

MUTHAA COMMUNITY DEVELOPMENT FOUNDATION

REPORT ON HEALTH, HYGIENE AND SANITATION 3rd WORKSHOP IN KAYAFUNGO LOCATION, KALOLENI DISTRICT COAST PROVINCE KENYA

PREPARED IN PARTNERSHIP WITH:



3rd – 14th November 2008

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BACKGROUND INFORMATION

Kayafungo Location, Kaloleni District in the coast province of Kenya is one of the most arid, poor regions of Kenya. Kayafungo is wanting in development and lacks clean water. After an extensive survey of latrine coverage; carried out by the Student Movement for Real Change, among the needs identified by the movement was need for health and sanitation education. The Muthaa Community Development Foundation, a non-governmental organization based in Kenya, was selected to conduct four health and sanitation education workshops over the course of the project period.

This is a report on the third workshop carried for ten days from 3rd - 14th November of 2008 with two days per sub Location and an evaluation day as follows:

Monday, 3rd November – Mbalamweni Sub-Location
Tuesday, 4th November – Mbalamweni Sub-Location
Wednesday, 5th November – Mrimani Sub-Location
Thursday, 6th November – Mrimani Sub-Location
Friday, 7th November – Mbalamweni and Mrimani Evaluation

Monday, 10th November – Miyani Sub-Location
Tuesday, 11th November – Miyani Sub-Location
Wednesday, 12th November – Kinagoni Sub-Location
Thursday, 13th November – Kinagoni Sub-Location
Friday, 14th November – VCT

WORKSHOP OBJECTIVES

The following were the objectives of the workshop:

- Train participants to be trainers of trainers in community health and hygiene.
- Empower through knowledge: causes & prevention of diseases and nutritional value on local foods.
- Impact skills on pit latrine construction.
- Mobilize and encourage the community to know their HIV status and care.

PARTICIPATION

The third workshop comprised an average of 107 participants from the Kayafungo Location. Just like the second workshop, there was a low turnout of participants. Present participants gave apology of most of the participants failing to attend to a community program of Food for Work and deaths in the locality.

RESOURCE PERSONS AND METHOD

The resource persons included:

- Emily Karechio-Team Leader and Facilitator
- Abdalla Mohamed- Key Facilitator
- Terry Adhiambo-Local Expert
- Alias Changawa – Facilitator/SMRC Latrine Contractor

TOPICS AND THEMES COVERED

The main topics trained on were:

- Water Treatment
- Waste Water Disposal
- Ecological alternatives in sanitation (Refuse Disposal)
- Nutrition (Mother and Child Malnutrition)
- HIV/AIDS (How to live positively, Home Based Care)
- Latrine Construction (Construction of a modern latrine)

WORKSHOP ACTIVITIES

The third workshop run as the second workshop where we adopted lecture presentations, group interactions, demonstrations and practical as the methods of teaching. The following is the workshop detailed activities;

1. Facilitation/Teaching

70% of the workshop was done/carried out with facilitators training and teaching the participants on the different topics covered. This also involved a lot of participants contribution where they contributed on their cultural beliefs and practices, local activities, regarding the topics covered.

For example; On Nutrition, the participants listed locally available food and how to mix and balance them.

2. Latrine Construction Education

During the third workshop, the participants learnt how to construct a modern latrine. This was proposed by some participants during the second workshop from an interest of learning to construct a traditional latrine on in their homesteads.

3. VCT (Voluntary Counseling and Testing)

On 14th November, there was a free Voluntary Counseling and Testing day for HIV/AIDS hosted by SMRC, Ministry of Health, World Vision, KWWP and MCDF at Gotani dispensary clinic..

This was our second VCT we had our first VCT program held at St. James ACK Magogoni church.

The second VCT was such a great success compared with the first VCT;

- 84 persons were voluntary counseled and tested unlike 47 people in the first workshop.
- Had more counselors compared with first workshop, who were able to;
 - ❖ Attend to all the clients who came for the VCT
 - ❖ Finish the activity early enough and the community was able to leave early to their homes
 - ❖ Have time for a rap up meeting where they tallied the clients' forms together
 - ❖ Have time for lunch break hence effective counseling in the afternoon
- Have the Mbalamweni participants entertain and counsel the community during the VCT
- Had a person living with HIV/AIDS who was able to encourage and people to get tested
- The support was of DASCO program under the Ministry of Health was highly noticeable and appreciated

The event was crowned with SMRC Project Director Ms. Lily giving presents to the Miyani and Kinagoni participants with MCDF facilitators welcoming and sensitizing the present members on the importance of the VCT activity.

It was lively with some Mbalamweni participants, Youth Alive, youth from Ribe and the person living with HIV/AIDS entertained the present community and educated more on HIV/AIDS.

VCT Results

- ❖ Total number of 84 persons were tested.
- ❖ 2 Female clients were found positive while we had no positive male client.

4. Group Work

On evaluation day, we divided the participants into two groups from their sub locations and carried out the following activities;

- Each group set four questions for the other group covering the following topics;
 - HIV/AIDS
 - Health and Nutrition
 - Latrine Construction
 - Diseases
- Select one participant from the group to ask the questions on behalf of the group
- Ensure that all the members of the group know the answers of the all the four questions
- Select one person from the other group to answer a question before the question is read

5. Participant's Community Training

The workshop had a session where participant had a chance to practice their learned knowledge and training skills by choosing a topic that one felt most comfortable with and teaching it . The participants used the languages that they were comfortable with either Swahili or Giriama.

This enabled the facilitators know how serious the participants are on the issue of going to the community and to be Community Health Trainers. This will continue in the forth workshop.

REMARKS

Workshops and Participants

This workshop's HIV/AIDS lesson was quite fascinating with a difference of views and understanding among regions where the participants came from. Home Based Care was something new to some Miyani participants unlike some of Mbalamweni participants who are "Wahuduma" care givers to the People Living with HIV/AIDS (PLHA).

Logistics

The third workshop took place at Gotani centre just like the first and the second workshop. Unlike the first and second workshop, some participants in the second week of training arrived late due to rains in the morning where at times we were forced to start 30 minutes behind schedule.

Reasons why some of the participants did not attend the workshop;

We discussed with the present participants why their colleagues did not attend the third workshop and the following are some of the reasons that were raised; Lack of allowance i.e. transport and sitting allowance

- Farming; - Ploughing and planting
- Rains
- Food for work community programs
- ALPHIA II project
- Funerals
- Personal meetings

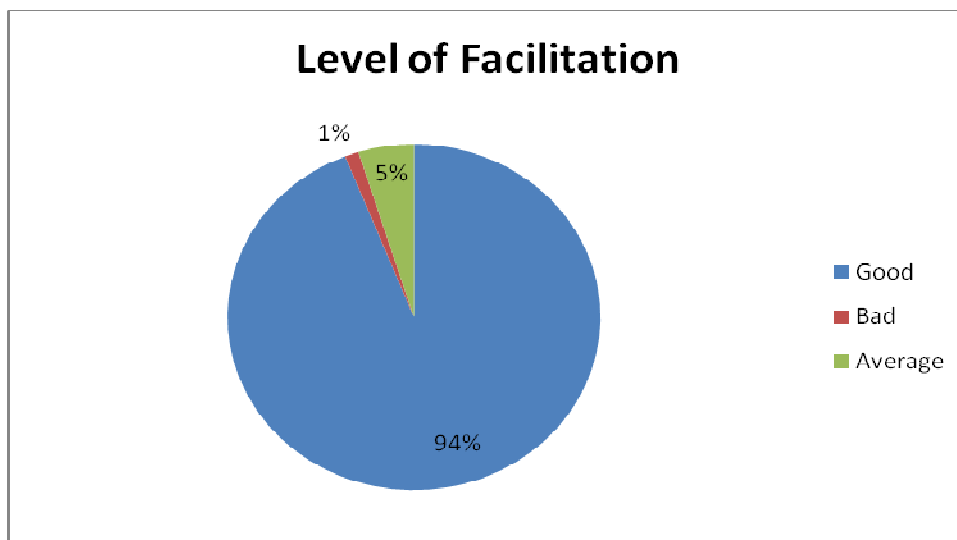
APPENDICES

RESULTS OF WORKSHOP EVALUATION

The evaluation was carried out on 107 participants and 104 questionnaires were returned. For all the questions we gave them choices to select from and so have outlined the answers in simple pie charts format. The evaluation was based on the following questions:

**1. How was the facilitation done on the third workshop?
(Masomo yalifundishwa vipi kwenye warsha ya pili?)**

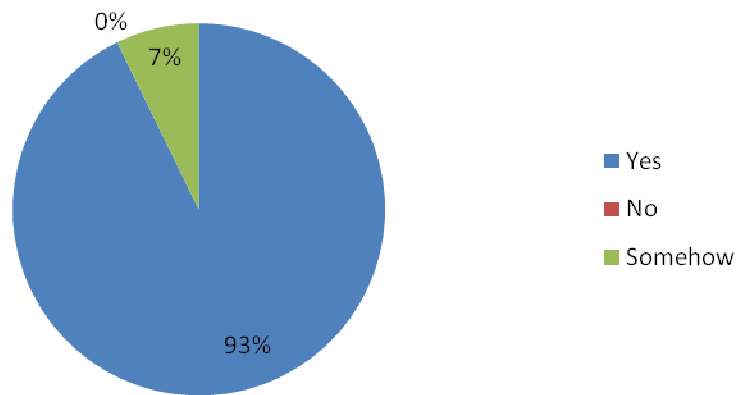
- a) Good
- b) Bad
- c) Average



**2. Has the third workshop had an impact in your life?
(Warsha ya tatu imekusaidia vyovyote maishani mwako?)**

- a) Yes
- b) No
- c) Somehow

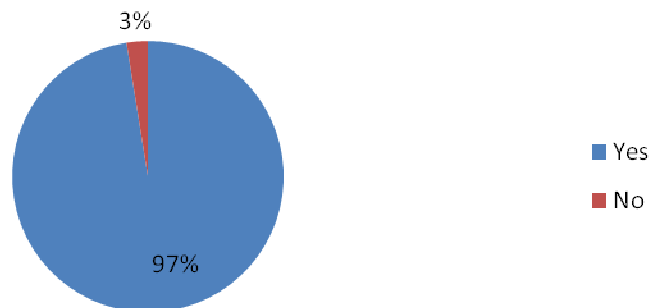
Workshop's life benefit



3. Were the topics covered relevant in your life?
(Je, maswala yaliyolengwa yalilenga maisha yetu?)

- a) Ndio
- b) La

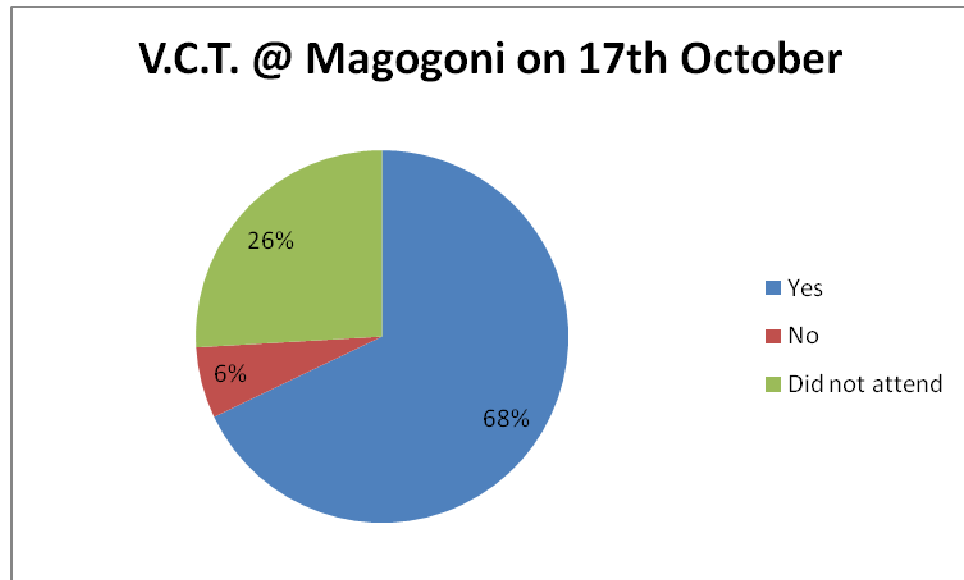
Topic's Benefit



4. Were you satisfied on how the VCT at Magogoni on 17th October was carried out?
(Ulifurahia namna VCT ya Magogoni tarehe 17 Oktoba ilivyoendeshwa?)

- a) Yes
- b) No

c) Did not attend



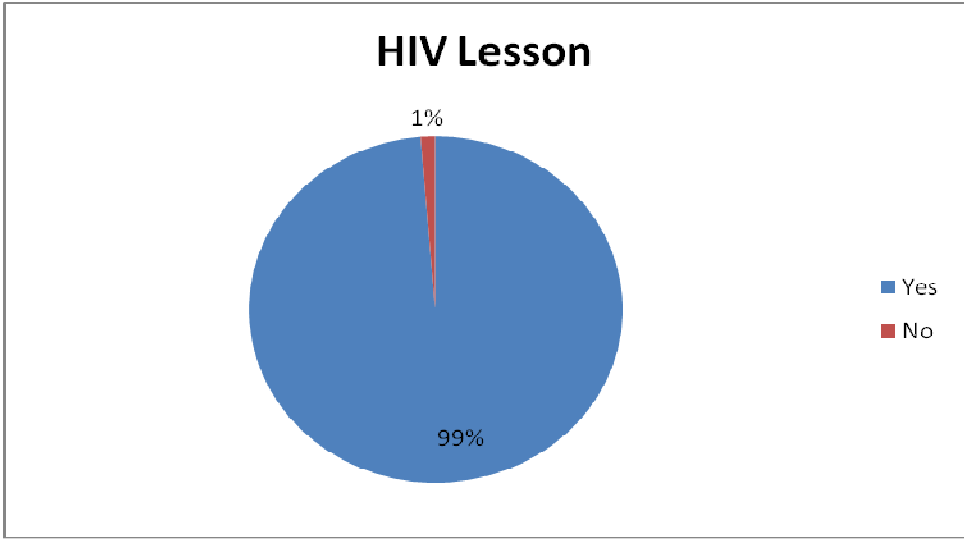
VCT Feedback from participants

The following is some of the feedback we got from the Mbalamweni and Mrimani participants who attended the VCT at Magogoni;

- ❖ All the clients were not attended due to late arrival of the counselors
- ❖ While waiting on the queue one would hear counseling going on from some of the counselors
- ❖ Community would prefer Counselors who are not from the community other than the ones they know.
- ❖ Although the young people attended the VCT program, they did not get tested.
- ❖ Some community members who were mobilized feared to know their status and so did not come for the test.
- ❖ Hunger made some people to leave early without being tested.

**5. Was HIV/AIDS lesson covered better this time?
Je, somo la HIV/AIDS lilisomeshwa vizuri wakati huu?**

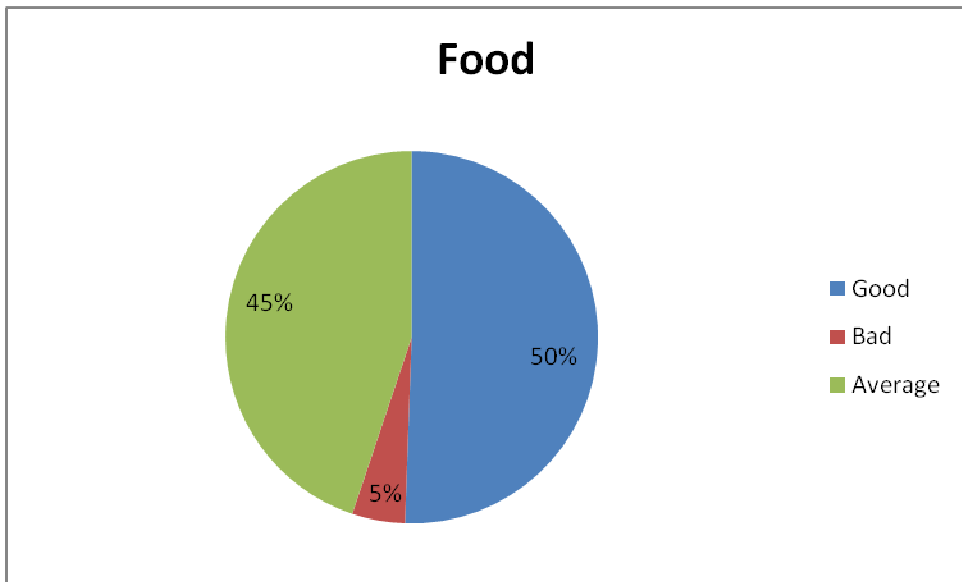
- a) Yes
- b) No



6. What is your opinion on;

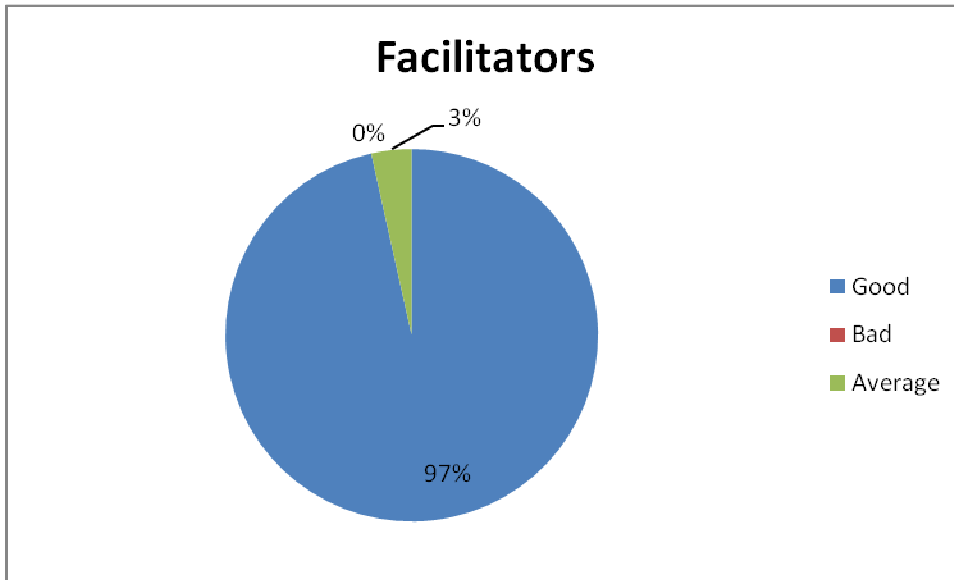
a. Food

- i. Good
- ii. Bad
- iii. Average



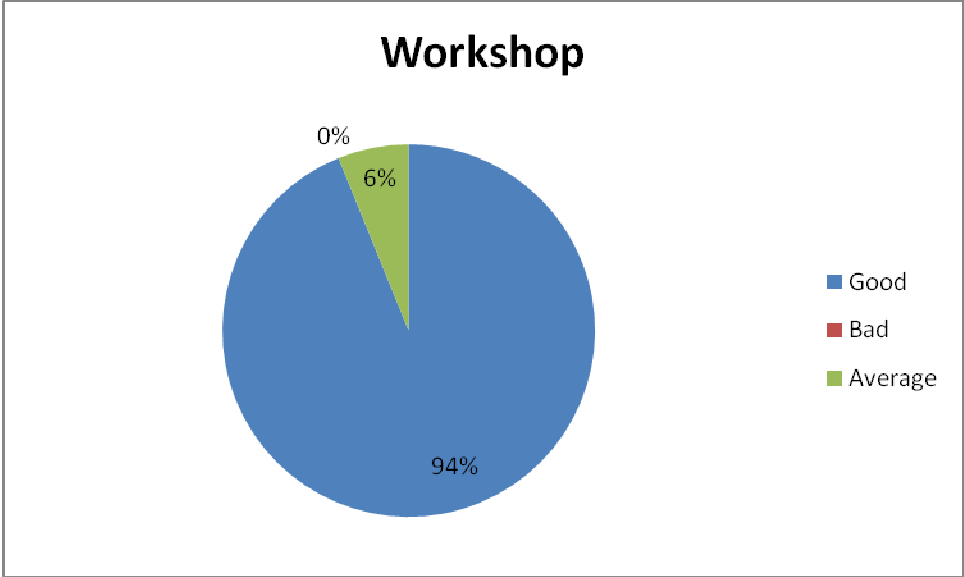
b. Facilitators

- i. Good
- ii. Bad
- iii. Average



c. Workshop in general

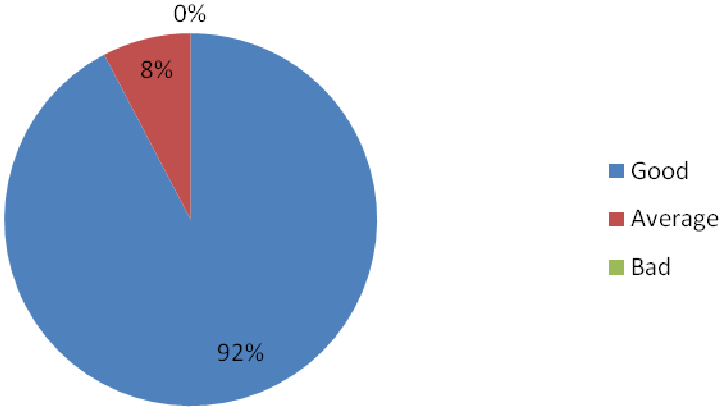
- i. Good
- ii. Bad
- iii. Average



**7. How did you find the Health and Nutrition lesson conducted?
Ulipendezwa na namna somo la Lishe Bora lilifundishwa?**

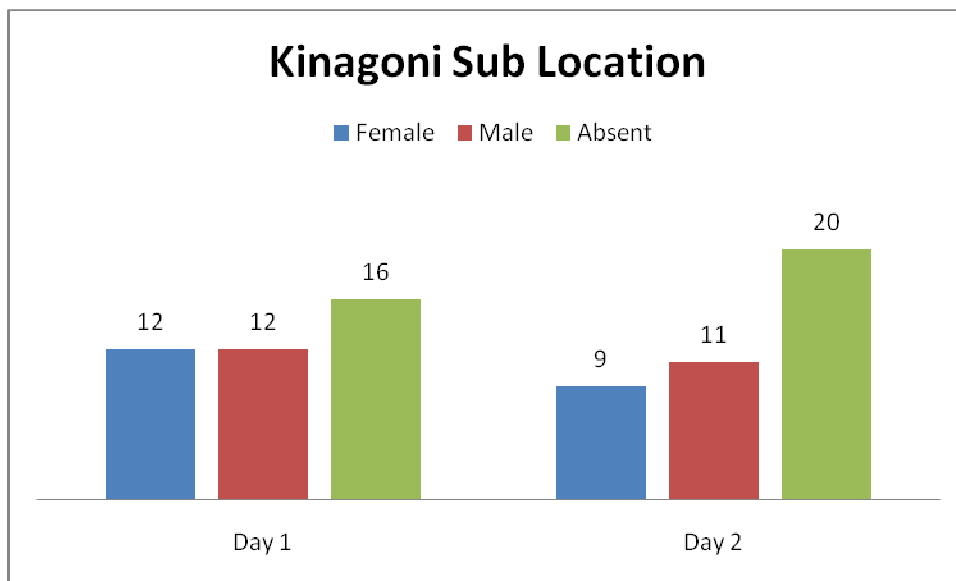
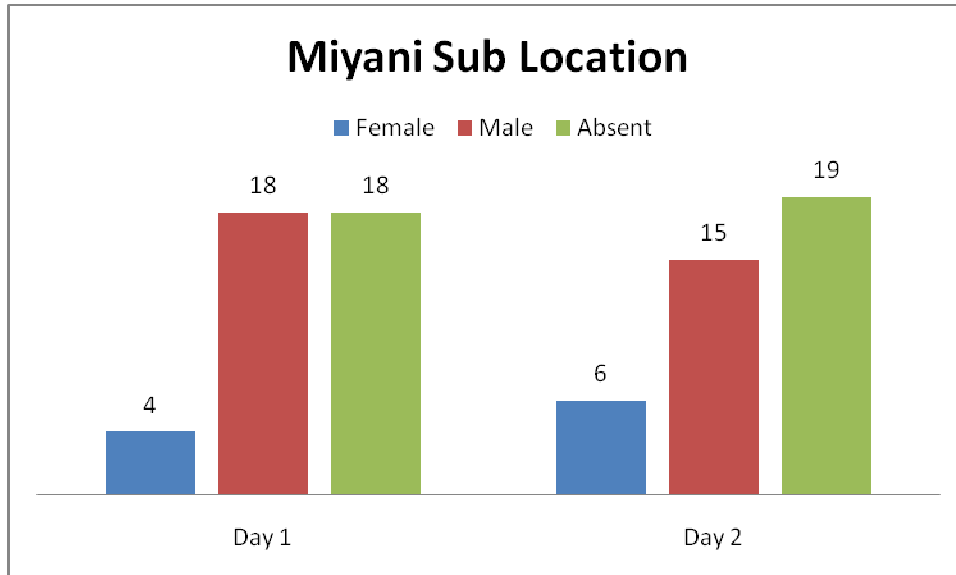
- a) Good
- b) Average
- c) Bad

Health & Nutrition Lesson

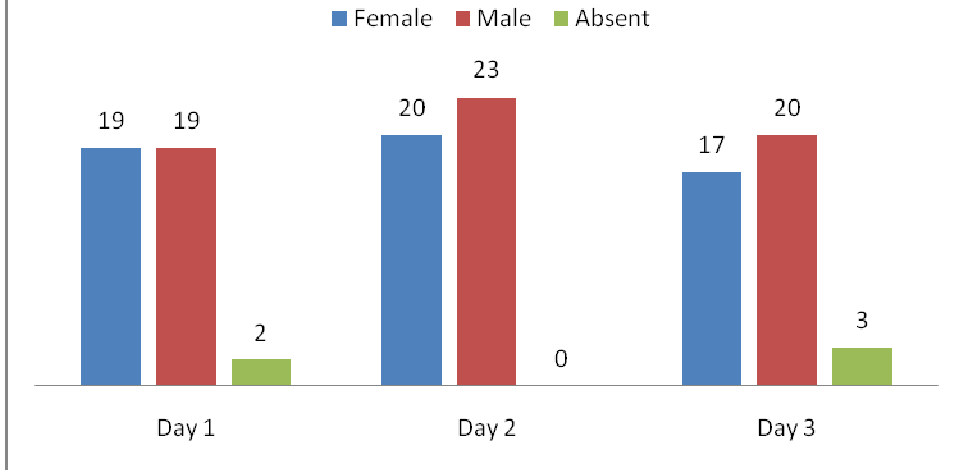


ATTENDANCE

The attendance was as follows:



Mbalamweni Sub Location



Mrimani Sub Location

