

JANUARY-FEBRUARY 2019 PROJECT UPDATE

The year 2018 was very successful. We constructed a modern kitchen, two classrooms, offices and staff toilets. Children playground was fully constructed and ready for use. In 2018, we admitted 60 new children to our program and our school reached grade 5.

27 children sat for class 8 examination in 2018 and 12 sat for high school final exams. Out of the 27 who sat for class 8 exams, 16 passed highly and joined high school while 4 out of 12 who sat for high school exams passed to join University at the end of the year 2019. The rest will join middle level colleges for different Diplomas.

The year 2019 started on high note with a number of activities. The first was taking all children who passed class 8 to high school. Fees and other school requirements were purchased for all students.

a) Female Genital Mutilation and Domestic Hygiene

6th, February was a world Female Genital Mutilation (FGM) day. All opinion leaders were preaching against Female genital Mutilation. FGM refers to all procedures that involve the partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons. It is incredibly painful, traumatizes girls and results in numerous negative health consequences that last decades.

Globally, it is estimated that over 140 million girls and women have undergone some form of FGM. Currently, more than three million girls, the majority under 15 years of age, undergo the procedure each year. Although the Demographic Health Survey of Kenya shows that FGM among 15-49 year olds declined from 37.6 per cent in 1998 to 27.1 percent in 2008-2009, the figures are still too high and progress has been far too slow.

Data shows that Kenya achieved an annual rate of reduction of 6.6 percent in the prevalence of FGM between 2005 and 2010. The United Nations Population Fund (UNFPA) and UNICEF joint program to end FGM, focuses on protecting girls and women by accelerating abandonment of FGM and providing care for its consequences has been operational in Kenya since 2008 to support national and grass root efforts.

FGM has immediate and long-term effects on women's health. Some of the immediate effects include severe bleeding, infection and shock. The long-term complications include recurrent urinary tract infections, keloids, difficulty during menstruation and pain during sex. FGM is also associated with the transmission of HIV from use of unhygienic instruments.

Research into the practice shows that FGM is practiced by different ethnic and religious groups within the country in different ways. FGM is far more prevalent among the Somali (98 percent), Kisii (96 percent) and Massai (73 percent) communities. As a result, FGM is also geographically unevenly spread in Kenya; it is more visible in rural areas than urban areas. It is important to note that FGM is against the law in Kenya.

In Nakuru, FGM is being practiced by the Kalenjin community although in discretion. During the workshop, some parents especially the Kalenjin were shy to speak about the vice. Parents from other communities were free to discuss the subject and asked many questions.

We invited Dr. GK Mbugua to moderate the workshop. Parents were also taught about their domestic hygiene. They were taught about taking their children for medical checkup and keeping their domestic environment clean. Finally they were taught how to train their children personal hygiene.





Photos above show the workshop in progress

b) Dairy Cattle

Last year we started keeping dairy cattle. The main objective was to have milk for our children. This enabled us to stop buying milk from street vendors.

We bought 3 pregnant dairy cattle (Whispy, Riziki and Elisabeth). Whispy was the first to give birth on Christmas day. By mid-January, all 3 had delivered.

We now have enough milk for our children. In fact they drink milk 3 days a week instead of twice, as they used to. This has made our children healthier and at the same time we save the money we used to buy milk with.



Whispy with her calf



Elisabeth with her calf



Riziki with her calf

c) Dining/Multi-Purpose Hall

Mid last year we started the construction of our dining/multi-purpose hall. Due to limited funds, we are not building it as fast as we would have wished. But the quality of work being done is very high. At the time of writing this report, they were doing last finishing work. Installment of windows, doors, ceiling and tiling has been completed. The remaining work to be done is painting and the making of furniture. We are hoping to complete this construction before mid-March. The funding is not yet complete – especially for the furniture – which was designed by the popular German designer – Sebastian Herkner – as a donation.



Work in progress at our dining hall



A sample of our dining furniture

We started the month of February on a wrong note. We lost a very hard working and committed parent. The mother to Tyson Ochieng died on 26th, February (may her soul rest in eternal peace).

Otherwise every other thing went on as planned. Children received all they needed including meals.