

# CARE Kenya Factsheet

JULY - SEPTEMBER 2013



**CARE Kenya Country Director, Bogdan Dumitru handing over a certificate to the best performer of the year during a share out ceremony at Alendu Mboga group in Rabuor on 18th June 2013.**

*(Community Savings and Loan (COSALO II project in KISUMU))*



### About CARE in Kenya

CARE was founded in USA on 27<sup>th</sup> November, 1945, to provide those who had been victims of World War II in Europe, left without livelihoods. Originally known as the **Cooperative for American Relief to Europe (C.A.R.E)**, it aimed at sending food aid and basic supplies to war-torn Europe, in the form of "CARE packages." At the time, such goods were hard to find or were rationed, and millions of people were at risk of suffering from hunger. As the economies of the former wartime nations developed and improved, the focus of CARE's work shifted from Europe to the problems of the developing world. In the 1950s, CARE expanded into emerging nations. In the 1960s, CARE pioneered primary health care programs. In the 1970s, CARE responded to massive famines in Africa with both emergency relief and long-term agroforestry projects. CARE is now a proven leader among international humanitarian organizations, striving to bring about lasting, meaningful change in the of the world's poorest communities. In 1982, CARE International was formally created, with CARE USA, CARE Canada and CARE Germany as founding members, soon to be joined by CARE Norway.

CARE commenced its humanitarian assistance to the Kenyan public in 1968, under the auspices of CARE USA. CARE Canada took over in 1989 when it first became operational as a lead member on an international basis. This was in line with CARE's response to other countries in the region, which had to deal with massive famines. CARE worked in Africa despite donor fatigue in 1985 and the years that followed, as drought and the century's worst famine gripped Africa in the harshest way. From the onset, CARE's involvement in Kenya focused not only on emergency assistance, but capacity and resilience building. Long term agroforestry projects were initiated, integrating environmentally sound tree and land management practices with farming programs to provide diversification of agriculture. Self-help development has been a watchword in Kenya since independence in 1963. The self-help movement (called *Harambee* in Kiswahili) was started and carried on by villagers' groups throughout the country. The groups would decide what the most urgently needed assistance was, and would come together to rally their financial and human resources to make a difference. CARE supported this movement by providing the missing components to community development. This included building schools for children who were studying under trees for lack of anything better to pursue a better education and a better future.

### CARE International's Mission

CARE International's mission is to serve individuals and families in the poorest communities of the world. Drawing strength from our global diversity, resources and experience, we promote innovative solutions and are advocates for global responsibility. We facilitate lasting change by strengthening capacity for self-help; Providing economic opportunities; Delivering relief in emergencies; Influencing policy decisions at all levels; and addressing discrimination in all its forms. Guided by the aspirations of local communities, we pursue our mission with both excellence and compassion; the people whom we serve deserve nothing less.

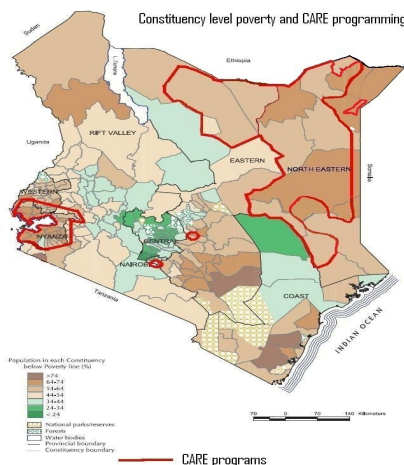
### CARE International's Vision

We seek a world of hope, tolerance and social justice where poverty has been overcome and people live in dignity and security. CARE will be a global force and partner of choice within a worldwide movement dedicated to ending poverty. We will be known everywhere for our unshakeable commitment to the dignity of people.

### Impact Goal

By the year 2030, Women and girls in Kenya will be self reliant, have a sustainable high quality life and fully realize their rights.

### Poverty map and CARE Programming by County



This map shows the Government of Kenya analysis of poverty by parliamentary constituency.

We have added our current areas of operation to the map to show where we are working, and to demonstrate the focus of that work.

## CARE International in Kenya (CARE) Programme Overview

We currently carry out major initiatives in Refugee Assistance, Health, Livelihoods, Water and Sanitation, Climate Change adaptation, Social Protection, and Community Managed Disaster Risk Reduction and in Group Savings and Loans, with an average annual budget of approximately USD 35million. CARE is one of the lead agencies under the United Nations High Commission for Refugees (UNHCR) and World Food Programme (WFP), for water & hygiene, food distribution, and formal education in the Dadaab refugee camps near the Kenya-Somalia border. As of 15th July 2013, the refugee population in Dadaab was 426,019. Our main office is in Nairobi, and our priority Counties are Embu, Garissa, Homa Bay, Kericho, Kirinyaga, Kisii, Kisumu, Mandera, Marsabit Nyandarua, Nyeri, and Siaya. As a result of the wide scope of our programme, CARE Kenya keeps growing, and by March 2013, there were 467 local staff, distributed as follows:

<b>Nairobi Province</b>	Nairobi	111	<b>N. E Province</b>	Garissa	27
<b>Nyanza Province</b>	Kisumu	20		Dadaab	210
	Kisii	37		Takaba	15
	Siaya	7		Moyale	4
	Homa Bay	2	<b>Eastern Province</b>	Embu	8
	Bondo	2	<b>Upper Eastern</b>	Marsabit	11
	Nyando	1	<b>Western Province</b>	Karatina	2
	Nyakach	1	<b>Central Province</b>	Nyandarua	1
	Rarieda	2		Kinangop	1
	Rongo	5			

### 1) Livelihoods Sector

Livelihood sector exists to empower vulnerable rural communities to enhance their livelihoods through various multipronged approaches including food security and economic development, integrated water, sanitation and hygiene (WASH), disaster risk reduction, community based climate change adaptation (CBA) and value chain/ making the markets work for the poor. This sector implements interventions that address diverse livelihood needs of different segments of the target populations. The needs range from inadequate water, hygiene and sanitation services, food insecurity and low income. In rural, remote and semi-arid regions where living conditions are deplorable and unfavorable, CARE Kenya has strived to address the underlying causes of poverty by actively involving the local communities and stakeholders to finding sustainable solutions to their own problems and needs. Relevant interventions are being rolled out to mitigate effects of drought, hunger, climate change and environmental degradation as well as enhancing disaster risk reduction. The livelihoods sector hosts diverse range of projects spread in different regions in Kenya including, Fafi, Garissa, Karatina, Kinangop, Kipkelion, Lagdera, Mbalambala, Moyale, Nyando, Siaya, and Wajir North. There are a cluster of projects and programmes that focuses on livelihoods improvement specifically contributing to food security through value chain and market based approaches (Kilimo Biashara project), Water Sanitation and Hygiene (MWA-KALDRR, SWS and SWASH+), and climate change adaptation and mitigation (ALP and SACC). The sector has also other new opportunities on the pipeline (Climate Smart Agriculture and WASH) that are still at design or donor negotiation level.

### Adaptation to Climate Change

KE826: Adaptation Learning Programme (ALP)

Start Date: 01.01.12 : End Date: 31.12.14

Beneficiaries: direct 2500; indirect 138,000

Male...56% (according to the census report) : Female 44% (according to the census report)

ALP's goal is to increase the capacity of vulnerable households in Sub-Saharan Africa to adapt to climate variability and change, and to incorporate Community-Based Adaptation (CBA) approaches for vulnerable communities in development policies and programmes in Ghana, Kenya (in Garissa, County), Mozambique and Niger, with plans in place to replicate across Africa. ALP will respond to adaptation challenges by developing and applying innovative approaches to the CBAs to generate best practice models; empowering local communities and civil society organizations to have a voice in decision-making on adaptation; promoting best practice models for CBA among adaptation practitioners; and influencing adaptation policies and plans at national, regional and international levels. ALP will benefit 59, 000 people in 40 communities, plus Civil Society Organizations (CSO) and local government learning and advocacy within the county, country and across ALP. The project is funded by DFID, as well as the Finnish, Danish and Austrian governments.

### Carbon Finance for Sustainable Agriculture Work

KE865: Carbon Finance for Sustainable Agricultural Work (SACC)

Start Date: 10.9.10: End Date: 30.9.13

Beneficiaries: Male: 1,047: Female: 698

Sustainable Agriculture in a changing climate (SACC) Project is a sequel to the very successful Aglive Project which was implemented between 2008 and 2010 along river Nyando catchment within Kisumu and Kericho Counties. SACC Project covers the same areas and will ultimately cover some parts in Homa bay County. The project will be in three phases with phase I which started in September 2010 as a pilot phase targeting 1700 Households in two Blocks of 10 by 10 km square to end in September 2013. The Project will use verified carbon standard (VCS) and climate, community and Biodiversity standards (CCBS) to earn carbon finance which will help farmers in mitigating against climate change through greenhouse gas (GHG) absorption.

#### Technical specification and configuration.

The Project identified 6 tree species to be planted and 1 or at most 2 should be planted by farmers. These include; -markhamia lutea, Terminalia brownie, Gravigilla robusta, Casuarina equisetifolia, Eucalyptus camdulensis, and Leucaena leucocephala. The trees are planted under certain technical specifications such as **1)** Woodlots at 2.5m by 2.5m spacing, **2)** Dispersed within the cropland at 5m by 5m spacing **3)** Boundary planting at 2m by 2m spacing of which again the farmers can adopt a maximum of 2 planting methods. Each farmer is to plant a minimum of 50 trees and maintain for 25 years. Farmers so far have been facilitated to grow trees for carbon sequestration and carbon credit, trained to produce early maturing crops that are adaptable to changing climate such as Butternut, green grams, Bulbed Onion and Water melon.

#### Specific objectives:-

- Empower communities to sustainably use their natural resources, use appropriate Agricultural practices and increase Land productivity (Food Security)
- Reduce Land degradation, improve Soil quality and vegetation
- Equitable sharing of resources within gender and empowering women and youths to be part of decision making
- Increase carbon sequestration and empower communities to participate in Carbon Trade

#### Expected benefits includes:-

Improved farm production, enhanced dietary diversity (nutrition), improved conservation, enhanced landscape aesthetics, revenue from sale of trees at the end of contract period and potential carbon credit

### Nyanza Healthy Water

KE870: Safe Water Systems (SWS)

Start Date: 1.1.12: End Date: 31.8.13

Direct Beneficiaries: 19339: Indirect Beneficiaries: 71740 (School Pupils/Teachers/MCH Clients/PSC Clients/CHWS Clients)

CARE's SWS is as an inexpensive water quality intervention at point-of-use, encompassing three components; water treatment using P&G purifier of water and WaterGuard; safe storage of treated water in containers with narrow neck, lid and spigot; and behaviour change through community mobilization and capacity building. SWS interventions are aimed at improving the quality of drinking water at household and clinic levels to reduce the incidence of diarrhea and other water-borne diseases in Nyanza Province. This is done through schools, health facilities and by Community Health Workers to reach out to vulnerable households. The current programming is based in Siaya County targeting 20 schools and adjoining Early Childhood Development Centers, 53 health clinics and 530 Community Health Workers.

#### The objectives of the project are to;

- .. Increase partners' knowledge on safe drinking water and hygiene promotion
  - .. Improve access to safe drinking water and hygiene infrastructure in schools and health facilities
  - .. Enhance linkages at the community level to boost adoption of safe drinking water and
  - .. Assess uptake and measure intervention's impact
- Ultimately, the project aims to sustainably improve the quality of life of vulnerable women and children.

**Value chain**

KE873: Kilimo Biashara Project

Start Date 01.01.12: End Date: 30.12.14

Started in January 2012, it is a partnership between 150-200 outgrower farmers in Naivasha, Nakuru County, Sunripe Ltd and its main buyer in Denmark (FDB), and CARE. It aims at increased number of out growers (men, women and youth) employed in the selected value chain. Its objectives are to have increased product quality and quantity through improved sustainable natural resource management and agricultural practices amongst out growers, improved access to input and capital for out growers, identification of new procedures for handling rejects, tested and adopted to reduce loss for Sunripe as well as the farmers.

**SWASH + II**

KE900/1 Increasing Accountability in school WASH

Project Start Date: 9.11. 12

Project End Date: 31.3.16

Beneficiaries: 318 Primary Schools

The overall goal of the program is to improve the sustainability and effectiveness of school water, sanitation and hygiene (WASH) at scale in order to support the Government of Kenya's Comprehensive School Health Policy, which is to enhance the quality of health in the school community and improve achievement in education performance by creating a healthy and child friendly environment for teaching, learning and psychosocial development through appropriate collaboration of stakeholders. In addition to sustainability and effectiveness of school WASH being critical for its own sake, a secondary goal of the program will be to lay the foundation for a potential longer term partnership between the Ministry of Education and the Bill and Melinda Gates Foundation to test, at some point in the future, reinvented toilet technology in a school setting, in accordance with the Foundation's "Reinvent the Toilet" campaign and investments.

**KALDRR**

KE911: Millennium Water Alliance Programme in Kenya

Start Date: 1.1.13: End Date: 30.11.14

Direct Beneficiaries: 36812

CARE Kenya is one of the leading humanitarian agencies in North east region of Kenya. CARE's previous and current programs have a strong focus on humanitarian assistance at the Dadaab refugee camps as well as community development programs for the refugee host community. Despite the gains in the past, recent challenges by climate change phenomenon puts more strain on the existing infrastructure. The region has suffered in the recent past persistent droughts, erratic rains with flash floods, heightened insecurity and social conflicts. All these have led to reduced communities' coping capacities and resilience to withstand disaster risks related to this phenomenon. CARE consequently believes that by improving the targeted communities resilience to drought and flash floods, entrenching the culture of community managed disaster risk reduction approaches, the impacts realized thereof will help protect and enhance the health of women and children thence support the attainment of the MDGS by 2015. CARE plans to use the MWA/ USAID funds through KALDRR program to target 36,812 direct beneficiaries largely comprising women and children to access improved water supply, proper usage of sanitation facilities and good health behaviors. The communities will be capacitated to increase their resilience to disasters like drought and flash floods through simplified community managed disaster risk reduction approaches. Key activities will include improving water supply infrastructure, sensitization towards sanitation facilities' usage, hygiene promotion and risk management.

**Goal:**

To increase resilience to drought and flash floods while simultaneously increasing access to improved water supply and sanitation services, and improving hygiene behaviors, for poor and vulnerable populations in the arid counties of Turkana, Marsabit, Garissa, Isiolo, Wajir.

**Strategic Objectives:**

SO1: Increase water storage capacity in arid lands, through improving natural and artificial storage

SO2: Improve WASH conditions at health facilities and nutrition centers frequently utilized during emergency response.

SO3: Improve access to safe drinking water sources, improve access to and usage of point of use water treatment products, and promote good hygiene behaviors and use of sanitation facilities as a means of reducing diarrhea disease in areas with recurrent emergency levels of malnutrition and around areas of improved water storage

**Proposed outcomes**

Increased water storage capacity in arid lands, through improved or developed natural and artificial water sources including water pans, shallow wells, boreholes and micro rainwater harvesting through roof catchments.

Improved WASH conditions at health facilities and nutrition centers especially those ones frequently utilized during emergency response. This program outcome targets malnourished children visiting the facilities' nutritional centers to access safe water, adequate sanitation and hygiene interventions.

Improved access to safe drinking water sources, access to and usage of point of use water treatment products, good hygiene behaviors and sanitation. This outcome will manifest itself by reduced diarrheal disease especially in areas with recurrent emergency levels of malnutrition and around areas of improved water storage

## 22) Emergency

### Regional Resilience Enhancement against Drought (RREAD IV)

Ke889: Drought Intervention

Start Date: 01.01.12: End Date: 30.12.13

Northern Kenya is characterized by unreliable rainfall and a fragile environment, compelling the pastoralists to adopt highly mobile lifestyles often crossing ethnic, national and international boundaries, and subsequently fuelling resource based conflicts. It is widely recognized that in order to maximize the use of limited primary resources in these dry areas livestock mobility is essential as a way of evading drought shocks. The prevalence of recurrent droughts has worsened along the international boundaries where different government policies and border dynamics create a lawless atmosphere that fuels disharmony. The internal problems of pastoralists living along the common borders of Kenya and Ethiopia's often spill over to either side, hampering free cross-border movements.

In recognition of the drought induced disasters, the RREAD-IV project has been applying Community Managed Disaster Risk Reduction (CMDRR) approaches through building and strengthening of the capacity of traditional institutions in order to defuse tensions arising from resource sharing during critical periods and bring harmony between the Kenyan and Ethiopian pastoralist communities within the targeted districts. The project has facilitated communities to realize their own potential to reduce the effect of drought, mitigate and respond to protect their livelihood assets along the Kenya-Ethiopia border. The RREAD-IV project has facilitated the formation of CMDRR cross border committees for new communities and strengthens the old DRR community committee focusing on natural resource management, livestock and Livestock Product marketing, cross border disease surveillance, and drought management. Capacity building on Group Saving and Loan concept for new and strengthening old groups to improve livelihood diversification. The project targeted nine communities living along the common border of Kenya and Ethiopia namely Dukana-Hoboq, Lataka-Godhloni, Waye-Gumbis, Godoma Dukisu, Dugo-Dugo Ethiopia, Iresteno-Qadaduma, Burduras –Hardure, Kiliweherri-Eljara, Eymole s-Sukela burki

Improved management of rangeland resources as a drought preparedness measures with cross-border neighboring communities of Lataka-Godhloni Ethiopia, Dugo Kenya – Dugo Ethiopia, Iresteno-Qadaduma Ethiopia, and Burduras – Hardure Ethiopia, Dukana- Hoboq Ethiopia and Eymole –Sukela Burki Ethiopia through:

Revival of traditional grazing system where pastureland is divided into wet season and dry season grazing areas amongst the pastoral communities

Rehabilitation of range land through bush control and de-stumping of invaders and un palatable spp

Sensitization of all members of the pastoral communities on traditional by-laws on use of pasture and water and enforcement of penalties set by the community to ensure compliance.

The community committees (DRR) who are also members of grazing council initiated a community led pasture scouting to guide community decision on when to open dry season grazing reserves that minimizes drought induced disaster.

The benefit realized by community from intervention was improved relationship between cross-border neighboring communities and reduce tension and hence conflict over common resources. This has been achieved through joint planning along common borders where communities shared their plans on grazing reserves and water and agreed on rules regulating access to these critical resources during period of drought triggered stress. During rehabilitation both side community vulnerable household was engaged in rehabilitation work. A total number of household benefited from cash for work was 311 among them 125 HH were from Ethiopia and 186 HH was from Kenya.

### Wama Women Group Saving & Loan

Wama women group is one of the new groups in Waye location of Sololo who were sensitized and mobilized on the methodology and concept of the group savings and loans. Expression of interest forms were issued to savings and loan groups to apply for support on capacity building on group savings and loans. Several groups submitted their applications out of which Wama was selected based on their previous experiences on home grown saving and lending initiatives known as (Ququbi) means merry –go round. The group members benefited from training on basic principle of the Group Savings and Loan (GS&L) methodology. The objective is to make the group to diversify their activities as a fall back during the critical period of drought. Group also have kitchen garden as an alternative source of income.

### Dugo across border Community Livestock vaccination campaign for early response

CARE provided logistical support to the County Veterinary Office and community animal health service providers to conduct mass treatment, deworming and vaccination campaign in three cross-border points: The vaccine was procured by Director of Veterenary services. Dugo and Iresteno in Bute Wajir North neighboring -Dugo and Qadaduma Ethiopia and Godoma in Moyale –Dukisu Ethiopia. The mass vaccination, deworming and herd treatment was meant to help in reducing incidences of trans boundary diseases outbreak due to depressed immunity as a result of drought and increased worm loads in animals. Sheep and goats (Shoats) are vaccinated against CCPP and PPR. The total number of Shoats Vaccinated was 17,136 and cattle 2036 against Black quarter and Anthrax. The total number of cross border community household benefited from the services was 2,235 among them Kenyan household 1,341 and Ethiopia 894 HH. Joint livestock disease surveillance along the border has improved timeliness of animal health interventions and Trans-boundary disease information sharing between communities resulted in decreased disease outbreak also enhances collaboration with line department.

### Review of old community DRR development and contingency plans for Godoma, Dugo, Kiliwehir, Eymole and Iresteno cross-border community on drought coping capacity

Participatory review and revision of Community DRR Development and Contingency plans was facilitated for five cross-border communities in Eymole Kenya –Sukelaburki Ethiopia- , Kiliweherri Kenya-Eljara Ethiopia, Burduras Kenya-Hardure Ethiopia, Godoma Kenya-Dukisu Ethiopia, Iresteno Kenya and Qadaduma Ethiopia by RREAD Kenya. The objective of the review was to establish extent to which community has implemented DRR plan enabled the community to cope better with re- current drought. After the review of the action plans, the committees took the initiative of sharing respective action plans with their local authorities and development partners in their areas. Iresteno community shared their development plan with Solidarities International and access external support in rehabilitation of community water earth pan through cash for work which had a double benefit to the cross-border community by creating asset and cash injected to sixty working vulnerable household. This has enhanced individual household food security and disposable income .The community further took initiatives of protect water source rehabilitated by fencing on their own. The plans have attracted resource allocation from constituency development funds which have provided funds for supporting one community

**KE776: Arid and Marginal Lands Recovery Consortium (ARC)**

Start Date: 19.02.09 : End Date: 17.09.13

Start Date: 19.02.09 : End Date: 17.09.13

Beneficiaries : 474,434

This project's goal is sustained access to food in vulnerable communities through enhanced resilience to shocks. This cost modification phase seeks to build upon and strengthen the gains made under the OFDA-funded Arid and Marginal Lands Recovery Consortium (ARC) program. The project has strategic initiatives designed to increase resiliency to drought through market support, livelihood diversification, improved agricultural activity, and improved access to veterinary care. This response focuses on enhancing livelihoods by strengthening economic opportunities and linkages based on productive community assets, which benefit longer term market creation and stimulation. This will take place by building group and individual capacities to identify and engage in viable value chains, improving access to financial services and capital access through formal institutions and savings groups, and engaging with value chain actors in order to promote linkages and efficiencies. The project funded by OFDA/USAID and implemented by five organizations under consortium was initially designed to run for three years with effect from February 2009; however the project received cost modification and expected to end on 17th September 2013. The originations include: CARE International in Kenya (CIK), World Vision (WV), Catholic Relief Services (CRS), Action against Hunger (ACF) and Food for the hungry Kenya (FHK) which is the lead agency. Each of the originations is implementing the project activities in different regions of Kenya. CIK is focusing on the counties of Garissa, Wajir, Mandera and Moyale (in Marsabit County) all in the north east Kenya.

**3) Financial Inclusion**

CARE has implemented the Group Savings and Loan (GS&L) methodology, a community managed micro finance (CMMF) scheme whose approach is to increase the economic resilience of micro entrepreneurs. Its basic principle is that members of a self-selected group form an association and save money by contributing regularly to a fund, governed by the group itself. Members save at a rate matching their capacity, thus lowering the threshold of entry for the poor.

The core of the model is investment of the savings into a loan fund from which members can borrow, repaying with a service charge. Members take out loans in amounts closely aligned to their actual needs and opportunities. Such lending allows members to earn substantial interest on their savings. The cycle of savings and lending is time bound and at the end of an agreed period, maybe up to a year, the accumulated savings and service charge earnings are shared out amongst the members in proportion to the amount that each saved throughout the cycle, plus interest earned.

The approach promotes saving first and credit/loans second. GS&L also functions as a business incubator by linking, informing, sharing information and linking the more cautious or inexperienced participants with peers within the group who are experienced micro-entrepreneurs operating in the same environment, with the same constraints. The program targets both potential and existing micro entrepreneurs. These are the poorer sections of the economically active populations in rural areas, who cannot access credit easily from commercial banks and the conventional micro financial institutions. CARE implements GS&L projects in five Counties namely: Nyanza, Western, Nairobi, Eastern and North Eastern, and includes Nairobi's Kibera slums.

CARE in partnership with the Financial Sector Deepening (FSD) is working on strategies for a national roll out of GS&L methodology, with FSD currently funding GS&L expansion specifically in Nyanza and the greater Marsabit Counties in Eastern Kenya. CARE is also working on modalities on improving GS&L service delivery in the informal settlements, targeting youths and women.

**KE845: Community Savings & Loans (COSALO) II**

Start Date: 20.04.11: 30.09.13

Beneficiaries: 176,387

COSALO II is a group savings and loan project being supported by financial sector deepening trust Kenya (FSD). The project is a follow on project of COSALO I which was implemented from 2008 to 2011 and was very successful. The project runs from April 2011- July 2013. The main aim of the project is to develop savings group models to the stage at which scale up programme impacting significantly on financial exclusion at a national level becomes viable. The project components include **i)** refining the delivery channels **ii)** developing a national scale up **iii)** poverty impact assessment. The project implements in Siaya, Kisumu and Marsabit counties. The project is also testing additional interventions and particular design features needed to reach highly marginalized groups in Marsabit and the Islands of Lake Victoria. So far the project has reached 176,387 individuals with Group savings and loan training in Nyanza and Marsabit and a savings and loan portfolio of Kenya shillings 446,574,037 and Kenya shillings 872,295,039 for Nyanza respectively and Kenya shillings 25,972,766 and 21,576,939 for Marsabit respectively as at June 2013. The livelihoods of the two communities have been greatly improved, thus positively impacting the education of their children, their housing situation, food security and the organization of social events. COSALO II will run until 30th September 2013.

**KE880: Marsabit Drought Resilience Enhancement Project (MDREP)**

Start Date: 1.5.12: End Date: 31.8.13

The project is funded by FAO and covers Marsabit County- (North Horr, Maikona, Central, Loyangalani and Laisamis districts). Its main objective is to contribute towards improving response and resilience to drought for ASAL livelihood in Marsabit; it adopts innovative strategies that enable pastoralists produce, market, protect and build their livestock herd. It also promotes protection of pastoralist's wealth or main assets (livestock) against drought effects. This is done through Index Based Livestock Insurance (IBLI). Partnership includes- CARE, ILRI, APA insurance company. It runs until August 2013.

**KE888: wPOWER CARE Kenya****Start Date: 19.09.12 : End Date: 30.09.15** KE888: wPOWER CARE Kenya

Start Date: 19.09.12: End Date: 30.09.15

This is a three year project running from September 2012 and ending in December 2015. The main goal is reduction in carbon emissions and deforestation and increased economic status for women through increased uptake of clean energy products by rural and peri-urban households in the Great Lakes Region. The project has four strategic objectives which include; increase access of women to small-scale clean energy markets, increase the number and incomes of women-managed small-scale clean energy technology enterprises, increase public awareness of the role of women in clean energy markets and improve documentation, evidence, and learning about the economic and environmental benefits of integrating women into clean energy value chains. The project will use existing GS&L groups to train 1,285 entrepreneurs who will be linked with clean energy product suppliers (Solar lamps and improved Cookstoves) to create a supply value chain that will reach villages in Nyanza (Kisumu, Siaya, Homabay and Kisii County), Eastern (Embu County), Northern Kenya (Garissa, Wajir and Mandera County). During the three years, the project is targeting to sale 82,275 solar lamps and 11,642 improved Cookstoves.

**KE909: Banking on Change (BOC) - GS&L Linkages with financial institutions**

Start Date: 01.01.13: End Date: 31.12.15

The Banking on Change project phase II is being implemented in five counties of Nyanza and Eastern provinces of Kenya through local based partners for the next three years. In Nyanza province the project areas of coverage included; Homa Bay, Ndhiwa, Kisii, Migori and Kisumu East districts which have a population of over 8 million (2009 census report). In Eastern province the project covered five districts which included Embu East, Embu West, Embu North, Mbeere North and Mbeere South districts. In Nairobi the project will operate in the informal settlement of Embakasi and Kibera.

The Embu County is located in Eastern Kenya and it borders the following counties: Tharaka Nithi to the North, Kitui to the East, Machakos to the South, Murang'a to the South West, Kirinyaga to the West and Meru to the North West. The population of the county stood at 516,212 according to 2009 census report with males being 49% and females 51%. These project areas are characterized by declining agricultural productivity, high population growth rate and high food insecurity which have exacerbated vulnerability of the local population. The main economic activities in the regions include micro enterprises, subsistence farming, livestock farming and bee keeping. The majority of the people living within the project regions have no or limited access to basic financial services.

BoC Phase II at a global level will focus on Youth - the Next Generation. This is aligned with CARE Kenya's programme approach which identified youth in Kenya as one of its priority impact groups. In BoC Kenya Phase I, 39.4% of youth (aged 10-35) were reached. BoC Kenya wants to deepen the outreach to youth to empower them with skills necessary for greater financial management, asset acquisition and improved income generating activities. This will be achieved through Financial Education, GSL, linkage and enterprise and value development. The skills gained in financial, marketing and enterprise development will enhance self-reliance and improve the youth's ability to seek employment. Within the slums most affected population by poverty are women, unemployed youths, school leavers, widows, single mothers, and the disabled, the aged and female headed households.

BoC Phase II will target selected existing BoC Phase I members and will reach out to youth to form Youth Savings Groups. The focus of Phase II will be on providing members with financial education and business training, enterprise development and linkage to formal financial institutions.

This report provides a project update covering the period 1st January 2013 to 30th June 2013. This first quarter of Phase II is intended to help retain BOC I staff as well as ensuring a smooth transition from BOC I to BOC II. The project aimed at reaching out to poor and vulnerable households both in rural and informal settlements with appropriate financial services and capacity building interventions on horticultural farming, enterprise development through business skills trainings and piloting linkage of mature GS&L groups in the new and old areas.

The period under reporting was characterized by a lot of political activities within the country that engaged the communities for a while disrupting normal/ daily community routines. In ensuring that the GS&L groups operated normally with minimal interference from political activities, the project came up with contingency and continuity plans to ensure that the project activities continued smoothly and the group funds were safely kept. The key activities carried out in this regard included: project start-up activities, actualizing security and continuity plans, BOC II project start-up workshop, linkage, profiling of youth groups, youth scoping activities, opening of Rongo (Migori) field office, Final Project Evaluation findings dissemination and Groups' Health Diagnosis exercises.

**Project Goal**

80,823 youth and women will have increased potential for wealth creation through access to financial services, employment creation and business skills by December 2015; this will be achieved through the following key objectives.

By Dec 2015 20,205 existing GS&L members have improved business skills and/or increased access to formal financial services.

By Dec 2015, 60,617 new youths have increased access to financial services and improved economic skills

By Dec 2015 BoC is perceived as a reputable pathway for achieving financial inclusion in Kenya

**4) Health, HIV and AIDS Sector**

HIV and AIDS is still one of the biggest challenges to development in Kenya. CARE works with communities, civil society organizations and the Government of Kenya to keep HIV transmission low, provide support to those who need it and treat those infected and affected with respect, acceptance and protection. Further, CARE'S focus is on strengthening the economic ability of women and youth while reducing stigma and discrimination. In this sector, CARE trains community organizations and individuals in a wide range of technical areas including HIV/AIDS issues and rights and legal redress channels. Numerous home-based caregivers are beneficiaries of such training. With improved skills, caregivers enhance the condition of the infected. Projects under this are Global Fund, Family Planning Results Initiative (FPRI and Chagua Maisha).



## Global Fund Round 7 HIV Program

CARE Kenya was awarded the civil society Principal Recipient of Global Fund (to fight Tuberculosis, Aids & Malaria) Round 7 for HIV and AIDS. The goal of this program is to improve the quality of life for people living with HIV (PLHIV) in Kenya and reduce HIV infections, scale up and maintain PLWHAs on adherence to ARV treatment, increase access to HIV testing and counseling services, increase uptake of HIV prevention and treatment services, strengthen institutional capacity to effectively implement and monitor HIV/AIDS services. CARE partners with the Ministries of Public Health and Sanitation & Medical Services, National AIDS Control Council (NACC), Global Fund Country Coordinating Mechanism, Non-Governmental and Civil Society Organizations (NGOs & CSOs—54 agencies), National AIDS/Sexually Transmitted Infections (STI) Control Program (NASCO) and UNAIDS, who provide technical support. Key strategies in achieving the goal is by promoting access to HIV counseling and testing and ensuring that those counseled and tested receive their test results, treatment adherence sessions for persons living with HIV (PLHIV) together with their family members (treatment supporters), sensitization of youth (aged 10-35), persons living with disability (PWDs) and MARPs [sex workers, injecting drug users (IDUs), prison inmates, the fisher folk, men having sex with men (MsM) and long distance truck drivers], behaviour change communication (BCC) at the community level and at the workplace, promoting peer education and strengthening institutional capacity of civil society implementers through supportive supervision, organized thematic trainings, cross learning visits and during periodic stakeholder feedback forums. Cumulatively, since program inception to December 2012, the total population reached with diverse HIV interventions is 1,907,039 (942,012 females and 965,027 males). Markedly, there has been significant progress made towards narrowing the gender gap in all the service delivery areas (SDAs) where out of the total population reached, 50.6% were male against 49.4% females. As at end of December 2012, based on the GF rating methodology, the program posted a tremendous performance of an A1 (more than 100%) which the program seeks to sustain.

## Chagua Maisha programme

The comprehensive HIV program implemented in Kisii County is funded by the US Centres for Disease Control and prevention. The programme is implemented in partnership with the two Ministries of Health and MERLIN, to increase access and utilization of HIV prevention, care and treatment services. Specifically, *Chagua Maisha* is supporting the strengthening and expansion of HIV services at the community and facility levels in the following technical areas: Prevention of mother to child transmission (PMTCT); adult and pediatric care and treatment; TB-HIV testing and treatment, testing and counseling (with particular attention to "provider initiated" testing and counseling (PITC), prevention with positives including increased condom use and contraceptive use/prevention of unwanted pregnancies among People living with HIV (PLHIV) (PwP); and adopting other prevention approaches and strategies that support primary prevention of HIV among the population and family planning integration targeting uninfected and HIV infected population.

### Objectives

1. To increase the quality, access and utilization of HIV prevention services at community and facility.
2. To increase the quality, access and utilization of HIV care and treatment at the community and facility.
3. To strengthen the capacity of indigenous organizations and the Kenya Ministries of Public Health, Sanitation and Medical Services.

**Key Results:** Increased uptake of high quality HIV prevention, care, treatment and support services i.e. *Prevention of Mother To Child Transmission of HIV (PMTCT) services, Adult and child HIV care services; Adult and child HIV treatment services; TB-HIV services; Provider Initiated Testing and Counseling (PITC) services; and Prevention with positives (PWP) activities.* . Some Immediate results include 23,384 (94.3%) Women of unknown HIV status tested in PMTCT setting (at ANC) and 3,155 (84%) at the maternities; 887 (77%) HIV+ pregnant women receiving prophylaxis against HIV at 14 weeks or first contact thereafter; 545 out of 574 eligible HIV+ pregnant women receiving prophylaxis during labor; 71 out of 412 HIV Early Infant diagnosis results turning HIV+ 563 of 612 (92%) of infants born to HIV+ women receiving prophylaxis against HIV; 11 new sites to which palliative services were decentralized to improve access against the planned 12 sites; 8 facilities with decentralized TB services out of the targeted ten (10) facilities; 20,325 persons enrolled in HIV care; 12,199 active clients in the program; 9,375 clients on ART with 9,161 clients being active on ART; 98% of the enrolled clients started on Cotrimoxazole prophylaxis

*As part of the strategy to achieve the intended objectives, the program has laid down modalities to ensure sustainable indigenous health organizations thus reflecting to quality comprehensive HIV services. This includes health facilities renovation and an assortment of medical equipment purchased and distributed to the health facilities.*

## 5) Refugee Assistance Programme

Protracted conflict in Somalia has displaced hundreds of thousands of individuals. Since 1991, CARE has provided relief and development assistance for the three refugee camps in Dadaab in addition to supporting host communities around the camps. In 2012 drought and conflict in Somalia increased the refugee influx into Dadaab and as at March 18<sup>th</sup>, 2013, the refugee population in Dadaab stood at 443,617 after an on-going verification exercise of refugees. Two additional camps were opened in late 2011 – Ifo 2 (East & West) and Kambioos where the new refugees were relocated to. However, Kambioos has only been recognized by the government of Kenya in January 2013 so as to facilitate the relocation of the urban refugees. There is now a total of 5 camps in the area all under UNHCR sub office Dadaab. In Dadaab, CARE offers these services:-

### Logistics and distribution

CARE distributes relief food provided by WFP in three camps (Dagahaley, Ifo 1 and Ifo 2) through different food programs, including general food distribution which is undertaken twice every month. There is also a school feeding program in all the six (6) primary schools in Dagahaley camp where CARE is the agency mandated to deliver primary education. CARE also provides support to associated implementing partners of the UN in the form of storage and distribution of fuel, warehousing and distribution of core relief items (jerricans, tarpaulins, blankets, cooking ware etc), provision of motor vehicle and generator repairs and maintenance.

## Education

CARE is currently implementing primary education in six (6) schools within Dagahaley camp with a current enrollment of 17,566 (7,739 Girls) learners as at 30<sup>th</sup> June, 2013. CARE's education sector has ensured that gender mainstreaming has been done in Dadaab education projects, with the main objective being provision of quality education to the refugees by equipping them with the desired knowledge, skills, attitudes and values to enhance their standards of life as refugees, and to prepare them for the challenges and roles awaiting them in case of possible repatriation or resettlement.

## Water & Sanitation and Hygiene (WASH)

CARE focuses on improving access to safe water and the efficiency of its supply to the refugee population. This is done alongside rehabilitation of the water reticulation system, through construction and maintenance of bore holes and storage facilities. With the continued growth of the population in the Dadaab camps, disposal of solid waste has become an increasing problem which must be addressed to prevent potential health and sanitation related infections. CARE supports sanitation through community mobilization to clean the camps, latrine construction. These are also blended with hygiene promotion activities. From January 2013, the focus is mainly on Dagahaley camp.

## Gender & Community Development

This is done through development programs that promote self-reliance among the refugee population, through increased access to productive opportunities and sustained capacity development. There is a special focus on the youth who constitute 48% of the entire refugee population. CARE ensures that the basic needs and rights of the refugees are met and protected, while also building their capacity to cope and be integrated into society, post repatriation and/or resettlement. This is currently achieved through psychosocial support and vocational training of the youth. Another method used for reaching out to the youth is through sports in which CARE has partnered with Right To Play, an NGO headquartered in Canada.

CARE plays a leading role in Sexual and Gender Based Violence (SGBV) protection and response by promptly reporting and referring cases for counseling, protection and medical support in two camps, Dagahaley and Ifo. This involves prevention and response to Female Genital Cutting (FGC) and Sexual Exploitation and Abuse (SEA) in the camps, through multi-sectoral interventions that encompass safety, medical, legal, psychosocial and community re-integration measures.

## Practice of Conflict Sensitivity

The conflict sensitivity consortium was formed by 10 international NGOs: Action Aid, CAFOD, CARE International UK, International Alert, Plan International, Responding to Conflict, Saferworld, Save the Children UK, Skillshare International, and World Vision. The objective of the consortium is to provide international emergency humanitarian teams with a set of practical conflict sensitive approaches (CSA) that will help improve the conflict sensitivity of their work during the first 30 days of an emergency response. CARE International in Kenya is engaged in this consortium to improve policies and practices that support Conflict Sensitivity across a broad network of NGOs, local partners and donor agencies.

## 6) Independent Television Services

### Women and Girls Global Kenya

Women and Girls Lead Global is a three-year effort in nine countries ; including Bangladesh, Colombia, Egypt, El Salvador, India, Jordan, Kenya, Malawi and Peru to use independent story-driven documentary films to help increase girls and women's ability to understand and seize their opportunities for leadership and empowerment. The films are intended to complement and strengthen existing efforts to pursue WGLG's broad vision.

In Kenya, Women and Girls Lead Global activities are advised through a Local Steering Committee comprised of alliance partners, USAID and Ford Foundation, main implementing partner, CARE – Kenya, and local partners Akili Dada, MEDEVA and Well Told Story.

In 2013, and every year through to 2015, a local broadcasting partner with national reach will screen 8-10 of these films in each country. In Kenya, WGLG partners USAID, the Ford Foundation, and CARE will integrate the films into existing or new campaigns and activities in collaboration with their local CSO partners or grantees, while Kenya Broadcasting Corporation (KBC) will screen the movies in 2013 and maybe beyond. ITVS has resources with which to adapt or create accompanying study or discussion guides for community engagement activities.

## Advocacy goals

Mobilize men and women to take action to create more social, economic and political opportunities for women and girls and to increase productive participation in existing gender equality activities.

Create emotional and personal media experiences for television viewers, increasing knowledge and changing attitudes about the importance of equitable and inclusive roles for women and girls, including leadership positions.

Increase public attention, exposure, and awareness around the roles of women and girls in society, with a focus on issues identified locally as most critical for progress.

### Targeted Beneficiaries

CARE will focus on Group Savings and Loans beneficiaries over the duration of the WGLG project. This is due to the fact that the groups already form the optimal numbers for the WGLG community screening focus groups. Secondly, most of the GSL beneficiaries are women, who are also the main target population for the WGLG community engagement.

The initial two groups have been identified from the wPower project. (Testimonials of a few members of each group can be found in Appendix I). wPower project is an Access Africa program supported by U.S Department of state covering three years from September 2012 and to December 2015. This is in line with the WGLG duration and timelines, and therefore proves to be a good choice for the campaign, allowing for the campaign to track impact on the wPower groups over the three years.

The project is being implemented in Nyanza, Eastern and Northern Kenya regions/districts, targeting 1285 entrepreneurs, 82,275 beneficiaries for solar lamps and 11,642 beneficiaries for improved cook stoves.

The main goal is reduction in carbon emissions, deforestation and improves economic status of women through increased uptake of clean energy products by rural and peri-urban households within the Great Lakes Region. The project has four strategic objectives which include:

- To increase access of women to small-scale clean energy markets
- To increase the number enterprises and incomes of women-managed small-scale clean energy technology enterprises,
- To increase public awareness of the role of women in clean energy markets.
- To improve documentation, evidence, and learning about the economic and environmental benefits of integrating women into clean energy value chains.

There are plans to include GSL groups from two other projects in the film screenings; Banking on Change and Community Savings and Loans.

Started in October 2009, the Banking on Change project aims to reduce poverty and enhance income and livelihoods security for households in seven rural and peri-urban districts of Kenya, all in Nyanza and Eastern provinces.

Community Savings and Loan (COSALO II) project is a joint initiative of Financial Sector Deepening Trust Kenya and CARE International in Kenya whose objective is to improve financial access to communities living in the remote and marginalized parts of Kenya, including Marsabit, Nyando, Bondo and Siaya counties.

Specifically, we will focus on women-only groups and groups where a majority of the members are women, in which case the men will also be involved in these womens' empowerment.

### Major Donors

The Canadian International Development Agency (CIDA), the United States Agency for International Development (USAID), Australian Aid, the Millennium Water Alliance, the Global Fund, the European Commission Humanitarian Office, the Centre for Disease Control & Prevention, the H. G. Buffet Foundation, the UK Department for International Development (DfID), the German Ministry of Foreign Affairs, the Sternstunden Foundation, the RTL foundation, the Luxembourg Ministry of Foreign Affairs, the World Food Program, the Disasters Emergency Committee (DEC), Proctor and Gamble Ltd., the Danish Refugee Council, the UN High Commission for Refugees (UNHCR), FSD Trust Kenya, the Rockefeller Foundation, the Cherie Blair Foundation for Women, the Bill and Melinda Gates Foundation, Barclays Bank and various other private and corporate donors.

### CARE International members supporting current program

CARE Australia, CARE Austria, CARE Canada, CARE Denmark, CARE Germany, CARE UK, CARE USA.

#### CONTACT INFORMATION

BOGDAN DUMITRU—COUNTRY DIRECTOR

GARY McGURK—ASSISTANT COUNTRY DIRECTOR, PROGRAMMES

SERAH NDEGWA-KAMAU—DEPUTY DIRECTOR, FINANCE AND ADMINISTRATION

MICHAEL CHILLA—DEPUTY DIRECTOR, SAFETY AND SECURITY

CARE INTERNATIONAL IN KENYA

MUCAI DRIVE, OFF NGONG ROAD

P. O. BOX 43864-00100

TEL: +254-20 2710069/2712357

WIRELESS: +254 220 2585381/2/3

MOBILE: (SAFARICOM): +254 722509870/273151081

MOBILE (AIRTEL): +254 733300756/65

Email: [info@care.or.ke](mailto:info@care.or.ke)

Website: [www.care.or.ke](http://www.care.or.ke)