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**YEAR 2 KANYERUS PROJECT REPORT.**

**PROJECT NAME**: ***KANYERUS WOMEN RIGHT TO REPRODUCTIVE HEALTH II PROJECT***.

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| **COUNTRY OF IMPLEMENTATION** | **KENYA** |
| **COUNTY OF IMPLEMENTATION** | WEST POKOT COUNTY |
| **LOCATION** | KANYERUS |
| **SPONSORING RC CLUB /PARTNER** | UPPSALA GLUNTEN RC |
| **IMPLEMENTING ORGANIZATION** | COMMUNITY NURSING SERVICES. |
| **PROJECT PERIOD** | NOVEMBER 2022 – OCTOBER 2023 |
| **PROJECT RESPONSIBLE PERSON** | DANIEL ODIWUOR MURUKA |
| **FIELD OFFICER** | CELINA KALEMUNYANG |

**Introduction.**

Kanyerus women right to reproductive health ii project, follows a successful implementation of a similar project in the same location, but on the lower side “Kapetakinei village”. The success story about the initial project spread a lot in the other villages. This encouraged different communities to reach out to the implementing partner to consider having a similar project in their community.

In the Pokot community, living in the western part of Kenya, in West Pokot county, the status of women is still not regarded highly especially by the male members of the community. The traditional life style is not making this any better. Women are not supposed to talk where men are and should take care of children and work hard to bring food to the table. Other traditional way of life like, female genital mutilation, child marriage, restriction to access to family planning, continues low educational status for women is not helping, rather putting the community at even greater danger economically in future.

It is against such retrogressive, culture and traditional life style that the community having learnt of progress in other communities, that they developed a desire for community sensitization. Kanyerus Women Health Right ii is a project intending to educate the community with skills, to enable the community adapt a change process through sensitization, dialogue with community members regarding the ills facing them as a community.

**Objective:**

The projects main objective was to initiate a process of change that leads to women having better access to health care and that traditions such as female genital mutilation, child marriage and teenage pregnancies are reduced. In addition, provide training in general family planning and enable girls to go to school.

**Strategic implementation planning.**

Each and every community, holds its culture and way of life in high esteem, these are deeply rooted believes, way of life that has been passed from generation to generation, they are the community identity which defines them. It gives them a unique sense of belonging and therefore a strategic approach to convincing the community to behave otherwise is tricky and can cause community uproar. Such Community change process must therefore be seen as being driven by the community members themselves rather than as the view and perspective of outsiders.

We have therefore as an outside organization (not from the Pokot community) have used the following community friendly approaches to ensure successful implementation of the project.

1. **Pre-Project meeting with the local leaders**: - Meeting with community leaders is very important, they a lot of influence on how the general community will perceive a new thing in the community. It was therefore very important that we explain to them about the project and get their support which we did. This is a more of an opportunity to develop rapport with the administrative wing of the community and to bring them on board.
2. **Using the local community members to drive the change process: -** Forming a group leading change process, with members from the same community, gave the project a community ownership. The feeling that this is our own people talking to us, telling us about this change. Their own, knows the best approach, they know the challenges and the solution. This made the implementation easy and has promoted ownership by the community.
3. **Training of the group members: -** This was to enable the group members acquire knowledge and skills, to deal with various questions that might arise and to differentiate between facts and myths.
4. **Using a local staff as field officer:** This was to give the project a local face, that is acceptable and not as an outsider from a different community coming to tell us about our culture that he/she has no idea of.
5. **Training in the local language: -** About 90% of the group members cannot write or read. The members of this community hardly know Kiswahili which is the national language. It was therefore important to use a language they were comfortable to help acquire skills.
6. **Including men in the project: -** Men are seen to be the greatest part of family decision making organ, they decide when a girl has to be married, how many children a woman should give birth to, etc. We therefore viewed men as the greatest stumbling block to effective change process that we need. They need to reach out fellow men and therefore the necessity of their inclusion.

**THE ACTIVITY REPORT.**

We have implemented and completed several activities this year, these activities were to enable us achieve our overall goal of sensitizing the community to adopt meaningful development changes towards women. We have therefore completed the following activities successfully:

1. **Introductory meeting with community leaders.**

Community entry is always an important part of initiating a community project, we were therefore able to meet different community leaders, the chiefs, the assistant chiefs, the village elders, the community health volunteers. The reason was to explain to them about the project and marshal their support.

We had meetings and the leaders agreed to support the project since they had previously heard about in in Kapetakinei.

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The leaders resolved to support the project, they saw this an opportunity for the community to change. They have always since then supported the project. The meeting took place in November 2022 at Kanyerus center followed by CHVs meeting in Kanyerus dispensary.

1. **Group formation.**

The group formation was conducted in the beginning of November 2022. This was presided over by the local administrators. The group formed consisted of 10 women, 10 men, 8 girls and 7 boys, 18 females and 17 males. The group was briefly informed of what their role would be and how they will fit in their roles. We agreed that only those willing and have a burden to see their community improve were included as members. We informed them that this is a voluntary service and no payment will be expected except re-imbursement of cost met by the group while implementing the project.

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1. **Training of group members.**

The training was conducted on the 25th and 26th of January 2023 at Morlem Centre. The Objective of this training was to equip the members of the group with accurate information to enable them carry out factual community sensitization. The training was done in a simple set up, giving the participant a good opportunity to feel at home and free to express themselves. The training included:

**(a) Female genital Mutilation** – The origin of Female genital mutilation, types of female genital mutilation, effects of female genital mutilation, laws regarding female genital mutilation, ways on which community can stop female genital Mutilation.

**(b) Family Planning**: - What family planning is all about, the different types available, myths related to family planning. Small family vs big family.

**(c) Right based Approaches**: What is human right, goal to development approach, who are right holders, who are duty bearers, who are the change agents. How can community apply right based approach?

**(d) Child Marriage**: Development of reproductive health system, girls age review, how the body prepares itself for pregnancy and child birth. The dangers of marrying young girls. The consequences of child marriage to the family, the community, to the society. How we can stop child marriage.

**(e) Girl child education**: - Why girls should also be given equal opportunity for education.

**(f) Others**- The need for child immunization, need for Antenatal Clinic.

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**Outcome**: All members of the group attended the two days training, the training was delivered in Pokot language to promote clear understanding, the training involved lecturing, group discussion, open dialogue and question and answers. All the participants were very satisfied with the information they got. The group come out of the training venue with a great desire to change their community.

1. **T-shirts for identification for the group members.**

The group members received T-shirts for the identification. The t-shirt became so prominent in the Kanyerus community by both adults and children. They have been referred to as “the people of the blue shirt” the t-shirt has gained both respect and hatred in the community. The respect gained is more than the hatred gained.

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1. **Introduction of group members to the public.**

The local leaders, requested us to plan for a community gathering so that the leaders themselves could present the group members to the community. This was a great idea and letter on we realized it was an important step to successful implantation of the project. The group members were therefore introduced to the general public on the 24th February 2023 at Kanyerus Centre.

The chief, the local Assistant County Commissioner, the police chief of the area, and members of the community attended the meeting. All the leaders present told the members of the community that the group had their blessing and will support the group and are behind the community drive to change.

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1. **Groups having regular meetings.**

The group have meeting regularly every week, this meeting is always chaired by the local field officer in the Kanyerus region.

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| **GROUP MEETING TARGET THIS YEAR** | **TOTAL GROUP MEETING THIS YEAR** | **REASON FOR NOT MEETING TARGET** |
| 44 | 36 | - Insecurity in the region of Kanyerus in September leading to migration out.  - Some meeting days fell on public holiday. |

* We achieved 81% of our meeting target in the project year Meeting turn up.
* The meeting turn up was ranging between 65 – 90% with an average attendance being 75% in every sitting.
* The women had higher turn up in every sitting, followed by men then the youth.
* The youths low turn up was attributed to the fact that most of them are in school and could not find time to attend the meeting regularly.

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**7. Group sensitization activities in the village.**

* 1. **a. School visits.**

The group had the opportunity to visit the following schools in the region: Makanyi Primary School, Ngengech Primary school, Kanyerus Primary school.

The main area of sensitization here was Teenage pregnancy, female genital Mutilation, Child Marriage and family planning.

* In school visits we reached out to:

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|  | **Total** | **Comments:** |
| Girls | 330 | * This number could be higher, but the low importance given to education in this region makes the number low. |
| Boys | 346 | * We were also targeting age 12 year and above only. |
| Teachers | 23 |  |
|  | **699** |  |

* 1. **b. Chiefs Barraza’s (a sort of special traditional meeting).**

1. The chief Barraza’s provided a great opportunity to meet men, they are mostly not found during home visits. Most men attend to chief Barraza’s than women. Unlike organized meetings by the team, the chiefs Barraza’s provide limited time and therefore the team could only give one topic per session.

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| Total Barraza’s attended | Total women | Total men |
| 16 | **321** | 1823 |

1. Out of the 16 chiefs Barraza’s attended we were able to meet 1,823 men, men become more interested in the discussion and following up chiefs Barraza’s because of the information by the group.
2. Family planning topic though was not well received by all men, we agreed that we would still continue giving them examples and inviting role models to talk to the men regarding family planning.

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* 1. **c. Churches.**

The group also conducted community sensitization in different churches every Sunday. Because the church leaders had been informed, they would every Sunday ask if there were members of the Kanyerus for change to speak in the church.

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| Total no of churches | Total women | Total men | Total boys | Total girls | Total |
| **38** | **821** | **230** | **123** | **342** | **1516** |

1. On average we were meeting 39 persons per church, more females were met in the church than the males.

The church was very receptive and very supportive in giving the group an opportunity to sensitize the members of the community who come church.

**d. Action days.**

Action days are activities which were meant to reach out to more people in the community, of different

ages in a more open environment. This year we had three different village activities, these activities

have been carried together by joining the old group. The activities carried out here included.

(i) End Female Genital Mutilation world celebrations.

(ii) Integration of the old and new groups.

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1. (iii) Road show (through the community)

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* 1. **e. Household Visits.**

Home visits and having a one on one with the members of the household remained one of the key strategy in our effort of meeting all the family members (Father, Mother and Children) as a unit. We have managed to visit more household in this area than we had planned for. We had a target of 256 households, however we have reached out to 307 households. The members of the group went even beyond their village to the next village household.

The table below is the breakdown of how many people have been met during the house visits sensitization sessions.

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| **Sex/age** | No |  | **H/H with** |  |
| Men | 89 | Total number | Father, mother children | 80 |
| Women | 302 | of household | Mother and children. | 207 |
| Girls | 1407 | visited 307 | Children only | 6 |
| Boys | 545 |  | Father only | 9 |
| **Total** | **2416** |  | Mother only | 5 |

**CONCLUSION.**

Kanyerus women health right has impacted the community in a number of ways, at first it was a bit difficult however with time it become more easy and members of the community agree that the group members have done a commendable in community sensitization. The following areas have been seen as areas with great impact:

1. **(a) Access to Family Planning**:- The group visited the dispensary and demanded to know why the dispensary does not stalk family planning commodities. They said it was not easy for them to sensitize the community on family while in the dispensary the services were not being offered. The dispensary in charge agreed to order the family planning commodities and it is now available.
2. **(b) Increase in Family Planning services uptake:** - In review of the records of the family planning uptake in Kanyerus both from the jeepline clinics and Kanyerus dispensary, the data has gone up by 20%. Some men especially those in the group have decided to lead by example. They urged their wives to take family planning and also accompanying them to the service point as they sensitize others to do so.
3. **(c) The decline in cases of FGM:**- The Kanyerus for change group, has had a great success in combating female genital mutilation. The cases have significantly gone down, you hardly hear of FGM cases and celebrations. The only challenge is that those who do it will go across the Kenya Uganda and do it there. We believe in the next year, the community will have understood the importance of not circumcising women and abandon it completely.
4. **(d) School enrolment:** - From the school registers, more children have been enrolled this year, some of these are the youths who had dropped out of school, some are new but older. This enrollment is both for boys and girls, however more girls 65% have enrolled to boys 35%.
5. **(e) Child marriage: -** Child marriage though still remains very common, many girls dropped out of school, went through female genital mutilation. Some of the girls who decided to go back to school are concentrating in school work. Those who did not go still find themselves getting married.
6. **(f) Women voice in the community: -** The women voice in the community is steadily rising, there are several instances that demonstrate this. Women are now able to stand and talk in Public Barraza’s, community gathering and give opinion during meetings. Though most of the women talking in those places are women in the Kasei for change group.
7. **(g) Right based approach achievements**: - The community have reached out to their leaders on the following issues. The chief and the sub chief must arise and tame the runaway FGM in the region since this is prohibited by the law and they are the custodian of the law. They have also reached out to the education depart to increase the number of teachers in their community since the enrolment has gone higher.

**CHALLENGES.**

1. One of the greatest challenge the insecurity in the area: The subay community from Uganda had invaded some houses in Kanyerus. This brought a big tension in the community causing movement out of Kanyerus, people fearing for their life. This led to no meetings, no community activities. The issue has been brought under control now.