

## SIX MONTHS REPORT



January - June 2018

Dear Stakeholders,



I take this opportunity to share with you our progress report for the last six months. We have registered a tremendous achievement in this reporting period ending JUNE 2018. It is the first semiannual report in our three-year strategic development plan. What began a few years ago as an education center offering only education to vulnerable children has developed into a transformative community development program.

I have to register my sincere appreciation to all our esteemed partners and donors to be specific; for your undoubted support which has enabled us to move this far.

I must thank all stakeholders who in one way or the other extended their hands, I am very happy for the support we have received from our esteemed donors and our beneficiary.

I extend my sincere gratitude to IMANI Foundation, FEMI Foundation, TALUD, PETER van VLIET Foundation, KOORNZAAYER Foundation, ZERO KAP, Catz Charity Foundation; your continuous support to this program has given hope to many families who were hopeless.

It is this support that we expanded the program and now report the activities rolled out in Kamasengre community of Rusinga West. We now target all the seventeen villages in Rusinga West.

In the previous years we have always presented to you the work we did to transform the lives of children registered in our education program at VFM, however 2018 we have serious partnerships with other schools in the community, impacting the lives of over 1000 children. Our efforts increased by over 70% due to the available resources.

In any set up there are challenges, these achievements were not realized in a silver plate, to mention but a few, our education program especially the school was never smooth with new government policies. The new curriculum design is just amazing government thought but it faced out all the books that we bought just one year ago. We kept our promise to offer children very friendly services and thus we appreciate the efforts you made to support this activity. The community involvement increased and as we monitor our progress closely we are sure the uptake and practice will increase, and our sustainability plan of community takeover will be realized at the end of the program.

In partnership with other local stakeholders and other partners like Free Kenya Foundation, the community has gained new development skills and we realized behavior change. Young women are have changed from offering cheap labor at the lake where they could offer sex for fish to vocational skills and we have seen 9 women in dress making, and over 50 young women in mat weaving. So many community members have involved themselves in farming and as things stand now families will eat because the harvest is guaranteed.

Our economic empowerment program picked so well, and I must applaud Zero Kap for supporting this initiative. Poultry farming is embraced, poultry feeds are made available at VFM and small farmers are already buying, groups in horticulture are already productive.

As we took to our community health activities, we never knew adult populations would demand the services, our focus was children, we called for more partnerships and through the support from the ministry of health. We achieved more with increased medical supplies and our joint community health outreaches.

I was never alone in this long walk, I only offered leadership to a competent group of individuals that I work with, I cannot forget to applaud our program Manager and the entire team for the work well done. The teaching staffs have proved their worth by excellently implementing the new curriculum to discretion of the Ministry of Education. Our school is rated the best in the island by ministry- thank you Millicent for your leadership.

Involving community structures has adversely strengthened our service delivery to this community, community health volunteers (CHVs), beach management units (BMUs), village elders, church elders, administrative officers and opinion leaders. This groups in our various meetings supported us and community entry is never a challenge.

We are looking forward to continuing our good teamwork of ensuring we achieve our vision.

*What we do together matters, it is the little things we do together and for each other that makes the community matter. Thank you for being part of this community and be blessed.*

## From the Program Manager

Dear Stakeholders,



*Mr. Philip Ongeru*

I feel the pride to write and share our enormous achievement and experiences through this first semiannual period of our three years strategic planning period. Our planning period for the next three years up to 2022 began with a single step in January 2018.

As we celebrate our international support from our various partners i.e. FEMI Foundation, Talud, IMANI Foundation, Koornzaayer Foundation, Peter van Vliet Foundation, Zero Kap, Catz Charity Foundation, Free Kenya Foundation, various national and county government agencies and all other stakeholder; we also celebrate the efforts of all our able staffs whose endless commitments fueled the achievements.

A team of fourteen able teaching staffs led by Madam Millicent Odhiambo has shown their ability to offer friendly teaching services to 222 children enrolled in our school.

Our community projects are robust as they are done by a robust team of three social workers, one program nurse and two experienced facilitators.

We also celebrate the work of all our support staffs and volunteers whose work has contributed to this report. We therefore report a steady development and performance culture characterized by strong employee engagement, teamwork, the drive for community service excellence and accountability for our semi-annual results.

We continue to deliver on our vision of improving the lives of vulnerable children and their families in Rusinga Island. We report an increased efforts and willingness of our beneficiary to partake the program. Families continue to thrive in activities that ensure their wellbeing. In this first semiannual report we present our results that we achieved as a team- you and us.

It was great working as a team involving every stakeholder was our strategy and with everyone on board we managed to deliver our planned objectives.

We adopted integration as our tool to achieve maximum outcome, our services we layered, and we set a minimum of four project to a target beneficiary.

As we move forward we have in place our monitoring and evaluation framework, this will direct our implementation and as we roll out our activities, we shall ensure that all our activities are done to achieve the desired impact.

Thank you

## Acknowledgement

This year was not ordinary in our programming, a lot of work has been done compared to last year, we expanded our work to reach out to other community members who have no direct



link to our school. This work was achieved as a result of what some of the people listed here below.

IMANI foundation, we have to applause the efforts we have received from you both financially and technically. The director Harrie Oostrom has been very instrumental to us, we appreciate.

We acknowledge the support from KOORNZAAYER foundation, the investment that stands currently at Joost Smit Learning Centre has been achieved through their support. We say thank you for the support our food security initiative through Free Kenya Foundation.

Peter van Vliet foundation is truly a family that embrace child wellbeing. Without the support from this family, our achievements would have not been realized.

We embrace and acknowledge the support we have received from FEMI foundation entirely for giving our community a priority. We have recorded a lot of achievement through their support. After two of our members were supported to learn from Tanzania, our activities have been given a new face. Financially we have been supported to do more to the community.

Calling TALUD in this course is meaningful to us, we are not regretting having you in our circle of potential stakeholders, the financial support we have received is a reason for our achievements.

If it were not for the support from Catz Charity Foundation we would have not realized the total community led sanitation- six VIP Latrines is appreciated.

We would not be implementing anything in the absence of our community members, children have played a great role in our work, wherever they uttered a word it was regarded. They have supported the implementation in many ways, care givers and parents whose efforts have enabled our success.

We acknowledge the support of various players whose commitment and efforts saw the achievements that we have realized in this semiannual report. If have not mention you it is not because we have disregarded your efforts, but it is because your effort was bigger and we only pray for your wellbeing.

## Semiannual 2018 report

### Background information

Victoria Friendly Montessori is a community-based program located at Rusinga Island in Kenya (VFM). The program idea was conceived in 2005 to support the orphaned and needy children in Rusinga island community to meet their unmet basic needs. With philosophy of adding days into the lives of destitute children, the program improves lives of vulnerable children who have lost their parents to HIV/AIDS, malaria and other deadly diseases, it has remained and stood out as spring of Hope to many hopeless children and their families. Many children have remained deprived, excluded and vulnerable to health risk, food insecurity improper education, improper clothing alongside shelter and other basic needs

With population of 222 children 14 teachers, the program in an amazing way has been able to give a proper package of an integrated early childhood development education with a Montessori foundation, hope and peace of mind to this special group of children. The rationale behind the program has since remained to giving hope to the destitute children in two ways; **directly and indirectly through projects that target them through their caregivers/ parents.**

As a way of ensuring the holistic development of these children, the program has considered rolling out sound projects to meet their needs: this ranges from direct inclusive education, feeding program, and school-based health activities and indirectly through WASH, food security and economic empowerment. VFM continue to implement our activities across five strategic issues targeting children both primarily and secondarily through the community member who are their parents or caregivers

This semiannual report presents our achievement, challenges and lessons learnt in the outlined activities namely;

1. Education
2. Health and Nutrition
3. Food security/ Agriculture
4. Economic empowerment
5. Water Sanitation and Hygiene

### *Our vision*

Working towards a society in which all children are able to live dignified existence with equal and just access for their future.

### *Our mission*

A happy children center endeavor to improve the situation of orphans and vulnerable children by providing care and protection, guide the re-integration process to the society and address the factors leading to the situation.

## Core values

As VFM family we are bonded by the following principles/values:

- (a) **Accountability** - at VFM we are accountable to all our stakeholders, we believe that any resource given to us is a self-sacrifice by the giver.
- (b) **Stewardship** - children according to us are innocent and gifts from God, we therefore feel proud as we serve them and their families.
- (c) **Transparency** – it is also our belief that many negative questions from stakeholders are sign of mistrust and suspicion, we therefore do our business in a way that all our stakeholders understand.
- (d) **Partners** - *“we can do more together than we can on our own”* this is our motto that in partnership we can do much. We therefore value partners and partnerships as we strive to impact the lives of vulnerable children.
- (e) **Voluntarism** - it is in our hearts that what we do can only be paid by God but can be appreciated by man

## Introduction:

The past six months Rusinga experienced a well distributed rainfall and with the presence of Victoria Friendly Montessori and her partners, communities have promising harvest. We very sure we have seen signs of improved feeding habits as food consumptions at school has reduced.

This report takes into account all the activities done within the past six months between January 2018 and June 2018 in the social work department, Education, Feeding program, health, water, sanitation and hygiene and food security.

We recorded a number of activities that were geared towards improving livelihood of children and their families. Children are always our primary target and all our activities are directly or indirectly implemented to ensure their wellbeing.

This semiannual report is the first one in our three years strategic planning period. It reports several activities that we have extended to the entire Kamasengre West community.

This report is presented in chapters as outlined in our activity plans. Integration approach was used to ensure service layering.

Chapter one outlines activities that we designed for improving the economic status of the community. Economic empowerment is key in our programming as it aims to ensure our sustainability.

Chapter two reports on sustainable livelihood and resilience- water sanitation and hygiene is covered in this chapter.

Chapter three records achievements in our social services- all activities implemented to ensure social well-being of the community.

Chapter four and five reports health activities and nutritional health respectively while chapter six outlines education and educational development.

## CHAPTER ONE

### SOCIO-ECONOMIC EMPOWERMENT

Improved socio- economic status of the community for sustainability.

**Sustainable livelihood:** the overall objective of this is to promote participation of children, youth and adults in initiatives for adequate food and household income. Specifically, the program aims to support communities increase farm production through adoption of good agricultural practices; sensitize and support community initiatives on soil conservation and agro-forestry; strengthen the capacity of communities to seek technical support and devolved funds from the government; strengthen the capacity of farmers to engage in market led production and value addition; and promote access to community based savings and lending opportunities.

#### Planned activities

Strategic Objective One: Improved socio-economic status of the community for sustainability.			TARGET June 2018	ACHIEVED JUNE 2018
Activity 1.2.2b: Support groups with loaning seed capital @ 1000 per member for 20 members	Capital	Groups	15	9
Activity 1.2.3 a: Communities are involved in vocational skills through apprenticeship.	Trainees	people	30	61
Activity 1.2.3b: Support apprenticeship graduates with start- up capital	Capital	people	0	0
Activity 1.2.4: Support groups with poultry units.	Units	Groups	4	4
Activity 1.2.5: Support groups with irrigation kits for horticultural production.	Kits	Groups	4	4
Activity 1.2.6: Support one group with vaccine store for poultry and other livestock disease management.	Store	Groups	1	0
Activity 1.2.7: Support one group with poultry feed processing unit for poultry feed production.	Unit	Groups	1	1

#### Village Savings and Loaning Associations- VSLAs (Table-Banking)

In this two quarters we managed to have 15 groups actively participating in the loaning activities. The VFM team did the trainings for the members. After the trainings members have gained a lot of interest in this activity and each is working hard to increase the savings. A total of 160 members have been boosted with Ksh 1000 for the loaning from VFM.



## Apprenticeship

9 Trainees have been recruited in the Inuka Dress Making Group. The training period is 6 months. After this period, one is engaged in the group and based on the agreement made one is able to get some income for a living. In mat weaving a total number trained in the two quarters has increased from 18 to 54, totaling to 63 young women



Currently 4 groups are actively involved in poultry keeping. One of the group has put up a structure in readiness to purchase the chicks as their self- effort.

The groups have the units stocked and are one group that stocked broilers has marketed 116 birds and was able to repay their loan before their date.

Feed Processing Unit- Currently the project is serving the whole Rusinga Community and customers from Mbita and Sindo. One of our potential buyer narrates how this project had really brought a big change to their lives. The order has already been made for branding of packaging bags and it is in process.



*Figure 1 Sample of our branded bag for packaging*

*Figure 2 Production of poultry feeds in process*

## Horticulture

There are 5 groups (Rago Self Help Group, Resa Rusinga Women Group, Uya Fishing Group, Gumba/Ukowe Farmers network and Wamwanga SHG) that are actively in horticulture farming. The group had been watering their crops while they bring water on their head. After VFM issued them with pipes and water pump, they could do the watering very easily. The VFM resource Centre also provides the community with the potato vines so that they could also go and plant. Spider plants, kales and tomatoes are the first enterprises in these groups







## ACHIEVEMENTS

- i. Members are able to save and provide basic needs for their families, collateral banking is successfully adopted by over 50% of our beneficiaries.
- ii. The branding of packaging bags is in process and the group has plans to start a bulk production.
- iii. Groups have been issued with pumping machines and pipes for their farms.
- iv. 160 members have benefited with the loaning money.
- v. Shillings 30,000 has been repaid and is banked.



## CHALLENGES

- i. The Inuka Dress Making group has few sewing machines, this hinders other trainees in doing their practical work.
- ii. Feed Processing Unit lacks sack binder and feed mixer. This hinders production in bulk. Mixing is done locally as this makes the work to be very cumbersome.
- iii. The apprenticeship graduates lacks a start-up capital.

## WAY FORWARD

- i. Some 2 members from Inuka Dress Making group have agreed to bring their sewing machines to support the project.
- ii. There is need to organize a fund drive to have some capital raised for the mixing machine.
- iii. A proposal to be made to support apprenticeship graduates with start-up capital.

## CHAPTER TWO

### WATER SANITATION AND HYGIENE

<b>Objective 2: Access to Dignified and Sustainable Livelihood and Resilience</b>			<b>PLANNED June 2018</b>	<b>ACHIEVED JUNE 2018</b>
Activity 2.1.1: Educate and promote personal hygiene in schools and at household level-( Hygiene kit and IEC materials).	Kit	Households	72	66
Activity 2.1.2: Provide for adequate sanitary facilities to VFM for improved hygiene at the ablution block.	Equipment	Month	2	6
Activity 2.1.3: Demonstrate proper handwashing practices.	Talks		2	5
Activity 2.1.4: Support schools with hand washing and safe water storage facilities. (500 Liters )	Schools	Tanks	0	3
Activity 2.1.5: Create awareness on water treatment methods and provide 3 chlorine dispenser	dispenser	Beaches	2	1
Activity 2.1.6: Advocate for provision of clean and sustainable water in three school.	meetings		2	0
Activity 2.1.8a: Support construction and branding of 3 public toilet in 3 beaches.	Beaches	VIP Latrines	3	0
Activity 2.1.8b: Support construction and branding of toilets 6- 4 doors toilets to 3 schools)	Schools	VIP Latrines	6	6
Activity 2.2.1: Train farmers on climate resilience farming practices	Trainings	Meetings	?	11
Activity 2.2.2: Sensitize children and adults on environmental conservation.	Advocacy	Meetings	1	5
Activity 2.2.3: Environmental clean-up by strategic placement of dust bins for solid waste management in public places.		Dust bins	0	0
Activity 2.2.4: Support establishment of household kitchen gardens for food production. (Seeds)	Seeds	Households	220	300
Activity 2.2.5: Support families/ households with gunny bags for smart kitchen gardening.	gunny bags	Households	120	321
Activity 2.2.6: Promotion the establishment of fruit and timber tree nurseries	Tree nurseries	Groups	10	1



Activity 2.2.7: Provide subsidized water tanks to the community for agricultural water storage and usage.	Tanks	Households	80	78
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## Hand washing

This we undertake both in schools and household levels. In schools we ensure that all children are taken through healthy habit practices. They are taught to drink clean safe water and to ensure good hygiene both at home and school.



## Waste Management

When we conduct home visits we encourage families to have a place set for waste management pits to ensure that the environment is maintained clean.



## Hygiene Kit

During home visits, we issue different households with a well packed hygiene kit. We give this to enhance the health of children in a family



## **Support to other Schools**

VFM has supported 3 primary schools i.e. Kamasengre, Uya and Eddy Primary Schools with VIP latrines of six doors each, modern hand washing and safe water storage facilities.



## **Advocacy**

We managed to advocate on the WASH activity to the community members. We advocated majorly on the importance of pit latrines, safe water usage and good sanitation, this was to help in the reduction of diseases and promote good health. Community Health Volunteers, area chiefs and the village elders were called upon to spear head this activity in various villages.

## **Trainings**

The community members have been trained on climate resilience farming practices in order to have enough food in the family in all round season.

## **Our environment**



### **i. Food security/ household kitchen gardening`**

This is done in order to ensure availability of food in the community. Training on gunny bags stitching was offered to 77 members who have also trained other members of the community.



## Progress

- ❖ 24 gunny bags for smart farming raised and planted in the resource Centre while 110 bags given to the community members have also been planted.
- ❖ With the new smart farming system children of VFM have been given priority to learn the techniques in Agri-Business just to increase parents' practice at home.
- ❖ 60 members were issued with water tanks directly and we realized 18 more tanks through pass on strategy.
- ❖ Community members are offered trainings on Agri-business.
- ❖ During the holidays, the kales in the resource Centre were given out at a cost to families whose farms were not yet established.
- ❖ One shade nets made in the resource center is standing with very healthy tomatoes and kales.





## Inside the resource center





## CHAPTER THREE

### SOCIAL SERVICES

Objective: **Greater access to social services.**

<b>Strategic Objective Three: Greater access to social services.</b>			<b>PLANNED June 2018</b>	<b>ACHIEVED JUNE 2018</b>
Activity 3.1.1: Train counsellors on identification of cases for counselling, child protection and social service delivery.	Trainings	People	25	25
Activity 3.1.2: Train community members and staffs on support service to children.	Trainings	People	75	75
Activity 3.1.3: Training support groups and community on HIV prevention, Gender Based Violence and Drug abuse	Trainings	People	72	75
Activity 3.1.4: Facilitate 3 social workers, 2 Facilitators and a nurse to conduct home visits.	5 Staffs	visits	72	6
Activity 3.1.5: Conduct community dialogue days to find solutions to own problems.		Meetings	2	6
Activity 3.1.6: VFM participate in national and international child days (orphans day, day of African child etc)		days	1	2
Activity 3.1.7: Employ two more social worker.	1	Person	1	2
Activity 3.2.1: Case identification		cases		4
Activity 3.2.2: One on one counselling with the children and caregivers.		councils		regular
Activity 3.2.3: Referral to other services.	1	Month	36	6
Activity 3.2.3: Develop a reporting system for children who are abused.	Meeting	Meetings	1	1
Activity 3.3.1: Family child protection education sessions		Sessions	0	
Activity 3.3.2: Enhance parent - child communication through Families Matter! program.	1	Parents	320	325
Activity 3.3.3: Identification and inclusion of discriminated disabled children.		children	6	9
Activity 3.3.4: Train children on child protection and life skills		children	300	300
Activity: Late Birth registration		children		135
Activity: NHIF registration		children		52

## **Child protection-case identification and management**

This is the protection of children from violence, exploitation, abuse and neglect.

This is mainly done to ensure child's security within the family and entire community. The government article on child's right provides for the protection of children in and out of the home. However, the community through our dialogue days have developed their own policy to ensure total child protection.

### **Trainings to staffs, children and families**



Various families' have been taken through education on child's rights and how to manage issues on child protection. Staffs have also been taken through the same process.

The VFM team was taken for training on Monitoring and Evaluation. This was done majorly to track the records, quality service delivery and to identify success and show progress.

### **Case Identification**

This is done to improve access to child protection services for children who experience child abuse or are at risk of any violence, neglect and exploitation.

#### **Cases Identified**

Currently we have 4 cases reported.

##### **Case 1: Domestic Violence**

During our household visit, we met this family of 7 members. We only find the child and the father. The mother had been chased away by the father. The father comes home drunk and can not provide the basic needs for the children.

##### **Case 2: Emotional Abuse**

This was encountered during home visit. This is a girl child who seemed to be very gloomy. We called her and had a brief talk. It was then identified that the child was suffering from stomach upset but the mother could not listen to this.

### **Case 3: Disability**

Children in the community have been neglected by almost all partners in their programming while their families have showed low interest in ensuring their well-being.

VFM identified four bright disabled children currently registered in secondary education with one preparing to join tertiary education at Maasai Mara. Families prioritize other children without disability in education. Six other disabled have been completely discriminated and are not in education.

Rusinga has one special school to the east but charges there are extremely expensive for many families with these children.

Disabled adults (3) are also identified, we report only those who are helpless. They live with children and are not able to provide basic needs to their children.

All the four cases reported are in Rusinga West.

### **Way forward**

These children have a right to education and all other child rights enshrined in the universal child rights. The plan to partner with their families. We plan to support on with physical disability through university and other three through secondary education. We continue to advocate for their rights.

### **Case 4: The elderly**

This case is of great concern to us as this group of people are the major victims of deaths caused by terminal diseases. They live with orphaned children and their unproductive age leaves these children in total dismay, they lack basic needs sometimes food is not provided.

In some of these families the government of Kenya has set aside 3000 shillings per elderly per monthly to support them and this fund benefit only few who are above 70 years of age. With the cost of living this money is not enough to meet the needs of even a household of 1 in a month.

### **Way forward**

It is necessary to consider this group in our program design for the next half of the year, supporting their well-being by providing basic needs to them, improving their housing, providing food and bedding, improving clothing for the orphans they live with. We are designing a sustainability plan for this costly initiative.

### **Referrals made**

### **Case 1:**

We did follow ups and had a discussion with the Child's father. This was done on different occasions. It was after several visits that we found both parents at their homestead.

### **Case 2:**

We managed to talk to the child together with the mother who admitted that she had been very busy to attend to the child. We talked at length and she accepted to take the child to the hospital. We follow up these cases,

### **Counselling**

We offer one-on-one counselling and general counselling services during home visits and also to group members. This is done in order to harmonize different issues in the families and also in the social groups. Domestic violence cases were identified for counselling (21), 33 cases of drug and substance abuse were managed, we handled them and some were referred to church elders and administrators. We uphold confidentiality as a key pillar in this activity and we have won the trust of the community. We seek consent in case we want to refer a case.

### **Community Dialogue Days**

#### **Purpose**

Communities meet to discuss issues affecting them, find solutions and make follow ups. VFM is a facilitator in this case.

#### **Days**

Two meeting were held through this period to discuss issues of child protection and the community role in child protection.

#### **Findings during the meetings**

- 14 teenage pregnancies.
- 4 girl-child dropouts from primary schools.
- 2 sexual abuses reported.

### **Way forward**

- Community to lead in child protection including reporting child abuse cases
- The community burn all gambling games in the community.
- Community promise to support VFM efforts like FMP, Peer education and other programs that are child focused,
- Adult community members must be role models to children.
- Case reporting and management was agreed as a community role.
- CHVs and village elders to lead the reporting of cases to VFM for further follow ups.



- Drug and substance abuse is prohibited by the community at a standing fine at community level.

### **Child protection**

The community members agreed to take child protection a notch higher. They made their policy to ensure the implementation of this and its effectiveness.

- **HIV Management,**  
Three groups of people living with HIV have been identified and trained on HIV prevention. The groups are well structured and participating in community advocacy.

### **Families Matter!**



### **Goal**

To reduce new HIV infections in young adolescence by delaying their sexual debut.

### **Objectives**

Raising parents' awareness about the sexual risks children face today.

Encouraging general parenting practices that increase the likelihood that children will not engage in risky sexual behavior including.

- Parental monitoring.
- Positive reinforcement.
- Parent – child relationship building.

Improving parents' ability to effectively communicate with their children about sexuality and sexual risk reduction.

### **Target group**

**Primary;** pre- adolescence

**Secondary;** parents or caregivers of children of 9-12 years of age.

### **Implementation**

The secondary target group is organized in a group of 16 members and offered structured six sessions. The sessions are organized weekly for a maximum of three hours per week. Parents and their children attend two sessions together for practical. Parents get opportunity to share their parenting challenges and successes.

The venues can be a church, under a tree or in one member's house. Two trained facilitators (male and female) offer the package.

### **Sessions**

1. Getting to know you and steps to understanding your child.
2. Getting to know you and steps to understanding your child.
3. Sexuality education, sexual health and parents as sexual educators.
4. Increasing comfort and skills in discussing sexuality issues.
5. Understanding child sexual abuse.
6. Discussing sexuality and handling peer pressure.

### **Achievement**

All through this reporting period 325 parents have been taken through the trainings and 325 children benefitted. Some families had more children in this age bracket and we are proud that this program is impacting more children. We targeted teachers in 12 schools as they handle children in the schools. 52 teachers were reached out and likely impacting the lives of over 1000 children.

## CHAPTER FOUR

### HEALTH SERVICES

*Improved access to quality healthcare: Interventions are geared at strengthening the capacities of duty bearer to provide equitable, accessible and quality services as well as create demand by promoting health seeking behaviors. The interventions endeavor to create awareness and health education to all the target beneficiaries for better health outcomes.*

#### HEALTH

Strategic Objective Four: Improved access to quality healthcare			PLANNED June 2018	ACHIEVED JUNE 2018
Activity 4.1.1: Employ a nurse	1	Months	1	1
Activity 4.1.2: Provide adequate medical supplies for minor illness management during medial outreaches	1	Quarters	2	2
Activity 4.1.3: Training of health care providers on emergency response	1	Training	1	1
Activity 4.2.1: Sensitize children and parents on emergency response	1	Sessions	22	20
Activity 4.2.2: Educate children on good health practices	1	Sessions	22	21
Activity 4.2.3: Strengthen health clubs for awareness creation	1	Clubs	12	12
Activity 4.2.4: Provide IEC materials to boost health awareness.	1	Flyers		0
Activity 4.2.5: Community participate in national health days (Malaria, AIDS, TB, Cancer, Malezi Bora)	1	Days	2	3
Activity 4.3.1: Regular medical checkups for the children	1	Quarters	2	2
Activity 4.3.2: Child growth monitoring	1	Quarters	2	2
Activity 4.3.3: Treat minor illnesses	1	Quarters	2	2
Activity 4.3.4: Monitor nutritional status of children	1	Quarters	2	2
Activity 4.3.5 Advocate for health seeking by the community.	1	Meetings	6	6
Activity 4.3.6 Conduct community outreaches to upscale health service delivery by service providers.	1	Outreaches	18	17
Activity 4.3.7 Equip the school clinic with basic medication drugs for ease of minor illnesses management.	1	Quarters	2	2
Activity 4.3.8: Support Tom Mboya Health Center with post-natal room in partnership with Homa Bay County government.	1	Building	1	0
Activity 4.3.9: Upscale ANC attendance.	1	Follow ups	0	23
Activity 4.4.0: Regular deworming of children	1	Quarterly	2	2

## **Health Services**

To ensure improved access to healthcare, the above activities are rolled out to the child and the community at large.

Each day we work towards giving ourselves good health for us to live long, this also enhances our economic progress. i.e with good health we can always work hard to prosper.

For the semiannual, we were able to achieve as at summarized above.

## **Drug supplies**

With the support of our esteemed donors and the little contribution from the community, the clinic has been supplied with the basic drugs for treatment of minor illnesses and other essentials for growth monitoring. We received the most quality and important drugs to help in the diagnosis and treatment.

To ensure effectiveness in this VFM partners with other sub county hospitals which has helped a lot by providing other services like HIV testing and counselling for service delivery.

The ministry of Health, Mbita sub-county supported us with albendazole (Deworming tablets) and all the children in school benefitted. We were also issued with Vitamin A supplement during the “Malezi Bora season” where children are being given Vitamin A supplement; our 169 children (plus the under 5 children) benefitted.

## **Trainings and sensitization**

The county government of Homa-bay organized health talk seminar on Reproductive health for women of child bearing age, our social workers, the program health worker and the young women of the community benefitted from this training which was successfully done with 60 young women getting an exposure on reproductive health education.

In partnership with Kolunga dispensary and Search program, We were trained on HIV prevention by use of drug called (PREP) Pre-exposure prophylaxis, currently most of the community members have been enrolled for medication and so far 11 males and 45 females have benefited.

## **Medical examination & treatment**



We normally exercise this both to our target children and to the community at large. We reached to them with the services at the school clinic for the children and during our medical outreaches. The following illnesses were attended to as below;

DISEASES	NO. SEEN
MALARIA	50
UPPER RESPIRATORY INFECTION	110
SKIN INFECTION	39
FEBRILE ILLNESS	11
EYE INFECTION	9
DIARRHEAR	26
STOMACH DISORDERS	7
TINEAR CAPITIS	49
SOFT TISSUE INJURY	33

### Child growth monitoring



This is an activity that is done to children to assess the child's development, to prevent illness and malnutrition. In the previous months we noted 3 children with slightly reduced weight but they recovered after their parents were advised to give them balanced diet and supplement it with fruits and they heeded to the advice. This is done ones quarterly. So far we monitored 576 children, 212 boys and 361 girls.

### Health club





Health club is ideal in school setup for pupils are taught life skills from various topics. Our pupils are at developmental stage and they need basic education on hygiene, adolescent health, they need to understand their sexual reproductive health. For the six months we had various sessions tackling different topics on Adolescent life skills. This is done by the social workers and the program nurse. We extend this to our neighboring schools too. So far 12 of the neighboring schools have been reached to. 224 pupils were reached to, 47 males and 177 females

### Adolescent Health

This is helpful at this stage in life, Boys and girls are taught their values so that we have a better nation. This helps guard teenage pregnancies and early sexual practices that may lead to HIV / STI.

In delivering these services to the community, we partnered with the community Health volunteers (CHVs). These are personnel trained on basic health by the government to reach to the communities at the village levels.



*Adolescent health talk at Kamasengre school*

### Nutrition Health



This is a very important indicator for better growth and development. It helps in early prevention of illness and other underlying conditions.

We have had sessions with the community members where we talked of good eating practices to our children, pregnant mothers, Adolescents, Elderly and the general population.

ACTIVITY	No. REACHED TO
Children given Vitamin A	374
Sessions Conducted	12
Adults reached with information	546



## HEALTH OUTREACHES






Here at the lake region, people have poor health seeking behavior hence; we visit various communities to offer them health services. This enables us reach to the community members at their disposal. This has helped us change this poor health seeking behavior to an improved state. The following services we offered as summarized below;

SERVICES	NO. SEEN
Treatment	462
Antenatal care	23
Immunization	13
Family Planning	67
HIV testing and counselling	136
Cancer screening referrals	61

## VFM NATIONAL HEALTH DAY

This is a very key day to us when we create health awareness to the community at large. VFM in partnership with the ministry of health and other organization participated in this i.e. on the Malaria day, Malezi bora and the Reproductive health day for young women.  
(PHOTOS)

This was conducted as summarized below;

ACTIVITY	KEY MESSAGES	NO. SEEN
<b>MALARIA DAY</b> 	<p>People were tested and treated, key messages on malaria prevention; sleeping under treated nets, clearing of bushes to ensure clean environment, Draining of stagnant waters</p> <p>Preventive drugs for malaria for antenatal mothers were issued</p> <p>Distribution of treated nets</p>	<b>5 ANC mothers benefitted</b>
<b>Malezi Bora week</b>	<p>Importance of immunization</p> <p>Issuing of deworming tablets</p> <p>Vitamin A supplement</p> <p>Antenatal care</p>	<b>31</b>    <b>247</b>  <b>169</b>  <b>12</b>
<b>Reproductive Health</b> 	<p>Family planning awareness</p> <p>Cancer screening awareness</p>	<b>34</b>  <b>26</b>
<b>Day of young women/ girls</b> 	<p>Behavior change</p> <p>Importance of girl child education</p> <p>Distribution of sanitary towels</p>	<b>127</b>          <b>127</b>

<b>World Tuberculosis Day</b>	The event was held on the 24/ 3/2018. For Mbita sub - county, it brought together all stakeholders. The theme being 'WANTED: LEADERS FOR A TB FREE WORLD' VFM supported all Community Health Workers to attend the event that was organized at MeD25. 21 CHVs, 15 children, 7 TB patients from Kamasengre attended the event that offered advocacy on how leaders at different levels can participate to end TB. WHO reports that the disease terminates 4500 lives daily worldwide and very eminent in sub-sahara Africa where HIV prevalence is high.	
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### **RECOMMENDATION OF THE DAY**

More sanitary towels to be provided for the young school going vulnerable ladies.  
Women of reproductive age to be encouraged to attend early cervical cancer screening for early detection for it is manageable at early stage.

### **ADVOCACY**

We advocate for various healthy practices like family planning and antenatal care to know the importance of child spacing for better growth and good planning for the family to ensure economic growth and general good health for the mother and also taking balance diet among others to ensure we live healthy.

### **SUCCESS STORY:**

Winnie, a 20 year- old young parent of 2 baby girls from Ufira village is married to a hard working gentleman called Daudi.

Through keen observation, we realized Winnie is pregnant of her third child, we did health talk and proper counselling on antenatal care. We continued to probe more from Winnie who opened up to let us know that she has never attended an antenatal clinic even the 2 kids were given birth to at home through a community midwife whom she trusted to be the best. We talked to her broadly on antenatal care and its relevance to the expectant mothers and encouraged her to embrace. She assured us to practice. We promised to do a follow up on her after delivery.



*“I am so happy that your messages on antenatal care has finally changed my behavior, I tried this time and it worked so nicely. I am one person who did not believe on delivering in the hospital based on my lack of information and the fear that the nurses mishandle pregnant women at child birth which I confirmed is not true, after I gave birth safely, I received friendly services and the treatment was awesome. The kind of care I got was quite a lifesaving one I really appreciate the efforts. I now celebrate my bouncing baby boy first to be born in the hospital. Most important is the fact that my husband and I know our HIV status” she narrates.*



## CHAPTER FIVE

### NUTRITION

**Nutrition – improved nutrition for children and the community.**

**The community may be food secure and children still suffer malnutrition,**

<b>Objective 5 - Improved nutrition for children and community.</b>			<b>PLANNED June 2018</b>	<b>ACHIEVED JUNE 2018</b>
Activity 5.1.1: Nutrition education for the family and schools		Sessions	0	25
Activity 5.1.2: Develop and display nutrition information		Fyers	0	15
Activity 5.1.3: Provide incentives to reinforce message implementation	17	CHVs	6	6
Activity 5.1.4: Design and implement curriculum for nutrition education	1	Manuals	20	20
Activity 5.1.5: Demonstrate healthy eating practices to children	1		0	
Activity 5.1.6: Train the social workers and CHVs on food value addition and food preservation methods for community uptake	1	Trainings	1	1
Activity 5.2.1: Train 25 public health care workers on nutrition interventions	1	Trainings	1	1
Activity 5.2.2: Facilitate movement of 17 CHVs to support awareness creation to the community.	17	CHVs	6	6
Activity 5.2.3: Support dissemination health and nutrition information by HSPs	1	HSPs	6	6
Activity 5.3.1: Provide healthier foods for children (School feeding program at VFM)	1	1	6	6
Activity 5.3.2: Provide children with supplementary vitamins				ongoing
Activity 5.3.3: Involve students in planning the school menu				

## **Feeding Production in school**

We offer feeding program in school to ensure smooth learning. This has improved this quarter as compared to other quarter. The partnership with the Free Kenya Foundation has brought a positive impact since the community members get time to participate in the resource Centre for demonstrations and proceed to do the same in the community.

The feeding is supplemented by the grown vegetables at the resource center within the school. We do vegetables twice a week and this has added value to the growth and development of children. This impact has been created by the participation of community members who actively participates at the resource center to ensure the availability of the vegetables



## **Moringa as supplement in our breakfast.**



This is a plant seed which has great nutritional value. It is always used as a supplement with other foods. e.g. porridge, vegetables etc.

We got trainings on importance of using moringa as a supplement. After the trainings, we harvested moringa, dried it and it could be used as a supplement during meals.

We currently using moringa in our breakfast as a supplement and children are involved in preservation

## Trainings

A total of 22 members were trained on food value addition, food preservation methods and nutrition interventions.

### Trip to Angiya;



*Figure 3 Members attending the Moringa facilitation offered by the freekenya*

Free- Kenya as partner organization, organized an exchange visit between VFM and ANGIYA team based on the smart farming trainings they have been taken through.

A total of 27 caregivers' plus the social work team attended. The teams were taken through the importance of using Moringa plant and the Neem plant. We learnt several functions of Moringa as a miracle tree including its ability to cure many diseases and the nutritional values it adds to health when using it.

The meeting was quite informative for we learnt more on the two species. Members interacted and promised to apply the new knowledge.

## FOOD SECURITY

This is done in order to ensure availability of food in the community. Training on gunny bags stitching was offered to 47 members.

### Progress

- ❖ 24 gunny bags for smart farming raised and planted in the resource Centre while some of the community members have also been issued with gunny bags.
- ❖ With the new smart farming system children of VFM have been given priority to learn the techniques in Agri-Business.
- ❖ 40 members were issued with water tanks.
- ❖ Community members are offered trainings on Agri-business.
- ❖ During the holidays, the kales in the resource Centre were given out at a cost
- ❖ One shade nets made in the resource center.

## CHAPTER FIVE

### EDUCATION

***To improve equitable access to quality education:*** Interventions aim to make at helping every child under our care to achieve the highest educational standards that he or she possibly can.

Objective 6 - Improved equitable access to quality Education.			PLANNED June 2018	ACHIEVED JUNE 2018
Activity 6.1.1: Sensitize on school safety measures.		sessions	1	1
Activity 6.1.2: Sensitize on friendly teaching and learning environment.		sessions	1	1
Activity 6.1.3: Conduct school inspection on safety		Quarterly	2	2
Activity 6.1.4: Installation of fire-fighting equipment.		Buildings	17	6
Activity 6.2.1: Assess and evaluate teaching quality		continues	v	v
Activity 6.2.2: Recognize better performing teachers and pupils		Tests	4	4
Activity 6.2.3: Lobby for deployment of qualified staffs (New)		Teachers	1	4
Activity 6.2.4: Promote learners and teachers achievements through regular awards, announcements and activities.		Quarters	2	2
Activity 6.2.5: Provide adequate teaching and learning materials for new class		Year	1	1
Activity 6.3.1: Engage PTA in monitoring school performance -	1	Meetings	2	2
Activity 6.3.2: Create a system of monitoring performance in the school		System	1	1
Activity 6.3.3: Monitor school attendance for children	1	0		6
Activity 6.4.1: Construction of administration facility at VFM	1	Building	1	0
Activity 6.4.2: Construction of administration facility at Dr. Williams Primary School in partnership with the local community.	1	Building	0	0



Activity 6.4.3: Establish a youth friendly center at VFM to benefit youths in Rusinga.	1	Building	0	0
Activity 6.4.4: Construction of an ECDE center facility at EDDIE Primary School in partnership with the local community.	1	Building	0	0
Activity 6.4.5: Establish and equip a community resource center.	1	Facilities	0	0
Activity 6.5.1: Provide very needy children with school uniforms in Rusinga to boost child retention and classroom comfort.	1	Children	50	100
Activity 6.5.2: Provide school fee subsidies to needy children in partnership with CDF busary fund and county government - Rusinga Ward		Children	2	0

## Education

### ‘Education is the key to successes’

These amazing rates. We registered the major reason for the child absence from school to be sickness after a follow up by the social workers.

### School safety- VFM

- **Fire-fighting equipment.**  
Seven fire-fighting equipment have been installed in the kitchen area and in the corridors. This is to help in the case of fire outbreak in school.
- **Play grounds**  
Several safety assessments have been carried out by the ministry of education and our play-ground certified though small in size.
- **Inspections**  
It is a requirement that the ministry inspect the schools, the last two quarters we saw three inspection efforts that turned out positively; implementation of the new curriculum which is competency based was done, general condition of the school was inspected, teaching and learning materials were inspected including teacher licenses.

## School infrastructure

- **VFM**

A new kitchen structure was complete and with support from Imani it is furnished with plastic chairs and plastic tables. Plans are underway to see the complete construction of an administration block and at this stage, VFM shall have all classrooms, ablution block, kitchen and store and administration block.

- **Eddie primary school**

This school has not realized a meaningful infrastructure development, there is no enough classrooms, the temporary structures that are put are not reasonable for population that is currently registered in this school. The school has two permanent blocks that are partitioned to provide for a classroom and an administration block. The school is open without fence and any attempt to do agricultural activities with children within school is not possible,

- **Dr. Williams primary school**

The school has better classrooms but without administration block. Teachers comfort is compromised as their preparation area is not available.

- **Kamayoge primary school.**

the school has very poor infrastructure, seven classrooms stand and grade eight have to use a nearby Ogola Jaseme Secondary that is not operational due to lack of resources.

The floors are very pathetic; teachers have to share pit latrine with children which is not logical. The fence is good and an administration block is available.

- **Uya Primary school**

Uya primary school has enough classrooms that are modern and that meet the government standards. One of the classrooms is currently acting as an administration block. It is fenced with a gate. They lacked latrines but VFM has partnered with the community and two pit latrines are being constructed.

- **Kamasengre Primary and Secondary**

The oldest school in this community with very old classrooms that are 45 years old. Water tanks are available for rain water harvesting. The ECDE structure does not provide a good learning environment. Several roads crisscrossing the only community sporting ground. The fence is open and the school is insecure.

- **Wamwanga primary school**

Only one permanent classroom, no fence, temporary classroom floor cemented. The school still lack a lot of facilities.

### **Way forward**

VFM is looking for potential partners in development of these facilities. Constituency Development Fund and other partners to improve the well- being of children in these schools.



### **Community roads**

The Rusinga ring road annually maintained, the rains experienced has washed the road and using it is not friendly.

VFM is concerned with the access road leading to Litare beach which is about 3 kilometers. Children use this pathetic road and when it rains it is not passable. The road poor affect several business activities in this beach which is the largest fish landing beach in Mbita sub county.



### **School attendance for schools in Kamasengre**

We have recorded improved attendance rate in schools, the involvement of stakeholders in education and the advocacy has improved the school attendance.

For VFM our feeding program and other child support programs has indicated 98% attendance. Families now changing their attitude to value education.

### **Performance**

We have also recorded an improved performance in class and in the outdoor activities.

### **Community involvement in education**

The government policy that offer opportunity for the community to manage their schools has increased community involvement in monitoring educational activities.

## Child support program

This semiannual period, we identified 100 children from this community school whom we offered new school uniforms. It was joyous as the families received.

The school feeding program at VFM is amazing one, two meals keeps the children active in school, access to clean water is a special support to children.

The medical services at VFM ensures healthy children.



## THE TEAM AT VFM





THE DINNING HALL INTERIOR.



## OUR 2018 PARTNERS

Rusinga community- our beneficiary, children and their families.

IMANI Foundation- our donor and advisor in development planning.

FEMI Foundation- donor partner.

Talud – our donor partner.

Free Kenya – our partner in agribusiness.

Koornzaayer Foundation – our donor partner in investment and food security.

Catz Charity Foundation – donor partner in water sanitation and hygiene.

ZERO-KAP- our partner in economic empowerment.

Peter Van Vliet Foundation- donor partner.

Mbita CDF – partner in community infrastructure development.

## 2017 audited financial statement



VFM FINANCIALS  
2017.doc



Audit letter .pdf