



CULTURE INFORMATION AND PASTORALIST DEVELOPMENT  
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**OVC SOLOLO PROJECT**  
**QUARTERLY REPORT FOR JANUARY – MARCH 2014**

**DATE: 14/05/2014**

## INTRODUCTION

OVC Sololo project provides support in a holistic approach, the project support OVC and PLWHIV in 7 locations of Sololo district. The project is in its 4<sup>th</sup> year of implementation. This first quarter of the project has high hope and expectation for the implementing organization, the donor and the beneficiaries. This includes the budgetary constraints and the project output.

Obbitu farming unit, the green house is a project in the right direction for nutritional support and food security for the project in future. Water will be the challenge based on the frequent drought and erratic rainfall in northern Kenya.

The number of OVC registered for support is 175 boys and 203 girls bring the total to 378 children among these 22 children is accommodated in Obbitu children home.

OVC Services provided are child specific based on home visit data collected on monthly basis. This includes nutritional, health care services, education, shelter, clothing legal protection and household economic strengthening. OVC Sololo project continued to have GOK and community support through OVC management committee and district children officer. CIPAD is a main stakeholder in children services.

## PLANNED ACTIVITIES

1. Routine OVC services
2. OVC management committee meetings
3. Health assessment activities
4. Green house activities
5. Obbitu children home management

## OVC ROUTINE SERVICES

### HOME VISITS

MONTHS	TARGET OVC	NO. SEEN	NO. NOT SEEN	Coverage rate %	REMARKS
January	49	44	5	92	General performance in school was poor. Dressing, health ,food and
Febuary	70	70	0	100	
March	80	76	4	95	

TOTAL	199	190	9	<b>96</b>	nutrition was good Home environment was clean Lack of latrines
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This a critical service area for OVC sololo project, the home visits aims at collecting child and family information through interview of children and the guardians and also observation of the homestead. The information collected has recommendation on which the project provides very important prioritized needs of the children, based on this information the following items were ordered for provision

. Home visit also check at the child in a holistic way in-terms of education attendance, retention and performance. Health conditions of the children is also checked and reported. Water quantity and quality this was done through checking for water storage containers. Clothing and beddings was also observed

The data is collected by OVC field officer and shared with the donor on monthly basis through a computer database program. The information also assisted the management team to make plan for budget and provision of services

## 1. EDUCATION



Education is key service area of OVC care and support, OVC children were expected to be enrolled in school at the right age, progress to the next level with no drop out and improved performance in class work.

Education is the main core service area for the OVC sololo project. All other services are usually pegged on education in that all children within school going age must be enrolled at the nearest public primary school.

The current enrollment stands 141 boys and 147 girls in primary school, totaling to 288 children. In secondary school there are 12 children at through and 1 technical school. The secondary school fees was assisted through Aphiaplus Kenya shillings 10,000/= was paid for each child this year.

### **OBITU CHILDREN END OF TERM ONE EXAM 2014**

NAMES	CLAS	MAT	ENG	KIS	SCI	S/S	R.E	READING	TOTAL	POSITION
								ENG KIS		

Guyatu Wario	3	88	92	86	86	88		88	100	628/700	13/39
Lasi Jarso	3	60	96	80	86	78		92	100	592/700	22/39
Rukia Guyo	4	52	45	44	58	52		-	-	251/500	33/51
Tume Godana	4	66	37	41	64	58		-	-	266/500	31/51
Diqo Racha	4	64	37	31	50	43		-	-	225/500	38/51
Jamal Mohamed	5	70	68	67	82	72		-	-	359/500	4/48
Dido Wario	6	70	73	54	92	62		-	-	351/500	9/73
Abdirahman Gollo	4	66	61	61	90	77		-	-	355/500	7/33
Dansa Qabale	4	44	57	62	76	60		-	-	302/500	19/33
Halima Hadija	4	48	58	62	70	52		-	-	290/500	21/33
Darmi Dida	3	86	92	56	68	80	65	-	-	447/600	18/29
Buke Ali	3	78	86	64	76	73	50	-	-	427/600	21/29
Galgallo Dida	3	70	90	42	78	80	50	-	-	410/600	22/29
Ismail Shukhu	3	86	86	40	78	77	35	-	-	402/600	23/29
Qabale Abduba	2	88	82	76	74	80	70	-	-	470/600	13/24
Guyo Gollo	2	56	46	58	76	77	80	-	-	393/600	19/24
Fugich Amina	2	12	36	36	58	63	55	-	-	260/600	23/24
Hadija Lokho	2	38	30	50	50	60	60	-	-	238/600	24/24

## 2. HEALTH CARE SERVICE

The program provides both curatives, preventive and promotive health services. Curative services are mainly received at the GOK health facilities for HBC children within their locality. Referral cases are done through CIPAD which pays for the treatment at Sololo hospital. For



OVC living in Obbitu children there is dispensary with essential drugs children who do not feel well were attended and very ill cases referred to sololo hospital for investigation and treatment. Admission cases were paid for through NHIF medical cover at sololo hospital. One case of referral was done this quarter for ENT case to Marsabit hospital. The child 047 has improved as result of the referral case.

Nutritional health assessment was done on monthly basis targeting all the children. Children were visited at school or home. Services at health assessment included general health assessment for any disease conditions, MUAC measurement and weight for height. No case of underweight was reported among Obbitu children. 4 cases of underweight were reported during health assessment. The family were advised and registered for food voucher supplementary food.

Obbitu children have been well despite some minor complaining like fever, head ache. 3 children had frequent attack of asthmatic attack and were managed through referral to hospital.

OVC children who are HIV positive were on their treatment and encouraging. The program to have testing and counseling will be planned with MOH mad APHIAplus.

De-worming of all children is ongoing during home visits and health assessment a total of 105 children has received Albendazole 400mg.

months	Target	Actual seen	Not seen	Follow up	Coverage rate %	No. not well	Under weight	remarks
January	85	69	16	16	<b>81</b>	7	2	Cases treated and cured
February	69	48	21	21	<b>70</b>	3	2	Treated and cured
March	98	0	98	98	<b>50</b>	-	-	

#### HBC FOOD AND NUTRITION

Food items	JANUARY	EBRUAARY	MARCH	Total foods	Total cost
Maize KG	2,750	2,750	3,300	8,800	334,400
Beans kg	880	880	1,320	3,080	184,800
Sugar 50kg bags	3	3	3	9	43,300
Tea leaves Boxes	2 boxes	2 boxes	2 boxes and 2 stakes	6 boxes and 2 stakes	19,800
Cooking oil boxes 24kg	5	5	5	15	41,500
Salt bundles	3	3	3	9	5,400
Bar soap boxes	3	3	3	9	13,500
Transport hire	2,500	2,500	2,500	3,200	8,200
<b>TOTAL</b>					<b>650,900</b>

#### LEGAL PROTECTION OF OVC



This is acquisition of birth certificates for the registered OVC, children living in Obbitu children all have birth certificates have been issued with birth certificates. 84

birth certificates were processed for OVC and vulnerable children.

## **PSYCHOSOCIAL SUPPORT**

Obbitu children had monthly talk with staffs and management on adolescence issues covering improved performance, health and social behaviours and physical growth and development. 74 families received awareness of importance of birth certificates and supervision of children in school to improve performance and instill good behaviour

## **HOUSEHOLD ECONOMIC STRENGTHENING**

2 families will receive 1 donkey each which was not given out previously for water and firewood transport to earn an income for the families.

5 families who received the donkeys earlier have benefited from sell of water and increased water quantity at household level which positively improved personal hygiene of family members

## **OBBITU CHILDREN VILLAGE**

The home provides accommodation for 23 children with a total of 18 staffs who take of the welfare of the children and project activities. Obbitu children home has a guest house to accommodate our guests and volunteers. The size of the land is approximately 1500M by 200M

## **SERVICES IN OBBITU VILLAGE**

### **1. ACCOMMODATION**

Children have separate beds which are double Decker, each child have a mattress, bed sheets, blankets and pillows. Boys and girls have separate rooms proving gender privacy. Every child has metal box to keep personal clothes and effects safely and orderly

## **FOOD AND NNUTRITION**



Obbitu children have adequate and nutritionally balanced food. They have 3 main meals and 2 snack time. Due to school activities children in primary school do not get tea breaks. The green house provides vegetables for Obbitu children and surplus for sale to the local market hence saving was made from consumption of sukuma wiki from the farming unit. Food was provided in adequate varieties from the food store and issued to the mother caretakers through food ledger.

## 2. CLOTHING

The children have enough home clothes and shoes, they were adequately replaced when it get worn out. Obbitu children and HBC children received second hand clothes from volunteers who came to visit the project and Obbitu children home from Italy.

## 3. HEALTH CARE

The children have been healthy but 3 children had frequent Asthmatic attack. It was managed by inhalers. There were very few complains in terms of sickness from the children most complain were cough and head ache, some gastroenteritis these case were managed at Obbitu children home some referred to sololo hospital

## WATER

Obbitu children home experienced some shortage of water during month of December and January rain came in middle March and we have most of the tank full by know. Children drink filtered water.

## LIGHTING

The village was served by solar electricity and generators. Both systems worked without major repairs. Children's house 2 had poor lighting from the solar electricity. The fault has not been identified but it could be either the battery is likely the problem or the charging unit. We are planning to provide a new battery before end of June. 6 bulbs security light bulbs were replaced.

The generator battery was also replaced John Kalili has been supportive when he was available.

## BUILDINGS

The buildings were in good state of repair, inspection was done by Bonaya the requirements have been shared with donor. The gutters has been repaired, children's bed has been repaired other activities are expected to be completed by the end of May.

## COMPOUND.

The compound has been maintained by cutting down long grasses to control mosquitoes and other scrolling insect and reptiles. Repair of traditional fence was done by the 1 watchman assigned to maintain the compound. In near future w shall plan to fence the whole compound with ANNO live fence to strengthen traditional fence and to show the demarcation line properly

## CHILDREN'S ENTERTAINMENT

Obbitu children had varieties of plays and materials. The play ground was well maintained, balls for playing was available. The children grew and developed physically

## OVC MANAGEMENT COMMITTEE MEETING



The OVC management committee sat at the end of March. They mainly deliberate on the OVC services. They also discussed children behaviours and school dropouts and referrals. Ongoing green house project was also discussed. Vetting of secondary school fees beneficiaries was done. The committee visited the green house project and were very impressed

## GREEN HOUSE PROJECT



The project has already shown results of harvests of Dannia, kales and spinaches. Obbitu children have started eating vegetables and pumpkins grown in the farm. This has changed the source of vegetables from MadoAdi to Obbitu farming unit for our children. Some of the vegetables were being sold to the local market, sololo hospital. Financial record on the sales is being maintained and record on the vegetables supplied to Obbitu children home.

The Moringa project was doing well the picture shows 19 families of OVC receiving moringa seedling to plant in their home. Obbu girl's moringa farm was not properly maintained after the school closed for April holidays. The seedling has sprouted well and requires weeding and putting more organic fertilizers

Water in pan 1 dropped in level as there was poor in flow caused by overgrown bushes within the water catchment area. Clearing of bushes has been planned to be done in the coming months

## NHIF PROJECT

All our OVC caregivers have started benefiting from the services as the fund was paid. The 50 HH supported by Guido have also started benefiting at Sololo hospital

## APHIAPLUS PROJECT

Secondary school fees for 29 children were vetted by the OVC management committee. A total of 203, 465 shillings was approved by Aphia plus, the fees will be paid during the opening of the second term. Provision of 6 donkeys for OVC families will be underway this will make the number of Donkeys 8.

## CONCLUSION

GOK collaboration was enhanced where the district children officer Moyale/ Sololo visited the project and had a meeting at Obbitu children home. The meeting was facilitated by



APHIAPLUS. The meeting was on quality service for OVC based on GOK minimum service standard policy. A committee called quality improvement team was formed and launched

Assistance from other organization was sorted, the coordinator visited world food program who advised me to go through world Vision Moyale office as they are the lead organization. A request letter has been sent to them and awaiting for their feedback.

Proposal to Adeso Africa on extension of green house project was approved and assessment done, still waiting for their feedback on the result of the assessment. Another proposal to only the brave foundation was written on poultry keeping and livestock breed in Obbitu children home. No feedback has been received yet.

On tax exemption the process has take us long and not in near future. The GOK treasury is the body which grants the exemption. Our application is already with them and they said to come and visit the project to confirm for themselves. Tax compliance certificate has been processed from up to April 2014 and a monthly tax return of being done.

**GUFU GUYO**

**PROJECT COORDINATOR**