PROJECT SUMMARY



Kajiado Community Health Programmes

Background:

The Kajiado district of the Rift Valley is the home to pastoralist Maasai communities. The population is highly dispersed with only 19 people per square kilometre. Given the very basic levels of nutrition (the diet is primarily maize and beans occasionally supplemented with goat) there is a high incident of disease (diarrhoea, trachoma, intestinal works and malaria). These require steady access to medical support, which is in many areas up to a two days walk away.

ICROSS Role:

ICROSS has worked in the Kajiado District for over 20 years mainly focusing on health care (access to medicines, training of traditional birth attendants and providing access to equipment and medicines). In 1999 ICROSS, together with local community based organisations, identified three areas (Lornagosua, Sinkirain and Norgumut) serving a population of approximately 16,200 which required additional health infrastructure. ICROSS secured funding of Ksh 4.7 million (US\$60,000) form the Japanese Government (JICA) to build dispensaries in these three areas. The project commenced in 1999 and was completed in 2001.

ICROSS Project:

Throughout the project ICROSS worked closely with the local community and Ministry of Health. The local community donated and cleared the land and provided security. The Ministry of Health provided technical advice on construction and committed to providing trained nurses to staff each dispensary once completed.



Kajiado Facts	
Population	406,000
Tribe	Maasai
Household Size	4.2
Geographic Area	22,000km ²
People per km ²	19
HIV/AIDS prevalence	4%
Average Annual Income	US\$ 400
% in Paid Employment	32%
% Below poverty line	39%

Source: Regional Government Statistics, AIDS in Kenya 2001 Note: HIV prevalence is of pop aged 10+. % in paid employment is % of economically active population

Infant mortality

Primary source of income



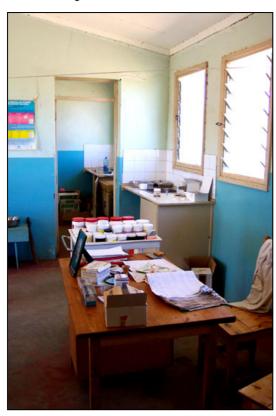
Joe Barnes Clinic in Lornagosia: This clinic receives between 5-15 visitors a day, all of which receive treatment and medicines for free. Many of the patients have walked over night to get to the clinic, indicating a great need for more dispensaries to be constructed.

7.4%

Livestock

For each dispensary there was a four-step programme

- 1. The local communities provided and cleared land. The locations were (of necessity) remote from road infrastructure. In some cases the land was not ideal for construction which created challenges in step 2.
- 2. ICROSS undertook a tendering process for a local contractor to build the dispensaries. Selection was guided by the Ministry of Works. Initial problems wit the first contractor (inability to work effectively in such remote sites) led to them being replaced by a second contractor.
- 3. In the construction of the dispensaries ICROSS worked with the Ministry of Works who provided guidance on standards and design. The actual construction proved challenging as the sites were extremely remote and the combination of heavy rains followed by subsequent drought led to the migration of the local populations.
- 4. The Ministry of Health has equipped the first two dispensaries and provided a registered nurse. Due to constraints in water access ICROSS sought additional funding for water tanks, which have been placed at each site. ICROSS was additionally granted funding from Development Corporation Ireland to carry out primary health training of community health workers in the same three locations.





The interior of one of the clinics

Impact:

Two of the three clinics are up and running. Due to the remote location and contractors withdrawing, the Norgumut dispensary still needs the final finishing touch and funding is being sought. The clinics will have a positive impact on local maternal, prenatal and neonatal mortality (very important in an area that has a 7.4% infant mortality rate, amongst the highest in Kenya). In addition relatively easy access to the health services provided by the dispensaries will reduce the prevalence of diarrhoea and diseases such as trachoma, intestinal worms and malaria.

Donors:



