

FREE THE CHILDREN

Interim Report

Adopt A Village - Salabwek

Submitted To

SVQF

Reporting Period

July 2009

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Abbreviations

AAV – Adopt A Village

FGM – Female Genital Mutilation

FTC – Free The Children

SVQF – Sanam Vaziri Quraishi Foundation

Executive Summary

Title	Adopt A Village
Country	Kenya
Program Goals	Reduce poverty and the incidence of poverty related diseases Reduce infant mortality and improve maternal health Increase empowerment and independence of women Increase base family income through sustainable and diversified income generating activities Improve access to clean and safe water for all community members
Sectors of Focus	Water and Sanitation, Health, Alternative Income
Operational Area	Salabwek
Program Start Date	January 2009
Funding Partner	SVQF
Total Budget	118,600 USD
Fund Disbursed To Date	65,000 USD ¹
Predicted Number of Beneficiaries	5,000
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Introduction

Free The Children (FTC) is pleased to share this interim report with our generous supporters from SVQF. For the past several years, SVQF has played an integral role in FTC's ability to successfully implement our unique and holistic Adopt A Village (AAV) model of international development in the community of Salabwek, Kenya. Activities have been carried out for all three sectors of programming that SVQF is currently funding. The following report details the program objectives, includes information on completed activities, describes our performance expectations and also provides a thorough analysis of our performance results to date. In accordance with our established evaluation methodology we have provided information describing indicators that demonstrate our developmental results and overall impact thus far. The report also charts out our performance expectations and our performance results to date in order to facilitate a clear view of what our goals are and what we have accomplished to date in order to honour our commitment to you as a valued partner.

¹ Please refer to Appendix A1 for summarized financial report.

Program Overview

Water and Sanitation

The Water and Sanitation programming carried out by FTC in partnership with SVQF is a critical component to achieving better life outcomes for the people of Salabwek through our AAV model. Upon entry into the community of Salabwek, 90 per cent of the households did not have access to safe drinking water and proper sanitation facilities. In order to access the closest water source, children and women would have to walk for hours to collect water for the household, preventing both groups from engaging in more meaningful activities such as attending school and income generating activities respectively.

Our Water and Sanitation program objectives are to:

- Increase access to clean water for all community members thereby increasing water security;
- and to Reduce the incidence and prevalence of waterborne and water related illnesses

With prior support from SVQF, FTC built a rainwater catchment system at the school site in Salabwek. The rain catchment system uses the school's roof as a collection tool, funneling the rain through the gutters and into a storage tank. While the rain catchment system has proved to be successful, to mitigate risk due to rapid increase in participants, drought or low levels of rainfall, FTC has planned an alternative water source be developed for the community. The proposed water source is a borehole that will be dug to a depth deeper than traditional water wells. The new water source will provide a consistently reliable source of clean water for household use.

The sanitation component of our water and sanitation programming heavily relies on the development of sanitation facilities such as latrines to prevent groundwater contamination. By providing the community with latrines, hand washing stations and sanitation workshops, FTC is increasing the hygiene and sanitation best practices and decreasing the incidence of common illnesses that are caused by poor sanitation in the community. Furthermore, we are also providing sanitation workshops to demonstrate why and how households can build their own personal latrines to avoid community members spreading disease.

Health

In line with FTC's rights based approach to international development, our other objective is to ensure a better quality of life, by helping the people of Salabwek realize their right to the highest attainable standard of health. The people of Salabwek are at higher risk for contracting various waterborne, vector borne and parasitic infections as a direct result of their geographical location and poor water sources. These include typhoid, malaria, ring worm, intestinal worms, amongst many others. The people of Salabwek are also affected by other more general ailments and poverty related diseases including but not limited to diarrhea, malnutrition, fevers/flu, stomach cramps, eye, ear and skin infections, injuries and wounds.

Our Health program objectives are to:

- Improve the health of the community members of Salabwek;
- Reduce the rates of various poverty related diseases;
- and to Reduce infant mortality and improve maternal health.

FTC's health care team is working to ensure that all the community members of Salabwek have access to consistent quality health care services. In addition to the services of a mobile health clinic which involves primary health care services and health care workshops, a health club has been established at the school in Salabwek. The club is responsible for monitoring the cleanliness of the school, as well as spreading knowledge of personal hygiene and health care to the other students. We also actively work with women and student groups. In the community of Salabwek, we currently work with our women's group and the Student Health and Environmental Clubs.

FTC's Health Team also regularly provides the residents of Salabwek with the following services:

- Mobile Health Clinics
- Mobile Health Prevention Services
- Training Student Health Clubs in School
- Preventative Health Workshops for all FTC Primary Schools
- Awareness Days
- General Health Education Workshops

Alternative Income

One of FTC's primary goals in Salabwek is to promote women's empowerment in order to contribute to an overall increase in gender equity in this community. In order to accomplish these goals, FTC has implemented our three phase alternative income programming method. Traditionally, male heads of household are the primary income earners. The dominant sources of income in Salabwek are selling of livestock and farm products and making and selling of charcoal. The average monthly income for a family is \$17 US. However, because of low household incomes, families often remove their children from school in order to contribute to income earning activities. It is therefore important to ensure that women heads of household are able to contribute to household income as well as develop to ability to actively participate in household economic decisions to ensure their children can remain in school.

Our Alternative Income program objectives are to:

- Increase empowerment and independence of women;
- Alleviate poverty through by increasing the base family income – through sustainable and diversified income generating activities;
- and to promote greater self-sufficiency, independence, empowerment and solidarity of entire beneficiary community.

The three phase method includes:

Phase 1: Women are mobilized into more formal women's groups that help them establish their own participation, ownership, and recognition of their own access and control over resources.

Phase 2: After a successful completion of the program's first stage, the groups move to more advanced group formation trainings.

Phase 3: Once the training is completed and put into practice by the group, FTC provides financial literacy trainings, and small loans are given to expand or establish small businesses and provide additional household income.

FTC initially began working with four women groups in Salabwek and that number grew to 18 actively participating groups. The percentage of women who are not in women's groups decreased steadily. By mobilizing the people of Salabwek, especially women, into alternative income groups, FTC provides the community members with knowledge and tools to generate and manage income. The groups are trained in financial literacy, business skills, micro-financing, leadership, and conflict resolution. Small loans are provided in order to expand or establish small businesses to diversify the household income.

Expected Results

Please refer to Appendix A2 for a detailed description of our performance expectations.

Water and Sanitation

The final objectives of the Water and Sanitation programming are to improve water security as well as decrease the incidence of waterborne illnesses and thus improve the overall health of community members in Salabwek. We expect to achieve these objectives by creating a new water source that will satisfy the growing need for accessible clean/safe water, complementing the existing rain catchment system and by creating enough sanitation facilities to meet the growing needs of the community. These will be direct outcomes of the community having access to a reliable uncontaminated water source and a greater number of pit latrines built.

Health

The final objectives of the Health Programming are to improve the overall health of the community members in Salabwek, especially amongst women and children, reduce maternal and infant mortality, increase community awareness of health related issues, and decrease in physically damaging behaviours including alcoholism and FGM. In order to achieve these goals our programs are based on two key components, health education and provision of health care services. We are working to increase the number of community members being diagnosed and treated for disease and other ailments relative to those who report illness. We are also monitoring the frequency with which community members are implementing lessons learnt into their daily lives and how receptive community members are to various health workshop topics. All of this depends on our clinics, workshops, and training sessions being well attended.

Alternative Income

The overall objectives of our Alternative Income programming are to increase women's self-confidence and their ability to make economically relevant decisions in their household, improve community gender perceptions by demonstrating to families the earning power of women, increase women's empowerment, increase women's leadership abilities and build capacity with women's groups, and to increase incomes for participants' households. These objectives will be met by an increase in women's understanding of their ownership, access to and control over resources, women's abilities to manage group dynamics, and women's ability to generate profitable small businesses while fulfilling loan repayments. The activities that will lead to these outcomes include the mobilization of women into women's groups, facilitating training sessions on business practices, financial literacy, and other topics necessary to effectively navigate group dynamics. Also associated with these training sessions are learning sessions on issues that complement women's ability to successfully exercise financial independence.

Accomplishments

Please refer to Appendix A3 for a detailed description of our performance results.

Water and Sanitation

Latrines

The past few months have been very productive for the FTC team in Kenya. Thanks to the generous support of SVQF, and the active participation of all community members, we have built 10 brand new latrines.

Construction of the latrines along with their maintenance and encouraging proper use are key steps to reinforcing basic sanitation practices and reducing easily transmitted diseases. The latrines are built in sets of two stalls (one for females and one for males) and are accessible to all staff and students. Each set was built similarly to an outhouse and specially designed to prevent groundwater contamination.

In addition, latrines are essential to ensure the continuation of girl child education. In the Maasai Mara, most young girls do not go to school during their menstruation as the schools do not have sanitation facilities. As a result the young female students will miss several days of class per month, falling behind in their studies and underperforming as a result. In many occasions girls will drop out of school all together. This trend serves to reinforce local stereotypes that boys naturally perform better than girls in school and as a result female education should be a lesser priority.

By providing students of Salabwek with latrines and a proper sanitation system, we are also providing them with the opportunity to further their education by ensuring they can regularly attend classes.

Workshops and training

Waterborne diseases have always been common for the people of Salabwek. It is therefore crucial to train the community to understand the importance of using safe, clean water to drink and cook. In the past few months FTC conducted 5 sanitation workshops to teach women essential sanitation practices such as the importance of how to boil water and how to build their own latrines at home. The trainings have been extremely successful and have had a direct impact on community members:

- Over 40 percent all women involved in our programming have created their own latrine. This represents an increase of over 20 percent of home latrines compared to two years ago.
- Approximately 50 percent of all trainees now boil their water at home. This represents 12 percent of the entire community.

As a result, of this initiative there has been a significant reduction of waterborne infections in Salabwek which will significantly decrease again with the implementation of additional access to clean water.

Additionally, our team of community mobilizers have visited the school once a month in order to provide students with sanitation workshops that reinforce basic but important sanitation practices. Each workshop is facilitated by a registered nurse who comes to the school once a month and talks to the students about various topics such as:

- The importance of hand washing
- General personal hygiene
- Latrine usage

Students play a crucial role in the dissemination of this information. As part of the various student clubs, including the 40 Salabwek students who belong to the Health Club, children have created student-led sanitation campaigns. Through these campaigns they share information with their peers and with all their family members.

Health

Health Initiatives

To encourage healthy habits FTC has put in place a health challenge for all women in Salabwek. This unique competition involves women implementing “7 habits to a healthy home” with the support of our staff. Once all steps are completed the women receive a government certificate and they celebrate as a group by drinking traditional chai tea. The steps that women have to complete in order to successfully finish the competition include:

- Building a dish drying rack
- Building a home latrine
- Creating a a hand washing station for their families
- Planting a kitchen garden
- Creating a rubbish pit
- Set up a hanging line for clothes
- Boiling Water

The competition has been very successful. One small example of the impact of this initiative is that 98 percent of all women participating in the competition now have their own kitchen garden at home. This greatly improves the level of nutrition for all family members by supplementing diets with more vegetables and legumes.

Workshops

In order to educate all Salabwek women on important health issues hawse have presented seven Health Workshops for all Salabwek’s women groups. These trainings included workshops regarding:

- Personal Hygiene and Sanitation
- HIV/AIDS
- Nutrition
- Home accidents and how to prevent and prepare for them
- Harmful cultural practices

In addition all Salabwek students have been vaccinated and every term they are trained by registered nurses through extensive health workshops. These workshops include First Aid emergency training and the school was recently outfitted with a first aid kit.

Alternative Income

Alternative Income Initiatives and Workshops

The women who have mobilized into our women’s groups are successfully progressing through the three phases of the alternative income programming. To date, 40 women attend each alternative income workshop, 63 animals have been distributed for the purpose of income generating activities, 6

training workshops have been held, and there has been a marked increase in participants' average monthly income.

The most remarkable accomplishment of our women's groups is the higher frequency of these women implementing lessons learnt from complementary learning activities into their daily lives. While our programs have been able to encourage the community as a whole to take up health, and water and sanitation best practices, women from our women's demonstrate a much higher rate of uptake of these activities. For example, since our water and sanitation programs were implemented in Salabwek through the support of SVQF, 12% of the community began boiling water before consuming it, but 50% of women from our women's groups are boiling water. Similarly, while 10% of the community as a whole have established their own pit latrines, 40% of the women from our groups are using pit latrines and 98% of women from our groups have planted kitchen gardens.

Conclusion

SVQF's constant and unwavering support to FTC, along with the passion and resolve of the people in Salabwek are driving the positive transformation of lives in this community. Through our AAV programming, we are building local capacity and empowering all community members to make their vision of change a reality, which in turn leads to better life outcomes for the community as a whole. The accomplishments of our water and sanitation, health, and alternative income programming to date are a direct result of SVQF's generous support, as well as the community members' active participation and engagement with our projects. Going forward, to complete the water and sanitation programming, the borehole construction is our next priority, as are holding our Education Awareness Days for the health programming component. We will provide SVQF with progress reports on these activities upon their successful implementation.

Appendixes

A1. Financial Report

Item	Component	Total Cost	Current Allocation	Balance Remaining
Water and Sanitation				
10 double latrines	Water/Sanitation	\$15,000.00	\$15,000.00	
1 Bore hole	Water/Sanitation	\$50,000.00		\$50,000.00
Health				
Medication	Mobile Health Clinic	\$3,600.00	\$3,600.00	
Medical Supplies	Mobile Health Clinic	\$2,400.00	\$2,400.00	
First Aid Kits for School	Mobile Health Clinic	\$100.00	\$100.00	
Staff Costs to Conduct Workshops and Administer Programs	Mobile Health Clinic	\$24,000.00	\$24,000.00	
Educational Tools	Health Clubs	\$1,200.00	\$1,200.00	
Educational Tools	Primary Schools	\$1,200.00	\$1,200.00	
Educational Tools	Women/Men/Youth Groups	\$1,200.00	\$900	\$300.00
Stationery/Food/Misc. For 2 Awareness Days	Awareness Days	\$2500.00		\$2500.00
General Operational Costs (including fuel & vehicle maintenance)	All components	\$2,400.00	\$1800	\$600.00
Emergency transport/bills for community members in need.	All components	\$600.00	\$400	\$200.00
Alternative Income				
Staff Costs to Conduct Workshops and Administer Program	Alternative Income	\$12,000.00	\$12,000.00	
Workshop Supplies/Miscellaneous	Alternative Income	\$2400.00	\$2400.00	
Total		\$118,600	\$ 65,000	\$ 53600

A2. Performance Expectations Framework

	Activities	Sub-activities	Outputs	Immediate Outcomes	Intermediate Outcomes	Impact
Water and Sanitation	Drill 1 borehole	Site selection, procurement and local transport of materials and equipment, groundbreaking, drilling and construction.	1 borehole dug and functional	Community has access to a reliable uncontaminated water source.	New water source will satisfy the growing need for accessible clean/safe water, complementing the existing rain catchment system.	Improved water security and thus improved health
	Build 10 latrines	Site selection, procurement and local transport of materials, groundbreaking and construction.	10 latrines built and functional	New sanitation devices are being used.	New sanitation devices will help service the growing community needs and decrease the level of groundwater contamination	Improved overall health as demonstrated by decreased incidence of waterborne illnesses.
Health	Mobile Health Clinics	n/a	Diagnosis and treatment services offered for a full day, twice a month	Community members diagnosed and treated through mobile health clinics	Increase in the number of community members that receive proper health care and improvement in the quality of health care that community members receive	Improved overall health as demonstrated by decrease in preventable illnesses from getting progressively worse or left untreated (in extreme cases, decrease in mortality rates associated with treatable illnesses)

Health	Mobile Health Prevention Services	Health Workshops on: personal hygiene (5), nutrition (2), first aid (1), HIV/AIDS and STDs (3), Mother/Child Health and Family Planning (3), Common disease prevention (2), health for underprivileged children (1)	Health workshops facilitated for men, women and children for a full day, twice a month	Marked increase in community members' knowledge of health issues taught through workshops.	Community members implement lessons learnt into daily life.	Improved overall health especially amongst women and children, decrease in common illnesses, and decrease in maternal and infant mortality
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Health	Training for the Student Health Club	Training topics: promotion of sanitation practices (i.e. hand washing, latrine usage), promotion of preventative health care techniques (water boiling) among peers	Training facilitated twice a month.	Student Health Club members disseminate information amongst their peers.	Marked increase in students' knowledge of health issues presented through peer health educators from the Student Health Club including increased awareness of sanitation practices and preventative health care techniques.	Students are more receptive to health information and there is an overall improvement in health as measured by students' knowledge of health issues and ways in which they incorporate this information in their daily life, or alternatively by further information sharing upstream to adults in families or with other peers not receiving information from the Student Health Club.
	Preventative Health Care Workshops at the FTC Primary School	Health Workshops on: personal hygiene (5), nutrition (2), first aid (1), HIV/AIDS and STDs (3), Common disease prevention (2)	Workshops facilitated twice a month to all FTC primary school staff and students.	Marked increase in staff and students of the FTC Primary School's knowledge of health issues taught through workshops (i.e. increase in awareness of preventative health care techniques)	Staff and students of FTC Primary School implement lessons learnt into daily life.	Improved overall health of FTC Primary School staff and students with respect to preventative health care techniques as demonstrated by health indicators measuring ways in which teaching has been implemented in daily life.

Health	Awareness Days	Awareness day topics: HIV/AIDS, FGM, Girl Rights, Alcoholism	Awareness days held on chosen topics and community members attend	Community members are receptive to awareness day topics.	Community members implement lessons learnt into daily life.	Improved overall health as demonstrated by decrease in reports of incidents relating to alcoholism, decrease in incidence of HIV/AIDS, increase in knowledge of girl child rights, and decreased incidence of FGM.
	Educational Health Workshops	Workshops on: child health, maternal health, HIV/AIDS, nutrition, sickness and injury workshops, common injuries and emergency treatment, sex education, hygiene and sanitation, pre-natal care	Workshops facilitated on topics listed and attended widely in particular by women.	Marked increase in community members' knowledge of health issues taught through workshops.	Community members implement lessons learnt into daily life.	Improved overall health, increase in maternal health and decrease in maternal and infant mortality.

Alternative Income	Phase 1 of Alternative Income Programming – Mobilization	Business training and workshops on: health care training, women's rights, FGM and its effects, early marriage, alcoholism	Women are mobilized into groups and receive business training, and training on topics that complement business training	Women initiate small projects decided upon and implemented by the group members.	Women gain an understanding of their ownership, access, and control over resources.	Increase in women's self-confidence and their ability to make economically relevant decisions in their household and improvement of community gender perceptions by demonstrating to families the earning power of women. Also, marked increased in women's empowerment by allowing them to increase their influence over some of the household economic decisions.
	Phase 2 of Alternative Income Programming - Managing Group Dynamics	Training on: writing, leadership, conflict resolution, minute-taking, and human rights (including child rights)	Women attend and actively participate in training sessions.	Women develop a better sense of how to effectively manage group dynamics and gain an understanding of how to leverage their learning of human rights in daily life.	Women effectively and appropriately apply group management techniques within women's groups and in daily life	Increase in women's leadership abilities both in the women's groups and at home thus promoting gender equity. Women become role models within the communities.

	Phase 3 of Alternative Income Programming - Microenterprise	Training on financial literacy and disbursement of small loans	Women attend and actively participate in training sessions. Women receive small loans.	Women use small loan funds to support the expansion or establishment of a small business and apply previous lessons learnt in the business.	Women's businesses become profitable enabling them to repay loans according to established schedules and provide money to put toward their households.	Increase in the participant's household income.
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A3. Performance Results

	Expected Results - Output Level	Performance Indicators Used	Actual Results
Water and Sanitation	1 borehole dug and functional	Completion of borehole and functionality	To be implemented
	10 latrines built and functional	Completion of latrines and functionality	10 Latrines built
Health	Diagnosis and treatment services offered for a full day, twice a month	Number of people using the services each month	On average 30 community members use the service; it is accessible to 5000
	Health workshops facilitated for men, women and children for a full day, twice a month	Number of workshops facilitated	7 workshops facilitated
	Training facilitated twice a month	Number of students in Health Club	40 students
	Workshops facilitated twice a month to all FTC primary school staff and students	Number of workshops facilitated	13 FTC Primary School workshops held
	Awareness days held on chosen topics and community members attend	Number of awareness days held	To be implemented
	Workshops facilitated on topics listed and attended widely in particular by women	Number of women who attend workshops	On average 22 Women attend workshops
Alternative Income	Women are mobilized into groups and receive business training, and training on topics that complement business training	Number of workshops facilitated on complementary learning	6 workshops held
	Women attend and actively participate in training sessions	Number of women who attend and participate in training sessions	On average, 40 women attend each workshop

	Expected Results - Outcome Level	Performance Indicators Used	Actual Results
Water and Sanitation	Community has access to a reliable uncontaminated water source	Number of people who now have access to clean water	To be implemented; 12% of the community is boiling water, 50% of women from women's groups are boiling water
	New sanitation devices are being used	Number of people who are now making use of sanitation facilities	40% of women who are part of women's groups are using pit latrines, 10% of the community have their own pit latrine
Health	Community members diagnosed and treated through mobile health clinics	Number of people utilizing the mobile health clinic and emergency services every month	40 community members make use of these services per month; accessible to 5000 community members
	Marked increase in staff and students of the FTC Primary School's knowledge of health issues taught through workshops (i.e. increase in awareness of preventative health care techniques)	FTC Primary School staff and students implement lessons learnt into daily life	1 school garden planted
	Community members are receptive to awareness day topics.	Community members implement lessons learnt into daily life	To be implemented
	Marked increase in community members' knowledge of health issues taught through workshops	Community members implement lessons learnt into daily life	207 community gardens have been planted, 98% of women from women's groups have planted kitchen gardens, 17% of the general community population have planted kitchen gardens
Alternative Income	Women initiate small projects decided upon and implemented by the group members	Number of small projects initiated/number of goods granted	63 animals given for income generation activities through training program
	Women develop a better sense of how to effectively manage group dynamics and gain an understanding of how to leverage their learning of human rights in daily life	Women implement lessons learnt into business activities, women's groups and in daily life	Women show a higher rate of implementing lessons learnt through complementary programming into their daily lives relative to the community as a whole