

Sauti Moja Marsabit
FAMILY HEALTH

Target Groups

A decorative graphic consisting of a white circle with a teal outline, positioned below the title and above the list of target groups.

- Vulnerable Single Mothers
- Village youth
- Child Mothers
- Primary School Girls
- NEXT: Primary School Boys

Vulnerable Mothers with Children

The most-vulnerable pastoralist women are single mothers – widows, abandoned women, and young girls – many of whom are rejected by family.



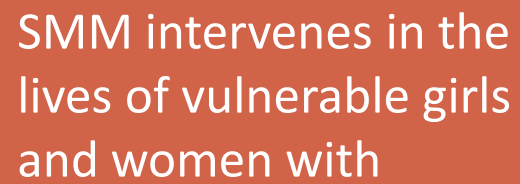


Most of these women are vulnerable due to

- * lack of education
- * few livelihood opportunities
- * marginalization and ostracism
- * lack of land
- * dependent children



Challenges of Female-headed Households



- * education support
- * livelihood support
- * family health training





Often the poorest women do not have time to participate in health and other training provided by government and other agencies. They are too busy struggling to survive. As a result, child care suffers.



Daily Struggle to Survive



Our beneficiaries were further marginalized, as they do not have a husband or livestock. Thus, they have less access to health information through social interaction with other village women who are able to attend training.



Limited Social Networks



In poverty, women must often rely on romantic relationships to access support for their children.

In absence of family planning, this contributes to increased family size and more poverty.



Need for Family Planning



15 Lesson Curriculum

Child health and
nutrition

Family planning

Prevention of STIs/HIV

Women and child rights

Gender-based violence

Substance abuse



Family Health for Livestock Beneficiaries



“Now we have real information and that has improved our child spacing, breast feeding techniques, improved child health, and improved decision making.”



Child Health and Nutrition - Ndito's Testimony



Health monitoring of children is routinely conducted in 24 communities and health issues, such as malnutrition, addressed in collaboration with MoH.



Monitoring Child Health



Christine had cleft palate which made it difficult to breastfeed and contributed to malnutrition and infection.

Sauti Moja staff partnered with the mom, Sisters of Charity and Operation Smile.

Today, Christine is a happy, healthy child.



Addressing Special Needs



“Before, talking about contraceptives was unheard of. But now, we can even borrow from neighbours. We ask them for ‘maize’ - “Midan kan naerqis abbo.”

“If you have maize, assist me with it.”



Family Planning - Sube's Testimony



“We are not the women that you met on the first day. We were at risk of HIV and unwanted pregnancy.”



Prevention of STIs and HIV - Nayaba's Testimony



HIV testing is done in collaboration with MoH. After learning about HIV, most women want to be tested. We and MoH have tested >400.

We follow up those testing HIV-positive with counsel, and ensure clinic visits and adherence to protocol.



HIV Testing, Counselling and ARVs



A livestock beneficiary was gang-raped and murdered.

In response, SMM initiated training in GBV. This allows women to share their stories and provides information on women's rights and legal recourse to violence.

All girl and women projects now include training on GBV.



Gender-Based Violence



“We are no longer least in the community. After every meeting, others come to ask me what I learned. They ask if they could come, too.”



Empowered Women: a Community Resource



Our livestock program will contribute to food security, but droughts reduced herd growth. This occasionally necessitates food aid.

This food allows mothers to stay home and care for children, and reduces the need to sell breeding stock.

We monitor children's health and intervene for the malnourished.



Emergency Food Assistance



Infestation of bedbugs, cockroaches and fleas lead to poor sleep and jiggers that affect health.

SMM provided sprayers, safety equipment and pesticide as well as training to facilitators who sprayed homes of 850 beneficiaries three times.

Others households are now adopting this on a fee-for-service basis.



Control of household pests



“When health is lost,
all is lost. Health is
more than everything;
health is richness.
Thank you, Sauti Moja,
for teaching us to be
rich.”



Bokayo Speaks for the CLB Members

Sexual Reproductive Health Training for Morans & Girls

Upon witnessing the impact of family health training for women, the Ministry of Health asked SMM to train morans and girls on SRH, as many had STIs.





Topics were

- * STI symptoms and consequences,
- * prevention and treatment of STIs
- * condoms DO's and DON'Ts.



Training Morans and Girls



Youth selected a trusted Family Care Provider - a female and a male – in each sub-village. They maintain supply of condoms, as youth do not like to go to the clinic.



Family Care Provider



The Rendille youth and care providers formed a group called

‘Khara a Feya’

‘To have Knowledge is Healthy’.



Knowledge is Healthy



“We do not want the fire started by Sauti Moja to go out. Keep adding wood to keep the fire burning.”



Plea from Namare Morans



"No other agency has ever addressed this important part of being human. On behalf of the young people, pass my heartfelt regards to the persons who gave us this assistance."



Chief of Namare

Vulnerable Girls – Child Mothers

School girls are at risk of pregnancy due to cultural norms, lack of knowledge and /or exploitation.





Pregnancy shatters the dreams of a school girl and can lead to a lifetime of poverty for herself and her child. Too often, it leads to forced early marriage.



Now what?



Reproductive health education is not introduced until secondary school, and only a few girls attend secondary.

Many mothers are reluctant to discuss sexuality with their daughters.



Lack of Sex Education



Forced early marriage is one way parents avoid teen pregnancy; in some communities, perhaps half of the girls are married off by Grade 8.



Early Marriage



For 10 years, we have provided new mothers with counsel and support for continuing their education. We also ensure good care and monitor well-being of their children.



Counsel, Education and Child Care



School is not for all young mothers, and some choose livelihood support.



Livestock for Livelihoods



We also provided training during school breaks – mainly SRH, life skills, effective communication and child care.



Child Mother Workshops



Prevention of pregnancy in young girls is better and more cost-effective than supporting child mothers and the care of their children.



Prevention of Pregnancy is Better

SRH Education in Primary School

In 2014, SMM initiated sexual and reproductive health training to reduce pregnancies in school girls. Life skills training contributes to academic performance and further empower girls.





Puberty & adolescence

Reproduction and
pregnancy

Prevention of FGM

Prevention of STIs and
HIV/AIDS

Risks from drug use

Prevention of rape

Menses and hygiene



Girls Identified Topics of Interest



A peer educator approach was chosen. Five girls from each of Classes 5 to 8 were selected.



Peer Education



The Children's Officer trains girls in child rights, gender-based violence, and sexual exploitation.



Child Rights Education



Trainings are facilitated by Grace and Martha.

Martha is the Vulnerable Youth Coordinator.

Grace is one of our first child mothers, so can speak of the struggles of girl pregnancy.



Facilitators



Meetings facilitated by SMM, Headmaster and Children's Officer ensures that girls' parents know roles and responsibilities as well as illegality of early marriage .



Parent Trainings



*‘Protect us to complete
our education’*



Girls Sing for their Parents



“Now days, school girls are not walking around with boys. Before, girls went with a boy to get water, but now they go alone.”



Observation by Village Woman



“Before, girls were sneaking off from school with boys, but this year, girls stay at class.”



Headmaster's Observation



“Our school girls trained by Sauti Moja share information with other girls in the village. We are happy to see the behavior of our girls changing.”



Testimony of Livestock Beneficiary



“Girls have developed a positive attitude toward their education and have greater focus on learning.

They valued the reproductive health education and noted communication skills and assertiveness were markedly improved.”



Teacher's Assessment of SRH



Adolescence, sexuality,
and reproductive health

Impact of teen pregnancy
and boys' responsibility

Sexual Offence Act and
Child Rights

Peer pressure and drug
abuse

Life skills (communication,
decision-making, and goal
setting)



NEXT: Boys SRH training (2016)