

# DIRECTOR'S REPORT 2006

**Period June 2006 – Dec 2006**

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January 2007

## Reproductive Health Care

- 3699 patients treated
- RTI, Malaria, Skin infections, Eye infections, Rheumatism, Accidents, Fractures, Burns, Diarrhea, STIs, Intestinal worms and ear infections are top five diseases
- 1,901 children immunized
- 558 Ante Natal Care

## Reproductive Health Care

- 64 Family Planning clinics
- 233 Antenatal care
- 127 (89%) deliveries by TBAs
- 15 (11%) deliveries took place at the health facility facilities

## TB Pilot Program

- Increase in TB cases detected in Latakweny & Ngilai
- 12 member committee in Ngilai & Wamba trained
- 20 member committee in Lesirikan and Baragoi trained
- 94 treatment supporters trained
- 1139 people reached in sensitization campaigns

## Youth Focus

- 74 School based peer educators trained
- Youth activities in Lesirikan and Ngilai continue
- 20 out of school peer educators trained
- A group of adults and youth visited Tasaru to learn more about FGM and the organization's strategy to cope with the situation
- 4 youth from Lesirikan and Ngilai took part in a training in Mombasa on the role in the formulation of youth agenda organized by UNFPA
- Peer educators workshops have continued to take place for both school based and out of school youths

## Male Circumcision

- 15 male circumcisers trained on safe methods of male circumcision
- 20 elders and guardians trained on safe circumcision
- 16 sensitization meetings where 3010 people reached
- 1500 condoms distributed at Lororas to the initiates and their girls
- 33 *Lororas* supervised during – 1915 boys reached
- 1539 boys used safe methods of circumcision – 80% success recorded
- 376 (20%) boys not observed safe methods of circumcision
- 876 boys & girls reached about Abstinence, Be Faithful and use Condoms at *lororas*
- 563 initiates reached during follow up meetings on safe sex

## HIV/AIDS & Other Sexually Transmitted Diseases

- 174 cases of STIs have been treated both in the mobile clinics and static health facilities
- 26 VCT community *barazas* held in Ngliai and Lesirikan
- 137 people were taken through Voluntary Counseling along the mobile routes and at the health facilities
- 37 people agreed to be tested (results not disclosed)
- CHE have continued with home visit and community trainings
- During market days SAIDIA staff have continued to hold health education talks to the people
- Out Patients health talks have also been done by the staff
- School health programme talk has also continued during the period
- Sensitization Barazas held in various locations

## **COMMUNITY DEVELOPMENT**

### **Early Childhood Development (ECD)**

- 40 stakeholders trained on their roles in the management of ECDs
- 120 grand & parents trained on parenting skills
- 40 TBAs trained on health & nutrition
- 430 children provided with meals at the loipi

### **Education**

- SAIDIA continues to support bright-poor children to institutions of higher learning
- SAIDIA through donation from Kate Miur equipped Ngilai primary with beds, beddings, library tables and chairs, teachers furniture and Head teacher's desk and chair
- SAIDIA is currently thinking about a career and counseling program for upper primary and secondary schools in Samburu – with a view to addressing lack of career professionals in the district in the long run

## Income Generating Activities/ Development of Potential Enterprises

- 300 HH interviewed - IGA assessment conducted
- 20 Self-help groups, mainly women, participated in the Feasibility study. This involved market opportunity identification, commodity market chain analysis and Business Development Services (BDS).
- 60 stakeholders took part in a district level IGA feedback meeting. This meeting was also meant to gather more info towards development of Business Development Services (BDS) Program
- 2 Community level trainings on “Community Banking” held at Ngilai & Lesirikan targeting
- 30 beekeepers trained on marketing and business management
- 70 herders trained on livestock business marketing & management
- 143 small shambas fenced with cactus plant

## Communication

- Radio communication still remains the main form of communication between Nanyuki office and the field. Nkonyio Nasipa radio yet to be installed
- Satellite phones have also been used during the IGA assessment exercise

## Staffing & Personnel Issues

- One lady CDW posted to Lesirikan left SAIDIA on harassment allegations
- Three Maralal based staff (*ECD officer, Logistics coordinator and copy typist/office admin*) laid off over fraud and incompetence
- Advertisement for ECD officer, Community Development Worker and Office Secretary/Administrator (Maralal) done and short listing complete
- A lady has been engaged as Office Secretary/Administrative Assistant at Maralal office awaiting interviews scheduled in February
- One Nurse left in September 2006 to join government
- Recruitment of two nurses one for Lesirikan and the other for Ngilai done in October 2006
- M&E officer transferred from Nanyuki to Maralal office

## Funding & PR

- UNDP funded children's rights campaigns within Wamba and Baragoi
- Donation of KES. 456,000.00 from Kate Miur for Ngilai primary education facilities
- UNFPA visited SAIDIA in December to carry out mid term evaluation
- SAIDIA received a visit BVLf in June 2006
- Two proposals have been done and submitted. A vector control proposal was done and submitted to World Bank in Nov 2006
- In October 2006 we did a proposal for N/Nasipa dispensary and submitted to Embassy of Japan
- In June 2006 BVLf funded a 5 month supplementary feeding for drought intervention for ECD and community health and sanitation education

## Partnerships

- Through FHI funding SAIDIA partnered with the ministry of Health in the refurbishing TB manyatta at Maralal District Hospital
- SAIDIA have continued to partner with the Head Teachers of the various schools where school-based peer educators are drawn

## Strategic Framework Development for SAIDIA

- Baseline surveys and evaluations of various programs undertaken and documented
- Stakeholders analysis carried
- Focus Group Discussions – Building Community Consensus
- Staff retreat workshop
- Development of draft VISION, MISSION and Organizational Values
- BOD's mailing questionnaire forwarded and responses received
- Consultations between the Chair, Management Advisor and Director

## Re-organization of field operations

- Completed zoning SAIDIA's area of coverage and staff (CHE) redeployed to the zones
- ECD food stuffs now purchased and distributed by local shopkeepers. This has drastically reduced overhead costs (transportation)
- Since June 2006 we have made monthly plans and reports by field staff mandatory.
- Lesirikan Health Centre committee elected through a newly introduced grassroots election system – right from Village Health Committees (VHC)

## Constraints

- Precarious shortfall in funding for staff salaries and overhead costs – for administration and operational cost especially towards the end of the year
- Unending insecurity of along the main roads connecting the main towns in the district. Early November SAIDIA vehicle suffered gun shots along Wamba – Maralal road. One solar panel was extensively damaged by a bullet. Nobody was hurt.
- 3 staff have to be laid off due to misappropriation and this meant some staff had to be overworked and some activities delayed.
- The drought disrupted various community activities as it lasted while the rains which started in October 2006 was also destructive the much it was a blessing.
- Staff capacity and commitment at various levels hinders SAIDIA to reaching its optimum potential as a catalyst of change in community development pursuits

Thank You