE!', which was held in November 2004. A total of 4,410 people attended the awareness sessions (table 5.3.).

Objective 3: Domestic violence component.  
*100 parents at risk of domestic violence from the targeted areas will have increased their knowledge on proper methods of conflict resolution and management through training and will also have been given skills on economic empowerment through self help group formation.*

In the reporting period under reference, 33 parents at risk of domestic violence from Manguo and Gatero A slums had been targeted. The programme managed to reach and train **55** parents (52 women and 3 men).

Fewer men than women were reached because the men declined to attend the meetings. Activities have been started to involve men in a different way.

## STATISTICS

Table 5.1: Type and number of cases handled by Bega kwa Bega through legal support and/or counselling

| Type of case      | Number    |
|-------------------|-----------|
| Civil             | 3         |
| Rape/defilement   | 21        |
| Criminal          | 14        |
| Succession        | 1         |
| Domestic violence | 10        |
| <b>TOTAL</b>      | <b>49</b> |

Table 5.2: Status of cases handled by Bega kwa Bega

| Case status                                  | Number    |
|--|-----------|
| Completed                                    | 5         |
| Pending in court                             | 27        |
| Under investigations                         | 2         |
| Referrals                                    | 4         |
| <b>SUBTOTAL</b>                              | <b>38</b> |
| <i>Handled through counseling/ mediation</i> | <i>11</i> |
| <b>TOTAL</b>                                 | <b>49</b> |

Table 5.3: Number of awareness sessions on rape and defilement carried out by the trained volunteers, per zone and total number of participants.

| Area         | No. of trained vols. | No. of sessions | No. of participants |
|--------------|----------------------|-----------------|---------------------|
| Nyahururu    | 3                    | 3               | 985                 |
| Mairo Inya   | 12                   | 9               | 1191                |
| Igwamiti     | 7                    | 5               | 133                 |
| Sipili       | 5                    | 5               | 883                 |
| Kinamba      | 20                   | 10              | 331                 |
| Marmanet     | 21                   | 11              | 887                 |
| <b>TOTAL</b> | <b>64</b>            | <b>43</b>       | <b>4410</b>         |

### Objective 4: Institutional violence component

*(i) Students in 8 secondary schools and 1 university campus at risk of institutional violence and 24 teachers from the same institutions will have been trained on ways of preventing and controlling violence in non-violent way.*

Students were trained of six secondary schools (against a target of 3). This was done in a one-day seminar in each school. An estimated 1,800 students were reached during these sessions.

In addition, 38 students from these targeted schools were trained as peer counselors during a 3-days workshop. These peer counselors are very instrumental in arresting unrest in school at an early stage.

A total of 10 teachers (against a target of 8) from 5 different secondary schools were trained in a 3-days workshop.

*(ii) Inmates in 2 prisons will have undergone formation activities and 12 wardens and 12 community volunteers will have been equipped with paralegal, counseling and general social skills to deal with inmates.* Nyahururu G.K prison was the target during the period of reporting. The programme managed to train **8 officers** from Nyahururu G.K prison and **4 community volunteers** who were to help in the formation process of the inmates through human rights education and awareness.

In addition, the programme in collaboration with Kenya Human Rights Commission (K.H.R.C) is organizing a 3-day seminar on human rights for all prison officers of Nyahururu G.K prison.

Two phases of the paralegal course for the prison wardens and volunteers was completed. The third and last phase had to be postponed due to delay in obtaining the consent of the Commissioner of prisons. The trained community volunteers have also not been given permission to start their work with the inmates.

## 5.4 Activities

### 5.4.1 Planned activities versus realized activities

#### **Legal Aid and Counselling Component**

The programme intervened through investigations and follow-ups to cases, which were reported in the office.

In the period under reference, interventions were made in **3 criminal cases** in which the police or prison wardens were adversely mentioned. Investigations were done and collaboration was sought with International Medical and Legal Unit (I.M.L.U), which is still following 2 of the 3 cases. One case was withdrawn on the request of the complainant's family.

Among the child abuse cases handled by the programme, three defilement and two

physical abuse cases were very serious and required specialized medical attention. The defilement cases were taken to Nairobi women's hospital, while the two boys, who had been seriously physically injured by their parent and guardian respectively, were treated at Nyahururu District Hospital. They were placed in one of the boys' centers, run by the Community Programme for Street and Needy Children. Counselling was done to the children by the social worker.

The community lawyer made regular visits to the paralegal outstations once a month to give legal advice and monitor the work of the paralegals. 3 Paralegal meetings were also held by the office to sort out the differences and challenges that arose in the course of the paralegals' work.

#### **Community Capacity Building Component**

The 68 human rights campaigners were trained in a 3-days programme held in 3 different zones in preparation for the anti-rape campaign.

A follow-up visit was made to each zone to assist the volunteers in executing their plans of action, which they made during the training. The follow-ups were also to train the volunteers on the use of different communication materials, particularly on how to reach young children who have been at great risk of child abuse. The campaigners organized awareness in 43 different forums (table 5.3.).

#### **Domestic Violence Component.**

Parents at risk of domestic violence from the two targeted areas (Manguo slum and Gatero A slum) were trained in separate groups on domestic violence and on proper conflict resolution. This was done in a one-day orientation workshop, held in each slum. Each group was given an additional 2 follow-up workshops, also of one day each, to keep the parents motivated and to help them understand and practise what they learned.

The Manguo parents were also involved in the Anti-Rape Campaign by actively participating in the procession in Nyahururu town. These parents formed a self-help group after having been trained on group formation. The group has shown remarkable progress so far and is now preparing to be handed over to the sister programme for Savings and Micro Credit. The group in Gatero A slum is still in the process of formation.

#### **Institutional Violence Component.**

All students in the schools were given 1-day training sessions on institutional violence, conflict resolution and alternatives to violence.

The 38 peer counsellors were trained in 2 separate groups, each with a 3-days programme on:

- Active Non-Violence
- Human/child rights
- Conflict resolution and management
- Basic counselling

Also follow-up meetings with the peer counsellors were done in 3 schools.

Teachers were trained in a separate 3-days workshop with similar topics as those of the peer counsellors.

Paralegal training for the 8 prison officers from G.K prison Nyahururu and 4 community volunteers was held in two phases, each phase taking one week. They were trained on:

- Human rights
- Instruments and standards of human rights
- Human rights enforcement, monitoring and reporting
- Para-legalism.

#### **5.4.2 Other Activities**

- Two one-day awareness sessions on domestic violence and rape and defilement respectively were done to Catholic Women Association leaders (CWA).
- A one-day training was conducted for St. Martin CSA staff on Community Service Orders in conjunction with the District probation office.
- The programme's regular volunteer attended a one-month counselling course on posttraumatic effects of rape, offered by Liverpool VCT Counselling centre in Nairobi.
- The programme participated in mobilizing Nyahururu community for donations such as cash, items like soap, toilet papers, sanitary pads and reading materials which were given to the women prisoners of Nyahururu G.K prison during the international women's day on 8<sup>th</sup> March 2005.

## 5.5 Constraints and recommendations

- Two of the schools targeted and reached during the year were involved in strikes. It is recommended that the programme collaborates with the sister programme for HIV/AIDS Alcohol and Drug Abuse to address drug taking in schools which could be a major cause of school unrest.
- Hearing and disposal of court cases was slow. It was recommended that the programme works closely with the magistrates to ensure that cases handled by the programme do not drag.
- Difficult working relationship with the paralegals because they had not internalised the programmes' approach. The programme would work out ways of motivating the paralegals and enhance spiritual formation to promote the spirit of volunteerism in them.
- Increasing cases of child defilement which the programme attributed to child neglect, domestic violence and drug abuse. The programme will intensify awareness creation and enhance interventions on drugs abuse.
- The third phase of prison wardens paralegal training was put on hold due to delayed consent from the commissioner of prisons. This training will be carried out in December 2005.
- The trained prison wardens did not carry out human rights awareness sessions for the inmates as planned. This is because they are not allowed to talk to the prisoners in a group. It is recommended that the prison welfare officer who has authority to speak to the prisoners in groups be trained in the next phase.

## 5.6 Organization

### 5.6.1 Staffing

The programme ran with employed staff as well as volunteers (table 2.2).

There were a few changes and re-organization of staff in the period under reference. The community lawyer who was acting in the capacity of coordinator left the organization and the assistant coordinator was promoted to be the coordinator of the programme. The then assistant lawyer took up the community lawyer's position. The assistant coordinator trainee who joined the programme within the period was confirmed and is now a full assistant coordinator.

One social worker went on study leave. She was replaced through a new recruitment.

### 5.6.2 Networking and collaboration

The programme closely collaborated with a number of stakeholders in Nyahururu town. These included:

- Nyahururu Law Courts which handled criminal cases
- The District Children Office (DCO) assisted in settling issues of child maintenance and custody and also referred rape cases to the programme.
- The District Probation Officer (DPO) assisted on the rehabilitation process of minor offenders from Nyahururu prisons, who were committed to community service order.
- The Nyahururu Police and Prison Officers supported the programme in the process of training prison officers on paralegalism. Also close collaboration was obtained in matters of investigation into criminal cases.
- Volunteer lawyers took up cases and represented the programme's beneficiaries in court freely.
- Nyahururu General Hospital assisted the programme's beneficiaries to access free medical check up and treatment. The medical officer of health (MOH) has provided and allowed a volunteer nurse to join in the paralegal training course so as to provide services to women prisoners in the Nyahururu (G.K.) prison.

See also Annex 2.

## 5.7 Impact

**Goal:** *A reduced the number of incidences of violence and increased community capacity to deal with issues of justice, peace and human rights.*

A positive impact was observed in the community capacity to deal with cases of rape and defilement. Such cases had been dealt with more adequately than before when reported in the office: e.g. evidence had not been washed and victims were taken straight to the hospital so that evidence against the perpetrator was preserved. This impact could be attributed to the campaign against rape and defilement, which had focused on what to do in case of rape.

Impact of training activities in schools was reported by the school principals, who stated that even though students had gone on strike, these were peaceful demonstrations

as compared to the violent incidences they had experienced in the past, when school property was destroyed. Students became more reasonable and open for discussions. Part of this was attributed to the positive influence of the peer counsellors. These positive results made some school administrations more supportive to the programme, for example by facilitating transport costs for the students attending training and provision of lunch.

### **5.8 Future Plans**

The programme plans to undertake the following in the next year of the project period

- Continue following up the pending court cases and counselling of victims
- Solicit and mobilize more volunteer lawyers to take up cases
- Conduct further awareness, followup and refresher courses for community volunteers in the programme
- Continue mobilizing parents at risk of domestic violence to form self help groups and train these groups.
- Continue training of teachers and peer counsellors in targeted schools and follow up their activities.
- Facilitate formation of ANV clubs in the schools and carry out orientation trainings in the schools.
- Continue training of prison wardens and volunteers on paralegal skills and work out ways of ensuring that they train and counsel the inmates.

## 6.1 Introduction

This reporting period marks part of the final year of the three -year programme phase funded by AES-Italy, which is ending in June 2005. The goal of the programme is a *reduced spread of HIV and improved socio-economic and health status of those infected and affected in the target area*. The target areas comprise a population of about 500,000 people demarcated by ten Catholic Parishes boundaries.

St. Martin CSA launched its Voluntary Counselling Testing (VCT) site in July 2004. This was a major milestone in the fight against HIV and provision of integrated services by the programme. To meet the demands of VCT the programme trained five of its staff and two volunteers on VCT. The period saw the completion of HIV positive children home. The home will provide familial love, care and support to destitute, abandoned and desperate HIV positive children.

The programme remained true to community involvement and participation through capacity building and belief in the integrity and inherent capacity of individual beneficiaries. Volunteers offered their time, energy, skills and material resources in spirit of love and solidarity to add value and worth in the lives of the needy amongst them.

## 6.2 Context

During the period under reference the government intensified anti HIV campaigns at macro and micro level through mass media. The Head of State took an active role in advocating for behaviour change and campaign on voluntary counselling and testing. The ministry of health registered more VCT sites, integrated in other institutions and stand alone, to increase accessibility of the service.

A ray of hope was shed in the lives of People living with HIV/AIDS (PLWHAs) and Kenyans when green light was given to a Kenyan company Cosmos limited by British pharmaceuticals GlaxoSmithkline Beecham to manufacture generics of antiretroviral (ARVs) drugs used in the management of HIV/AIDS.

A government programme was started in hospitals providing ARVs at a cost of Kshs.500 per month, compared to much higher prices previous years. Over and

above, more accessibility of CD4 cell count machines for mandatory test before the onset of ARV therapy at provincial government hospitals was achieved. Nyahuru district hospital opened a centre for comprehensive and palliative care and support for people with terminal illness, including HIV where ARVs are dispensed. Hitherto, it was only the programme that was providing ARVs in the target area.

The ministry of Education provided ministerial guidelines on financial support of orphaned children and came up with policy to ensure HIV+ orphans are accepted in schools as every child has the right to education.

During the period, two Parishes; Muchungui and Muhotetu were separated from Sipili and Kinamba Parishes that were in the Programme catchment's area. This will affect programme logistics and operations.

## 6.3 Objectives

*Objective 1: Seven anti-HIV/AIDS clubs will have been empowered to educate their peers on how to prevent HIV infection and how to live with the People living with HIV/AIDS (PLWHAs).*

During the period **11** new clubs were formed as a result of training 85 club patrons. In total 24 operational clubs had been initiated. Members used interpersonal, one-one relationships to reach their peers with behaviour communication messages. However in a proposal review workshop, a need was identified to shift from training patrons to train Youth AIDS Educators. This was in recognition of government effort to train patrons in school to head HIV/AIDS programmes in schools. Youth AIDS Educators will place premium on hard to reach youth-out-of-school.

*Objective 2: One hundred persons [67 volunteers and 33 Training of Trainers] will have been empowered to educate their peers on how to prevent HIV infection and how to live with People living with HIV/AIDS (PLWHAs).*

During the period 64 new volunteers completed all phases of training offered (HIV/AIDS information, orphans management, home based care and community mobilisation for self help initiatives), 59 others completed all the training started in the previous reporting

period. In total the programme trained **285 volunteers**. **22 Trainers of Trainers** out of 33 targeted were trained. These were mainly representatives of religious groups. In a proposal review, a need was identified to train Community AIDS Educators that are representative of the cross section of general population for effective delivery of HIV/AIDS information, education and communication materials.

*Objective 3: Two hundred People living with HIV/AIDS (PLWHAs) in the target area will have received Home Based Care, continuous counselling and support from the community.*

The programme targeted 200 new PLWHAs each year. This target was found to be unrealistic in light of exogenous factors such as family rejection, stigma and discrimination, privacy and confidentiality needs of PLWHAs, some which are fundamental human rights. **40 new PLWHAs** joined the programme in the year under reference and went public on their HIV positive status. This brought the total number of volunteers the programme was working with during this year to **103**. An additional number of 36 PLWHAs died while receiving the services.

*Objective 4: Three self-help groups of People living with HIV/AIDS (PLWHAs) in the target area will have successfully started activities in support of their members and or their families.*

**Two** PLWHAs self-help groups started income generating activities during the year under reference and received the first grant. Four previously formed groups already received the 2<sup>nd</sup> grant after initiating viable projects with the first grant.

*Objective 5. Thirty-four orphaned children in the target area will have been placed successfully with relatives, foster parents or elsewhere.*

68 new orphans were reported during the year under reference. Part of them was assessed and together with previous enrolled orphans, a total of 278 were supported by the programme in various ways. Through volunteers they were successfully integrated in family school and community life.

*Objective 6: Sixty HIV+ orphaned children will have been cared for in a special home.*

During the period the construction of the home was completed. The programme had identified **22 HIV positive and abandoned orphans** who were temporarily catered for in

the community, awaiting admission in the home. Very destitute children were referred to other HIV positive children homes, elsewhere in the country. The children awaiting admission are expected to join from July 2005 onwards.

## 6.4 Activities

### 6.4.1 Planned Versus Realized Activities

#### **Programme awareness in three new parishes**

Staff, management committee and Base group members through kind and able assistance of parish priests carried out programme awareness in the new parishes. There was a positive response and **96 volunteers** were recruited out of the 60 targeted. This was in an effort to involve other faiths and increase their representation.

#### **Awareness raising campaigns**

Awareness raising sessions were done to organised groups as well as to the general public. In spite of a high HIV awareness level country wide (over 80%), disparities were found to exist between regions, age brackets and within different occupations. The programme used socio-cultural sensitive information, education and communication packages to respond to different needs in a cosmopolitan region. Emphasis was given to advocacy of tried best practices in VCT, prevention of mother to child transmission of HIV (PMTCT), Antiretroviral therapy, Home based care, community orphans care and support, behaviour change communication and campaign against stigma and discrimination of PLWHAs and orphans. Communities were actively involved in planning and organising awareness activities to facilitate identification of predisposing and risky factors and develop multidimensional and multi-sectoral approaches and strategise on how to address them. During the period under reference over 15,000 people were reached (table 6.1.).

## STATISTICS

Table 6.1: Awareness activities done (no. of sessions and no. of participants) divided per type of audience

| Type of audience      | No. of sessions | No. of particip. |
|-----------------------|-----------------|------------------|
| Local community       | 16              | 4,882            |
| Primary schools       | 20              | 4,164            |
| Secondary schools     | 14              | 2,968            |
| Tertiary institutions | 2               | 247              |
| Churches              | 21              | 2,260            |
| Other groups          | 19              | 679              |
| <b>TOTAL</b>          | <b>92</b>       | <b>15,200</b>    |

Table 6.2: Capacity building courses for community volunteers, type of training, no. of sessions and no. of participants

| Type of training       | No. of sessions | No. of particip. |
|------------------------|-----------------|------------------|
| HIV/AIDS information   | 7               | 215              |
| Orphans management     | 4               | 143              |
| Home-Based Care (HBC)  | 4               | 119              |
| HBC refresher          | 4               | 111              |
| Community mobilisation | 4               | 114              |
| Training of trainers   | 1               | 22               |
| <b>TOTAL</b>           | <b>24</b>       |                  |

Table 6.3: Services offered to People living with HIV/AIDS

| Activities                                | No. of sessions (cum.) | No. of PLWHAs |
|---|------------------------|---------------|
| Home-based care                           |                        | 199           |
| Continuous counselling                    |                        | 163           |
| Group therapy                             |                        | 105           |
| Medical care                              |                        | 237           |
| ARV HIV/AIDS mgt.                         |                        | 56            |
| ARV Post exposure prophylaxis: rape cases |                        | 32            |
| Income generating activities              |                        | 80            |

Table 6.4: Number of orphans who received additional financial assistance by the programme, as per level of education and type of assistance

| Level of education | Type of assistance |           | TOTAL      |
|--------------------|--------------------|-----------|------------|
|                    | Fees               | Uniform   |            |
| Nursery            | 12                 | 5         |            |
| Primary            | 13                 | 43        |            |
| Secondary          | 95                 | 2         |            |
| Institute          | 8                  | 1         |            |
| <b>TOTAL</b>       | <b>128</b>         | <b>51</b> | <b>179</b> |

Table 6.5: Number of clients who received VCT services, no. and % who tested positive

| No. VCT clients | No. of clients HIV+ | Percentage |
|-----------------|---------------------|------------|
| 1,565           | 173                 | 11%        |

### Community volunteers

The reporting period was a learning point of the invaluable untapped potential in communities. Communities and volunteers demonstrated their inherent capacity to respond to the needs of the needy among them through self-help initiatives. This was made possible through a series of capacity building training that enabled volunteers offer their skills in orphans' management, care and support to PLWHAs, community and resources mobilisation.

They found need to come together on monthly basis to share experiences and support one another. In the reporting period **24 training courses** were conducted to groups of volunteers (table 6.2.).

### People Living withHAs component

PLWHAs gave the staff and community volunteers' strength and will to "volunteer an extra minute and walk an extra mile to reach them". During the first contact, they looked weak, worn out, vulnerable, low self-esteemed and spoke with a voice that weighed stigma on them. They looked abandoned, rejected and discriminated. After a series of encounters in supportive counselling they grew strong day by day, spoke out on their status and eventually they became a resource to us. They gave HIV/AIDS a human face and an inspiration to others to know their HIV status.

The programme through community volunteers provided home based care, diet support, continuous counselling, group therapy and grants<sup>6</sup> through their umbrella self-help groups. In addition they received medical attention, laboratory tests and Antiretroviral drugs (table 6.3.).The programme recognised their worth, dignity and capacity. They made monthly medical contribution of Kshs. 50 and cost shared on laboratory tests and ARVs. They continued to make savings before and after receiving grants based on ones ability.

<sup>6</sup> Implementation of the grant component for income-generation was done through the Community Programme for Savings and Micro-credit.

### **Orphans component**

The number of children orphaned by HIV/AIDS was on the increase. The programme worked closely with community volunteers who did identification and initial assessments. In conjunction with the guardians, community (fundraising) and ministry of education (bursary allocation) the programme ensured that orphans continued and successfully completed their education to a level of their ability.

They received adequate medical attention, legal, arbitration, moral and social support through home and school visits. A total of **278** children were assisted through the community this year: 273 were integrated with relatives and **3** elsewhere. Out of the 278 children, 179 received addition financial assistance from the programme (table 6.4.).

### **HIV positive orphans home**

During the reporting period the construction of the home was over 90% completed. A community of three Dimesse sisters moved into the home to start running it. A management committee of community members was constituted to prepare for admission of the children and to give future direction. Furnishing of the home, employment of staff and development of admission procedures were initiated by the same committee.

### **VCT Services**

During the reporting period efficiency and effectiveness of HIV/ AIDS services was improved when St.Martin CSA opened a VCT centre. VCT has been acclaimed all over Africa to be the wheel for anti HIV campaign in this decade. It gave individual clients opportunity to evaluate their risky behaviours and develop risk reduction strategies. At least over 80% of the clients identified at least two mode of HIV transmission, 90% what they could do to reduce vulnerability to infection and about 50% portrayed willingness of partner notification and possibility of partner referral.

**1565** persons were tested and **173** resulted HIV positive (11%)(table 6.5). Due to physiological, anatomical, socio -cultural and economic factors more women tested HIV positive than men (64% of those testing positive was female).

### **6.5 Constraints and recommendations**

- *Lack of proper networking* among different stakeholders that mitigate responses and enhance duplication of efforts. It is recommended to continue

liaising with different organisations to learn and have positive influence.

- The *number of children orphaned* and made vulnerable by HIV/AIDS was overwhelming making services to them limited especially to orphans out of school. This situation was most evident in semi-arid areas of Ng'arua zone. It is recommended to increase the number of community volunteers in these areas and intensify community mobilisation. In addition management committee members should take a proactive role in ensuring such orphans get full bursary from the Government of Kenya.
- *Easy availability of HIV/AIDS funds.* Some HIV/AIDS project implementers do not have genuine motives and misappropriate funds meant for those affected and infected, while others use approaches which are short-term and unsustainable. It is recommended to participate actively in constituency AIDS technical committees that approve proposals for funding by the government and ensure funds are utilised judiciously.
- *Lack of enough medical personnel in health institutions* to monitor and follow up ARV treatment, side effects and adherence. Availability of cheaper ARVs has increased accessibility, but follow-up on the patients lacked behind. Lack of adherence will result to drugs resistance and faster progression to AIDS. It is recommended to capacity build volunteers and health workers at grassroots level for effective follow up.
- *Cost of living* went high as a result of exorbitant prices of consumer goods. This consumed small returns made by PLWHAs implementing small income generating projects, making these less sustainable. It is recommended to identify ways of upgrading their projects to keep pace with household expenditures.
- The *workload in the programme* was overwhelming especially due to direct contact with beneficiaries. This was in continuous counselling, Antiretroviral therapy, referrals for medical care and laboratory tests and VCT services. It is recommended to train volunteers in basic counselling skills and other expertise, reduce staff-beneficiary contact and add staff to support existing ones, particularly where VCT centres have been opened.
- *Low capacity in the programme* to respond to growing need for awareness raising and counselling on substance

abuse. It is recommended to initiate capacity building to staff in recognition of the interrelationship between substance abuse and spread of HIV/AIDS.

## 6.6 Organisation

### 6.6.1 Staffing

- During the reporting period, one counsellor and assistant co-ordinator left the programme. A new assistant co-ordinator trainee was recruited for a period of six months and thereafter employed to fill the vacant position. Two candidates were recruited for the vacant post of counsellor to serve a probation of seven months after which one will be employed. The assistant co-ordinator from the Community Programme for Savings & Micro-Credit joined the programme for six months in the outstation to fill the gap left behind by the departed counsellor.
- One regular office volunteer completed his volunteering duration and three new were recruited, one for each zonal office. The programme gave three students opportunity for field attachment. They had life-changing experiences with volunteers and beneficiaries and first hand experience on the ground.

### 6.6.2 Collaboration

The programme placed premium to collaboration and networking within and outside the organisation (annex 2). There was one exposure visit to three HIV positive children's homes. Important lessons and logistical insights were gained in line with St. Martin- CSA HIV positive children's home. Visitors at individual and institutional level were received and opened doors for future collaboration and networking.

The programme was appointed to serve in two committees within the area of project jurisdiction: Constituency AIDS Control - Technical committee and Comprehensive and Palliative Care Clinic Management Board.

### 6.6.3 Capacity building

Staff, base group and management committee members participated in training courses organised by St. Martin CSA aimed at improving competence, efficiency and effectiveness in service delivery and management (table 2.4, page 10). The

organisation sponsored training of five staff on Voluntary Counselling and Testing for three weeks.

## 6.7 Impact

### *Awareness raising component*

HIV prevalence dropped from 13% (last reporting period) to 6.9% in this reporting period in Nyandarua District. The Programme is a major stakeholder in HIV/AIDS projects in this district.

### *PLWHAs component*

The level of 'living positively' and willingness to go public improved compared to previous reporting period. For example, 9 PLWHAs went public on their status in their home area in a public gathering of over 300 people. Death rate of PLWHAs in the programme went down from an average of 8 people to 3 people per month. The occurrences and recurrences of opportunistic infection went down reducing the cost of medical care by 50%.

### *Community mobilization for self-help initiatives*

No volunteer was reported to have moved out of the Programme due to lack of interest or workload. Those who dropped were as a result of moving out of the project area, while three volunteers passed away. The community took active participation and involvement in the lives of orphans and PLWHAs. In the previous reporting period relatives looked upon the Programme to support them in burials of PLWHAs and waiving of mortuary bills. During this reporting period the community met most of these needs. In one of the many fundraising organized by volunteers Kshs 119, 000 was raised towards education of orphans. The Programme received invaluable donation of clothing, drugs and foodstuffs from the community.

### *VCT Services*

Before the launch of St Martin CSA VCT the Programme conducted 35 VCTs per month through referrals. Since then, the Programme conducted an average of 100 VCTs per month about 30% above what is recorded by other VCTs centres in the District. More people got access to other services for example, ART and support groups through the VCT.

## 6.8. Future plans

Being almost at the end of a 3-years programme phase, most of the initially set objectives have been achieved.

- Develop a new 3-years strategic plan with new objectives and activities, with components for orphans, PLWHAs, awareness-raising and advocacy and community capacity building and write proposal for funding by May 2005.
- Continue operating the VCT services and open two more outstations.
- Provide technical advice and guidance to the Talita Kum Children's home for HIV+ children.

# Case

Wamaitha, Kuria and Njoroge are three brothers living in a village called Raitha, within St. Martin's project area of North Kinangop. They were orphaned by Aids at the age of 14, 12 and 8 respectively. Josephine, their mother was a single parent and died of AIDS related illnesses at the age of 35 years, leaving them behind in a one roomed grass thatched hut built by their grandparents. The hut was in a sorry state and was falling apart.

When Josephine died, her son Kuria had just joined a local secondary school known as Mwenda Andu. After some time, the school fees went unpaid and the school administration discontinued his studies. Kuria was not to be accepted back into the school until the school fees arrears were paid.

The area of Raitha falls under a community volunteer called Wambui. Wambui has the responsibility of checking up on beneficiaries from the programme (The Community Programme for HIV/AIDS). At this time while making her follow ups, Wambui learnt about the perils of the family and reported the same to the programme office in the North Kinangop area. The issue was taken up for assessment by the area social worker.

The social worker and Wambui visited the family and later visited the chairman of the local church, where the orphans were members. Through the local administration, made up of the area chief and elders of the village, a community meeting was convened to discuss the plight of the orphans.



The social worker in the meeting (see photo) talked about St. Martin-CSA, its vision, mission and approach and explained to the people the need for solidarity with this family. As a result, a small fund-raising was conducted. Different resources were donated in the form of food, clothes, building materials and money. The money together with the building material collected was enough to construct a decent house for the orphans and clear the outstanding school fees balance for Kuria. The community also provided a piece of land, seed, fertilizer and labour, which was supplemented by the programme and this ensured that the orphans had food at hand.

There after the social worker visited the principal of Mwenda Andu secondary school and discussed the plight of Kuria. A consensus was reached and the principal

offered to consider Kuria for school bursaries, besides giving him manual jobs during school holidays to supplement his school fees. The programme also assisted by paying Kshs 6,000 per year as part of school fees for Kuria and provided counselling to the boy to make him psychologically at peace with himself and his situation.

Today, Kuria is happily continuing with his secondary education and his performance, if maintained, will guarantee him a place in the National Universities. At home the children have become the responsibility of the community and are well provided and cared for. They are no longer in a desperate situation because they know they have neighbours, who care.

## 7.1 Introduction

The reporting year was a period in which the programme increased its client base and activities and settled its procedures and rules.

The goal of the programme is to *improve the socio-economic ability and increase the levels of income of the beneficiaries of St. Martin to cater for their special needs*<sup>7</sup>. The achievement of this goal is made through training, saving and loan facilities.

During the past year the staff of the programme offered saving facilities to 627 beneficiaries, disbursed 49 loans to beneficiaries of different programmes and 71 grants to People Living With HIV/AIDS (PLWHAs).

Due to the socio-economic level of the beneficiaries<sup>8</sup>, the training activities were very important to assure the success of the income-generating activities they invested in. Usually a group is trained for more than six months before its members are allowed to start receiving loans. That is the reason why the programme after three years disbursed loans to only 74 (40%) of the active beneficiaries. Of this 74 beneficiaries, 53 (55%) loanees were running successful income generating activities (IGAs), while 16% was not able to invest the money in any viable project.

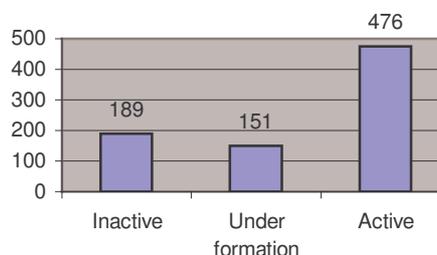
## 7.2 Objectives

*Objective 1: 150 St. Martin beneficiaries will have been prepared to save regularly<sup>9</sup> invest and manage income-generating activities (IGAs) by March 2005.*

The programme is working with a total of 26 active groups, with a total of 627 beneficiaries. Other groups are still under formation by the other St. Martin programmes, while some groups decided to withdraw from the programme.

Approximately **190** beneficiaries among the 476 active clients<sup>10</sup> (40%) (figure 7.1.) are saving regularly and 74 of them received a loan.

Figure 7.1: Activity level of programme beneficiaries



A challenge to the programme is the training attendance of beneficiaries. Despite the training activities offered, some beneficiaries did not internalize the importance of saving or did not sufficient learn how to appropriately manage an IGA. This was partly due to inconsistency in attending training activities. Since October 2004, the staff collected information from the field and the result was that around 60% of the beneficiaries were attending training activities consistently.

*Objective 2: 14 groups will have matured<sup>11</sup> through guidance and training to undertake group activities independently from the programme by March 2005.*

**12 groups** were trained on the entire curriculum of the training manual of the Savings and Micro Credit programme and are mature to undertake activities independently.

During the year the staff faced different problems with some of the mature groups. Issues of leadership, conflicts among the members or mismanagement of funds occurred on certain occasions in very old and organized groups. That is the reason why among the 12 not even one group is completely independent. Follow-ups are still necessary to avoid the collapse of the groups for superficial reasons. In the month of March 2005, three representatives from each mature group

<sup>7</sup> Special needs for parents of children with disabilities include among others: finances for special schooling, medical care and rehabilitation. For People Living With HIV/AIDS these include: medical care and nutrition.

<sup>8</sup> The socio-economic level of the beneficiaries is characterised by low levels of education, self-organisation and initiative as well as limited entrepreneurial skills. Many have limited and unreliable sources of income.

<sup>9</sup> On average the beneficiary is saving money every month

<sup>10</sup> To be active means that the beneficiary is regularly participating in group activities, i.e. trainings, meetings, merry-go round activities etc.

<sup>11</sup> A mature group means, that a group has undergone all trainings in the manual, has functional leaders, a constitution adhered to by members, is saving regularly and the group undertakes its activities by itself.

came together for a three days workshop on issues of responsibility, self-reliance and St. Martin approach. This will help the groups to work towards independency and achieve full maturity.

**Objective 3A: 45 beneficiaries with regular savings will have accessed loans to implement income-generating activities (IGAs) by March 2005.**

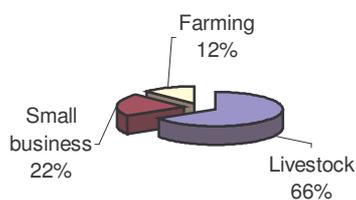
**49 loans** were disbursed during this reporting period and **97** from the beginning of the programme (85 to parents with disabled children, 10 to people affected by domestic violence and 2 to parents with potential street children).

Among the 21 groups (excluding the PLWHAs groups), beneficiaries coming from 16 groups received loans, but compared to the total number of beneficiaries the percentage of loanees is still low: 74 among 295, this is 25%.

Default rate was very minimal: only with one beneficiary (out of 49), the programme was forced to withdraw money from the savings of the guarantors to pay the outstanding balance of a loanee. In addition to this case of defaulting, 12% of the loanees caused minimal delays in loan repayments.

The majority of beneficiaries invested the loan into agriculture related activities (figure 7.2.).

Figure 7.2.: Type of Income generating activities undertaken by the beneficiaries with the help of a loan



**Objective 3A: 65 PLWHAs with regular savings will have accessed grants to implement income-generating activities (IGAs) by March 2005.**

**71 grants** were disbursed in the reporting period (with a total of **88** from the beginning of the programme) to PLWHAs coming from

6 support groups. 38 of them were first grants and 33 were second grants. As per the grant policy, a PLWHA can apply for a second grant if the first was invested appropriately.

Up to date only 10% of the grants disbursed were not invested in the planned activities or did not lead to a successful IGA. This positive result was attributed to the training programme offered to the PLWHAs.

One of the 6 groups was split in three smaller groups due to the fact that the beneficiaries lived very far from each other and spent much money on transport to attend meetings at a central place.

### 7.3. Activities

#### 7.3.1. Planned activities versus realized activities

##### **1. Train 30 support groups according to the curriculum in the training manual.**

Staff trained *30 support groups* during the reporting period, but four of them withdrew from the programme for different reasons. Two groups from Sipili and Ol Moran area, affected by dependency syndrome, left the programme as soon as they realized that the money the programme was disbursing was for loans and not grants. Other two groups collapsed because of internal conflicts and decided to withdraw their savings from the programme's account.

The programme *revised the Training Manual* to make it fitting the needs of the beneficiaries.

##### **2. Revise the loan policy and offer loan facilities to 23 groups.**

In the month of October 2004 a one-day workshop was organized to revise the Loan Policy. Main changes made were on the amount of loans, on the grace period, on the percentage of the loan amount guaranteed by the savings of the guarantors. Implementation started from 1<sup>st</sup> of January 2005, which immediately resulted in a high number of loan applications, a sign that the clients appreciated the new policy.

##### **3. Carryout training needs and socio-economic assessment of beneficiaries through home visits to groups newly enrolled in the Programme.**

During the reporting period the programme made *135 home visits* (50 to parents with disabled children, 41 to PLWHAs and 44 to people affected by violence). Together with earlier conducted home visits (325 in total) interesting information about the type of beneficiaries of St. Martin-CSA was acquired.

83% of 625 beneficiaries are women, 12% are illiterate, the average number of children per a family is six and 13% of them has no land or livestock and could be referred to as the poorest of the poor.

#### **4. Organize one 2-days refresher workshops for leaders of groups already previously enrolled.**

The workshop was organized and carried out in the month of March 2005. 30 beneficiaries attended and the discussions were very enriching. The staff of the programme were able to know better the training needs of these “old” groups, and the participants understood better the need to be independent from the programme in line with the Saint Martin approach. The meaning of a ‘successful Income Generating Activity’ was discussed so as to achieve more collaboration from the loanees during the follow up visits.

#### **5. Provide grants facilities to 6 groups of PLWHAs**

The programme provided grant facilities to 6 groups of PLWHAs. The programme in collaboration with CPHAADA decided to intensify mobilization in Sipili and Karandi communities so that more PLWHAs would join the split groups.

A close collaboration was established between the social workers of Savings & Micro Credit and of CPHAADA programme to enhance follow up visits to the beneficiaries who received grants.

#### **6. Organize and carry out a Participatory Evaluation Process (PEP) in May 2004.**

The PEP of the programme was carried out in the month of May as scheduled. It was a good exercise and 5 external collaborators participated.

#### **7. Organize and carry out Three Years Proposal Writing Workshop in August '04.**

The recommendations of the Evaluation Process were discussed and put into practice in the Proposal Writing Workshop. The programme developed a Three Years Proposal that was approved by the former donor, Credito Cooperativo Bank in Italy. A short seven-months proposal was put in place to carry the programme up to the end of the year activities and start from April 2005 the new Three-Years project.

#### **8. Organize Harmonization meetings with the staff of other programmes of St. Martin C.S.A.**

Harmonization meetings were held every two months with the Community Programme for Persons with Disabilities and once a quarter with the Community Programme for HIV/AIDS Alcohol and Drug Abuse. The programme benefited from these meetings in terms of collaboration in the field. The staff of the programmes now understands each other better and are supporting each other's activities, this is making the work easier for the good of the beneficiaries.

#### **7.3.2 Other activities**

- Programme staff and some management committee attended a series of capacity building workshops organized by St. Martin CSA (table 2.3), acquiring various skills necessary in managing programme activities.
- Programme staff also supported training activities organized by other programmes of St. Martin CSA, including a training for the Marleen project students, a training-of-trainers course for trainees from Barsaloi parish of Maralal diocese and two training courses on formation and management of self-help groups for community volunteers of the Community Programme for HIV/AIDS.

#### **7.4 Constraints/ Recommendations**

- Record keeping is still a challenge at both group and individual level. During project follow up visits only 17% had records; of this percentage few were able to present clear and updated records. Staff need to put more emphasis on the importance of record keeping during group training activities especially for PLWHAs who need to be

trained again on record keeping and leadership.

- The implementation of the new loan procedure has been a challenge during the last quarter of the reporting period. The calculations on the amount of repayments and interest is complex to explain and not all the beneficiaries are able to understand. The need to simplify this information to the beneficiaries as much as possible and give the beneficiaries more time to understand the policy has been identified.
- The programme has experienced some incidences of defaulting and delay in loan repayments with some beneficiaries withdrawing their savings to repay the outstanding loan balance. Staff needs to put more emphasis on training activities relating to project planning, such that if clients plan and invest in the right way such situations will be minimal.
- During this period, the programme experienced some clients withdrawing part of or the whole amount of their savings for various reasons. This hinders the other members of the group from accessing a loan, as these savings would have acted as guarantee. It's necessary to look deeply into the issue and how to solve it and more so do more training on the importance of savings.

## 7.5 Organization

### 7.5.1 Staff changes:

There was a slight staff re-organization during the last quarter of this reporting period. The Coordinator, a lay-missionary from the Padua Missionary Office, approached the end of her 3-years period of volunteer service in St. Martin-CSA and stepped down from the position to continue the last half year as an advisor in the programme. The Assistant coordinator was promoted to serve as the new coordinator. One of the trainees in St. Martin-CSA was appointed as the Assistant Coordinator. The programme also recruited a new regular office volunteer; the contract of the former volunteer expired in February 2005. The programme also had 2 students on attachment.

### 7.5.2 Networking

To achieve success, the programme networked with different institutions at various levels especially the Ministries of

Agriculture (through agricultural extension officers) and Tree Is Life project in Nyahururu Diocese, which supported programme staff on training in livestock & crop husbandry.

## 7.6 Impact

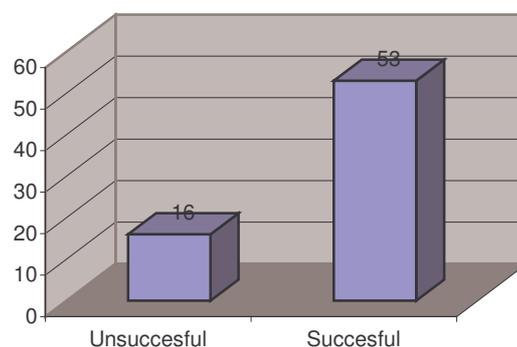
The goal of the programme is *to achieve improved socio-economic status and an increased level of income among the beneficiaries of St. Martin-CSA to enable them respond to their special needs.*

Out of the 476 beneficiaries actively involved in the programme activities (training, savings & loan facilities), *190 (40%) of them were empowered through training to develop a saving culture and save regularly.* These savings are an investment to meet the future needs of their families.

Through training, beneficiaries were equipped with knowledge and entrepreneurial skills, which they applied in managing their income-generating activities. Some also adopted agricultural skills on their farms. This improved agricultural yields on their farms and the surplus is sold to generate income.

From the start of the programme 97 loans were disbursed to 71 beneficiaries to start various income generating projects. Out of the 97 loans for projects, 69 were assessed for their success level and *53 (77%) of them could be rated as successful<sup>12</sup>* (figure 7.3).

Figure 7.3: Percentage of income-generating projects, supported by a loan, which were successful or unsuccessful.



<sup>12</sup> Successful IGA means that the IGA is appropriate & sustainable, generating income and the client is managing the IGA well, is marketing the products to generate profits from the IGA, has good income-expenditure records.

28 project loans could not be rated because either the loanees received the loan recently making it impossible to judge the performance of the project or they left the group or shifted from the village for various reasons.

The success of the projects enabled the beneficiaries to respond to the special needs<sup>13</sup> of their families. To some beneficiaries working on their project was a form of employment thus reducing their frequency to go for casual labour as they did before. This improved their self-esteem and renewed hope.

*34 (68%) out of the 58 PLWHAs, who received grants, successfully invested the money in their projects. The income generated from these projects helped them to meet their special needs such as improved nutrition & medical care.*

The programme is optimistic that the impact assessment study planned for in the mid of the next proposal period (August 2007) will provide adequate information on how the programme has influenced the lives of the beneficiaries It's working with.

## 7.7 Future Plans

- Facilitate training activities to beneficiaries in 50 self-help groups to build their capacity to be entrepreneurial and start income generating activities.
- Make follow-up visits to loanees, assess the progress of their projects and address any challenges they experience.
- Identify opportunities for exposure visit and organize for the same.
- Intensify training on agriculture in collaboration with Ministries of Agriculture & Livestock and Tree Is Life.

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<sup>13</sup> Special needs for parents of children with disabilities include: special schooling, medical care and rehabilitation. For People Living With HIV/AIDS it includes: medical care and nutrition

## ANNEX 1: LIST OF MANAGEMENT COMMITTEE MEMBERS, STAFF AND REGULAR VOLUNTEERS

### St. Martin C.S.A

#### Trustees

1. Bishop Luigi Paiaro
2. Fr. Borsa Sandro
3. Fr. Gabriele Pipinato

#### Management Board

1. Irene Njeri Wamithi
  2. Raphael Kang'ethe
  3. John Muthee
  4. Jedidah Mwangi
  5. Paul Kariuki
  6. Benson Maina
  7. John M. Kariuki
  8. Ignatius Wang'ombe
  9. Peter Kariuki
  10. Lydiah Waiya
  11. Frank Wanyeki
- Sr. Peris Mwaura (in attendance)

#### Directors

1. Fr. Gabriele Pipinato
2. Ans van Keulen
3. Thomas Kihara
4. Mwangi Njoroge

#### Secretariat

1. Elishiba Wanjiku
2. Pauline Githinji

#### Accounts Department

1. Peter Gakunga
2. Stephen Gikonyo
3. Esther Wachira
4. John Maina Githinji
5. James Mbuthia
6. Ibrahim Kiragu (Regular volunteer)
7. Eunice M. Mutahi (Regular volunteer)

#### Public Relations Department

1. Cecilia Ndegwa
2. Claudia Guglielmi
3. Hilda Wachira (Regular volunteer)

#### Training and Facilitation Department

1. Nathan Kirwa
2. Gathoni Njenga

#### Human Resource Department

1. Vacant

#### Properties Manager Department

1. Vacant

#### Community Mobilization Department

1. Vacant

#### Security Department

1. Thomas Lusimba
2. Joseph Kinyua
3. John Mwaura
4. Ramu Lengewa

5. Salvatore Kariuki (casual)
6. Peter Mbugua (casual)
7. Omari Karigi (casual)
8. Peter Wang'onde (casual)
9. Pantalione Kamau (casual)

#### Transport Department

1. Martin Wamugunda
2. Samuel Njagi
3. Peter Gichohi
4. Elijah Maikia
5. Georges Maina
6. Joseph Lukio (casual)
7. Mark Kame (casual)
8. Patrick Kimani (casual)
9. Simon Githinji (casual)

#### Support Staff

1. Janet Mbaiye
2. Alice Wangechi
3. Wilfred Mwangi
4. John Maina
5. Paul Nderitu (casual)
6. Peter M. Kabau (casual)
7. Ann Wanjugu (casual)
8. Abdul Jabal (casual)

#### Leather Work Project / Curio shop

1. Job Meijer
2. Anthony Kivuva
3. Augustino Alikutepa (casual)

#### Volunteers Mission and Youth

1. Vera van der Baard
2. Joris Obdam

#### Volunteer consultant

1. Roeland Q. Kriense Lokker

### Community Programme for People with Disabilities

#### Management committee

1. Paul Kariuki
2. Jacinta Wanjiru Kiboi
3. Mary Kiboi
4. Mary Murage
5. Charles Njiri
6. Julius Gitonga
7. Francis Kimani
8. George Gathungu
9. Wangui Kibe
10. Peter Wakahora.
11. Vacant

#### Staff Members

1. Peter Gichuru
2. Damiana Koki
3. Charles Mathenge
4. Mary Kihara
5. David Wanderi

6. Peter Ndegwa
7. Monicah Mbuthia
8. Luca Ramigni
9. Josephine Mureithi
10. David Gikonyo
11. Rachael Wachera (Study leave)
12. Patricia Oyuga

*Regular volunteers*

1. John Mureithi
2. Francis Thuku
3. Catherine Wanjiru Mureithi
4. Tabitha Wanjiku Maina

**Community Programme for Street and Needy Children**

*Management Committee*

1. Benson Maina
2. Gervasio Gatero
3. Damaris Njeri Mwai
4. Mary Wahome
5. Samuel Murage
6. Julius Karanja
7. Grace Mburu
8. Eunice Muigai
9. Grace Wainaina
10. Anthony Wainaina
11. Martha Mwangi

*Staff members*

1. Sr. Mary Mwangi
2. Sammy Nyutu
3. Agnes Gicheru
4. Sammy Nderitu
5. Priscilla Ndogo
6. Joan Kahihu
7. Peter Kinyua
8. Titus Ndogo
9. Paul Kiruri
10. Peter Nderitu (study leave)
11. Jane Kamau

*Regular Volunteers*

1. Grace Nyambura
2. Vacant

**Community Programme for Active Non-violence and Human Rights**

*Management Committee*

1. John Kariuki
2. David Kamanda
3. Joseph Wanjohi
4. Zachary Onkware
5. Maureen Njagi
6. Leah Murugi
7. Phylis Nyambura
8. Judy Lukio
9. Samuel Wanyoike
10. Albert Githuku
11. Vacant

*Staff members*

1. Dianah Mueni

2. Beatrice Gikonyo
3. Peter Njuguna Ndung'u
4. Susan Gathu
5. Esther Maina (study leave)

*Regular Volunteers*

1. Justina Kilonzo

**Community Programme for Savings & Micro-Credit**

*Management Committee*

1. Stephen Waweru
2. Margaret Mugo
3. Mary Muthoni Njau
4. Peter Oketch Olongo
5. Leonard Miano Mwangi
6. Paul Mwaniki
7. Jane Muya
8. Ignatious Wang'ombe
9. Catherine Kariuki
10. Stephen Waithaka
11. Esther Muthee

*Staff members*

1. Laura Di Lenna (Advisor)
2. Windrick Mukoshi
3. Agnes Karau
4. Susan Gichohi
5. Daniel Mutahi

*Regular Volunteers*

1. Peter King'ori Njuguna

**Community Programme for Aids, Alcohol and Drugs Abuse**

*Management Committee*

1. Peter Kariuki
2. Mwai Kabiru
3. Margaret Kuguru
4. Charles Mathenge
5. Rose Ndegwa
6. Sammy Mbugua
7. James Muriithi
8. John Mwangi
9. Rose Kinoti
10. Paul Wachira
11. Jane Kinyua  
Benson Mbuthia (in-attendance)

*Base Group – North Kinangop*

1. Charles Mathenge
2. Peter Wahungu
3. Monica Njohi
4. Moses Kamau
5. George Matu
6. Peter Kangiri
7. Margaret Waruru
8. Bismac Maina
9. Vacant
10. Vacant
11. Vacant

*Base Group – Ng'arua*

1. Peter kariuki
  2. Emmanuel Mwangi
  3. Isaac Kigo
  4. Magdalene Thuni
  5. Benson Mbutia
  6. Sophia Chege
  7. Grace Muthara
  8. John Wamaguru
  9. Vacant
  10. Vacant
  11. Vacant
- Mary Waitaha (in attendance)  
Ann Kariuki (in attendance)

*Staff members*

1. Thomas Sangoro
2. Samuel Murage Maina
3. Eston Wahome
4. Martha Githinji
5. John Maina
6. Nancy Nyaga
7. Francis Gitonga
8. Peter Kariuki/ Mary Kamau

*Regular Volunteers*

1. Joyce Wambui
2. Mary Ibai
3. Jecinta Kanyoko

**Talita Kum Childrens' Home**

*Management committee*

1. John Njoroge
2. Alice Kimemia
3. Millicent Kairo
4. Sr. Catherine Gathuma
5. Fr. Simon Mwangi
6. Frank Wanyeki
7. Rose Ndegwa
8. D.C.O – Nzioka
9. Ernest Ng'ang'a
10. Sophia Chege
11. Monica Njohi
12. Nicetta Njohi

*Staff members*

1. Sr. Magdalene W. Mwangi
2. Sr. Anne Wanja

**Trainees/regular volunteers who left 2004/5**

1. James Ndicho
2. Beth Wanjiru
3. Pamela Kiara
4. Tobias Kamau
5. Lucy Mbutia
6. Peter Kariuki
7. Mary Wanjira

**Staff members who left in 2004/5**

1. Philip Lumumba
2. Raphael Kariuki

3. Peter Karanja

**Committee Members who have left 2004/5**

1. James Ndung'u Kageche
2. Nderitu Macharia
3. Jane Matu
4. Lucy Marietta
5. Fredrick Kuguru
6. Mwangi Njoroge
7. David Ndegwa
8. Sr. Magdalene W. Mwangi
9. Fr. Peter Mbaaro
10. Rev. Joseph Wainaina
11. Francis Thuku
12. Titus Ndogo
13. Peter Wamae
14. Rachael Wanjiru
15. James Ndegwa
16. Jacinta Gatiba
17. Joseph Mwangi
18. Ann Kariuki
19. Cecilia Njoroge
20. Waithera Njogu
21. Agatha Thuo

**Base Group Members who left 2004/5**

1. Joseph Waiganjo
2. Amos Ngatia (Deceased)
3. John Kibuthu
4. Sr. Pascalia

## ANNEX 2: COLLABORATION

### St. Martin C.S.A

- Fontana Foundation (Italy) Fundraiser and net worker of St. Martin- C.S.A in Europe.
- Missionary Office of Padua (Italy): Provision of a priest and 2 lay-missionaries, fundraiser.
- Atantemani (Italy): Community solidarity group doing awareness creation and fundraising for St. Martin- C.S.A in Italy.
- CMC/PSO (Netherlands): Provision of personnel assistance (2 volunteers: 1 senior, 1 junior position).
- Manos Unidas: financing partner sponsoring St. Martin-CSA hostel.
- Local government: St. Martin- CSA is represented at various forums at the district level: District Development Committee, District Disaster Management Committee, District Anti-Corruption Committee. There is also collaboration with the Municipal Council (Local Authority Service Delivery)
- Nyahururu Catholic Diocese
- Central Rift NGO's Network: St. Martin-CSA is a member.

### Community Programme for People with Disabilities

- CUAMM (Italy): major financing partner, provision of physiotherapist. Through financial assistance from OPSA: Home for Disabled in Padua, Italy.
- Liliane Foundation: sponsoring of individual children.
- The Ministry of Health, Nyahururu District Hospital and various dispensaries in the area of jurisdiction: TBA practicals, general consultations.
- Ministry of Education- District Education Officer (DCE)- Nyandarua & Laikipia, EARC- OI, Kalou: assessments and referrals to special units.
- North Kinangop Mission Hospital: referrals for ENT and orthopaedic cases.
- Disabled Children's Homes in OI, Kalou: referrals for orthopaedic cases.
- Rural Eye Clinic- Dr. Donato for eye screening and treatment.
- Jaipur (Nairobi Rotary Club) for wheel chairs.
- N.E.C.B.O: referrals for epileptic cases.
- Kikuyu Orthopaedic and Eye Hospitals for orthopaedic cases and eye treatments
- Special Schools- namely;
  - Isiolo School for the deaf
  - Nanyuki Rural Training Centre
  - Wandumbi Special School for the mentally handicapped.
  - St. Lucy Special School for the blind- Meru.
  - Tumutumu School for the deaf.
  - Nyandarua School for the deaf.

- Nyandarua Rehabilitation and Vocational Training Centre. (referral of children for special education)
- Wamba Mission Hospital for the referral of burns.
- Nakuru Hills Special School for the Mentally Handicapped (schooling for the mentally handicapped)

### Community Programme for Street Children and Non Formal School

- Cordaid (Netherlands)/ Kindernothilfe (Germany): main financing partners.
- Nyahururu Municipal Council: Collaboration in screening of the children that have been arrested, for joining St. Martin- CSA or other correctional Institutions.
- Nyahururu Law Courts: Committing children to St. Martin-C.S.A
- District Children Officer- D.C.O.: Settling disputes among parents, liasing on behalf of the programme with the courts, referring of rescue cases to the programme.
- Pendekezo Letu, Rescue Dada, Kwetu Home of Peace: for exposure visits
- District Probation Office: committals of children to St. Martin- CSA.
- Public School Teachers: keep an eye on programme's children in their school.
- Pandipieri Street Children Center (networking and exchange expertise)
- Cocesci, Nairobi: upgrading of programme staff, exchange of expertise.
- Nyahururu District Hospital: treatment of children, waiving of bills.
- St. Gerald Boys Centre (Mweiga) : referral.

### Community Programme for Active Non-Violence and Human Rights

- CMC/AMA (Netherlands) : Financing partner
- Officers commanding Police Station (OCS) of Nyahururu and Rumuruti: collaboration in the investigation and intervention of rape and defilement cases as well as domestic violence cases. Assistance in criminal prosecution and watching brief in matters of interest in court.
- Officer in charge of Nyahururu prison: Unlimited access to beneficiaries in prison and remand was provided. Training of prison wardens by programme.
- Medical Officer of Health (MOH) of Nyahururu: Examination of survivors of violence. Doctors to testify in court when requested. Waiving of medical fees of very needy beneficiaries.
- Federation of Women Lawyers in Kenya (FIDA-Kenya): Gender mainstreaming/sensitization, legal awareness, women rights, property ownership, succession and referrals of

- survivors of domestic violence for counselling and legal redress.
- Kenya Human Rights Commission: Human rights Education and advocacy, civic education, intervention on human rights violation of criminal nature through referrals.
- Catholic Justice and Peace Commission and National Council of Churches of Kenya: civic education, peace building, legal education (justice & peace) and elections violence monitoring.
- Legal Advice Centre (Kituo cha Sheria): legal education, human rights advocacy, and referrals for victims of human rights violation for legal redress.
- International Justice Mission: Legal intervention (through investigation, education and representation), training on counseling of torture victims and legal rights.
- Nairobi Women's Hospital- treatment and medical checkup of defiled/sexually abused children.
- D.C.O (District Children Office- Nyahururu): Helps in solving family disputes related to child maintenance and custody. Refers Rape and Defilement cases to the programme.
- Chemichemi ya Ukweli ( Wellspring of Truth): Active Non-violence Training, Human rights advocacy and peace building.
- Legal Resources Foundation (L.r.F): provisions of paralegal training for community volunteers.
- Child Rights Advisory Documentation and Legal Centre (CRADLE): staff capacity building on issues pertaining to children in conflict with the law and children in need of protection by the law. Referrals.

#### **Community Programme for HIV/AIDS Alcohol and Drug Abuse**

- AES (Italy): major financing partner.
- National AIDS Control Council: financing additional activities.
- Ministry of health: provision of equipment (VCT) and information of HIV/AIDS; referrals of cases (to and fro): waiving of medical bills for needy beneficiaries; provision of volunteer personnel; follow-up of patients on ARVs.
- Catholic dispensaries of Nyahururu , Ng'arua , North Kinangop, Sipili and Ol Moran Catholic Hospitals: referrals (to and fro); use laboratories on VCT; volunteer personnel; provision of office space (NKCH).
- Ministry of education, boards of governors and head teachers of schools; provision of bursaries to needy orphans, partly waiving of fees, provision of social and emotional support to orphans; provision of teachers for TOT training and anti- HIV/AIDS youth club patrons.
- Private Physicians and pharmacists; referrals (to and fro); provision of discounted services.

- Parish priests: community mobilization; provision of venues.
- Asumbi Treatment Centre: referrals of chemical dependants
- Oyugis Integrated project: exchange of expertise.
- Child Welfare Association Nyahururu.
- Save the Children Canada: upcoming collaborator in community mobilization in Kinangop- Rights of Orphaned Vulnerable Children.

#### **Community Programme for Savings and Micro-Credit**

- Co-operative Bank of Padua (BCC-Dell'Alta Padovana): major financing partner.
- Ministry of Agriculture: technical advice to beneficiaries with agricultural projects.
- Tree is life, Nyahururu : Provision of Agricultural training to the beneficiaries.