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Partnership for Change
Christian Aid in Kenya

Poverty is an outrage against humanity. It robs people of dignity, freedom and hope, of power over their own lives.

Christian Aid has a vision – an end to poverty – and we believe that vision can become a reality. We urge you to join us.

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Cover: Joyce Julius Noorkitoip lives in Sitoka, a Maasai village in Narok County which is three hours by car to the nearest hospital. Joyce has seen many women in the village suffer complications when giving birth, and many have lost their lives. Now, thanks to the work of our partner the Transmara Rural Development Programme, villagers can access healthcare through mobile clinics, a 4x4 ambulance and a new dispensary in the village centre.
Background

Kenya is a lower middle-income country, a key growth centre in Africa, and the largest and most diverse economy in East Africa, with an average annual growth rate of over 5% for nearly a decade. President Uhuru Kenyatta’s ‘Big Four’ development agenda – manufacturing, universal healthcare, affordable housing and food security – provides a framework for Christian Aid Kenya’s contribution to development. The Jubilee government plans to create 1.3 million manufacturing jobs by 2022, achieve 100% healthcare coverage for every Kenyan, improve housing and ensure no one is food insecure.

Kenya’s entrepreneurship and human capital give it huge potential for further growth, job creation and poverty reduction. The country is currently enjoying relative peace and stability following raised tensions in the 2017 general elections. It is anticipated that this will continue to prevail creating an enabling environment for the country programme to contribute to inclusive socio-economic growth toward achievement of the Big Four Agenda within Kenya Vision 2030, the African Union’s Agenda 2063, and the Sustainable Development Goals (SDGs).

Kenya has seen reduced child mortality, near-universal primary school enrolment, and narrowed gender gaps in education. Challenges persist in terms of inequitable gender and social norms, systematic identity-based profiling, stereotyping, discrimination and exclusion; the Government is attempting to address these within counties by ensuring the Leave No One Behind agenda is implemented.

A roadmap currently exists for tracking progress in implementation of the SDGs and the institutional framework is in place with the Ministry of Devolution and Planning for coordinating the implementation and monitoring of the SDGs. Increased spending on health and education are paying dividends but there are gaps in universality of access to these essential services. While the healthcare system has faced challenges, devolved healthcare and free maternal healthcare at all public health facilities are increasingly improving health outcomes and developing a more equitable healthcare system. HIV/AIDS continues to wreak havoc on health and wellbeing, with increased transmission among adolescent girls aged 15-19 years. The Government’s universal health coverage agenda and universal primary education will guide these social development goals.

The country is vulnerable to climate fluctuations but remains largely in reactive mode, where responsible institutions wait for a calamity to strike, then rush to look for solutions – usually well-documented and tried options. However, the context is slowly evolving, with increased interest and investment from the Government, giving Christian Aid the space to influence the agenda and drive the processes required for long-term solutions that build and enhance the resilience of affected communities.

Addressing poverty through improving income and income equality will be major goals that the country programme will continue working on to ensure inclusive economic growth that transforms the lives of poor and marginalised citizens.

Our priorities

The programme will prioritise integrated programming that cuts across several impact areas, mainly climate change resilience, humanitarian response, gender and inequality, economic justice and inclusive markets and health.

Climate change

We support climate financing at local levels, ensuring communities can access finance through bottom-up planning and prioritisation. We also work in partnership with the Kenya Meteorological Department to support access to climate information services, to help communities make informed decisions.

Our Clean Energy Now campaign aims to shift Kenya’s energy investment from fossil fuel into renewable energy and delivery of sustainable and affordable energy to poor communities. We are also playing a lead role in Christian Aid’s Big Shift Africa campaign, advocating for low-carbon development and energy access across Africa.

Economic justice and inclusive markets

We are taking a lead role in transforming market systems and power relations in favour of smallholder producers and small and medium enterprises, creating employment for a wider scope of individuals, improving incomes, and resilient livelihoods. We use participatory approaches to market development, to unlock potential in our core priority value chains: beekeeping, cereals and vegetables.

Eradicating harmful traditional practices

Female genital mutilation (FGM) is a traditional rite of passage for Maasai girls in Kenya. Yet it carries many risks.

Often conducted in unhygienic conditions, it can predispose the girls to infections such as tetanus. The women conducting the practice often do not wear any protective gear and there is risk of HIV infection. It can also lead to complications when women give birth – complications that can be life threatening.

FGM also violates women’s and children’s human rights, including their rights to health, to be free from violence, to life and physical integrity, to non-discrimination, and to be free from cruel, inhuman, and degrading treatment.

Through our projects and partners in Narok, we are working to address this deeply entrenched custom.

Mary says that she while she can’t be sure that FGM is eradicated in her area, there is a definite reduction in the practice.

Humanitarian

We are at the front line in responding to emergencies in Kenya with a view to improving community-led disaster preparedness, response and climate change resilience building. We are improving direct funding to community-based preparedness work and increasing community leadership, participation and decision making in resilience planning, responses and adaptation.

Gender and inequality

We are working to make inclusion a key driver to resilience. We seek to ensure that all services for community members are responsive to the needs of people who are marginalised and discriminated against, as well as women and girls, by using gender and power analysis in our programming.

Health

We work with partners and counties to increase access to essential services by strengthening community and national and county-level health and child protection systems.

Saving mothers’ and babies’ lives

In rural Kenya, pregnant women often face several challenges when it comes to accessing healthcare. Many live miles away from the nearest health centre, and have to make long journeys on foot to access skilled delivery services.

In Isiolo, our partner, Anglican Development Services of Mt. Kenya East (ADSMKE) has trained community health volunteers and re-oriented Traditional Birth Attendants (women who deliver babies at home) as ‘mothers companions’, who accompany women to deliver in hospital, and established mother-to-mother groups hosted by community health workers.

The volunteers and health workers encourage mothers to give birth in a dispensary, with skilled supervision, and they talk to women about the importance of attending ante-natal clinics, child immunisation, pregnancy danger signs and how to avoid neonatal and maternal fatalities.

The project partnered with communities to build maternity shelters which are traditional huts (manyattas) that are used by women to rest before they go into labour or after they have delivered.

Jane Rica is one young mother who has benefited.

Jane was visited by one of the mother companions who encouraged her to attend her local mother-to-mother support group.

Jane said, ‘I was so happy to be educated on how to stay safe as a pregnant woman and how to deliver a healthier child. I thank the community health volunteers who constructed this manyatta, because it would have been difficult for me to get [to the dispensary] once I went into labour.’
Key programmes

Supporting orphans and vulnerable children

There are more than 2.6 million orphans and vulnerable children in Kenya. Nearly half of these children were orphaned by HIV and AIDS.

As well as losing their parents, many of these children are also infected with HIV, and most of them have no access to antiretroviral therapy. Despite advances in treatment, HIV remains the leading cause of death for young people (aged 10–19) in Africa.

The Comprehensive Assistance, Support and Empowerment of Orphans and Vulnerable Children (CASE-OVC) programme is a five year programme, funded by USAID and PEPFAR (the US President’s Emergency Plan for AIDS Relief).

The programme aims to reach 170,000 orphans and vulnerable children, from 52,000 households, who are affected or infected by HIV and AIDS, in 18 counties. The goal is to improve the children’s well-being by ensuring they gain access to social services (health, nutrition, education, legal protection, psychosocial support and social protection). We are also working to improve their families’ livelihood options so they are better able to care for themselves.

SALI (Sustainable Agriculture Livelihood Innovation)

The SALI project was funded by ‘In Their Lifetime’, which is a seed fund that enables Christian Aid to pioneer new approaches to fighting poverty and to scale up the solutions that work best.

In Kenya, the project equipped groups of smallholder farmers in Embu County with critical weather forecasts, agricultural training and access to buyers - enabling them to grow, process and sell drought-resistant crops more effectively and confidently.

SALI was a success and has now been scaled up to reach a far wider base of 4,000 farmers across four counties.

UK Aid Match

UK Aid Match is a UK aid-funded programme that doubles all donations received during a defined appeal period.

Our UK Aid Match funded programme in Kenya focuses on saving lives in childbirth and improving the health of mothers and babies in rural areas.

Programme activities include the funding of maternity wings in district hospitals, rural transport to bring pregnant women to local health facilities and awareness raising in remote rural communities to increase uptake of health services.

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Renewed hope for Ruth

Ruth Munini Mutungi lost her daughter to AIDS six years ago. Now aged 60, she is the sole provider for her four grandchildren.

Ruth enrolled in Christian Aid Kenya’s CASE-OVC programme. Ruth’s capacity to engage in economic activities that can benefit her family will be enhanced. She will gain skills to be able to expand her kitchen garden and increase her livestock, so she can sell surplus produce and earn an income to support her family.

Phyllis Kanini, Ruth’s oldest granddaughter, is currently in secondary school and hopes to pursue a degree in communications and journalism. With the help of the programme, Phyllis and her siblings stand a better chance of achieving their career ambitions.

Ruth also has ambitions of expanding her kitchen garden and increasing her livestock. ‘I am looking forward to getting a water tank, which will enable me to grow a variety of crops in my kitchen garden,’ she says.

Traditional birth attendants

Despite the government’s commitment to stopping mothers and children dying, the risk of dying in childbirth in Kenya is still high. Girls and young women aged 15-19 years old are at particularly high risk of complications during pregnancy and delivery. A key factor is the lack of proper antenatal care and assistance by a skilled health worker.

Our programme is retraining traditional birth attendants to become advisors, who support women to access health services. This programme is harnessing the trust women have in traditional birth attendants, and strengthening the links between the formal health system and community systems and structures.

Shifting the Power

The Shifting the Power project aims to strengthen the capacity of local and national organisations so they can play a leading role in decision making during humanitarian crises.

The project supports around 50 local and national NGO partners across five countries including Kenya.

People in Ela bor, northern Kenya, identified disease and child and maternal health as key problems in their community. With the help of our partner CCSMKE, they succeeded in getting government funding to build a clinic in their community.