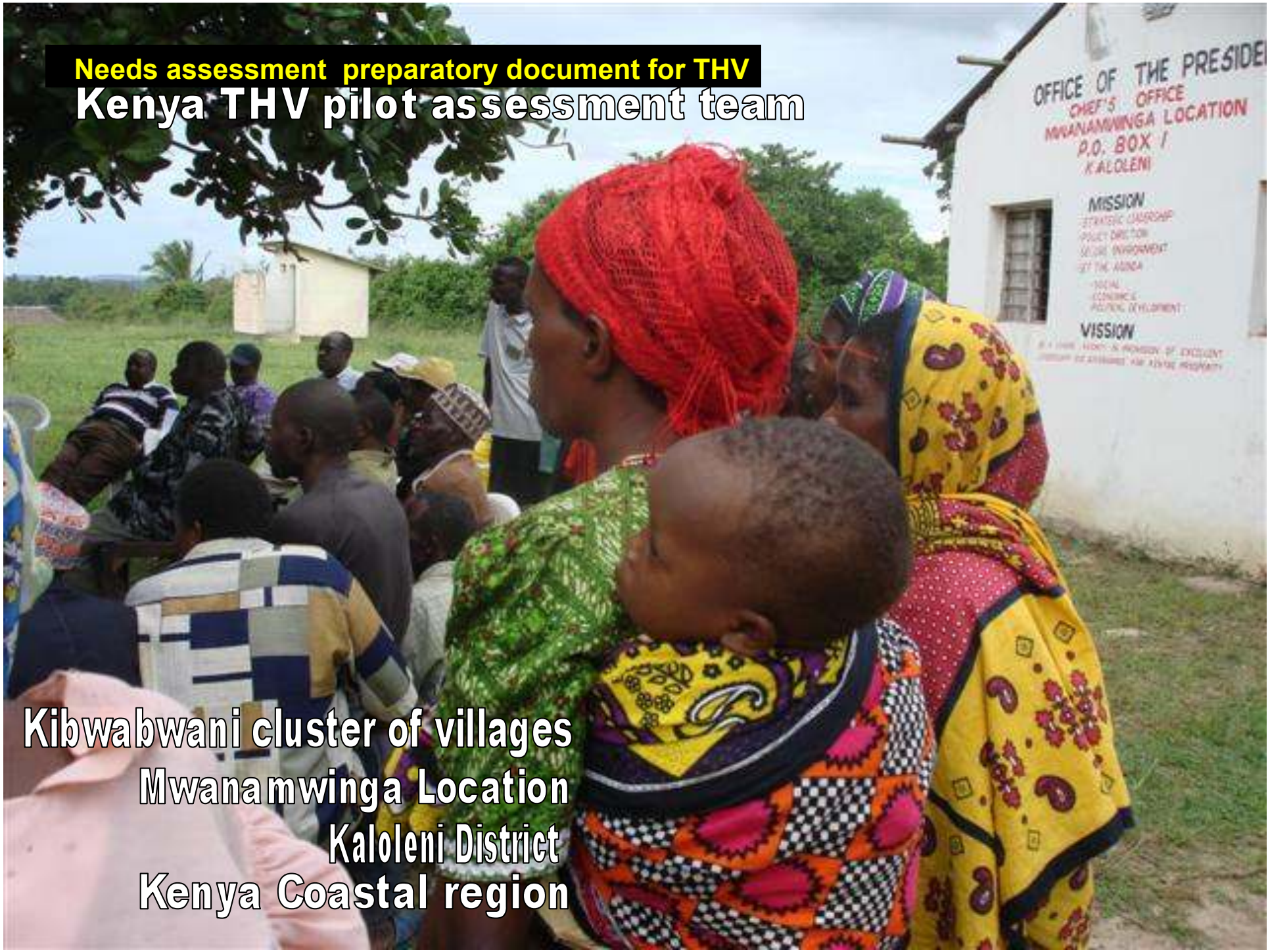

Needs assessment preparatory document for THV
Kenya THV pilot assessment team
OFFICE OF THE PRESIDE
CHIEF'S OFFICE
MWANAMWINGA LOCATION
P.O. BOX 1
KALOLENI
MISSION
VISSION
Kibwabwani cluster of villages
Mwanamwinga Location
Kaloleni District
Kenya Coastal region

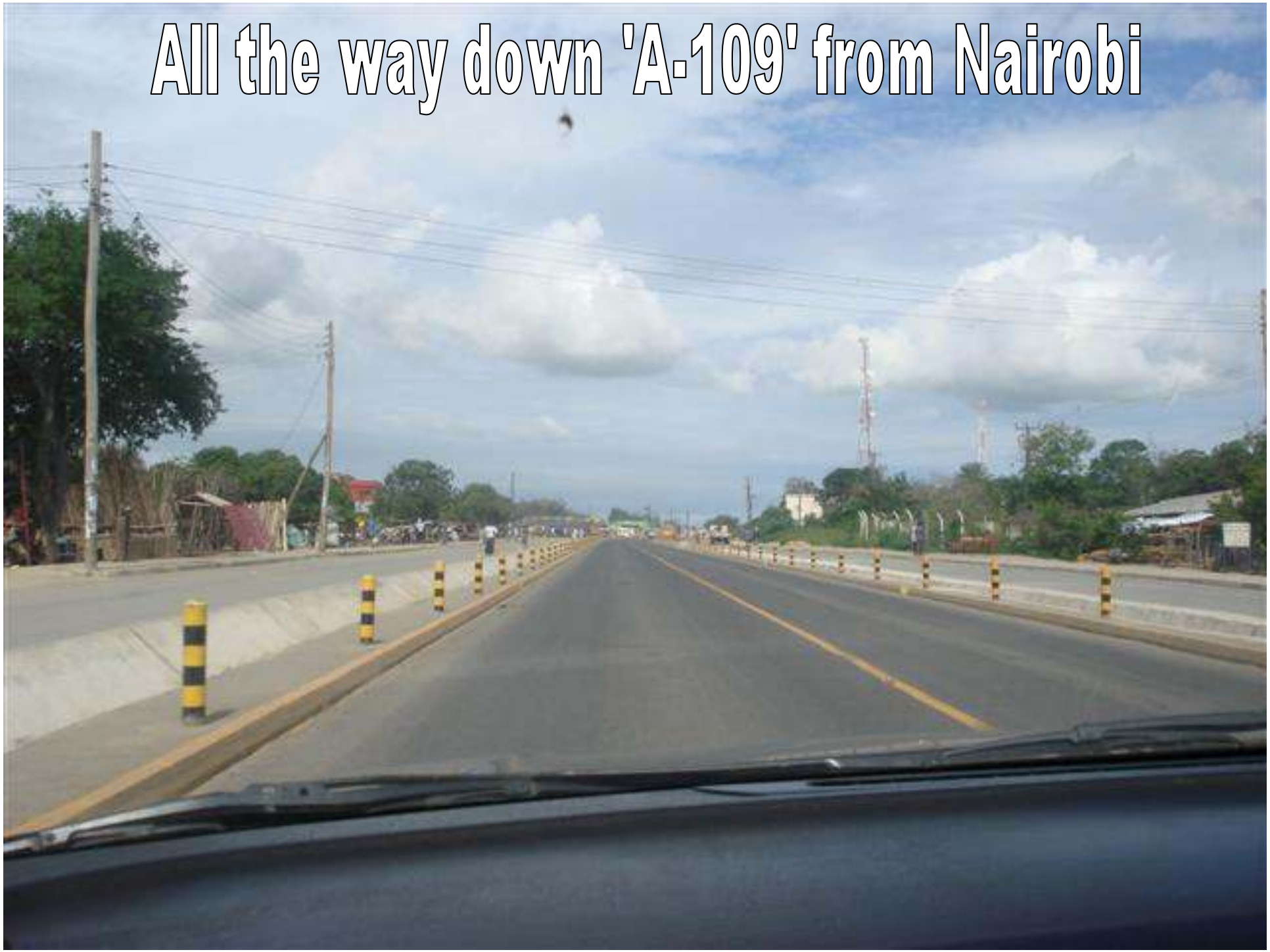
(Mogadi
coordinates :
3 47’21.45”S –Latitude
39 35’51.87”5 -Longitude
Uganda
Kenya
Kampala
Nairobi
Untitled Placemark
Untitled Placema
Image © 2008 TerraMetrics
© 2008 Europa Technologies
Image NASA

# Location

## Satellite picture with reaching instructions

- **Kaloleni District was recently carved out of Kilifi District**
- **20 km short of Mombasa on A-109 (Nairobi-Kenya highway), turn left into Kaloleni.**
- **Kibwabwani village cluster is around 17 km from Kaloleni**
- **Distance from Mombasa:**
  - **Kaloleni -61 km**
  - **Kibwabwani -78 Km**
- **Mombasa to Nairobi:**
  - **480 KM**

# All the way down 'A-109' from Nairobi

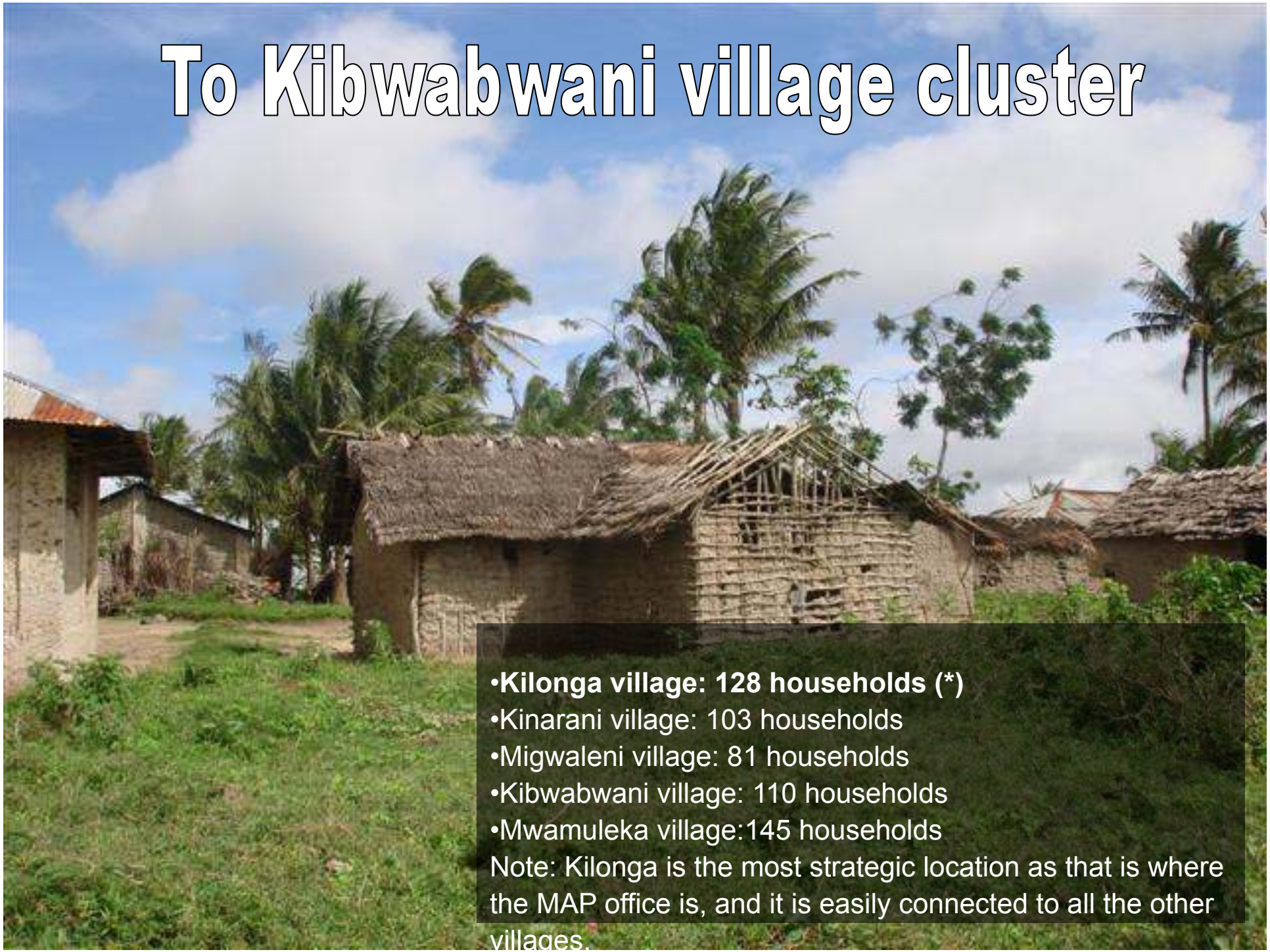


# Through a game park

# Through some very bad roads

after 518 KM .....

# To Kibwabwani village cluster



- **Kilonga village: 128 households (*)**
- Kinarani village: 103 households
- Migwaleni village: 81 households
- Kibwabwani village: 110 households
- Mwamuleka village:145 households

Note: Kilonga is the most strategic location as that is where the MAP office is, and it is easily connected to all the other villages.

a poor area where people struggle to make ends meet....

..but still want the best for their children !

## Note:

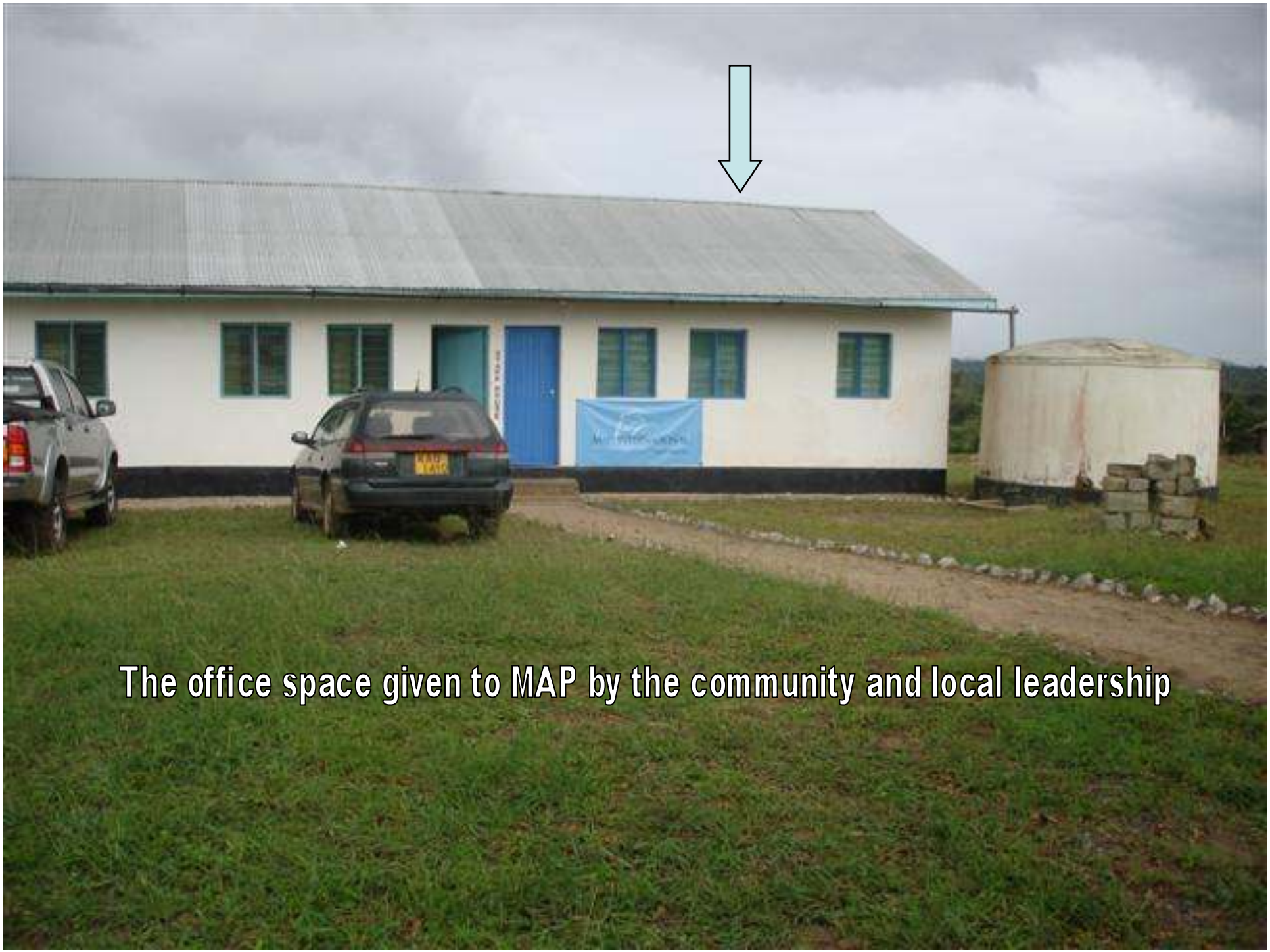
- This Power point presentation is a profile of Kibwabwani village which is being developed as the THV with funding support from Gale Foundation and MAP International

MAP INTERNATIONAL
health & hope for a hurting world

MAP International Kenya

Pilot assessment team

Ownership
MAP has already mobilized community members who have taken leadership....



The office space given to MAP by the community and local leadership

Participation
Engaged community enthusiasm in analyzing their situation

Involved local government in the process -Mr. Joseph the Location Chief

# Executive summary:

- Kaloleni District was recently carved out of Kilifi district. *Mwanamwinga location* is in this District and has three sub-locations, one of which is the Kibabwani cluster of villages.
- The Kibwabwani cluster of 5 villages is in the coastal region on the east of Kenya. MAP International Kenya has decided to work in this area for the Total Health village (THV) program covering all five closely connected villages with its focus initially on one of the five villages- 'Kilonga'.
- The area was chosen because it figures as one of the priority poverty reduction areas for the government, and is also a high disease incidence area, with high levels of Lymphatic Filariasis and Schiztozomiasis.
- After the preliminary selection, team members from MAP kenya carried out pilot preliminary visits to the area for further investigation and discussions. Following this the team started gathering all necessary background information on the area from various sources (government statistics, development ministries, etcetera)
- Following this a small team went to the area and started discussions with the sub-location Chief and the leaders of the 5 villages about the possibility of starting a program in the area. They were met with a great deal of enthusiasm from this group because the area is quite isolated.
- The local community members organized themselves into an informal committee of those who were willing to cooperate in the process and started ground work preparation for the pilot assessment team that was to visit in late May 2008.
- As part of this preparation the community arranged to hand over the use of an office building that was constructed 20 years ago (but not used) to MAP to use as an office.

# Executive summary:

- When the pilot assessment team visited Kibwabwani on the 27th May the local community was already ready to actively take part in the needs assessment of the village to be the focus of the THV program
- Since all the 5 villages in the cluster are closely connected, the needs assessment was done at 2 levels: One at the Macro –Kibibwani cluster level covering all the 5 villages and one more detailed one in Kilonga village
- Consequently the THV program will cover all the 5 villages ultimately but will launch out from Kilonga first.
- A detailed profile of the needs in the community was carried out using Rapid Participatory analysis tools and the details appear in the following slides.
- Through detailed processes the community identified 10 priority needs areas namely:
  1. Overcoming Ukame (Drought)
  2. Biashara (business development skills)
  3. Maji-1 (safe drinking water)
  4. Afya (poor health improvement)
  5. Elimu (improve poor education)
  6. Kilimo (agriculture development)
  7. Mafuriko (flood prevention)
  8. Ki Pindu Pindu (Cholera prevention)
  9. Kibarua (casual labor skills improvement for increasing remuneration
  10. Maji-2 (improving irrigation systems)

# Executive summary: Continued…..

- The entry point for the program will be a DSI (Disease Specific Intervention) which will probably be a combination prevention method for Lymphatic Filariasis, Schiztozomiasis and STH (Soil Transmitted Helminthes)
- The medications required for this will be obtained locally for now to cover the main focus village and made available at the time of the launch of a special campaign. This will help the community to appreciate that MAP has taken serious consideration of their needs and will pave the way for future coordination, leading to the opportunity to address the other health coordinates and thus lead the village to becoming a THV.
- Based on the discussions , assessments, analysis and identification of needs , the PDM (Project Design Matrix ) has been framed into a log frame for the program and is being incorporated into the PPT.
- It is proposed to have a 5-7 years life cycle for this program and build in an evaluation component into the 2$^{nd}$ or 3$^{rd}$ year of the programme to determine how the program should further be honed and modified for effectiveness.
- Besides the contribution from MAP International and its donor support, every attempt will also be made to involve local partners in the process.
- Approximate funding for the programme in the first 5 years is as follows:
  - Year -1 : 100,000 $
  - Year -2: 120,000$
  - Year -3: 155,000$ (Evaluation)
  - Year -4: 160,000$
  - Year -5: 180,000 $

# Preamble:

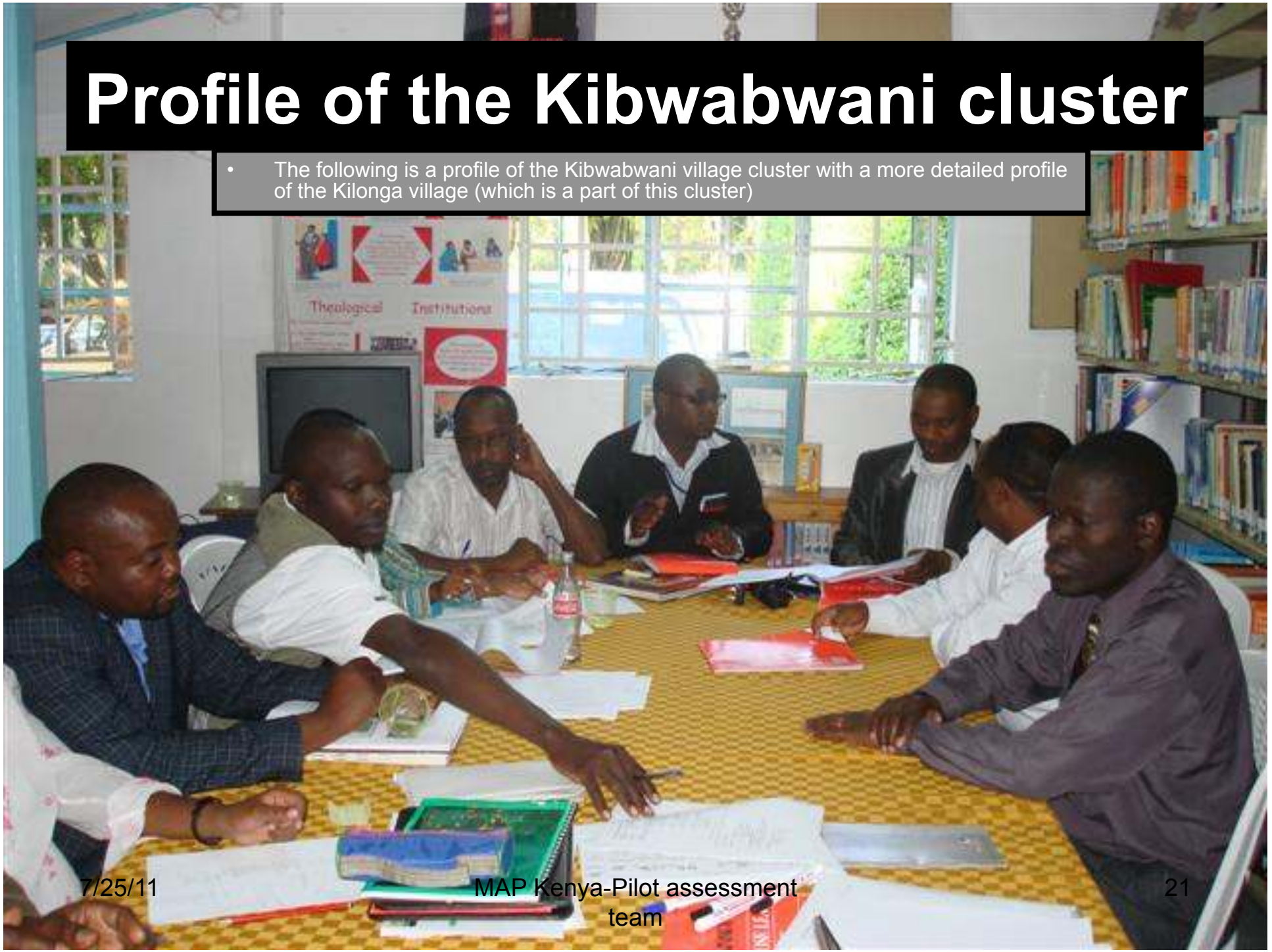
Significant dimensions of the selection of the location:

1. A poverty prone region was identified which also had a very high disease incidence and was remotely located.
2. Based on secondary and other data available this place was then visited and examined for suitability, including discussions with the local people and the local authorities.
3. Following this necessary interactions were carried out with the location, sub-location chief and the local community leaders to assess their willingness for active involvement in the facilitation of a THV (total Health Village) in the region.
4. Staff representatives were then out to start ground preparations for the pilot assessment team to visit and carry out a rapid Participatory needs assessment.

The following is a detailed profile of the area along with a participatory assessment of needs in the area, and an analysis of development actions that should form the action plans for the way forward.

# Profile of the Kibwabwani cluster

- The following is a profile of the Kibwabwani village cluster with a more detailed profile of the Kilonga village (which is a part of this cluster)



# Location:

- Latitude : 3 47’21.45”S
- Longitude:39 35’51.87”S
- **Size of Kilonga: 3500MX7000M (approx)(-Village to be taken up initially)**
- **Kaloleni District was recently carved out of Kilifi District**
- **20 km short of Mombasa on A-109 (Nairobi-Kenya highway), turn left into Kailonei.**
- **Kibwabwani village cluster is around 17 km from Kaloleni**
- **Distance from Mombasa:**
  - **Kaloleni -61 km**
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- **Mombasa to Nairobi:**
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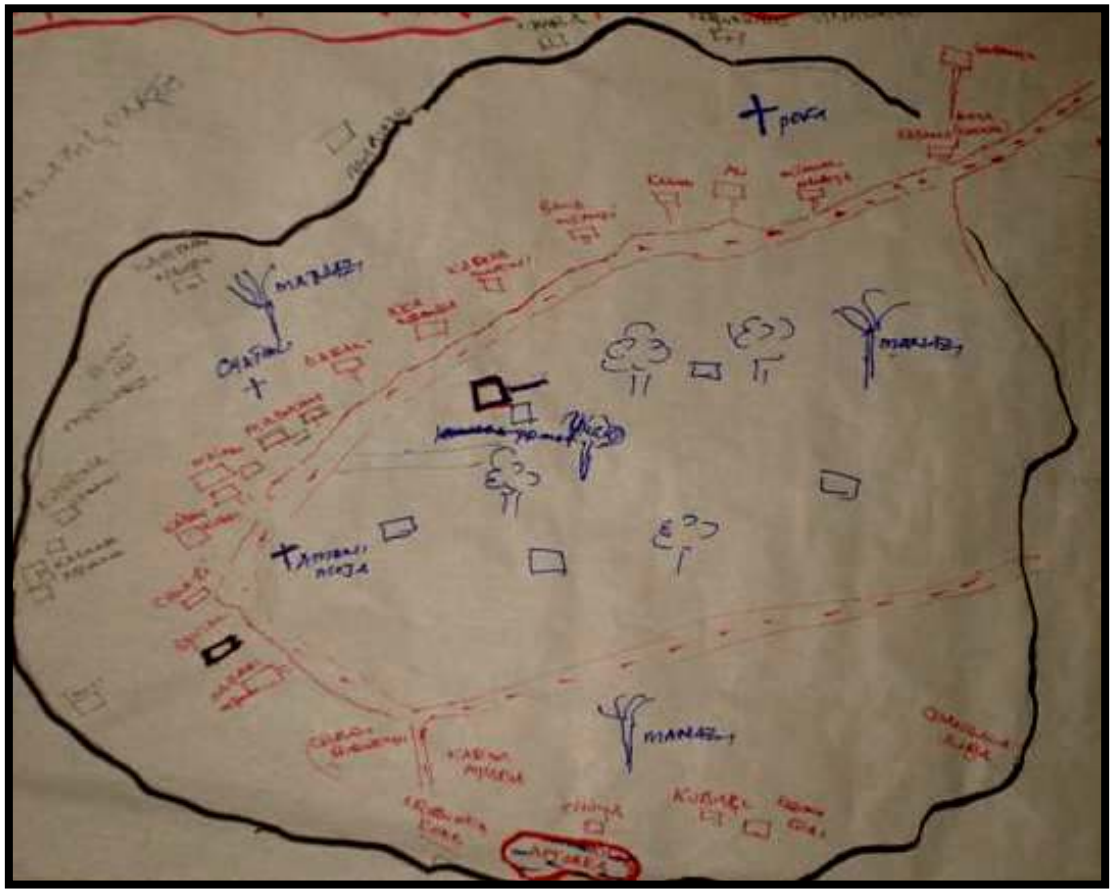
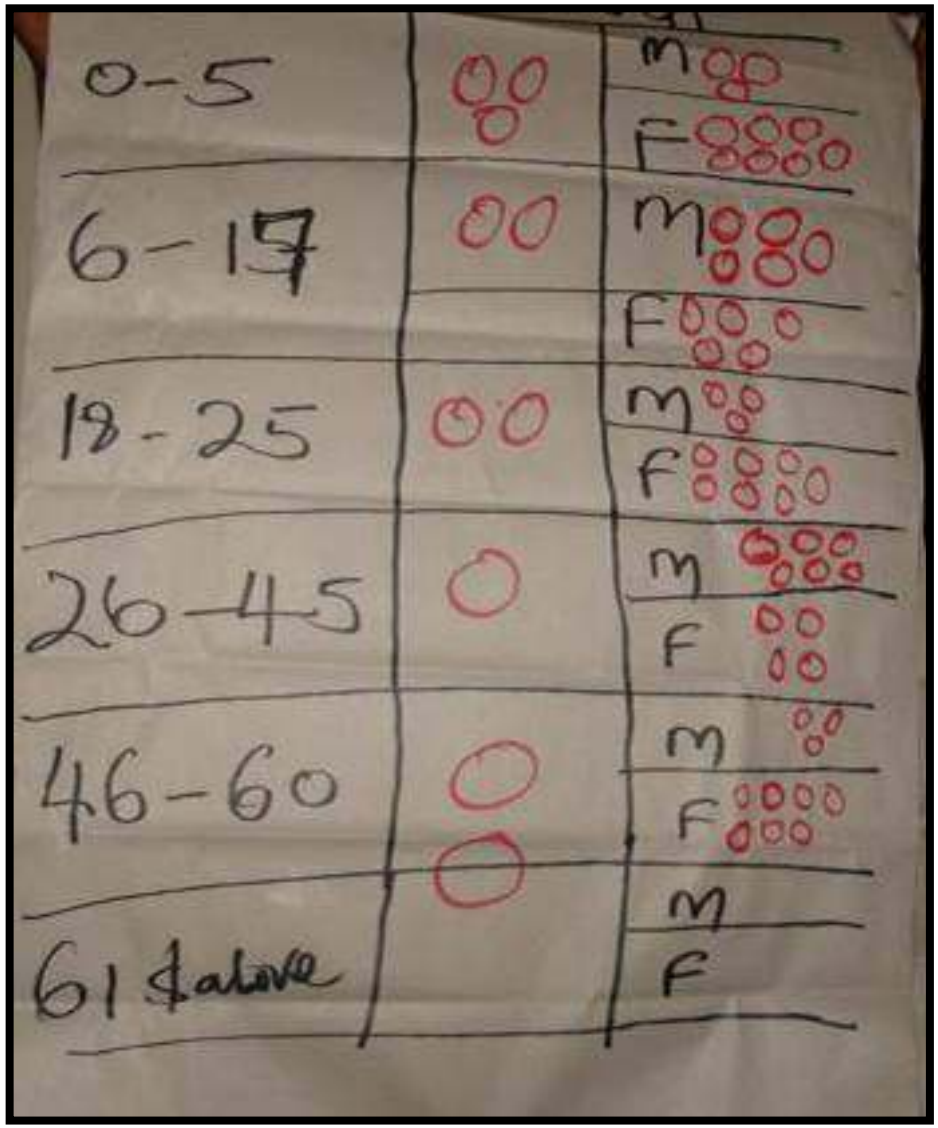


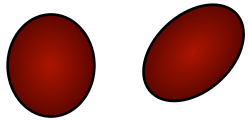
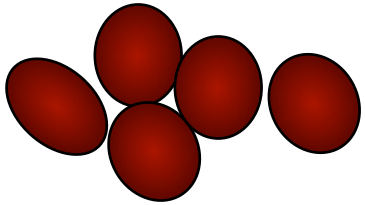
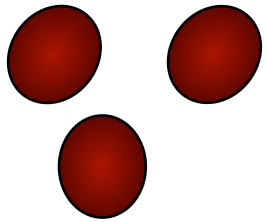
# Socio-Cultural aspects: Population




- 128 families live in Kilonga of Kibwabwani village cluster
- Age range and approximate population in each age group is seen in the figure
- Roughly 70 % of the population is under the age of 25 years
- Females are generally more than the males in almost all groups

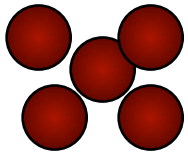
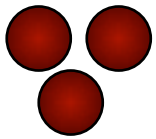
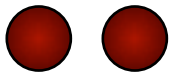
# Socio-Cultural aspects: Ethnic Composition

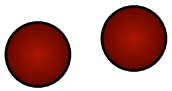
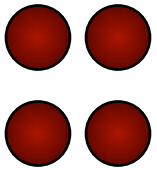
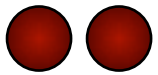
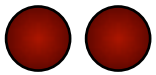
- The entire population belongs to the Giriama tribe which is one of the 9 tribes in the coastal region
- The religious affiliations of the community in Kilonga especially are as seen below:

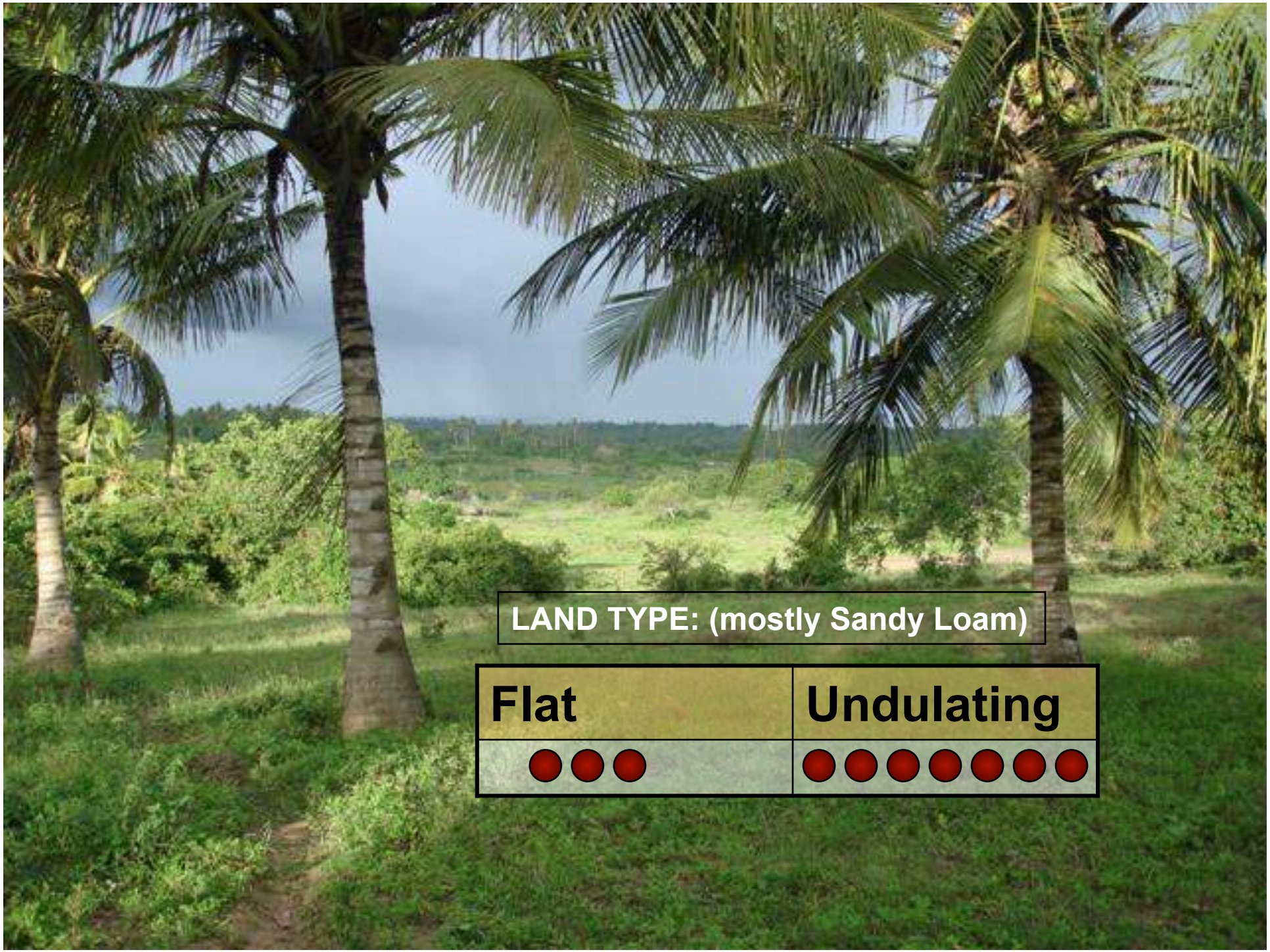
| Muslim | Christian | ATR |
|---|---|---|
|  |  |  |

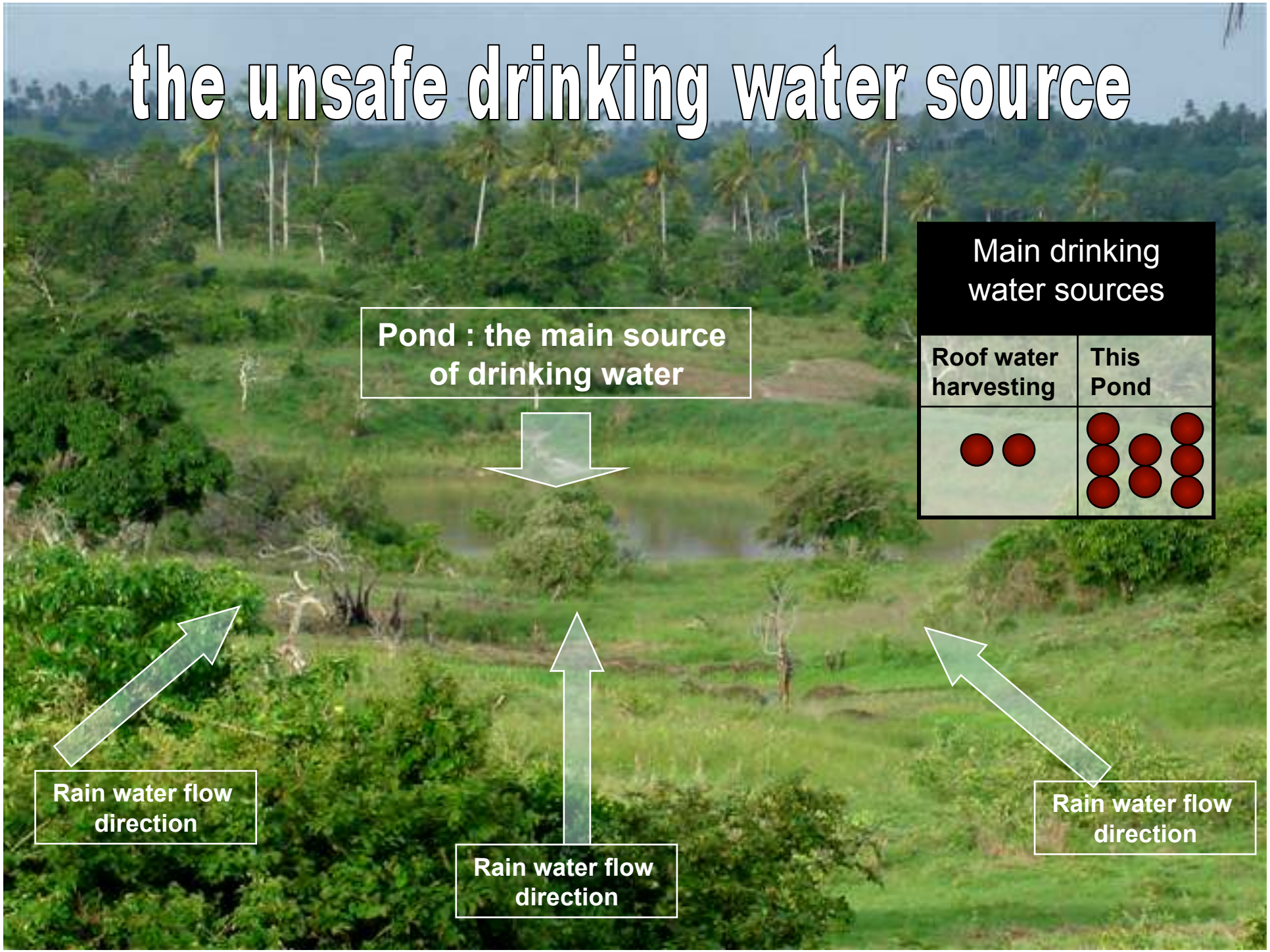
## Socio-Cultural aspects: Gender analysis (Kilonga)

| Issue | Male | Female |
|---|---|---|
| Overall ratio of the population | 0 0 0 0 | 0 0 0 0 0 0 |
| Decision on use of family money | 0 0 0 0 | 0 0 0 0 0 0 |
| Gender based violence | 0 0 0 0 0 0 0 | 0 0 0 |

| Main responsibility of men | | |
|---|---|---|
| Casual work (digging) | herding | Masonry and Thatching |
|  |  |  |

| Main responsibility of women | | | |
|---|---|---|---|
| Fuel wood collection | digging | Fetching water | Taking care of babies |
|  |  |  |  |

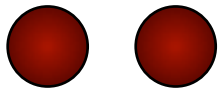
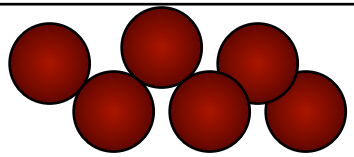

LAND TYPE: (mostly Sandy Loam)
Flat
Undulating


the unsafe drinking water source
Pond : the main source of drinking water
Main drinking water sources
Roof water harvesting
This Pond
Rain water flow direction
Rain water flow direction
Rain water flow direction

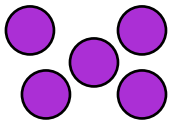
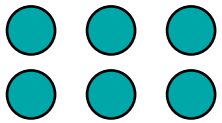
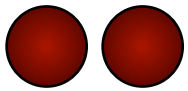
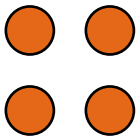
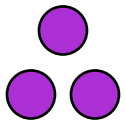
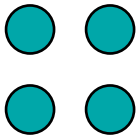
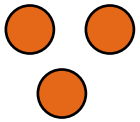
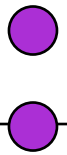
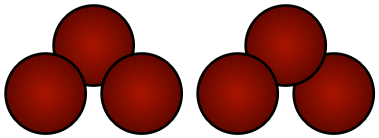
**Dr. Julius Kavuludi, Country Director, MAP International Kenya** reviews all information collected along with other facilitators before the larger assembly of villagers.

# RFSA Rapid(household) Foodsecurity Status Assessment:

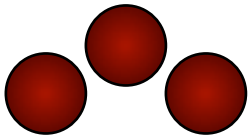
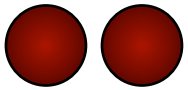
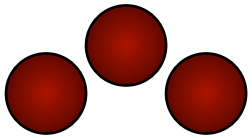
**(of the Kibabwani village cluster)**

| Population ratio | Local name (& Description) | IE Ratio (Income-Expenditure ratio) | |
|---|---|---|---|
| | | INCOME | EXPENDITRURE |
| | **Matajiri** *(the well off)* | 0 0 0 0 0 0 0 0 0 | 0 0 |
|  | **Nafuu** *('somehow manage')* | 0 0 0 0 0 | 0 0 0 0 0 |
| | **Mutsowi** *('they lack')* | 0 0 | 0 0 0 0 0 0 0 0 |
|  | **Mkiya** *('poor')* | 0 | 0 0 0 0 0 0 0 0 0 |

# RFSA and access to education:

| Population ratio | Local name (& Description) | Stage of Education (Access profile) | | |
|---|---|---|---|---|
| | | Primary school | Secondary school | Middle college/ Univ. |
| | **Matajiri** *(the well off)* | |  |  |
|  | **Nafuu** *('somehow manage')* |  |  |  |
| | **Mutsowi** *('they lack')* |  |  | |
|  | **Mkiya** *('poor')* | | | |

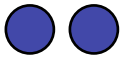
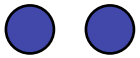
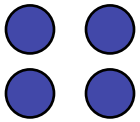
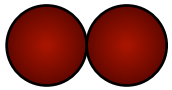
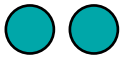
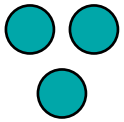
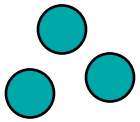
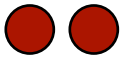
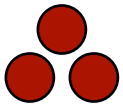
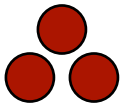
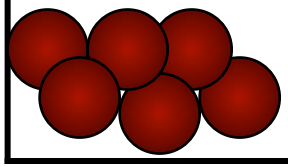
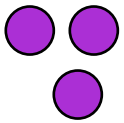
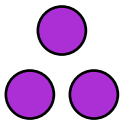
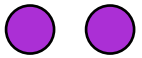
# Type of health seeking behavior in the cluster of villages

| | Type of options accessed | | | | |
|---|---|---|---|---|---|
| | Do nothing (Kuhasa) | Pray (Muvambi) | Medicine man (Aganga) | Go to the health centre (Daktari) | Self medication |
| **% of Population** | | |  |  |  |
| **Perceived success rate** | **50%** | **40%** | **30%** | **70%** | **30%** |

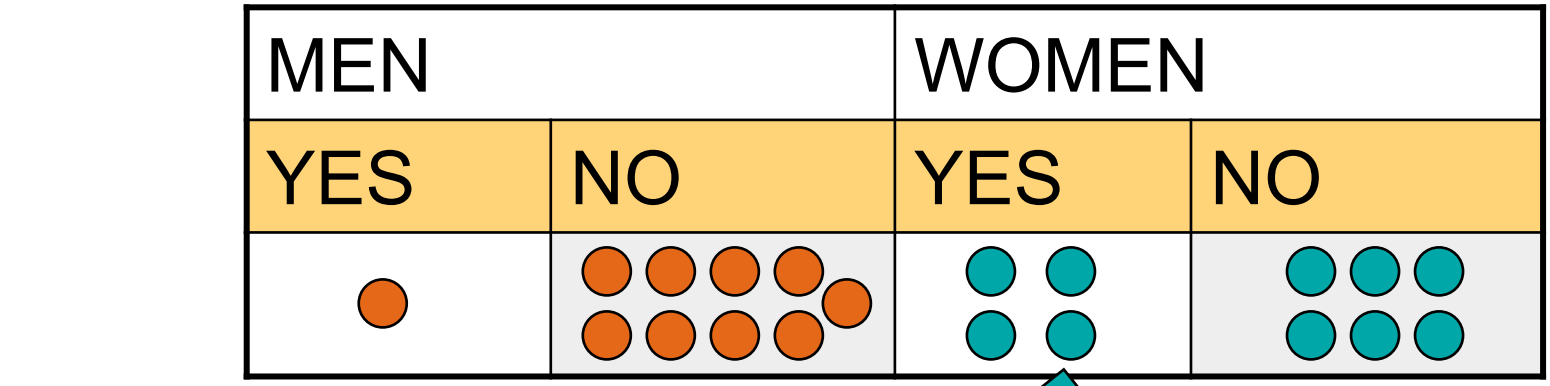
Villagers joke about each other's health seeking behavior...

...and soon turn their attention back to the "profile of their lives"..

# RFSA and access to Health care:

| Population ratio | Local name (& Description) | Type of health care facility (Access profile) | | | | |
|---|---|---|---|---|---|---|
| | | Do nothing | pray | Medicine man | Go to the health centre | Self medication |
| | **Matajiri** *(the well off)* | |  |  |  | |
|  | **Nafuu** *('somehow manage')* | |  |  |  | |
| | **Mutsowi** *('they lack')* |  |  |  | | |
|  | **Mkiya** *('poor')* |  |  | | |  |

# Family planning practices in operation in the community:

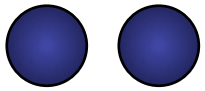
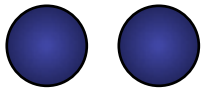
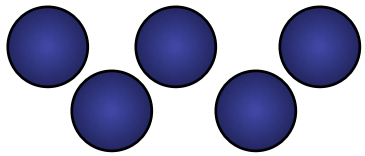



| RHYTHUM METHOD | COITUS INTERRUPTUS | CONDOMS |
|---|---|---|
| ● | ● | ●●●●<br>●●●● |

| PILLS | NORPLANT INJECTION | IUD | FEMALE CONDOM | RHYTHUM |
|---|---|---|---|---|
| ●● | ●●●<br>● | ● | ● | ● |

- Available from the dispensary
- But also sold in shops

# Nutritional status of 1-5 year olds:

| STATUS (AS ASSESSED BY THE MOTHERS) | APPROXIMATE RATIO |
|---|---|
| GOOD |  |
| FAIRLY POOR | |
| MODERATELY POOR |  |
| EXTREMLY POOR |  |

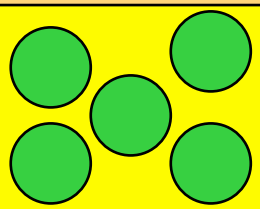
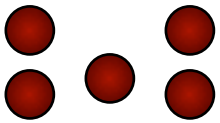
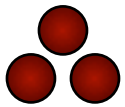
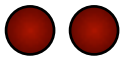
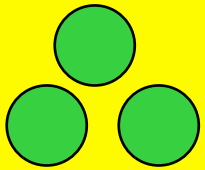
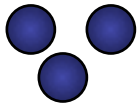
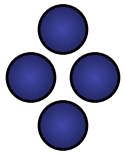
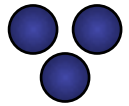
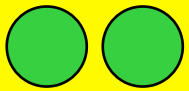
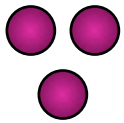
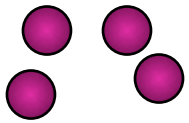
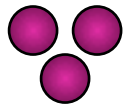
**Observations of mothers**

**children with Malnutrition (symptoms):**

- ***Wasting***
- ***Not happy***
- ***Rough skin***
- ***Swollen belly***
- ***Frequent sickness***
- ***Weakness***
- ***Loss of appetite***
- ***Irritability***
- ***Oedema***
- ***Hair change***
- ***Rickets***
- ***Pica***

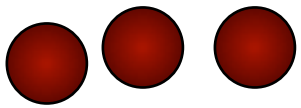
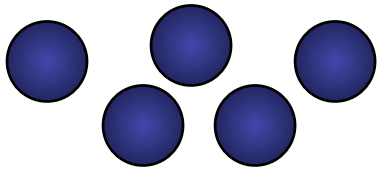
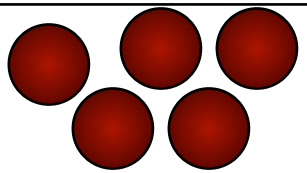
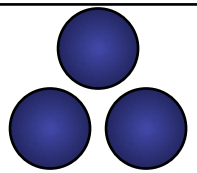
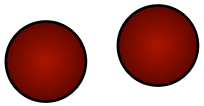
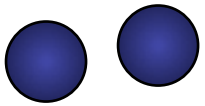
# Disease distribution:

**GENDER & AGE Wise**

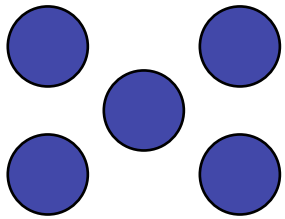
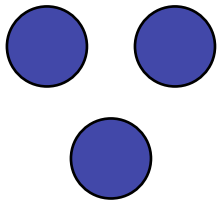
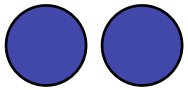
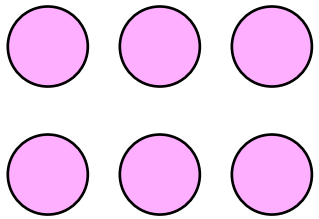
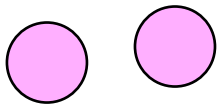
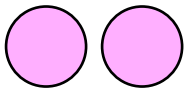
| Group | Frequency | DISEASE | | |
|---|---|---|---|---|
| | | Malaria | Cough | Diarrhea |
| Children |  |  |  |  |
| | | Malaria | Gynecological | Respiratory |
| Women (maternal) |  |  |  |  |
| | | Malaria | STDs (*) | TB |
| Men |  |  |  |  |

**(*)Men in the FGD observed that it was impossible to get to the age of 40 without getting an STD first !!**

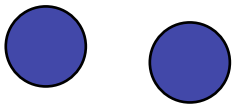
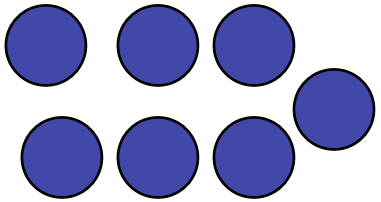
# Ratio of number of children per man and per women in the village:

| Age range | Average ratio of numbers of children to men & women | |
|---|---|---|
| | Per MAN | Per WOMAN |
| Children under 5 years |  |  |
| Children 6-10 years |  |  |
| Children above 11years |  |  |

# Infidelity in marriage

| | Sexual behavior | | |
|---|---|---|---|
| | Very faithful to spouse | Sometimes faithful sometimes not | Never faithful |
| MEN |  |  |  |
| WOMEN |  |  |  |

# who do the unfaithful men go to for sex?

| | Profile of these women | | |
|---|---|---|---|
| | Those who sell sex due to poverty (just for some food or clothes) | Those who have sex out of friendship with the man | Commercial Sex workers (charge 100 KSH per time) |
| |  |  | |
| Marital status of these women | 50% single and 50% married | 80 % are married women | 20 % are married women |

Reasons why married women seek 'outside friendship':

1. **Their husbands work elsewhere and don't come home**
2. **There is failure of satisfaction in the marriage**
3. **Some men have become "functionless" (**-Very significant)**

OFFICE OF TH
CHIEF'S OFF
MWANAMWINGA
P.O. BOX
KALOLENI
MISSION

OFFICE OF THE PRESIDE
CHIEF'S OFFICE
MWANAMWINGA LOCATION
P.O. BOX 1
KALOLENI
MISSION
VISSION

Part -1

# Bio-Physical conditions: Climate

- There were no immediately available records of temperature, humidity and rainfall for the cluster of villages. Discussions with farmers revealed that rain falls from April to July (70% of the rainfall) and again from October to November(30% of the rainfall). While there are showers during several months of the year, the ones that are any significance to farmers are those that start off in April and end in July and those that start in October and end in November. The Pattern and distribution of this was established with farmers using the TST and the approximate amounts of rain per month were established by extrapolation of the Remote sensing data and its secondary calculations Months with rainfall below 40 mm are the dry months.
- Overall rainfall approximately 1800-2000 mm per annum
- The area in General is considered to be a very high rainfall area for Kenya.
- Agriculture in the area is predominantly rain fed, but supporting irrigation can make a significant change for them.
- Technically, there is tremendous opportunity for Watershed development through rainwater harvesting. and  horticulture

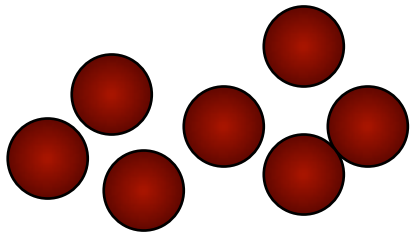
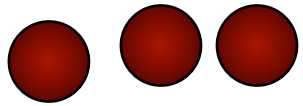
| Jan | Feb | Mar | Apr | May | June | July | Aug | Sept | Oct | Nov | Dec |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | |
| Below 40 mm | Below 40 mm | Below 40 mm | 88 mm | 440 mm | 352 mm | 352 mm | Below 40 mm | Below 40 mm | 176 mm | 352 mm | Below 40 mm |

# Bio-Physical conditions: Rivers and water bodies

- The Villages are situated around a water reservoir that has water available for them for most of the year till it dries up. This is ½ acre in size and 4 Meters deep and holds water for round 10 months a year.
- Since this is at the lowest point, it is subject to serious contamination as rain water runs off the land carrying all the rubbish and fecal matter with it , finally ending up in the pond.
- Since this water then meets 80 % of the needs of the community is a major contaminant and disease spreader..
- The high rainfall makes it possible to carry out rain water harvesting.

## Bio-Physical conditions: Land resources in May 2008

## Other Uses: Grazing

| Cultivated | Fallow |
| --- | --- |
|  |  |

# Economic situation: Farming systems (Cropping pattern)

Crops grown:

- **Rice:**
  - Planting during long rain season and harvesting after two months.
  - Seed rate 4 - 8KG per acre
  - Approximate output 50-90 per acre
  - Variety ‘pishori” – local variety
  - All of rice produced is consumed in the village.
  - All villagers here, they use only their family labor, because their rice crop has very low yield and labor intensive.
  - Crop produced by the household lasts for 2-3 months only.
  - Rice crop damage is due to the following reasons: humidity, poor storage, rodents.

# Economic situation: Farming systems (Cropping pattern)

Crops grown:

- **Cashew nuts:**
  - Planting during rainy season
  - Produces when the tree is 5-7 years old
  - Approximate output 40kg un-roasted per tree, per season.
  - Variety – local variety (the variety is unknown to the local people)
  - At one time farmers grew Cashew with great interest but difficulty in marketing the fruit has discouraged them
  - Average number of trees per house hold is 10-15.
  - Currently they use the fruit for domestic consumption and sale.
  - The poor market has resulted in trees being left untrimmed and allowed to grow to large size

Part -1

# Economic situation: Farming systems (

Crops grown:

- **Coconut:**
  - Many plants of coconut, some systematically grown some just haphazardly.
  - The coconut variety is called Mtsamuri (local name). There are many other varieties too
  - The coconut tree takes an average of 5 -7 years to mature and produce fruit
  - Approximate output 40 - 70 fruit per tree
  - The fruit is available throughout the year.
  - Coconut trees in the area are getting infected by an insect / beetle which badly damages it.
  - Average number of trees per house hold is 10 – 2, depending on acreage.
  - Currently they use the fruit for seasoning food and snacks, cooking oil, tap coconut wine.
  - 70 % of fruit are consumed in the village and 30 % are sold.
  - Average price of selling coconuts is KSHs 3 – 10 per fruit.

Part -1

# Economic situation: Farming systems (Cropping pattern)

Other crops grown:

**Beside rice planting, villagers plant various other vegetables namely:**

- Beans
- Cassava
- Cow peas
- Pineapples
- Bananas
- Maize

Part -1

# Economic situation: Farming systems (Cropping pattern)

Other Crops grown:

- **Pineapples, Water Lily, Sponge Gourd, Cucumber, Leguminous crops, Bananas, Maize and egg plants**
- Vegetables are  for subsistence as yield volumes are small
- By way of inputs, farmers don't use fertilizer or farmyard manure which is surprising and needs to be investigated.

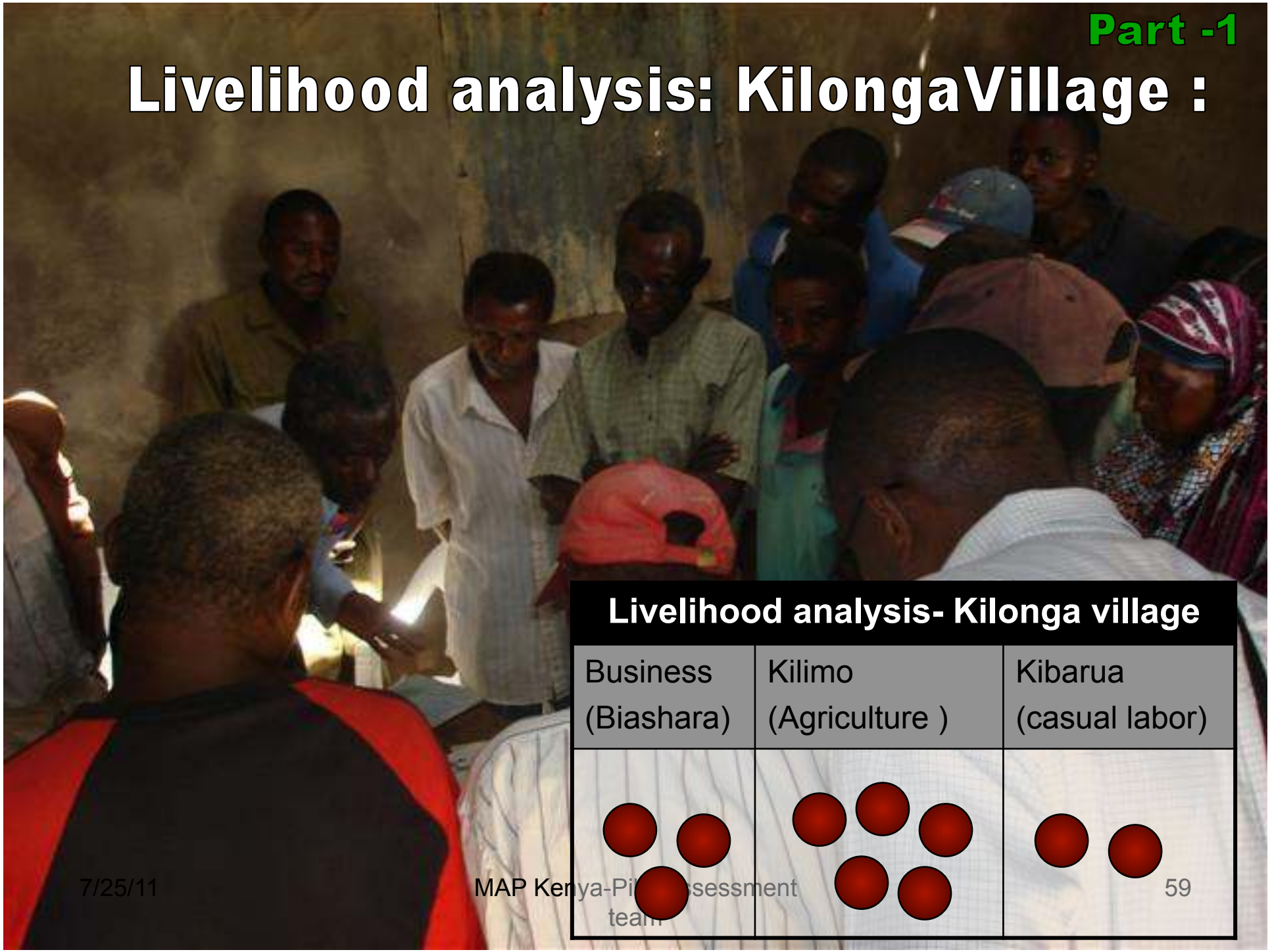
Dr. Kavuludi tries his hand at being a farmer...and decides it is easier to be a Surgeon!

# Economic situation: Enterprises and industry

- Trade of goods and services is very low due to very low purchasing power. Average income per month for an adult male below 900-1000KSH( $15). Income is mainly derived from casual, unskilled labor, coconut drink, hiring of ox and plough, trade in livestock (chicken, goats, cattle), basic processed foodstuff such as maize meal, salt, sugar and occasionally wheat flour. This rural setting has no external investors or investments.

Part -1

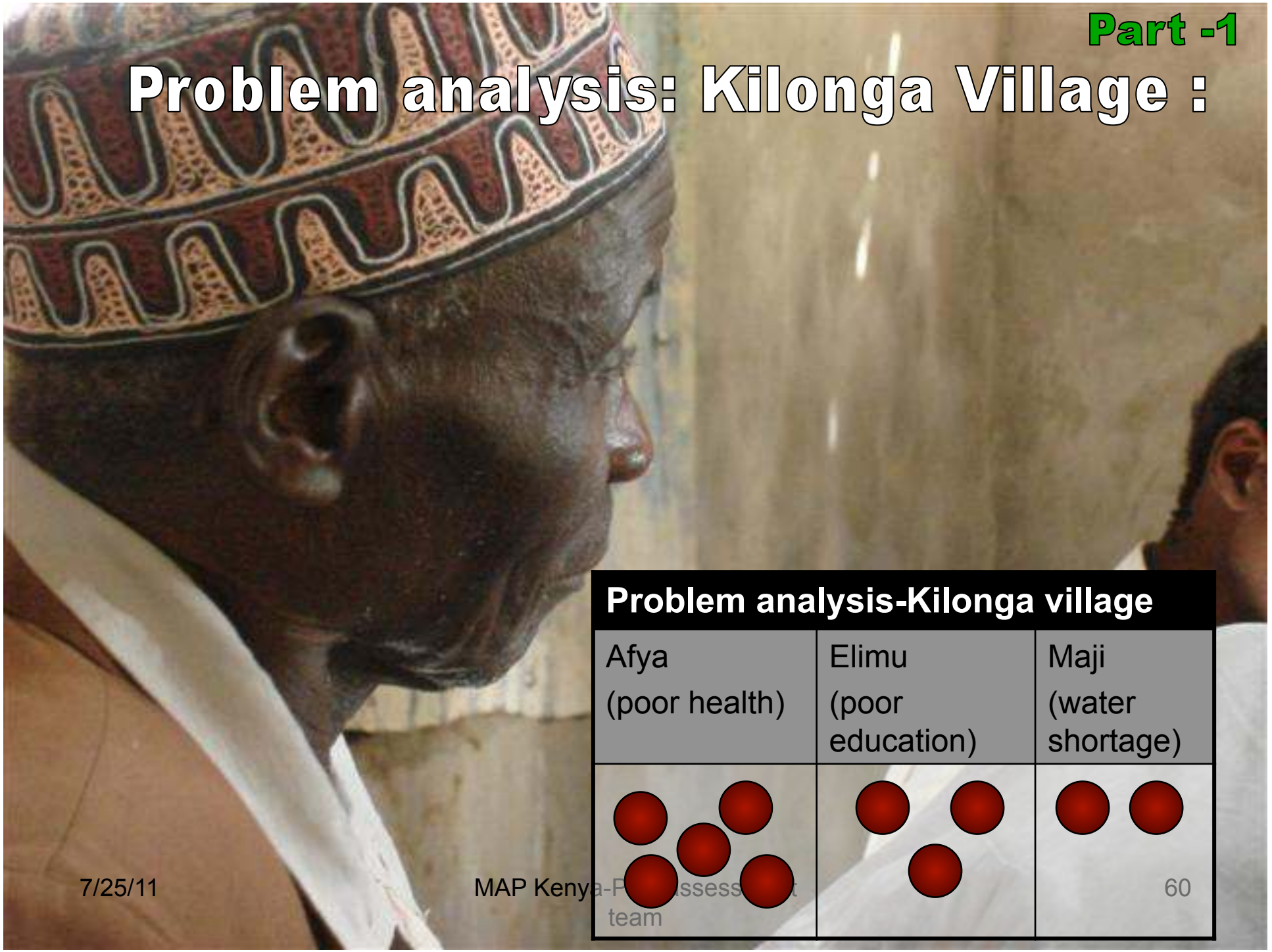
# Livelihood analysis: KilongaVillage :



| Livelihood analysis- Kilonga village | | |
|---|---|---|
| Business (Biashara) | Kilimo (Agriculture ) | Kibarua (casual labor) |
| | | |

Part -1

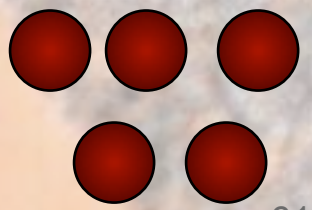
# Problem analysis: Kilonga Village :



| Problem analysis-Kilonga village | | |
|---|---|---|
| Afya (poor health) | Elimu (poor education) | Maji (water shortage) |
| ●●●●● | ●●● | ●● |

Part -1

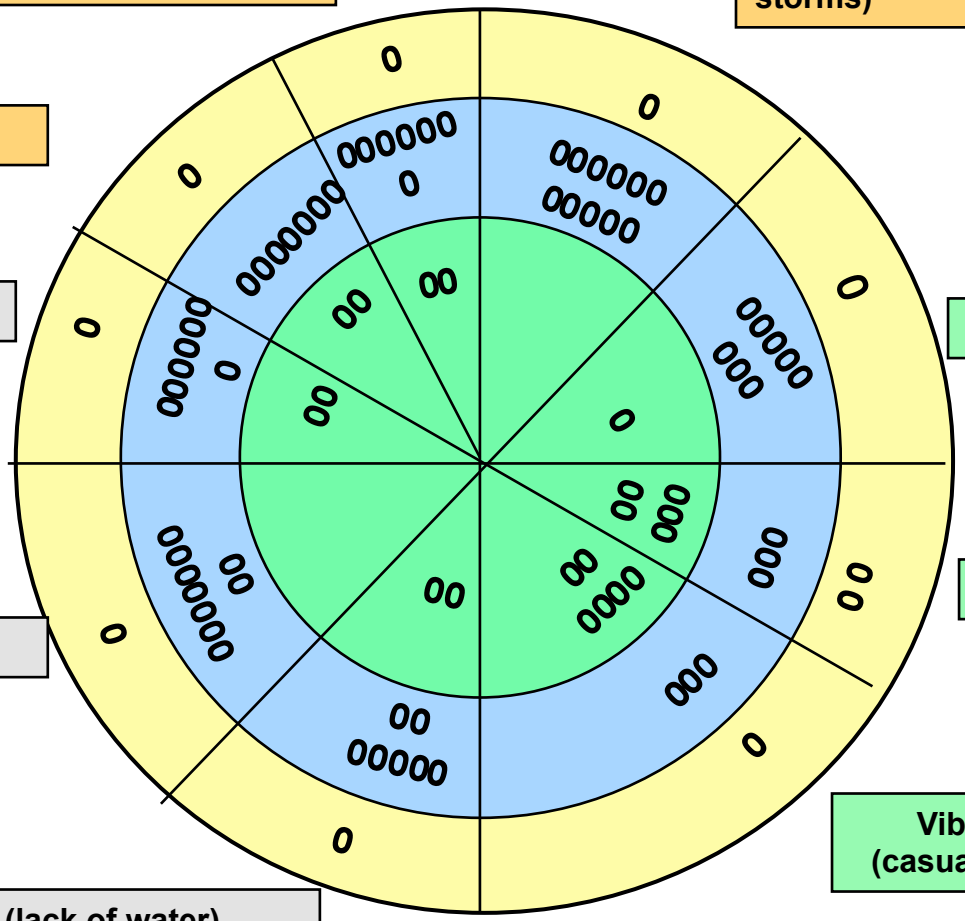
# Uncertainity analysis: Kilonga Village :

| Uncertainty analysis- Kilonga village | | |
|---|---|---|
| Radi (thunder storms) | Ki Pindu Pindu (Cholera) | Ukame (drought) |
| | |  |

# WWVA: Wholistic Worldview Analysis-Kilonga village

May 2008

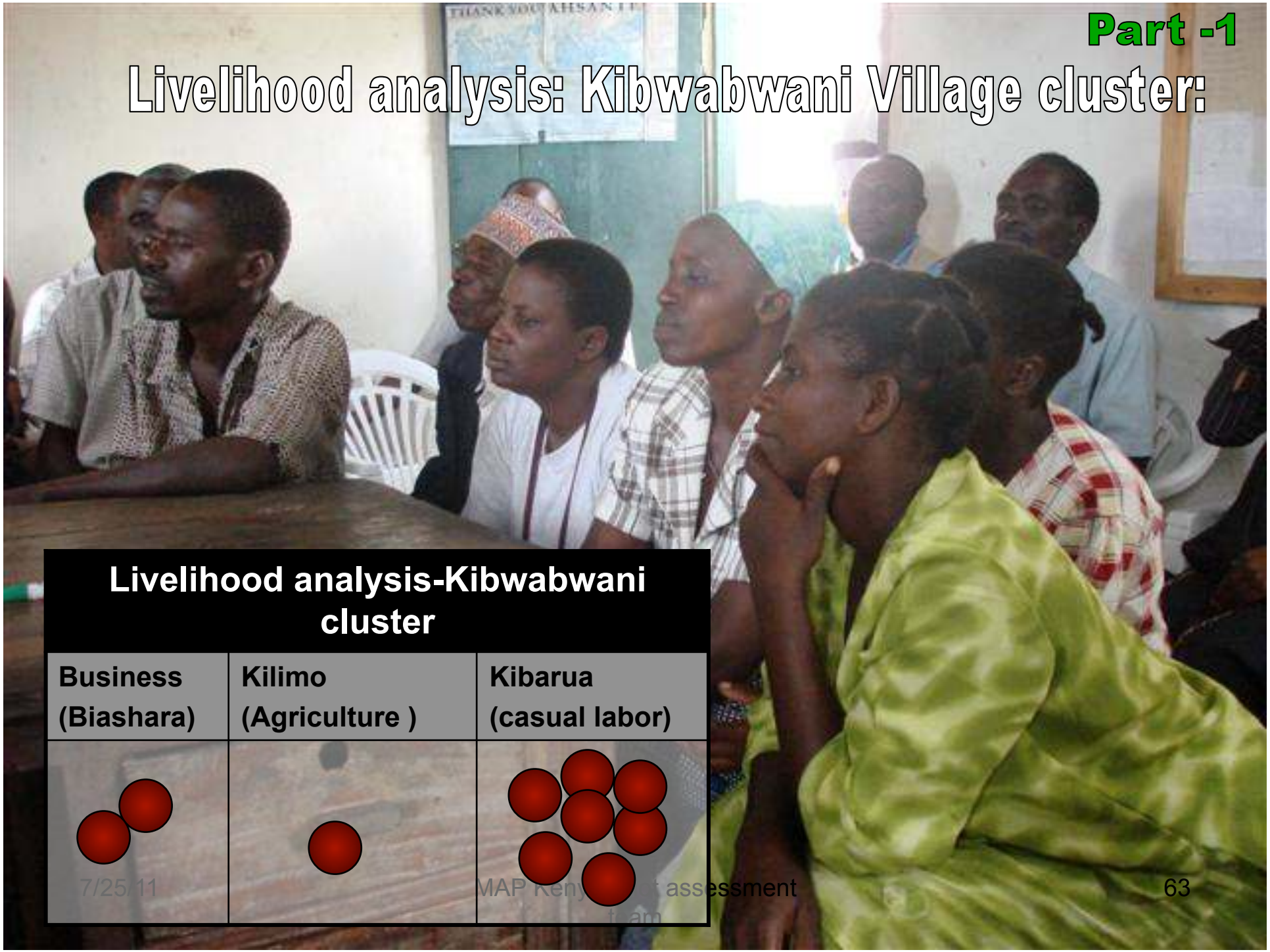
Kaya THV Rapid assessment-May-June 2008




| COLOR CODE |
| --- |
| From: Livelihood Analysis |
| From: Problem Analysis |
| From: Uncertainty Analysis |

Part -1

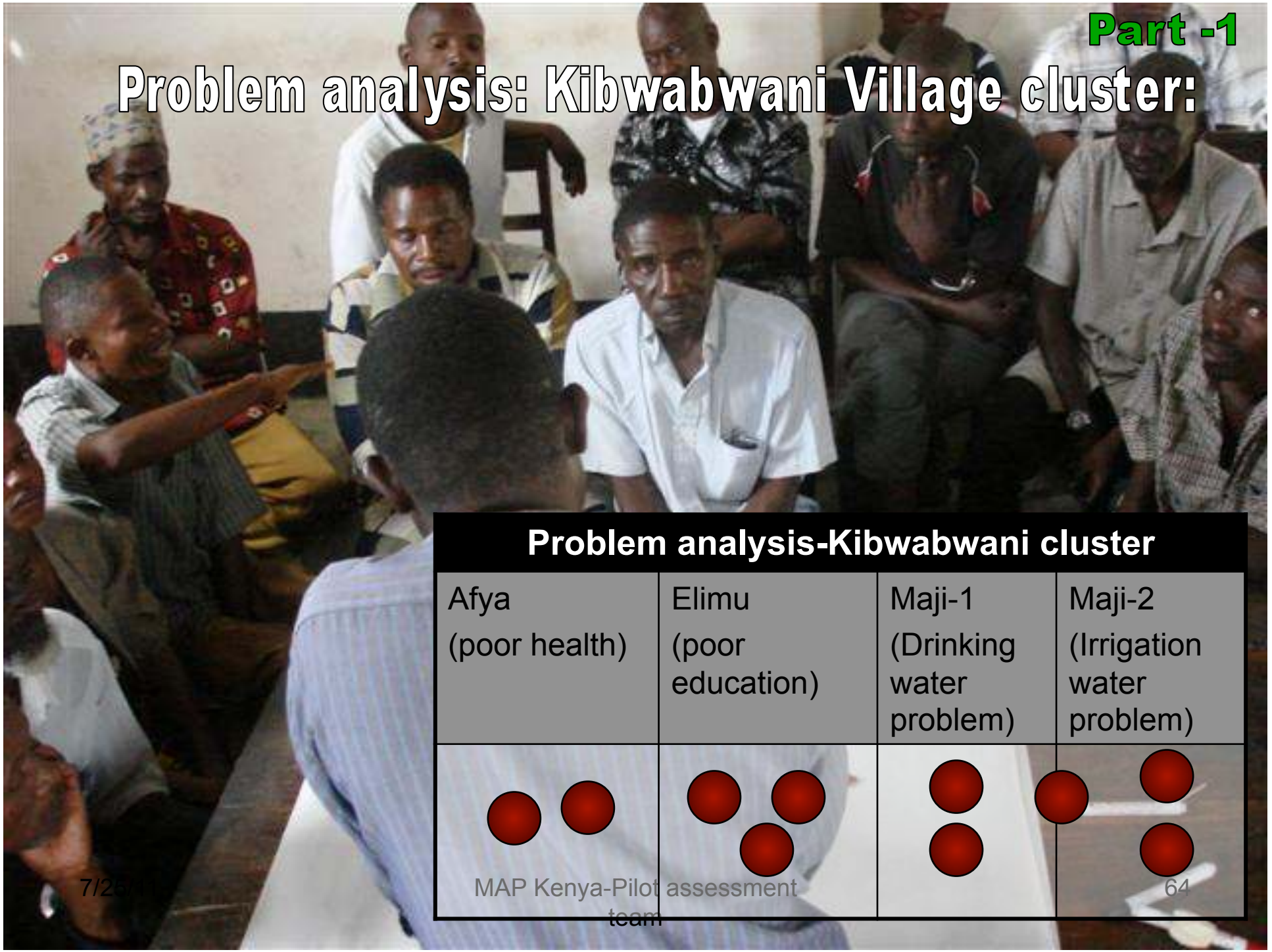
# Livelihood analysis: Kibwabwani Village cluster:



| Livelihood analysis-Kibwabwani cluster | | |
|---|---|---|
| Business (Biashara) | Kilimo (Agriculture ) | Kibarua (casual labor) |
| | | |

Part -1

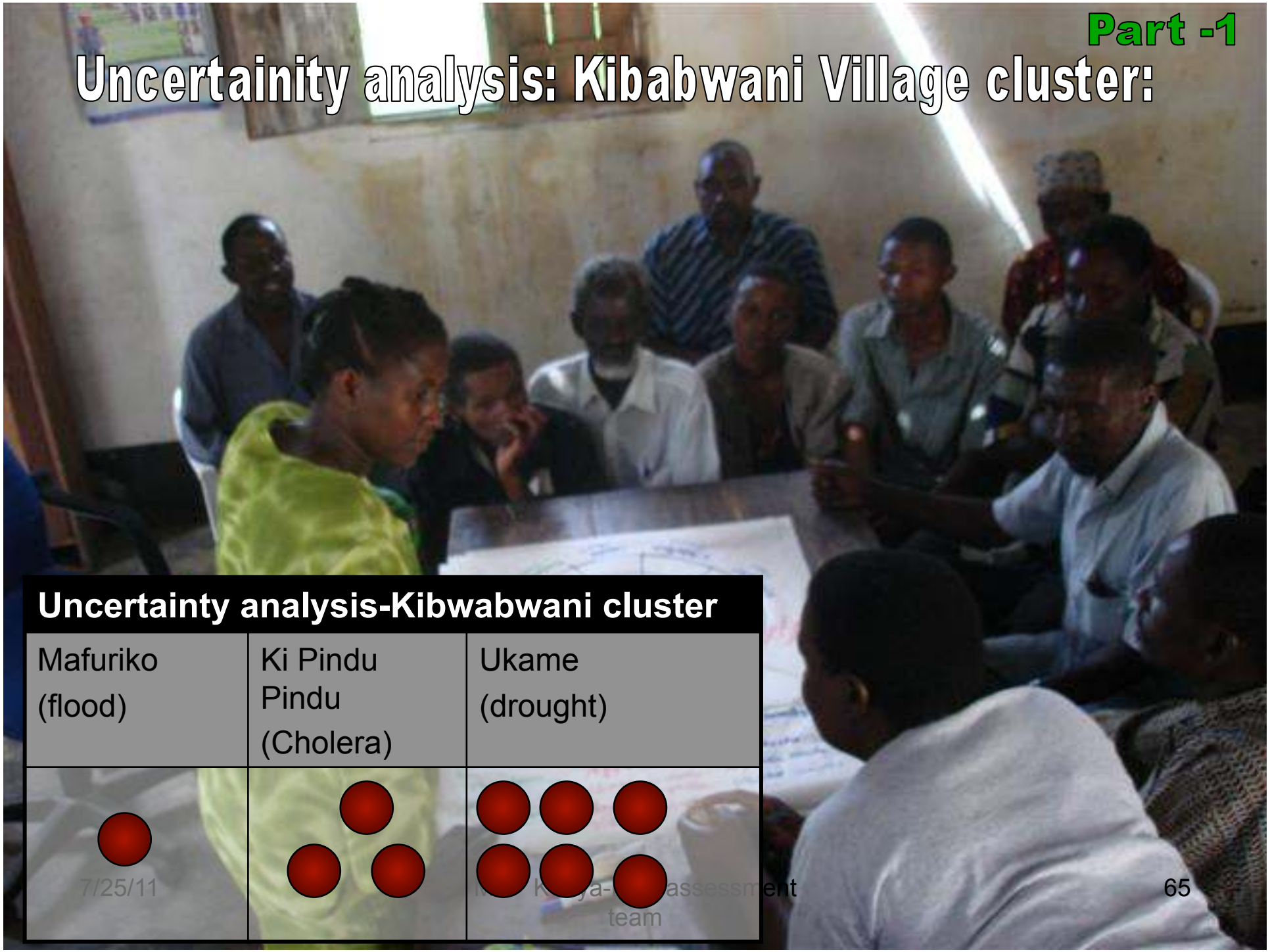
# Problem analysis: Kibwabwani Village cluster:



| Problem analysis-Kibwabwani cluster | | | |
|---|---|---|---|
| Afya (poor health) | Elimu (poor education) | Maji-1 (Drinking water problem) | Maji-2 (Irrigation water problem) |
| ●● | ●● | ●● | ●● |

Part -1

# Uncertainity analysis: Kibabwani Village cluster:

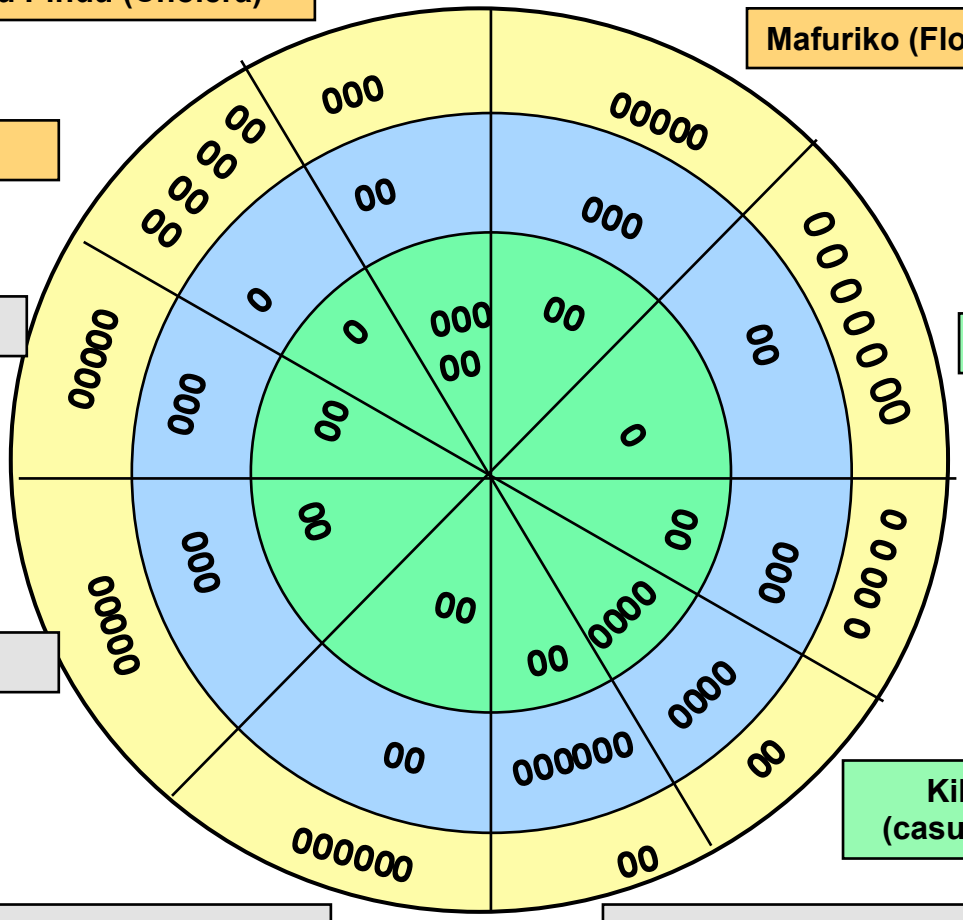


| Uncertainty analysis-Kibwabwani cluster | | |
|---|---|---|
| Mafuriko (flood) | Ki Pindu Pindu (Cholera) | Ukame (drought) |
| ● | ● ● ● | ● ● ● ● ● ● |

# WWVA: Wholistic Worldview Analysis-Kibabwani village cluster

May 2008

Kaya THV Rapid assessment-May-June 2008



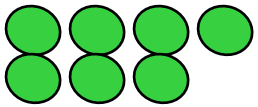
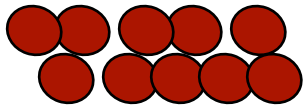
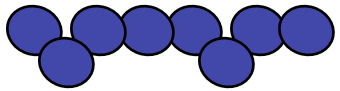

| COLOR CODE |
|---|
| From: Livelihood Analysis |
| From: Problem Analysis |
| From: Uncertainty Analysis |

# WWVA: analysis & community need priorities

1. **Overcoming Ukame (Drought)**
2. **Biashara (business development skills)**
3. **Maji-1 (safe drinking water)**
4. **Afya (poor health improvement)**
5. **Elimu (improve poor education)**
6. **Kilimo (agriculture development)**
7. **Mafuriko (flood prevention)**
8. **Ki Pindu Pindu (Cholera prevention)**
9. **Kibarua (casual labor skills improvement for increasing remuneration**
10. **Maji-2 (improving irrigation systems)**

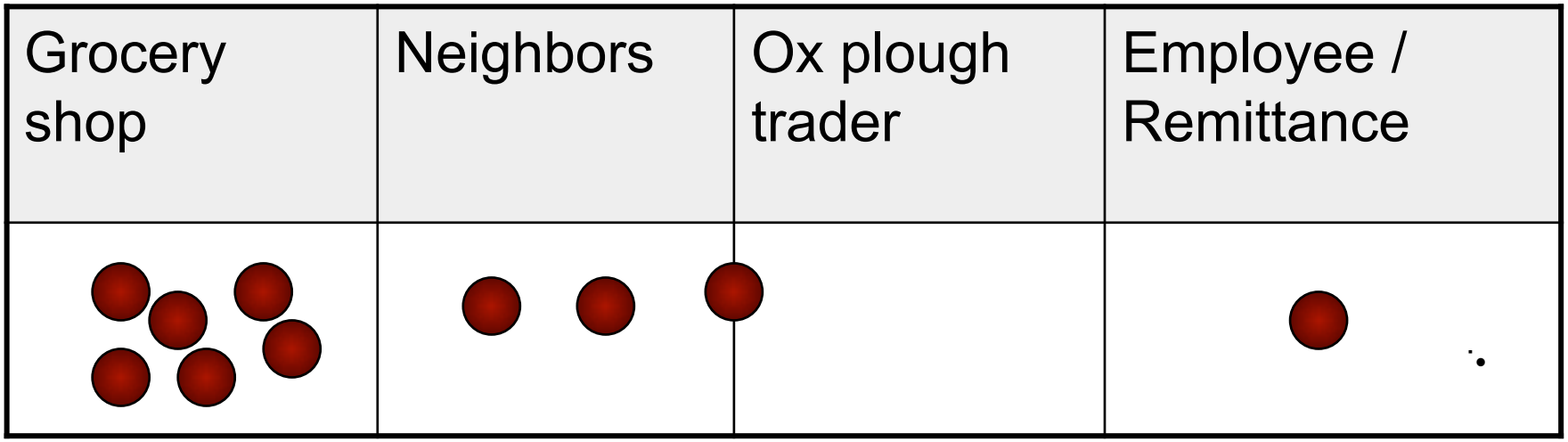
# Economic situation: Enterprises and industry

## Assets of villagers: In Kilonga village:

| category | Livestock | Business | Coconut trees |
|---|---|---|---|
| Well off |  | | |
| Medium Poor | |  | |
| Poor | | |  |
| Very poor | | | |

# Economic situation: Financial services and access to credit

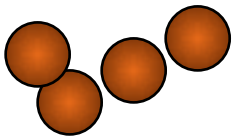
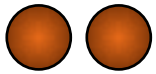
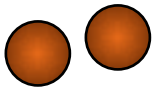
## Credit Facilities:




## Purpose for which Loans taken:

- The villagers use money for buying food or other small items.

## Some Pointers: (Expenditure analysis)

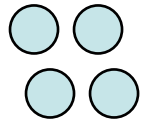
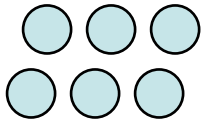
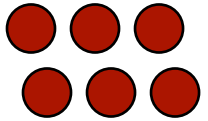
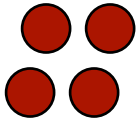
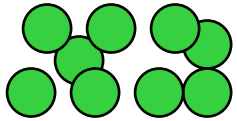
| Food | Education | Medicine | Clothes | Other expenses |
|---|---|---|---|---|
|  |  |  | | |

This slide was updated on 2nd July 2008 after Clement did the assessment on 1st. July 2008.

Part -1

## Educational facilities: Other services/ social infrastructure

- Community has 30% literate and 70% illiterate population.
- 30% of student population is girls.
- (Literacy is defined as ability to read and write in any language)

| | Male | Female |
|---|---|---|
| Primary |  |  |
| Secondary |  |  |
| College | |  |

Note: This information was debated and re-verified: The ratio is ok. The girls after primary education they are married off or some even earlier after puberty. Related to college - most of the young men seek for jobs immediately after secondary.

Part -1

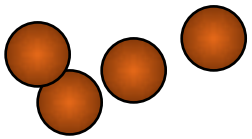
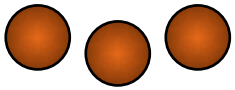
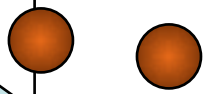
## Physical and social infrastructure: Physical infrastructure

- Most houses built using raw clay filled between networked sticks, fastened and secured with reeds/ropes. Columns reinforced using local stones piled on top of each other and bonded with coral/ phonolite which has an effect like cement. Roofing material: thatch or iron sheets.

# Other on-going /Planned projects:

- There are plans for establishing a police out post in the village:
- We are very happy to cooperate with MAP International in your program plans
    - Kibwabwani Location Chief : Joseph Kitsao

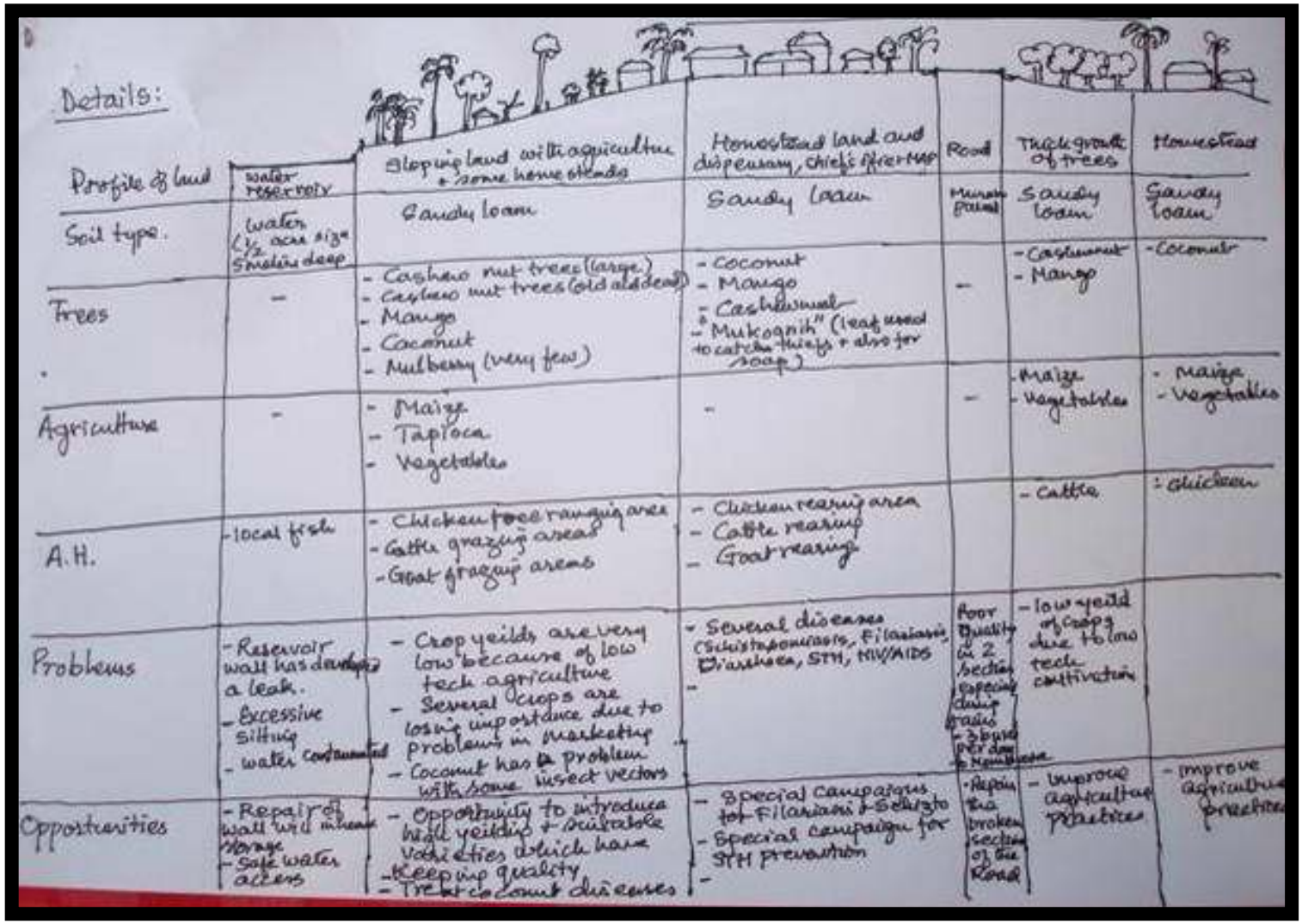
## Some Pointers: (Expenditure analysis)

| Food | Education | Medicine | Clothes | Other expenses |
|---|---|---|---|---|
|  |  | |  | |

**Note: this was redone in the community Later with the community only as the Information providers**

**This is my opinion since I am a resident there and it can do for now. (This was done with Safari)**

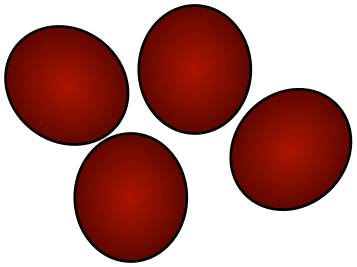
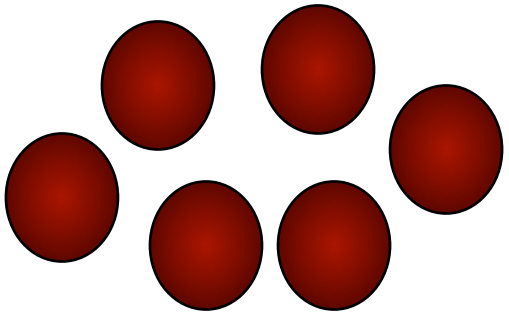
# Transect: of Kilonga village



Details:

| Profile of land | water reservoir | Sloping land with agriculture + some homesteads | Homestead land and dispensary, chief's office + MAP | Road | Thick growth of trees | Homestead |
|---|---|---|---|---|---|---|
| Soil type. | water (½ acre size 5 metres deep | Sandy loam | Sandy loam | Murram Paved | Sandy loam | Sandy loam |
| Trees | - | - Cashew nut trees (large)<br>- Cashew nut trees (old and dead)<br>- Mango<br>- Coconut<br>- Mulberry (very few) | - Coconut<br>- Mango<br>- Cashewnut<br>- "Mukognih" (leaf used to catch thiefs + also for soap) | - | - Cashewnut<br>- Mango | - Coconut |
| Agriculture | - | - Maize<br>- Tapioca<br>- Vegetables | - | - | - Maize<br>- Vegetables | - Maize<br>- Vegetables |
| A.H. | - local fish | - Chicken free ranging area<br>- Cattle grazing areas<br>- Goat grazing areas | - Chicken rearing area<br>- Cattle rearing<br>- Goat rearing | | - Cattle | - Chicken |
| Problems | - Reservoir wall has developed a leak.<br>- Excessive silting<br>- water contaminated | - Crop yeilds are very low because of low tech agriculture<br>- Several crops are losing importance due to problems in marketing<br>- Coconut has a problem with some insect vectors | - Several diseases (Schistosomiasis, Filariasis, Diarrhoea, STH, HIV/AIDS<br>- | Poor quality in 2 sections especially during rains<br>- 3 buses per day to Mombasa | - low yeild of crops due to low tech cultivation | |
| Opportunities | - Repair of wall will increase storage<br>- Safe water access | - Opportunity to introduce high yeilding + suitable varieties which have<br>- Keeping quality<br>- Treat coconut diseases | - Special campaigns for Filariasis + Schisto<br>- Special campaign for STH prevention<br>- | - Repair the broken section of the Road | - Improve agricultural practices | - Improve agricultural practices |

# Communication: Two national GSM networks available (Safaricom and Celtel Kenya)

| Have cell phones | No cell phones |
| --- | --- |
|  |  |

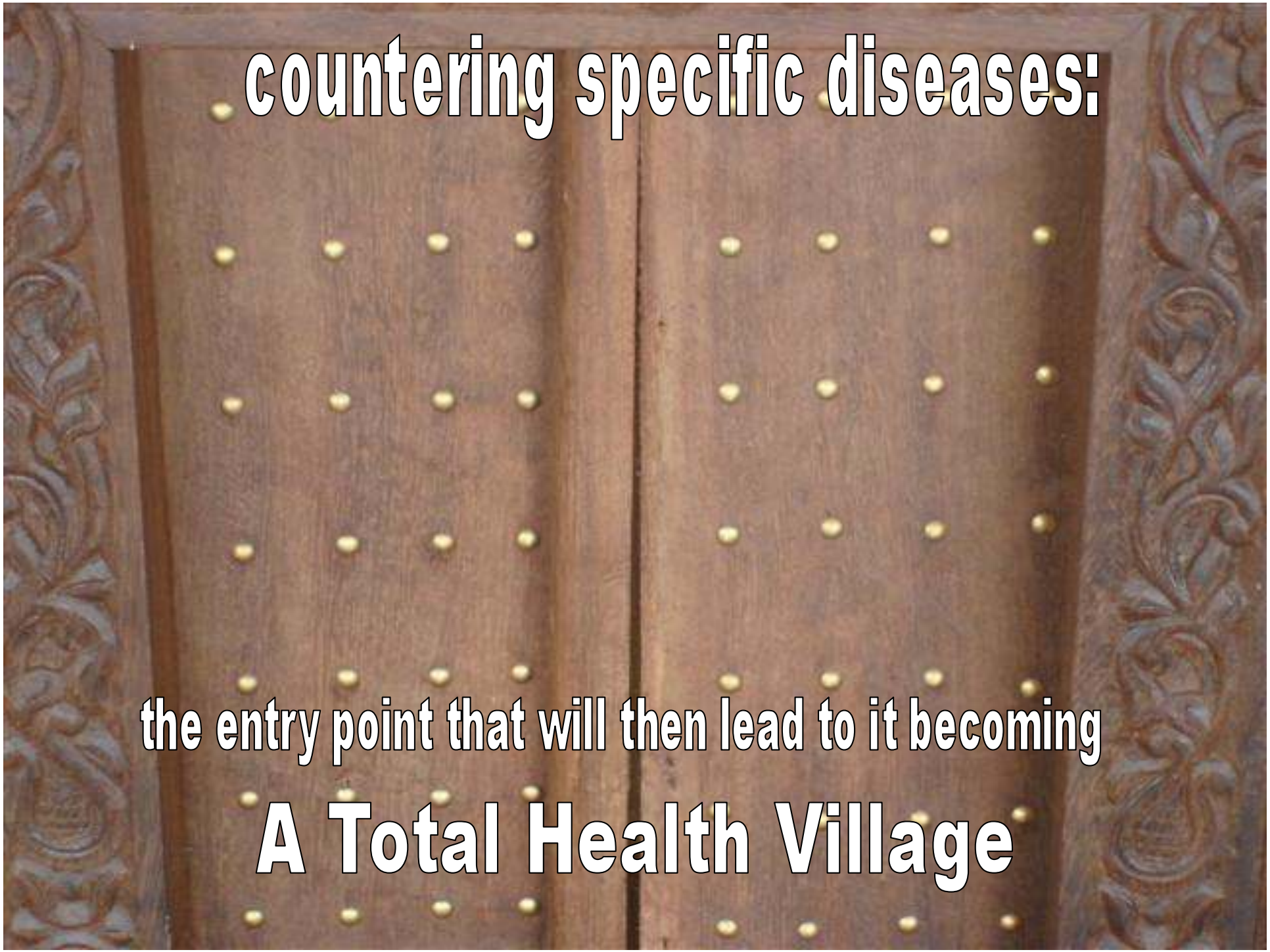
# Voices of the poor

- **“ Surviving every day is a struggle. It is hard to make ends meet””**
- **“We produced a lot of Cashew here, but we didn’t get a good market for it so we are discouraged”**
- **“Yes going to the Hospitali gives better results but we don’t have money for treatment”**
- **“It is hard to reach the age of 40 for a man without getting STD”**
- **“some women have no alternative but to sell sex…they often do it just for some food or a small bag of corn”**
- **“we know the water from the tank is not safe to drink, but what do we do when we have no other water?”**

# Project Design Matrix -LFA

| GOAL | Impact/ Objective | Outputs | Activities |
|---|---|---|---|
| ***Community in Mwanamwinga (Kibwabwani sub-location) empowered to create conditions that contribute to Poverty reduction and improved Health in the region*** | **Food security** in Kibwabwani improved | **Countering drought through watershed development and increased access to irrigation** | **Network** with agriculture university and procure appropriate seeds for sandy soil |
| | | | Train farmers on modern farming methods for improved food production |
| | | **Mitigating damage caused by floods in the rainy season** | Field visits to successful farmers at the coast and to resource persons in agriculture |
| | | | Initiate a forestation efforts and environmental protection |
| | | **Improved agriculture** | Initiate a demonstration farm within the community |
| | | | Facilitate water pumps for irrigation and water pan construction |
| | **Literacy levels** among children and skills in adults improved | **Improved literacy** in Kibwabwani sub-location especially of girl children | **Networking** to get construction of classrooms and Office |
| | | | Training on functional adult literacy |
| | | **Improved business skills** among interested adults so that their capacity to earn is increased | Advocating for greater interest in formal education performance |
| | | | Carrying out advocacy to enhance girl child education |
| | | **Improved capacity of laborers in Kibwabwani to get better remuneration** | Carrying out advocacy for the recruitment of more teachers of construction of secondary schools |
| | | | Advocating for enhancement of career guidance in schools |
| | **Disease burden** in the Kibwabwani sub-location reduced and health improved | **Countering diseases such as LF, Schistosomiasis, STH and other diseases of public health importance** through awareness at a special campaign and training of health promoters | Conduct medical camps on disease specifics (SH, STH, and LF) |
| | | | Provide essential medicines to combat SH, STH, LF |
| | | | Provide health education to the community on SH< STH, and LF and other diseases of public health importance in the village |
| | | | Training of CHWs and TOTs to address the common disease specifics (SH, STH, LF) at the time of a special campaign launch |
| | | **Increased access to safe drinking water** | **Train community members on water treatment methods**, safe disposal of human waste, PHASE, prevention of SH, STH, LF. |

**Note: The bold fonts represent specific Community identified needs**


countering specific diseases:
the entry point that will then lead to it becoming
A Total Health Village

Dr. Phaneus Maggo: is based in Kilonga

The medicine used for Schistosomiasis treatment

Will all this make a difference to me?

Yes ! We want to Anchor that hope!

# Potential future opportunitites:

## For Fund Raising:

- Have a campaign for Filaria/Scistosoma/STH eradication and get someone to fund it (should be well within 3-5K)
- Have a special campaign and surgical camp for operation of hernias and Hydrocoel cases (should be well within 3K for travel, stay and antibiotics and other medications)
- Break up costs for each activity (the 10 community priorities and cost them). This can be further divided into number of beneficiaries to state …a gift of …'x' $ can benefit ' XXX' beneficiaries in '----' program
- Fund raise for school building (to e tied in with the authorities (you assure that a teacher will be assigned from the government and we'll raise fund for additional class room). Community can be asked to commit to ensure children will attend (especially girls)
- Other possibilities: sponsor a child/sponsor a family/ sponsor an even/sponsor an activity