

ANNUAL REPORT 2019

INTRODUCTION

CHILD A STREET CHILDREN PROJECT IN NAIROBI KENYA.

AIM IS TO REUNITE THE STREET CHILDREN WITH THEIR FAMILIES.

This being the 23rd year in operation, CHILD has rehabilitated a number of 762 Children in the centre up to date. 99% of them joining school while 1% going back to rural Areas .More than 1800 families have benefited from the project by rescuing their children from ending on street through counselling, guidance and follow up.

The number of street children in our country Kenya is increasing daily due to poverty level, peer, pressure, breakdown of homes/families sexual physical and emotional abuse, domestic violence abandonment, neglect of parents ,death of parents and Political crisis has also lead so many children on streets . Nairobi being the capital city we have more than 250000 street children in Kenya. Kangemi slum among the leading where CHILD project is located.

Street children definition has now changed, they are no longer homeless kids instead some leave their homes to go out to beg for food since having a meal is a problem.



The Kenyan economy has deteriorated and the poor families continue to suffer .The parents send their children on street to provide the daily needs since unemployment is on higher rate.

When the children go out to beg, they enjoy staying away from home sleep out at night which becomes addictive and glue sniffing is introduced as a street culture. In this place the children are inadequately neither protected nor supervised and are object to abuse, neglect, exploitation and murder. Glue sniffing makes them not to feel the hardships of street life most of these children are orphans and from single parent.

The community at large appreciates child's work and very much ready to work with us. They help us locate where the children come from so we rescue them on time. We work hand in hand with the police, teachers. Chief administration, remand homes and neighbouring NGO .With all this we interact with their families or relatives to ensure the child is back home and school. Children go out on street to beg, steal, and collect metal and plastic scrapes for sale, to get something to eat, bet, watch video and buy drugs. The project age limit is from 6 to 15 years.

CHILD activities are: Teaching, counselling, field work, home visits, health education, school visits, Medical help, vocational training, Video show and tours.

The project age limit is from 6 to 15 years

Age 15 to 20 years join vocational training get skills become self independent.

The project was founded by Frigga & Poul Hansen in the year 1997 during their stay in Kenya. The project has continued very well and with enough confidence, Frigga decided to give it to Kenyans in the year 2013. With so much support and advice, the project is still on up to date. Thank you so much Frigga Hansen and all the well wishers **Mrs. else Kruse, Poul skallerup and Saint Vincent group** not forgetting Maria christeen who have visited the centre occasionally when she is in Kenya. She is a good friend and a blessing to the project. We appreciate each and every support and efforts focused towards this project. These poor, sick, vulnerable and wasted Children need your help. GOD BLESS YOU ALL

FACTS AND FIGURES 2018

BOYS/ GIRLS

B/ forward from	2018	21	10-11
New admissions	2019	27	15-12
Joined school	2019	21	10-11
Back to rural	2019	6	3-3
Total rehabilitated		27	15-12
Trained		6711	
Meals		7321	
Sunday school		1659	
Parents meeting		25	
Food helps		24	
Treated		30	
De-worming		90	
Hair cut		250	
Staff meeting		13	
Museum		3	
Video show		6	
Vocational trainings	Trained	6192	
	Meals	6192	

CHILD activities are: Teaching, counselling, field work, home visits, health education, school visits, Medical help, vocational training, Video show and tours.

FIELD WORK

This is the main work that is carried out every morning, where we visit the streets to get in touch with those children who are sleeping on streets or spend the day on street. By so doing we are able to bring them to the centre for rehabilitation process .From the street to the centre, some may opt to run away and not follow us because of different reasons example: we are strangers to them, don't want to stay indoors the whole day, have casual works to attend to, heavily drunk with glue, and some feels they are in the right place and life to live. Counselling is done to tell them the dangers of street life and drug abuse. When we get to the centre they take bath and we offer them hot tea and mandazi or bread so we can start getting information from them like: where one comes from, the parent's whereabouts, where they live, so that we can be able to locate them and involve the parents/guardian in this process. Some of them refuse to give information and lie about themselves, but in meantime we finally get the right information. We don't push them since we have enough time to interrogate them on daily basis and connect the whole story. Some children lie that their parents are dead but later we get them alive so we expect anything from these children and therefore it needs time and patience to deal with them and record every statement. Some may agree to take us home immediately from field and others take some days to agree. When they take us to their home we are able to talk to their parents or guardian on how we will

both work hand in hand to help the child get off the street and have a good life. In some cases we get to know that the parents are the ones who send their children to go and beg to provide food for the day due to the economic crisis

Finally the child become addicted and now the parents cannot be able to change the behaviour she instilled in that child. The journey to change is not easy it takes one to accept.

HOMEVISIT



This is done every month and always where need be. We visit to know where the child comes from, visit when the child is not coming to the centre or not going to school, visit when the child or parent is sick, and in case of any other need. During this time we visit home with the company of the child and mostly we get the parent or guardian at home either sleeping, drunk or out there doing casual work. Counselling and health education is given and to the sick we advice them to visit the health centre for treatment and we buy drugs for them if prescribed and in case the parent is bedridden we give food help to sustain the family and to avoid children to go back on street to beg . After this we ask the child to bring the parent to the centre for more information and counselling .The parents / guardian are very co-operative. We talk with the ‘parent in the absence of the child to know why the child is on street we do much of counselling to see that the child is back home and not sleeping on the streets. The project expects the child to be coming to the centre to spend the day while go home in the evening The needs of these street families are so many beyond food and education but due to financial challenges we consider the most needy cases.

NB Kangemi consists of 9 highly populated slum villages where these children are from.

TEACHING AT THE CENTRE



Teaching and counselling is done daily. The centre is open from 8.00 am to 4.00 pm. The Children come to the centre everyday Monday to Friday 8:00am to 4:00pm Saturday 8am to 12pm and on Sunday 8am to 10am for Sunday school service. During this time, we identify whether the child knows how to read and write. At the centre the children are taught how to read, write, draw, sing, pray and discipline. This is given in individual way since each child is on a different level of education while others have never gone to school and others are dropouts.

The Children are very much interested to know how to read, write and to make drawings. We teach the Kenya school curriculum that is the same subjects taught in school. These Children behave very well in their new environment but others are not able to stay at the centre the whole day. Our children have done very well in school regardless of their status and we have managed to get students achieving over 300 marks in their final year. At the centre they get breakfast and lunch in between and play football. Football is done at a nearby public school playground once a week for one and half hours. After the children learn how to read and write, we enrol them to public schools to continue with their education and that means the child is fully rehabilitated and ready to cope with other Children in schools. More than 1000 children have passed through this centre. NB: The project caters for all the expenses to make sure the children are enrolled in public schools.

HEALTH EDUCATION

CHILD project gives health education to both child and parent. This is done at the centre, home, streets, and vocational training. This needs communication that can help to create awareness on the dangers of street life and common communicable diseases, Hygiene, drug abuse, domestic violence, early pregnancies, HIV /AIDS, Tuberculosis, Deworming / Skin infections, Malaria is also given during this session.

The parents are taught during parents meeting which takes place every after two weeks on: Family planning, Domestic violence, HIV AIDS, Tuberculosis, Malaria, Cancer, Human rights, STDS HBP, Diabetes etc.

Vocational trainees who are young adults get the lessons once a week and the children at the centre get twice a week.

VOCATIONAL TRAINEES GETTING VIDEO SHOW ON SEXUALLY TRANSMITTED DISEASES



This has lowered the risk of infection and transmission although stigma is still high in Kenya. The project advises those who are sick to visit the health centre always when they feel sick and the project takes care of buying the drugs as prescribed at the health centre.

NB: video show is given during this health education to help them understand well. Kangemi URBAN SLUMS program provide this services and also give sanitary towels to our mothers and girls. The project appreciates the good work.

CANCER

Cancer has become an epidemic and is now declared as a national disaster. In Kenya most of all deaths are as a result of cancer. In Kenya we don't know much about cancer up to date many people still believe it's a curse or witch craft this is because they is no adequate information to the people. Therefore child project takes this initiative to create awareness in Kangemi community where we have sick people who don't understand about this illness and neither can they afford to go for treatment and they don't know where to start. By this we will be able to identify how many cancer patients we have, enlighten them about the disease and refer them where they will get help. We can only fight cancer only by first creating awareness to know what it is, causes, signs and symptoms, treatment, screening prevention and early detection. To help educate the public about specific preventable cancers. 2019 the government has introduced a vaccine to prevent cervical cancer to be given to 10 year old girls but due to lack of information the turn up is very low considering this is killer disease.

SCHOOL VISITS



After these children have been rehabilitated we enrol them to school within our surroundings while some opt to go back to rural where we also cater for their transport. They first start by doing interview which will tell which one class level he /she belong .At the centre we do much individual education so that the child can pass the exam. we put much effort because there are some who have never stepped in school and they are already over age .Example; A child is at the age of 10 years, he is supposed to join level 4 of class instead because he /she has never stepped in school he can only be admitted in level 1 class which the classmates will be of 6 years old so this child can never feel comfortable in that class. Learning with small ones, he /she opt to drop out of school. At the centre individual education has really helped them since we do much to make sure the child is capable of joining the preferred class through hard work. That's the biggest challenge we have in this department they have poor concentration and so it takes us one year to rehabilitate and know how to read and write. Everything is catered for in the beginning of the year and we continue doing follow up. During this time we visit all the schools we have enrolled our Children to see how they are doing e.g. Their academic performance, cleanliness, attendance, discipline, problems they face at school and at home. We were monitoring 202 as per 2019. 8 of these have sat for their final primary level Kenya Certificate of Primary Education exams for 2019, Remain 194 children. 2020 we have enrolled 20 children total of 214.

These children who have cleared with their primary level will join vocational courses in March 2020.

The government is threatening to arrest all those parents who will not take the children to secondary school by the end of February 2020 and these becomes difficult since the parents cannot afford the school fees. The government itself has not put measures to enrol them or cater for their needs. We are in a confused environment.

Note that to enrol a child to public secondary school is 20000kes without all the other requirements e.g. Uniforms, books, .so it's like you have to get over 30000kes in your pocket and in this economic crisis in Kenya even to afford a meal is a problem.

NB: If we don't get the child in school, we visit the home to know the problem to avoid the child going back to street, so by this we are able to rescue them on time.

The school teachers are very co-operative, they understand these Children very well, where they come from, how to relate with them, create good environment for them to stay. Much thanks to the head teacher of Kangemi primary school Mrs. Mudaki who is the only Head teacher who accept our children to join public school. The rest complain the children are over age and will be indiscipline in school.

The project provides books, uniforms, bags, shoes and school fees for the Children to be enrolled in school.

PARENTS MEETING

We invite the parents to the centre after every two weeks so we can be able to talk more about their families, common communicable diseases, progress of rehabilitated children, and know how they are relating with teachers. During this time we have a profile form where we take in all the details required including health to know if a child is sick or have a long term illness before we keep him or her at the centre. We celebrate world aids day with them and share Christmas gift. We soon start to celebrate world cancer day.

SUNDAY SCHOOL

The Children attend Sunday school service at the centre on Sundays from 8:00am to 10:00am, spiritual guidance is given, breakfast is provided to them. They read the bible, sing and make drawings and colouring. The children come with their siblings and friends on Sunday session.

All Children in the community are welcomed during this time.

CHRISTMAS PARTY





MEDICAL CARE

The project provides medical help by referring the sick to the health centre, buying drugs to the sick parents and children as prescribed at the public health centre. Mostly our children suffer from skin diseases and accidents e.g. been knocked by a car, motorbike ,fractures, dog bites and many minor accidents which some we're able to treat at the centre with our first aid box.

During weekend they visit private hospitals and we assist where possible especially on accidents. The Children are de-wormed after every three months at the centre.

VIDEO SHOW

Video show is also given in collaboration with Kangemi Urban Slums Program. Children really enjoy watching and this helps them get clearly and not easy to forget what they have learnt.

TOURS

Tours are also given to our Children in case we get a chance to visit a place like museum if fee is waived. If we get other institution to waive we would like to take these children places within our county like Animal orphanage, giraffe centre, Bomas of Kenya, Parliament, and many more sites.

FOOD HELP

This is done where need be and if the parent is sick and cannot be able to work to feed the children. Also in some cases where the children are abandoned by the parents or some parents have been arrested or admitted in the hospitals .This is mostly done during home visit as we assess the situation at home. Our country has been facing economic crisis, food is very expensive people have to rely on one meal per day.

CHILD gives food aid to the sick at least once though in truth most of them need it a lot more than that. The parents struggle the whole day to feed their own children, send them to school and pay house rent which is very expensive.

Children at the centre enjoy meal and they feel lucky to have a meal because most of them survive on one meal that we offer them during the day. Some come with tins to put part of their share to their younger ones left at home. Food is a major problem in our country reasons behind being the Crop production is low, lack of employment, lack of income, political crisis and Weather changes. Millions of people are suffering from persistent hunger and under nutrition.

The poorest are hit hardest by food insecurity problems and this leads to human suffering example: diminished work performance, school performance, and insufficient income earning decisions.

Emergency relief programs target the hardest hit .Credit to the poor to stabilize consumption and promote self employment through vocational trainings and start up small businesses can also improve household food security.

Foods help to the needy families, Feeding program to children at the centre and in vocational trainings is all **CHILD** project can assist.

STAFF MEETING

Staff meeting is held every month to help us review, evaluate, plan how to run the project in a smooth way .To discuss on new issues arising with our Children and parents. This has brought efficiency in our work and team work.

VOCATIONAL TRAINING

CHILD once again started vocational training in helping the big boys and girls gain skills. The project has **Hair dressing** and **Tailoring courses**. Previously **81** young girls and boys had benefited from these courses 24 in apprentice 34 in hairdressing 23 in tailoring. Most of them have secured something to earn a living.

NB; The program once again started in February 2017 up to date. 135 students have benefited in 6 semesters where first semester started in February 2017 up to July. Second semester started in August to January 2018.Third semester February to July. Fourth semester august to February 2019.Fifth semester from March to august 2019.Sixth semester from September to February 2020.92 certificates were issued in 2019. Total number is 80: in hairdressing and 55: in tailoring out of all these students in hairdressing have already secured jobs and they are earning income. They are very happy for the help the project has given and some are doing it at home they still get some income. Tailoring students are working in kangemi and Westland's market and some of them have already started their own and already have machines. Those employed are paid in commission according to the work they are given .mostly they do repairs and fix the new clothes to gain enough experience.. We started with one boy in mechanic course December 2018 and now

he has finished the one year course working in the same garage. The big street boys are interested in other courses like mechanic, welding, carpentry and others. While others need capital to start small businesses and others need karts to be ferrying goods from one place to the other. Most of these girls in vocational training have been at the centre when they were young and have reached level 8 in Kenya education .Others are enrolled case by case. Many of them have been abused sexually and become pregnant and this worsens their problem because they have to feed their children. They are very much willing to get skills, earn so they can be able to take care of their children and families.



HIV / AIDS

HIV AIDS has claimed many lives leaving the children with no option but to join streets. The project has mothers living with HIV/ AIDS. The mothers get ARVs at the health centre free of charge.

The project does much of counselling and emphasis on every new parent to get tested and know their status. The challenge is that they do not have adequate balanced food to eat and money to buy drugs when prescribed for opportunistic infections.

NB: Other common diseases affecting our children and parents are skin diseases, common colds, coughs, tuberculosis, malaria, typhoid, and STDs.

VISITORS

Maria christeen visited the project and identified that the project is not in a good environment. Houses in Kangemi are very expensive and rare to get a spacious place due to congestion. Kangemi being the most nearby slum to the city centre the houses are very expensive a single room going from 5000kes again owners are upgrading the houses to apartments. Owner /tenants don't want anything to do with theses street children they fear that they might steal or break their houses while they are away.

The Kangemi area chief administrator came to the centre with our former vice chairman to see where and how they can assist and chief agreed to help us secure some 'containers' and give us a place to settle most likely at the chiefs camp which up to date nothing has come out of it.

It is our wish to get our own premises and settle .May God grant us the wish.



CASE STUDY



The above girl by the name joy mwende is 10yrs old. on our way to field work we met this girl on the street sited by the roadside and the girl looked confused we stopped to talk with her only to tell us that she was rapped yesterday night by a stranger but she can recall the face of the man we asked where the parents were and if she has told the mother about the incidence but she said she has not told anyone about the incidence since her mother came in almost at dawn and slept immediately because she was drunk the mother sell alcohol at a nearby club. We asked the girl if she can take as home to her mother and she was resistant at once but we really counselled the girl and we told her she need to be taken to the hospital immediately for check-up and the only responsible person to take her to hospital was her mother that is when she agreed. We reached home and truly we got the mother a sleep only to wake her up with terrible news we went with her to the police station and the police told us we should first rush the child to hospital then come and report. we gave the mother transport to take the girl to Nairobi women hospital which deals with such issues after the medical examination the girl was confirmed rapped but no HIV but she was put on drugs immediately and they went back home so the next morning they went to the police post and reported the matter where it is now under investigation the girl will be coming to the centre every day as we keep counselling her and the mother.

WAY FORWARD

1. To get funds to rent a bigger premises to avoid congestion and to rehabilitate as many children on street as possible. 2018 December we vacated to new premises still along Marenga road Kangemi where we had both children and vocational trainees under the same roof a two bedroom house. 2019 July we again vacated been thrown out to where we are now up to date. We have four separate rooms one for hairdressing, tailoring, classroom, and office.
2. The government or a well wisher to donate a piece of land for us to construct our own centre.
3. To get funds to enroll the rehabilitated children to join schools to avoid them going back to the streets.
4. To cater for food for the bed ridden, drugs for opportunistic infections for those living with HIV AIDS and other chronic infections.
5. To continue with vocational training and apprenticeship courses.

CHALLENGES

1. The vocational trainees come with their siblings, the children get tired and want to sleep or drink something. They only share lunch with their parents. They keep them at their back to sleep also to avoid congestion.
2. The big street children are much on drugs and betting clubs
3. We are forced to go beyond the number due unavoidable circumstances the children are facing.
4. The food prices are high affecting our budget.
5. We had too many occasions which needed parent's participation.

CHILD project take this opportunity to place in record our hearty thanks to all the well wishers who have made this project a success, and ask others to join hands in supporting this project to enable us reach many more vulnerable children.

ALL ARE WELCOME

GOD BLESS YOU ALL

Report written by;

Holidah Mihango

Email : mihangoholidah@gmail.com

Tel: 0725 677 587

Secretary – CHILD