

SOS CHILDREN'S VILLAGES KENYA

THE CAREWE PRMLSE ANNUAL REPORT 2017



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ABOUT SOS CHILDREN'S VILLAGES, KENYA

SOS CHILDREN'S VILLAGES IS A CHILD FOCUSED, NON-GOVERNMENTAL ORGANIZATION PROVIDING CARE AND SUPPORT TO CHILDREN WHO HAVE LOST OR WHO ARE AT RISK OF LOSING THE CARE OF THEIR BIOLOGICAL FAMILY. SOS CHILDREN'S VILLAGES KENYA IS A MEMBER OF SOS-KINDERDORF INTERNATIONAL, THE LARGEST PRIVATE, WELFARE ORGANIZATION FOR CHILDREN ALL OVER THE WORLD. SOS-Kinderdorf International was founded by Austrian philanthropist Herman Gmeiner in Imst Austria in 1949. He was committed to helping children in need-children who had lost their homes, their security and their families as a result of the Second World War. With the support of many donors and coworkers, SOS Children's Villages has grown to help children all over the world. From the first Children's Village in Imst Austria, SOS Children's presence is now in135 countries and territories.

In Kenya there are 5 Children's Villages under the SOS Family care programme in Nairobi (1973), Mombasa (1979), Eldoret (1990), Meru (2005) and Kisumu (2012). Other programmes include: Advocacy, Education (5 ECD Centres, 4 SOS Hermann Gmeiner schools and 1 SOS Technical Training Institute) Youth empowerment, Health (2 SOS Medical Centres).SOS Children's Villages Kenya also runs a Family Strengthening Programme (FSP) in 8 locations; Mombasa, Nairobi, Eldoret, Kisumu, Suba, Marsabit, Busia and Meru) Both our villages and community programmes currently take care of over 10,000 children. Our patron is Her Excellency Margaret Kenyatta the first lady of Kenya and we have a board of trustees.

SOS CHILDREN VILLAGES HAS A UNIQUE CHILD CARE MODEL, WHERE CHILDREN LIVE WITHIN THE FAMILY UNIT; RECEIVE CARE, LOVE, AFFECTION AND PROTECTION FROM A CAREGIVER. WE UPHOLD FOUR PRINCIPLES OF CHILD, PARENT, FAMILY AND COMMUNITY.

Currently there are around 1,000 children in care and SOS CV is laying a foundation for more child care capabilities through program expansion and adopting alternative child care models.

Children admitted into our facilities have either lost their biological parental care or face the real threat of losing parental care. They are referred to us by children's courts, government departments, police stations, credible community organizations, hospitals and members of the public. In all cases a thorough and transparent admission process is followed to ensure that the most meriting cases are admitted and that we are in compliance with our policies and statutory obligations.

Once admitted into an SOS Children's Village a child is offered a new beginning full of love, security and possibilities. Our children are cared for by qualified and trained SOS mothers who provide the emotional, psychological and nutritional needs of all our children.

We also share in the development of the communities our children come from. We work in the spirit of the United Nations Convention on the rights of the child and we promote these rights.

WHO WE ARE

WE TAKE ACTION FOR CHILDREN WHO HAVE LOST OR ARE AT RISK OF LOSING BIOLOGICAL FAMILY BY BUILDING AND STRENGTHENING FAMILIES FOR THEM TO LIVE IN AND GROW WITH LOVE, SECURITY AND RESPECT.

OUR ROOTS

The first SOS Children's Village was founded by Hermann Gmeiner in 1949 in Imst, Austria. He was committed to helping children in need – children who had lost their homes, their security and their families as a result of the Second World War. With the support of many donors and co-workers, our organisation has grown to help children all over the world.

We take action for children as an independent non-governmental social development organisation. We respect varying religions and cultures, and we work in countries and communities where our mission can contribute to development. We work in the spirit of the United Nations Convention on the Rights of the Child and we promote these rights around the world.

With the SOS Children's Village concept, our organisation pioneered a family approach to the long-term care of children who have lost or re at risk of losing parental care

THE MOTHER: EACH CHILD HAS A CARING PARENT

The SOS mother builds a close relationship with every child entrusted to her, and provides the security, love and stability that each child needs. As a child- care professional, she lives together with her children, guides their development, and runs her household independently. She recognizes and respects each child's family background, cultural roots and religion.

BROTHERS AND SISTERS: FAMILY TIES GROW NATURALLY

Girls and boys of different ages live together as brothers and sisters, with natural brothers and sisters living within the same SOS family. These children and their SOS mother build emotional ties that last a lifetime.

THE HOUSE: EACH FAMILY CREATES ITS OWN HOME

The house is the family's home, with its own unique feeling, rhythm and routine. Under its roof, children enjoy a real sense of security and belonging. Children grow and learn together, sharing responsibilities like families do.

THE VILLAGE: THE SOS FAMILY IS A PART OF THE COMMUNITY

SOS families live together, forming a supportive village environment where children enjoy a happy childhood. The families share experiences and offer one another a helping hand. They also live as integrated and contributing members of the local community. Through his or her family, village and community, each child learns to participate actively in society.

OUR VISION: EVERY CHILD BELONGS TO A FAMILY AND GROWS WITH LOVE, RESPECT AND SECURITY.

EVERY CHILD BELONGS TO A FAMILY

EVERY CHILD GROWS WITH LOVE EVERY CHILD GROWS WITH RESPECT

EVERY CHILD GROWS WITH SECURITY Family is the heart of society. Within a family each child is protected and enjoys a sense of belonging. Here, children learn values, share responsibilities and form life-long relationships. A family environment gives them a solid foundation on which to build their lives.

Through love and acceptance, emotional wounds are healed and confidence is built. Children learn to trust and believe in themselves and others. With this self-assurance each child can recognizes and fulfils his or her potential.

Each child's voice is heard and taken seriously. Children participate in making decisions that affect their lives and are guided to take a leading role in their own development. The child grows with respect and dignity as a cherished member of his or her family and society.

Children are protected from abuse, neglect and exploitation and are kept safe during natural disaster and war. Children have shelter, food, health care and education. These are the basic requirements for the sound development of all children.





OUR MISSION: WE BUILD FAMILIES FOR CHILDREN IN NEED, WE HELP THEM SHAPE THEIR OWN FUTURES AND WE SHARE IN THE DEVELOPMENT OF THEIR COMMUNITIES.

WE BUILD FAMILIES FOR CHILDREN IN NEED

We work for children who are orphaned, abandoned or whose families are unable to care for them. We give these children the opportunity to build lasting relationships within a family. Our family approach in the SOS Children's Village is based on four principles: Each child needs a mother, and grows up most naturally with brothers and sisters, in their own house, within a supportive village environment.

WE HELP THEM SHAPE THEIR OWN FUTURES

- We enable children to live according to their own culture and religion, and to be active members of the community.
- We help children to recognise and express their individual abilities, interests and talents.
- We ensure that children receive the education and skills training they need to be successful and contributing members of society.

WE SHARE IN THE DEVELOPMENT OF THEIR COMMUNITIES

- We share in community life and respond to the social development needs of society's most vulnerable children and young people.
- We establish facilities and programmes that aim to strengthen families and prevent the abandonment of children.
- We join hands with community members to provide education and health care, and respond to emergencies.

SOS CARE PROMISE

THERE IS NEVER AN EXCUSE FOR HURTING A CHILD. THE UN CONVENTION ON THE RIGHTS OF THE CHILD CONFIRMS THAT EVERY CHILD HAS A RIGHT TO BE FREE FROM HARM AND MISTREATMENT, IN BODY OR AS SET OUT IN OUR POLICIES AND SOS CARE PROMISE, WE ARE COMMITTED TO CREATING A SAFE ENVIRONMENT FOR CHILDREN IN ALL OF OUR PROGRAMMES. THIS INCLUDES PROVIDING A SAFE HAVEN FOR CHILDREN IN SOS FAMILIES AND BEING A FORCE PROMOTING CHILD SAFEGUARDING IN THE COMMUNITIES.

THE FOUNDATION OF OUR APPROACH TO CHILD SAFEGUARDING IS OUR CHILD PROTECTION POLICY We have zero tolerance for any abusive behavior to children, whether intentional or inadvertent, anywhere in our sphere of influence. The foundation of our approach to child safeguarding is our Child Protection Policy: Child Safety is Everybody's Business. The policy focuses on four key action areas: Awareness – developing an open and responsive culture and an understanding of the terrible effects of child abuse Prevention – creating a safe environment through selective recruitment, training and child empowerment Reporting – establishing accessible channels for reporting incidents, taking all concerns seriously and protecting those who report Responding – demonstrating clear leadership and responding appropriately to the nature of the offence"

Children without parental care or at risk of losing it face a heightened risk of violence, abuse, and neglect. Children growing up in alternative care have often experienced violence in their past lives, either at the hands of their families or communities. As a consequence, they are prone to becoming more accepting of violence or risk becoming aggressors themselves – violence begets violence, and this vicious cycle must end."

Gitta Trauernicht Vice President SOS Children's Villages International in The Right to Protection, a report by SOS Children's Villages CHILD EVERY CHILD IS UNIQUE AND RESPECTED PARENT EVERY CHILD NEEDS A CARING AND STABLE PARENT FAMILY EVERY CHILD GROWS UP IN A SUPPORTIVE FAMILY COMMUNITY EVERY CHILD IS PART OF A SAFE AND SUPPORTIVE COMMUNITY

WE FOCUS ON CHILDREN WITHOUT ADEQUATE PARENTAL CARE. WE POSITION THE SOS CHILDREN'S VILLAGE AS A PROGRAMME FOR CHILD CARE AND PROTECTION WE PROMOTE FAMILY STRENGTHENING AND STRONG GATEKEEPING AND ENSURE THE BEST CARE OPTION FOR EVERY CHILD WE CREATE A SAFE ENVIRONMENT FOR CHILDREN IN ALL OUR PROGRAMMES WE PROMOTE AND CONTINUOUSLY STRENGTHEN THE CARE PROFESSION. WE PROVIDE INDIVIDUAL SUPPORT TO ACHIEVE GOALS, IMPROVE GENDER EQUALITY AND INCREASE IMPACT. WE ENHANCE THE INTEGRATION OF SOS FAMILIES AND VULNERABLE FAMILIES IN COMMUNITY LIFE WE PROMOTE EDUCATION, PARTICIPATION AND STEPS TO INDEPENDENT LIFE WE PARTNER FOR SUPPORTING SERVICES AND ADVOCATE FOR QUALITY CARE.



ABOUT OUR CHILDREN'S VILLAGES

OUR CHILDREN'S VILLAGES ARE LOCATED IN NAIROBI

> MOMBASA KISUMU ELDORET MERU

SOS CHILDREN'S VILLAGE NAIROBI

SOS Children's Village Nairobi was the first SOS Children's Village in Kenya. It was constructed in 1973 in Buru Buru Estate in the Eastland area of Nairobi, 11 km from the central business district of Nairobi. On 16 October 1975, the village was opened in the presence of both the Kenyan Vice-President, and the founder and president of SOS Children's Villages International, Hermann Gmeiner. The first Village Director was Mr. Anthony Herrnegger, in subsequent years 10 more have served the village.

The village comprises 16 family houses, a village director's house, a house for the SOS aunts (SOS aunts take care of the children in case of an SOS mother's absence), a guest house, a sports ground, a multi-purpose hall, an administrative and service unit, coops for the chicken, vegetable beds, green house for tomatoes and a water treatment plant.

Every family house has 10 children, the majority from Kenya and a very few from other parts of Africa who were moved to Nairobi for medical reasons.

The children attend the SOS Kindergarten (located in the village) and the SOS Herman Gmeiner Primary School, 2 km away, as well as community schools. The secondary children attend the SOS Hermann Gmeiner Secondary School in Eldoret, as well as other government and private schools. Attached to the village are the youth facilities where the youth move to as they reach adolescence.

The girls' house is located within the village while the boys' house is across the road. This facility was officially opened in 1989 but has been occupied since 1985. A second youth house based in the community, houses older youths who are preparing to leave the organisation once they have completed their education and training, be it vocational, or academic.



SOS CHILDREN'S VILLAGE ELDORET

SOS CHILDREN'S VILLAGE MOMBASA

Mombasa is a lively port-town and tourist center with around 400,000 inhabitants. Construction works for the SOS Children's Village Mombasa were completed in 1979. In the same year, the first children and SOS mothers moved in.

The SOS Children's Village Mombasa developed in the Northern shore of the Bay of Mombasa, 500 metres from the coast. It consists of fifteen family houses, a village director's house, staff flats, a house for the SOS Aunts and an administrative and service unit.

Each family house comprises a small garden in which fruits and vegetables are cultivated. 150 children are currently housed in the SOS Children's Village Mombasa.

The attached SOS Kindergarten was opened in 1979, and consists of four group rooms, a playground, and several secondary rooms. It is currently attended by 100 children both from the SOS Children's Village, and the local neighborhood.

The SOS Children's Village Eldoret, was the third SOS Children's Village in Kenya, in Kapsoya Estate about 6 km from Eldoret town. It opened in 1990 and inaugurated by the former President of Kenya, Daniel Arap Moi, in 1995.

Although the village started with 12 family houses 3 more have recently been added. Each family house has the capacity for 10 children who attend either the SOS Kindergarten located in the village, the SOS Herman Gmeiner Primary or Secondary School, located directly opposite the village, or other government and private schools.

Attached to the village are the youth facilities where the youth move to as they reach adolescence. The girls' house is located within the village while the boys' house is a little further.



SOS CHILDREN'S VILLAGE MERU

The SOS Children's Village is situated on the outskirts of Meru on the road to Meru National Park. Due to its central location, Meru was considered as a perfect location for the construction of an SOS Children's Village.

Educational and social facilities in Meru are insufficient, however, due to the construction of the SOS Children's Village and the SOS Kindergarten SOS Kinderdorf International was able to considerably improve the social standards of the local population.

The SOS Children's Village Meru was officially opened on 8 October 2005.

The village has 13 family houses, each with a capacity of 10 children. The village director's House, accommodation for SOS aunts, guest house, and an administration and service area.





SOS CHILDREN'S VILLAGE KISUMU

Kisumu is located on the shores of Lake Victoria. SOS Children's Village Kisumu construction ended in November 2011 and children were admitted. The village brings to five the number of SOS Children's Villages in Kenya. So far, the village comprises 15 houses, and a kindergarten.

At full capacity, it provides a home to a total of 15 mothers and 150 children. Moreover, Kisumu has a fully functional Family strengthening programme which impacts over 1000 children.

GORVENANCE STRUCTURE



PATRON

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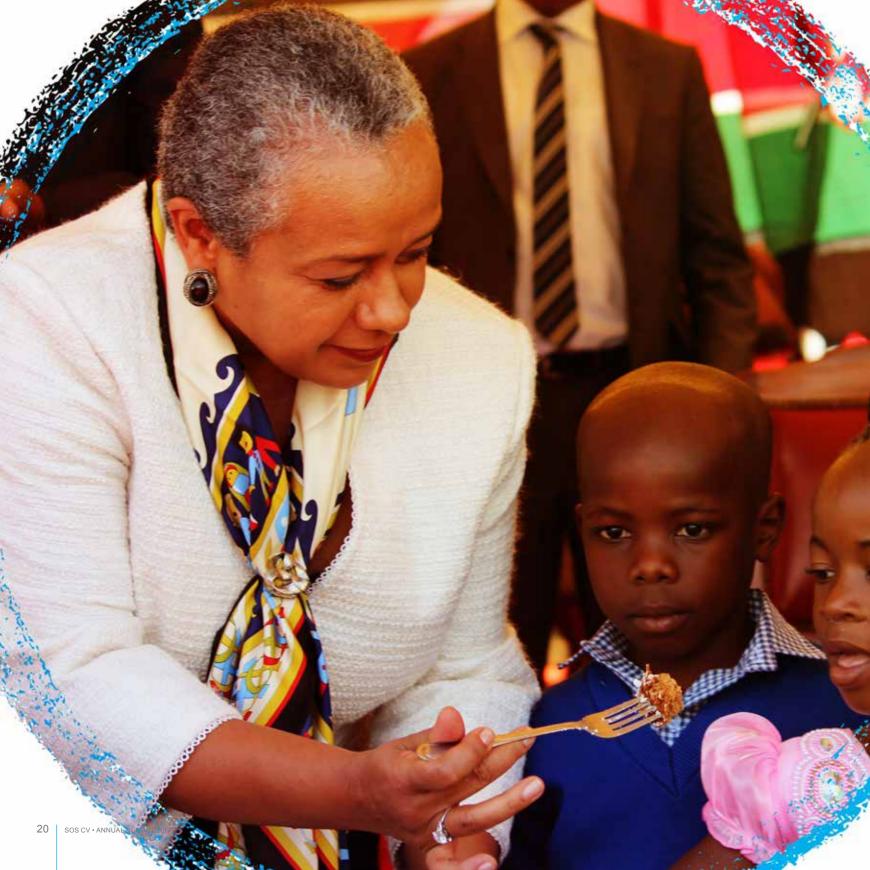


Mr. Dereje Wordofa SOS International Regional Director-East &Southern Africa



Ms. Ruth Ngobi Board Secretary





CHILDREN HOLD A VERY SPECIAL PLACE IN SOCIETY; OUR CHILDREN ARE OUR FUTURE

WORD FROM THE PATRON

I CONGRATULATE SOS CHILDREN'S VILLAGE FRATERNITY AND ALL ITS PARTNERS WHO HAVE BEEN STEADFAST IN THEIR SUPPORT AND COMMITMENT IN SUSTAINING THE GROWTH OF SOS VILLAGES IN KENYA FOR THE PAST FORTY-FIVE YEARS.

Under the stewardship of the Board, the leadership of the National Director and the tireless work of the staff, we have seen the SOS Villages become home to thousands of children with many more from the surrounding communities, benefitting from Health Care, Education and Protection Services.

The family based model provides the children with security and love. It helps build lasting bonds of community which also strengthens the safety net for vulnerable children and their families within the community

Children hold a very special place in society; our children are our future. On their part, SOS Villages spare no effort in creating an environment that is conducive to child development – an environment in which all children can thrive both socially and academically to reach the pinnacle of their potential.

As Patron, I applaud the SOS mothers and care givers, who work zealously to ensure that our children are raised with love and given hope for a bright future. It is always impressive to see a charity like this make a real difference to the lives of many.

SOS Children's Village is on a path of sustainable growth thanks to consistent support and encouragement from our international and local partners. You have all played a key role, although the journey has not always been easy. There are still many vulnerable children who are still at risk and in need of care.

It is my appeal to all stakeholders to join hands and support SOS Children's Villages Kenya; May the inspiration and commitment of SOS Children's Villages continue in the years ahead.

Her Excellency Margaret Kenyatta, First Lady of the Republic of Kenya

OUR STRATEGY MOVING FORWARD



OUR STRATEGY FOR THE NEXT DECADE IS TO ENSURE THE BEST CARE FOR CHILDREN, INNOVATE, AND UNITE MORE PARTNERS SO THAT NO CHILD GROWS UP ALONE,

Societies today are at a critical juncture far too many children are still growing without adequate care, without having their basic needs and rights met, without the foundation to become selfsufficient adults. Even more children – those living outside of households, the most vulnerable children of all – are not even being counted for development statistics.

This situation is morally unacceptable, and for societies, completely unsustainable. SOS Children's Villages has almost 70 years of experience supporting children without parental care, and those at risk of losing it. We have a deep understanding of how to prevent the breakdown of parental care and how to care for children who need someone. We do this through innovative and effective partnerships with donors, communities, governments and other organizations'.

OUR OBJECTIVES:

- 1. Many more children succeed in life.
- 2. We lead the world's largest child care movement.

OUR STRATEGIC INITIATIVES:

- 1. Innovate alternative child care. Ensuring our own alternative care programmes are integrated into the community.
- 2. Strengthen families. Increasing our efforts to prevent the loss of care.
- **3. Empower young people. Improving their care and employability.**
- 4. Advocate for children. Increasing our advocacy impact and giving a stronger voice to children.
- 5. Create a movement. Sharing our experience and knowledge with partners.
- 6. Simplify SOS. Continuing efforts to improve our own efficiency.
- 7. Invest for funding growth. Raising more money to allow us to carry out our vital mission.

SOS CHILDREN VILLAGES PROGRAMMES



SOS FAMILY CARE PROGRAMME

FSP - FAMILY STRENGTHENING PROGRAMME



EDUCATION:

- S ECD CENTRES
- 4 PRIMARY SCHOOLS
- I SECONDARY SCHOOL
- I TECHNICAL TRAINING INSTITUTE,



HEALTH - a MEDICAL CENTRES

ACT. SPEAK. CHANGE. ADVOCACY

SOS FAMILY CARE PROGRAMME

Under this programme SOS Children's Villages provide a home for children who have lost parental care within SOS Children villages. We have 70 years of experience in offering long term alternative care based on a family-like care model, which we call SOS family care. We also provide other alternative forms of care such as foster care.

To find the best possible alternative care option for each individual child, we constantly innovate and improve our work with SOS families and use our experience and competence to explore relevant care solutions, together with partners. If it is in the best interests of a child to return to the family of origin, we actively support and carefully accompany this process.

In Kenya there are 5 SOS Children's Villages in Meru, Mombasa, Kisumu, Nairobi and Eldoret. These are places where children who have lost

parental care can find a parent, a family, and a community. Children grow within their SOS families until they are mature enough to lead independent lives. Children are admitted into SOS family care based on alternative care standards and reintegrated back to community based on case by case basis. All the children and young people in SOS families have access to quality education from kindergarten through university or vocational training. Together with our partners, SOS Children's Villages also provide children and young people with access to non-formal education through child group activities, play, tutoring and stimulating informal education environments that support a child's development. Quality health care is also ensured for all children in the care of SOS families.

The SOS Children's Village is, at its core, a community of loving, stable families. Each Village consists of 10 to 15 family houses, and often houses a kindergarten, social center, and play space that is open to children from surrounding communities. Our Children's Villages place a strong emphasis on integrating SOS families into the communities at large, enabling them to form lasting friendships and connections with people outside of their immediate SOS families. We ensure access to community services and encourage participation in community activities of SOS families and vulnerable families. We enable easy interaction with neighbors. We support physical integration according to local context and experience. The SOS Children's Village opens its services and facilities to the wider community, e.g. parenting skills training, psychosocial counselling and schools.

FAMILY STRENGTHENING PROGRAMME (FSP) OUR FAMILY STRENGTHENING PROGRAMMES ARE COMMITED TO PREVENTING FAMILY SEPARATION SO THAT VULNERABLE CHILDREN REMAIN WITHIN THEIR FAMILIES OF ORIGIN IN THE CARE OF LOVING PARENTS OR RELATIVES. OUR INTERVENTION MODEL DIRECTLY TARGETS CHILDREN AND YOUTH BY ENSURING THAT THEY HAVE ACCESS TO BASIC NEEDS AND SERVICES INCLUDING QUALITY HEALTHCARE AND EDUCATION. We relentlessly develop the capacity of caregivers towards self-reliance and strengthen community -based partners to create a strong safety net around the vulnerable children and youth in the community. We seek out like -minded partners and mobilize resources to increase our impact through provision of proper nutrition, quality education and healthcare, decent housing, training and development for young people, capacity development for caregivers and community based partners as well as emergency response. Family Strengthening Programme is built on strong foundation and experiences that SOS CV Family Child Care Model had gained in child and family development, in finding ways to address the situation of those children who are at risk of losing care of their biological family.

Family Strengthening programmes constantly seeks sustainable and innovative ways to prevent family separation and address the situation of those children who are at risk of losing care of their biological family. The theory of change focuses on two models: family empowerment and community empowerment to achieve ultimate development of children through provision of quality care and protection. The family development process is an integral part of family strengthening ambition to relentlessly engage with caregivers and develop their capacity towards self- reliance. Community -based partners are also strategically identified, assessed and engaged to help create a strong safety net around the vulnerable children and youth in the community. Diverse partners are actively sought and resources mobilized to increase impact through provision of proper nutrition, quality education and healthcare, decent housing, training and development for young people, capacity development for caregivers and community based partners as well as emergency response when necessary . Family strengthening programme endeavors to create

resilient communities where vulnerable children, youth and caregivers thrive to reach their maximum potential

SOS CV Kenya implements 8 Family Strengthening Programmes within 8 counties in the country supporting a total of 18,472 programme participants with 12,432 children, 2,146 youth and 3,894 caregivers. The programmes are supported with funding from SOS mainstream budget, donors funds through SOS Netherlands and SOS Denmark for innovative projects in Nairobi and Busia and local funding from Centre for Disease control [CDC] through Elizabeth Glasier Pediatric AIDS Foundation [EGPAF] in Suba. Busia Integrated Care programme is a 5 year programme funded by the Dutch Lottery Fund [Netherlands] ,NEXT Economy youth programme a 3 year programme funded by Dutch Ministry of Foreign Affairs [Netherlands] and Nairobi FS with Biocentre innovation by TV Galla [Denmark] .

The 5 FS programme are part of Children's Villages programme in Nairobi, Kisumu, Mombasa, Meru and Eldorect while Busia and Suba are annexed to the Kisumu CVP and Marsabit is annexed to Meru CVP. The 3 stand alone FS programmes in Busia, Marsabit and Suba were included in ESAF re-innovation plan for development into comprehensive Children's Villages programme in a reinnovation process staring in 2018.

Busia programme is a unique programme innovation aligned to 2030 strategy which implement both family strengthening and family based alternative care through an integrated child care approach.

The programme targets 1,000 children who are at risk of losing parental care and 200 children who have lost parental care. The integrated care programme also seeks to share support alternative care institutions integrate quality child care and protection practices based on SOS CV long term experience.

FAMILY STRENGTHENING PROGRAMME -SUCCESS STORIES

THE MFSII PROGRAMME-MERU SUCCESS STORIES IN THE INTERVENTION COMMUNITIES

The MFSII programme is a programme that was funded by the Netherlands government and was been implemented by SOS children's villages Meru from the year2011-2015. The programme targeted six locations namely Kithoka, Chugu, municipality, Kaaga, Runogone and Kirimene.

THE MAIN OBJECTIVE OF THE PROGRAMME WAS TO STRENGTHEN FAMILIES ECONOMICALLY THROUGH EMPOWERMENT OF THE PROGRAMME PARTICIPANTS FOR SELF-RELIANCE.

This was achieved through caregivers been supported with dairy goats, sheep, fruits tree seedlings business startup kits and energy saving jikos. Care givers were also trained on yoghurt making process trainings on good parenting skills as well as livestock rearing practices.

TITUS THURANIRA

Titus thuranira is one of the care givers from Kaaga location whom we visited at his place. Titus lives with two of his children namely Sharon kendi who is in form four at kinoru day secondary school and Chris Muguna who is in class one at Kaaga primary school. Titus tells us before the intervention of the programme paying school fees for the children was very hard as well as meeting their other basic needs was also a problem. The family had been supported with dairy goats and sheep. Titus thuranira tells us from the dairy goats he has been provided with he has managed to sell two goats so as to enable him pay school fees for his eldest daughter. He tells us that he intends to sell the remaining goats and buy dairy cows.

Nelson Mandela once said education is the biggest weapon which can change the world. This can be attributed as true from what Titus has achieved. The programme had earlier managed to take some of the care givers to agricultural centers such as Wambugu farm in Nyeri County and Kenya agricultural and livestock research organization in Embu County. The care givers were trained on good farming practices such as choosing the best farming seedlings, best pesticides to use on their crops and how to manage their farm produce once they have harvested.

Titus through this exposure visit has managed to grow arrow roots as well as sweet potatoes .With the availability. He tells us that he is able to sell some sweet potatoes to the market where he is able to earn to some cash and therefore he is able to cater for the needs of his children. He has also managed to grow bananas at his farm from the banana suckers they were provided with at Embu. He mentions only but a few the types



Titus tending his sweet potatoes at his farm

of bananas in his farm in his native language such as "Kampala "he tells us that he sells them at a price of Ksh 800. The programme in partnership with NHIF has also managed to train the care givers on importance of joining the health insurance scheme and this sensitization has enabled many caregivers including Titus

ESTHER FREDRICK

Esther is another care giver supported by the programme. Three of her children had been enrolled in the programme. The eldest child is now at Chuka University. The care giver tells us that life before the intervention of the programme was quite different comparing to the state in which she and the rest of her family members live. The family had been supported with dairy goats and sheep. She has also been trained on good parenting skills and is now able to raise her children as per what she was taught. The children are now aware of their rights as well as their responsibilities.

Esther also had the privilege of attending an exposure

visit to Kenya agricultural and training research organization at Embu whereby she was provided with some coffee tree suckers as well as banana suckers which she has since planted in her farm. The coffee breed which she been had provided with she says they are the best comparing to the one which she used to grow at her farm. She is now able to sell the coffee produce and is able to earn some income which is used to cater for the needs of the family.



Above: Mature bananas at Esther's farm. The FS program supported her with tissue culture for family IGA and consumption. Below: Esther also benefitted with coffee seedlings for commercial farming



MR, FECHA

Mr. Fecha, a man from Hulahula community is a beneficiary of SOS FS program. Mr. Fecha is caregiver to thirteen family members. He lost his first wife four years ago and married another wife after a year. He received a female camel, five goats and eight chickens from the program. The camel gave birth twice, the milk from the camel has been utilized to pay college fees for his first born son, drinking by younger children and the surplus is sold and the money used to buy house hold needs like food and non-food stuff.

Some goats have also given birth and the milk is sold and the proceeds used to supplement house hold needs. The eggs from the chickens are sold and the money gained used to sustain household needs.

Mr. Fecha is very grateful to SOS FS program for having changed his house hold life.



Mr. Fecha milking his camel.



Mrs. Nasas working on her quarry.

MRS, NASAS

Mrs. Nasas hails from Milima Mitatu community. She has six children. She has been SOS FS program beneficiary since 2013. The program issued her with quarry tools and five goats to support her livelihood. From the tools recived, Nasas has been able to crush stones to building gravels. She has been selling the gravels to those constructing houses. She sells one wheelbarrow of gravels at a cost of two hundred shillings. The money made from the sale of the gravels has been used to buy house hold needs and paying school fees for her children. She is grateful to the program for having changed the live of her children and hers.

EDUCATION PROGRAMME

SOS CHILDREN'S VILLAGES KENYA PROMOTES A CHILD CENTRED EDUCATION THAT RESPECTS THE INDIVIDUAL CHILD AS A RESOURCEFUL UNIQUE HUMAN BEING WHO ACTIVELY PARTICIPATES IN HIS/HER OWN DEVELOPMENT. THIS IS IN LINE WITH THE NEW COMPETENCY BASED CURRICULUM REFORMS WHOSE VISION OF THE BASIC IS TO ENABLE EVERY KENYAN TO BECOME AN ENGAGED, EMPOWERED AND ETHICAL CITIZEN.

LEARNING FOR LIFE AIMS AT THE DEVELOPMENT OF A FULL HUMAN POTENTIAL FOR MEANINGFUL AND DIGNI ED LIFE IN A GIVEN CONTEXT AND THROUGH THE STAGES OF A CHILD'S DEVELOPMENT,

IN SOS CV KENYA, WE PROMOTE A CHILD'S CENTERED EDUCATION FOR ALL THE CHILDREN UNDER OUR CARE.

The Education programme has been quite successful in terms access, equity and support for the youth and children. 100% of the children who completed primary and secondary education all transited to the next level of education: secondary, universities, vocational training institutions and other colleges. Through the Children Villages and the FS Programme the organization was able to provide Education support to about 1200 children.

With the support other partners i.e. the UKAID through the DFID Jielimishe Girl Education Challenge the organization was also able to support an additional 3000 girls who had dropped out of school to access quality Education.

Through the support from LEGO foundation and SOS Denmark, the organization was also able to support 12000 children and 3000 care givers in appreciating play in learning for holistic child development in 2017. So far, there is commitment from the partner that cohort of girls supported under phase one of the project will continue being supported through the transition phase for the next 5 years.

JGEC PROGRAM

During the year 2017, working closely with other partners with a shared / common vision became evident as viable option for tapping on the locally available funding opportunities. To this SOSCV Kenya, jointly with I Choose Life – Africa (ICL) (as Lead Organization) continued to implement phase two of the UK-AID/DFID funded Jielimishe Girl Education Challenges (JGEC) Programme in Meru, Laikipia and Mombasa Counties, a Programme that supports close to 3000 girls to go back to schools ensuring their retention in school and transition to the next level of school there by enhancing their learning.

Besides providing Education support materials, the girls and boys in the target group participated in a mentorship program which aimed at enabling children to have a clear understanding of who they are as an individual, raise their self-esteem, be motivated to remain in school and learn, and to take responsibility of their own actions and behaviours. Through Jielimishe Girls' Education Challenge Project Phase 1 (GEC 1), has been working with 10,170 girls from some of the most marginalised communities in three target Counties (Laikipia, Meru and Mombasa) in Kenya.

The goal of this initial phase was to increase access to equal education opportunities for girls, and thereby improve their life chances. This experience increased our understanding of the context and brought out clearly the barriers that girls face in accessing education and the potential that exists amongst them and their communities and which could be enhanced through strategic and focussed project interventions to enable the girls achieve even more. The three year project came to an end in February 2017, and recorded excellent performance in terms of the impact to the target group. As a result of the good performance and with the main aim of ensuring completion of the full cycle of education and be self-reliant, JGEC transition phase (GEC -T -) commenced in April 2017 and the main outcomes are learning, Transition and sustainability. The key objectives for phase 2 are;

- SCHOOLS WITH STRENGTHENED TEACHING AND LEARNING CAPACITY
- COMMUNITIES WITH IMPROVED AND INVOLVEMENT IN GIRLS EDUCATION.
- GIRLS MOTIVATED TO STAY IN SCHOOLS, LEARN AND TRANSITION DUE TO MENTORSHIP AND LIFE SKILLS.
- IMPROVED ACCESS FOR MARGINALIZED GIRLS TO TVET AS AN ALTERNATIVE PATHWAY TO EDUCATION
- INCREASED INCOME TO SUPPORT GIRL'S EDUCATION
- STRENGTHEN COLLABORATION WITH MOE FOR INCREASED SHARING AND USE OF EVIDENCE FOR BETTER EDUCATION MANAGEMENT.

LEARN TO PLAY, PLAY TO LEARN LEGO PROJECT.

THE PROJECT IS AN INITIATIVE FUNDED BY LEGO FOUNDATION THROUGH SOS DENMARK, WHICH IS BEING PILOTED IN KENYA FOR 18 MONTHS, AIMED AT TRAINING AND IMPLEMENTING LEARNING THROUGH PLAY IN SCHOOLS, HOMES AND CHILD BASED INSTITUTIONS.

The project will support 12,000 Kenya children develop intellectual, emotional, social and creative skills and aims at achieving changes in behaviour and attitudes to learning through play. The project target group is an estimated 12,000 children from 6 project locations in Kenya. The age is between 0-12 with a main focus on children between 0-7. The participants include the caregivers, children, members of community based organizations, ECDE teachers and VSLA group's members in the communities

A SIMPLE WAY TO PREVENT BRICKS FROM BEING STOLEN

irds

LEGO BRICKS ARE ATTRACTIVE AND EASILY STOLEN ONE BY ONE OR BY THE BOX, WHICH DID HAPPEN IN SOME OF THE SCHOOLS INVOLVED IN THE PROJECT. HOWEVER, MOST OF THE LOCAL TRAINERS MANAGED TO CONVINCE THE CHILDREN TO LEAVE THE BRICKS IN THE BOXES WHEN THEY WENT HOME BY MENTIONING HOW UNSATISFYING PLAYING WITH JUST ONE OR TWO BRICKS IS. IN ONE SCHOOL, A TEACHER DECIDED TO LET ALL THE CHILDREN BRING HOME ONE BRICK AND GAVE THEM AN ASSIGNMENT:

"BUILD SOMETHING AND BRING THE BRICK BACK TOMORROW,"

THE FOLLOWING DAY THE CHILDREN EACH BROUGHT THEIR BRICK BACK. THE TEACHER ASKED WHAT THEY HAD BUILT AND THEIR RESPONSE WAS,

"WE WEREN'T ABLE TO BUILD ANYTHING WITH ONLY ONE BRICK,"

THE TEACHER SUMMED UP BY SAYING,

"IF YOU BRING HOME ONE BRICK YOU CAN'T BUILD ANYTHING, IF YOU KEEP ALL THE BRICKS SAFELY AT SCHOOL, YOU CAN PLAY TOGETHER,"

AFTERWARDS, NO BRICKS WERE STOLEN.

LESSONS LEARNED...

The implementation of the Learn to play, play to learn project has, effectively, lasted only one and a half years, with a few months' extension. It took almost two months to have the LEGO bricks shipped from Denmark to be released from the Port of Mombasa. Two election periods with extensive political activity put many project activities on hold for several weeks. Despite a relatively low budget and without extra human resources, SOS Children's Villages Kenya was able to implement the project, reaching more children, caregivers, teachers and other adults working with children than expected.

THERE ARE SOME IMPORTANT LESSONS LEARNED FROM THE PROJECT:

YOU NEED TO MOTIVATE STAFF: Existing staff at SOS Children's Villages implemented this project. Some of the master trainers said that it was hard to keep up their motivation when they also worked simultaneously at a full-time job.

ONE AND A HALF YEARS IS A VERY SHORT TIME:

More time for follow-up, consistent facilitation of refresher trainings and coaching of local trainers would have made life less stressful for master trainers and ensured an even better project outcome.

IMPLEMENTATION GAPS NOT DETECTED DUE TO LACK OF COORDINATION, MONITORING AND

MIDTERM REVIEW: A midterm review was not carried out due to lack of time. At the same time, there were gaps in SOS Children's Villages Kenya's national level coordination and monitoring. A midterm review, coordination, ongoing monitoring and follow-up could have helped prevent deficiencies detected by the endline survey. For example:

- The long-term impact is reduced when the focus is on materials that are not locally available: Almost all project participants were overly enthusiastic about the LEGO bricks, causing some teachers and parents to use locally available materials less than before. When the project ends and regular monitoring likely decreases, the bricks will probably gradually disappear. The teachers and parents who have not practiced how to use the learning through play methodology with locally available materials may not be able to transfer their knowledge, skills and enthusiasm to locally available materials at a later stage, possibly affecting the longterm sustainability.
- Local trainers should have prior experience in training facilitation: The endline survey found that the transfer of knowledge and skills beyond the local trainers' level is somewhat diluted. Many teachers complain that the trainings facilitated by local trainers were not very in-depth. At the same time, not all local training participants accepted and appreciated that their peers had enough knowledge to act as trainers. The lessons learnt are that the trainers selected for project should have prior experience in training facilitation.





HEALTH PROGRAMME

Health, an integral part of every human being, is echoed by the sustainable development goal (SDG-3). The SOS Children's Villages Kenya Medical Centers-Nairobi, Eldoret & Kisumu, have continued to foster good wellbeing of the population through provision of quality care thus impacting on reduction in child mortality, improved maternal health, increase access to essential services and combating HIV/AIDS, malaria and other diseases. This has been realized through various interventions carried out at the facilities and community level programs in collaboration with a team of dedicated staffs, partners, donors and well-wishers.

The medical Centers have continued to provide quality services to its beneficiaries and the community.

A SUMMARY OF THE HIGHLIGHTS IN 2017 INCLUDED:

- The Eldoret MC received an accreditation award from National Hospital Insurance Fund (NHIF)
- The care and treatment program entered its year II of implementation, where USD120,000 has been committed to the implementation of the program.
- Through the continued partnership with Xellia Pharmaceuticals, the Eldoret MC benefitted from a donation of DKK 20M towards the renovation of an existing building to a maternity wing.
- Continued operationalization of a 12-hour outpatient clinic in Nairobi
- The SOS MC Nairobi received funds from Novo Nordisk to implement a community-based nutrition project in Kiambiu slums.

THE MEDICAL CENTERS CONTINUED TO OFFER PREVENTIVE AND CURATIVE SERVICES AS INDICATED BELOW REACHING 52, 337 CLIENTS THROUGH THE VARIOUS PORTALS:

- Out-patient center
 - Family planning clinic
 - Cervical cancer screening and treatment
 - Nutrition support and counselling
 - Community outreaches
 - Ante and Post Natal clinic
 - Laboratory and Pharmacy services

WE MANAGED TO CONDUCT 108 OUTREACHES THROUGHOUT THE YEAR IN VARIOUS SUB-COUNTIES WITHIN NAIROBI AND UASIN GISHU COUNTIES AND OTHER NEIGHBORING COUNTIES FOR EXAMPLE NAROK,

ACTIVITY HIGHLIGHTS FOR 2017

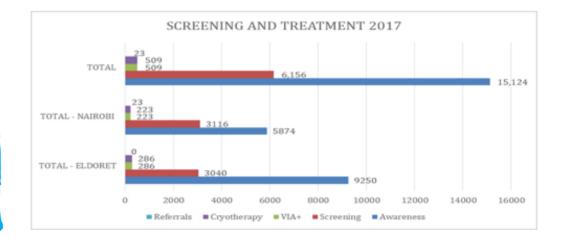
1. THE SAVE MY MOTHER (SMM) PROJECT IN ELDORET AND NAIROBI MEDICAL CENTERS

The project continued to reach the women of reproductive age for cervical cancer screening through outreach and in-reach programs. We managed to conduct 108 outreaches throughout the year in various sub-counties within Nairobi and Uasin Gishu Counties and other neighboring counties for example Narok. This is done in collaboration with various like-minded partners like the Ministry of Health, local CSOs and NGOs

During this reporting period, a total of 15,124 clients were taken through awareness sessions, out of which (41%) 6,156 women were screened during period under review. A positivity rate of 8% (509 out of 6156) was realized with 100% of the positive clients undergoing cryotherapy in the 2 counties.

ELDORET & NAIROBI

ACTIVITY	JAN TO JUNE '17	JULY TO DEC '17	TOTAL
Awareness	8729	6395	15124
Screening	3121	3035	6156
VIA+	236	273	509
Cryotherapy	236	273	509
Referrals	16	7	23



2. THE CARE AND TREATMENT PROJECT IN NAIROBI MEDICAL CENTRE

SOS continued to partner with The University of Maryland Baltimore in the implementation of the Care and Treatment project. During the reporting period, we finalized on year I (Sep, 30th 2016 to 29th September 2017) and proceeded to year II (Sep, 30th 2017 to Sep, 29th 2018) after a successful implementation of the later. The program continues to focus on the 90-90-90 UNAIDS strategy.

During this reporting period, the main highlights of the project include the following:

a) HIV Testing Services (HTS)

The HTS target was surpassed and recorded 52% above the target. Despite the high numbers, the positivity rate remained low at 2% with only a population of 134 (37% of the target) clients being registered as linked to a facility

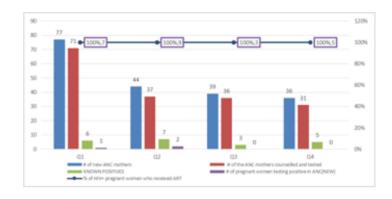
b) Adult and Pediatric care and treatment:

As at December 2017, the MC had 1217 persons on care, out of this 99% (1210) of them on HAART as per the "Anza Sasa" initiative.

137 clients were enrolled in care whilst 124 initiated on HAART.

c) Prevention of other to child transmission (PMTCT) of HIV/AIDS

During the reporting period, the Medical Centre catered to 196 expectant women. 100% of the eligible mothers (175) were counselled and tested. With a 6.8% (25/175) positivity rate, these women have so far received optimal PMTCT services to reduce transmission to the infant. Maternal and infant prophylaxis is currently at 100% uptake.



d) HIV Exposed Infants (HEI) outcomes

Find below the highlights during the reporting period,

- At 9 months, 90% (27/30) of the children were on active follow up whilst 10% (3) was transferred out.
- At 18 months 2nd review 86% (30/35) of the children were antibody negative 8% (3) transferred out while the other 6% (2) died due to non-HIV related issues.

e) TB/HIV

 This is a key component of care and treatment. During the period under review, 28 new TB cases were identified having been screened as guided by the policies. 11 of these clients were co-infected and were thus managed for both TB and HIV effectively.

3. NUTRITION PROJECT IN KIAMBIU LOCATION

The Nairobi Medical Centre in collaboration with SOS Children's Villages Denmark implemented a high impact nutrition intervention in Kiambiu. The project focused on providing nutrition services to women of reproductive age, pregnant women and children at risk of malnutrition in a bid to improve their health and nutrition situation. The program was conducted both at facility and community level in collaboration with like-minded stakeholders which included Ministry of health, AMREF, Kenya Medical Supplies Authority (KEMSA), AMREF Health Africa, Mama Lucy and Kenyatta National Hospital (KNH) hospitals and Nestlé's Healthy kids program.

At the inception of the project, SOS held a stakeholders' meeting with the key community influencers. This forum was aimed at familiarizing the community stakeholders with the nutrition project in their locality as well as the key deliverables of the new project. SOS also participated in community dialogue days, a session aimed at easing partnership and collaboration with other health-focused organizations and facilities on the ground. While partnering with the ministry of health and the department of nutrition, monthly review meeting were conducted to monitor progress periodically.

4. OUTREACH CAMPAIGNS

The Medical centers conducted outreach activities throughout the year. They include cervical cancer screening & treatment, jigger activities and Nutritional outreaches.

SOS Medical Center Eldoret in partnership with Uasin Gishu beyond zero medical team and other partners conducted mini medical camp at Kimumu. Our target group was the children, women and persons infested with jiggers. Some of the services offered included jigger control and decontamination, general treatment of common ailments, cervical cancer screening and treatment, screening for prostate cancer amongst the men, Diabetes and hypertension screening and treatment, deworming and vitamin A supplementation for the children under 5 & family planning services.





ADVOCACY PROGRAMME

Every day at SOS Children's Villages Kenya we all work for the protection and development of children in a family environment. Through advocacy at county, national, regional and international level, we sensitize decision-makers to the rights and needs of children, to bring changes in policies and practices that will make a positive and lasting difference to their lives. We also support children and young people to participate in making decisions that affect them, so that their voice is heard and they can be active architects of their future.

At SOS Children's Villages under the advocacy programme we take action to improve policies and practices that undermine the wellbeing of children at risk of losing parental care or who have lost parental care. The advocacy programme intends to address issues of advocating for the rights of the child in and out of SOS Children's Villages. This is inclusive of a child's to quality care as well as ensuring quality treatment for all children under alternative care.

OUR APPROACH TO ADVOCACY IS BY ADVOCACY FOR THOSE AFFECTED, WITH THOSE AFFECTED AND BY THOSE AFFECTED.

By advocacy at SOS Children's Villages we intend to develop capacity of advocacy networks to conduct advocacy efforts. To implement child's rights according to national legislation and SOS Children's Villages Kenya policy and activities and to build advocacy capacity of stakeholder groups and communities.

The overreaching goal for advocacy in line with Strategic Initiative 4 of the SOS CV Federation Strategy 2030 is to contribute to improving public policies/ Laws in favor of our target group. This is further supported with the four strategic components; Focus on care and prevention, focus on evidence- based advocacy work, ensure every member association builds on its own capacity and ensure participation and involvement of children and young people in advocacy work.

1. CONTRIBUTION TO IMPROVING PUBLIC POLICIES/ LAWS IN FAVOUR OF OUR TARGET GROUP

SOS CV KE is a contributing and participatory member of the National Steering Committee on the Children Bill 2017 and the Legal technical subcommittee of the same. Members are drawn from various government Ministries and child focused civil society organizations with coordination done through the Department of Children Services (DCS) and the National Council for the Administration of Justice (NCAJ)

SOS CV KE has participated in the process of reviewing the Children Act (2001) in a number of ways. At the National level, SOS CV KE together with other organizations submitted proposals for recommendation into the Bill to the Department of Children's Services. The key issues for consideration included; proposal of a new section that makes provision for family preservation services, support and early intervention services for families with children at risk of separation as a function of the government, proposal of a new section that promotes kinship care arrangements to be registered and monitored by the Assistant County commissioners/ chiefs in consultation with Area Advisory Councils. Provisions to amend the section on foster placement to ensure that a child must not be placed in into foster care without necessarily being first placed in a charitable children institution. Proposal of a new section that recommends the establishment of foster care agencies to recruit, train, place and monitor foster care arrangements with the supervision of the Department of Children's Services. Though not all recommendations were not accepted, the Bill is scheduled for validation in March 2018 to align it to the Constitution of Kenya (2010) and other legislations

that promote the rights of children. This will give us an opportunity to further lobby and advocate for the inclusion of the emerging issues that affect children.

SOS CV KE together with other members of the steering committee further participated in the development of participation tools for children and adults for purposes of guiding them in giving their views for inclusion into the Children Bill (2017). SOS CV KE was represented by 5 programmes staff and 5 children form the Villages who participated in the regional consultation forums in Kisumu, Mombasa and Nairobi regions for purposes of contributing to the review process.

In addition to this, SOS CV KE is contributing to the development of the National Plan of Action against Sexual Exploitation of Children in Kenya (2018-2022). The purpose of this is to align with existing legislations and policies and taking account of emerging issues in relation to sexual exploitation of children in different settings. The areas of focus include prevention, protection, recovery and reintegration. A planning matrix has been developed and shared with the National Council for Children's services for comments and adoption. The technical working group is equally charged with the mandate to identify issues for lobbying and advocacy on sexual exploitation of children in Kenya. This draft plan of action was forwarded to the NCCS for endorsement and further action with other stakeholders.

SOS CV KE also participated in the development and submission of the Alternative Report to the UN Committee on the Convention on the Elimination of all forms of Discrimination against women (CEDAW). The report responded to the 8th periodic report of the government of Kenya acknowledging the milestones achieved, identifying gaps and challenges faced by women and girls in realizing and safeguarding their rights. The report was also developed in line with the list of issues provided by the UN committee of experts. The recommendations that we submitted focused on the following key areas in line with various Articles of the Convention as well as issues that affect our target group: combating gender and cultural stereotypes, equality in education, matrimonial and family rights and measures towards full realization of the rights under the convention.

Kenya was reviewed in the committee sessions that took place in Geneva in November 2017. The State led delegation was represented by the Cabinet Secretary Ms. Sicily Kariuki and other member organizations from FIDA Kenya, COVAW, FEMNET, Plan International Kenya, among others. From the summary of the proceedings between the committee and the State, concluding observations were further provided. As a way forward for 2018, partner organizations are working on submitting a matrix indicating how we are contributing to implementing the concluding observations. This will further strengthen joint advocacy at national and county level and enable us engage better with the policy makers.

2. FOCUS ON EVIDENCE BASED-ADVOCACY WORK

The Community Action for Quality Alternative Care and Protection Programme was launched in Eldoret in June 2017. The programme is anchored in the Strategy 2030 and focuses on quality alternative care for children without parental care and on advocating for improved provision of appropriate alternative community care. The key components of the programme are; professional capacity development, strategic service provision and advocacy.

The programme is being implemented in a new Kibulgeny location in Uasin Gichu County thus necessitated the undertaking of a Feasibility Study which was conducted and focused on issues related to the child welfare system, education system and an analysis of children who have lost or at risk of losing parental care. This study will enable us identify key partners within the community who will be engaged in promoting alternative care by ensuring key services are provided to the children beneficiaries, identify children who will be recruited into the programme as well as advocate for the government to implement the gaps with viable solutions that focus on the child and other community centred structures.

3. BUILD CAPACITY IN ADVOCACY, POLICY DIALOGUE, NETWORKING AND ALLIANCE BUILDING

SOS CV KE together with other partners drawn from the government and child focused civil society organizations have established the Alternative Care Alliance that was launched in October 2016. SOS CV KE is currently a member of the interim steering committee and has supported 5 meetings so far to ensure the running of the alliance. As a member of the interim steering group, we focused on formalising the registration of the Alliance. This culminated in coming up with the terms of reference for the interim steering committee, thematic working group and the Secretariat. The Constitution of the Alliance was also drafted and the registration process initiated with the Registrar of Societies, this is pending and yet to be finalised.

In collaboration with the Department of Children

Services, the alliance members came up with messages that promote alternative care and received funding through Save the Children Kenya for the calendar project. We produced a calendar for 2017 with the highlighted messages. The alliance is also using its website and social media platforms to share advocacy messages on alternative care.

There were also discussions to officially launch the alliance as well as coming up with a Position Paper on the Children Bill (2017) for purposes of lobbying the National Assembly.

Capacity assessment of SOS staff in regards to alternative care and protection was done with support of the regional office. 32 staff form Eldoret were trained on alternative care and advocacy to enhance their knowledge on the same and to enable them better advocate on issues of alternative care within Kibulgeny Location and Uasin Gichu County. They form part of the SOS alternative care committee in Eldoret.

32 representative from the local partners in Eldoret were also trained on alternative care and advocacy. The team comprises of Kibulgeny Locational Area Advisory Council members, government representatives at locational level.

4. PARTICIPATION OF CHILDREN IN ADVOCACY WORK

50 children from Eldoret were trained on the different forms of alternative care. The purpose of this was to engage in identification of gaps in the different care options.

THE CHILDREN PRODUCED STATEMENTS ON HOW TO IMPROVE QUALITY CARE FOR ORPHANS AND VULNERABLE CHILDREN,

The gaps identified will inform measures to enhance quality care and will provide an opportunity for children to participate in decision making on matters that affect their wellbeing.

SOS CV KE together with other partners and government representatives participated in the coordination and planning of the 1st Children's Devolution Conference that brought together children form the 47Counties. The children engaged with the governors and other key decision makers. The purpose of the conference was to promote issues of children in devolution.



FEATURES



YOUTH EMPOWERMENT – 25 AUGUST 2017

YOUNG AFRICANS CALL FOR INCREASED CAREER OPPORTUNITIES

The Pan-African Youth Empowerment (PAYE) Conference gave 150 young people from 47 African countries the opportunity to meet with and learn from representatives from international and Pan-African institutions, corporations and academia.

The conference, held 22-24 August 2017, was co-hosted by SOS Children's Villages International and the African Union.

"TODAY, YOUNG PEOPLE ACROSS AFRICA FACE AN UNCERTAIN FUTURE, A LACK OF OPPORTUNITY AND A LACK OF ABILITY TO REALISE POTENTIAL", SAID NORBERT MEDER, CEO OF SOS CHILDREN'S VILLAGES INTERNATIONAL,

"THE YOUNG PEOPLE PARTICIPATING IN THIS CONFERENCE HAVE SET OUT A STRONG OUTCOME STATEMENT, WHICH CALLS UPON ALL OF US TO TAKE ACTION AND ENSURE YOUNG PEOPLE CAN FIND AND CREATE THE OPPORTUNITIES THEY NEED," Albert Muchanga, African Union Commissioner of Trade and Industry, told the conference: "My message to the young people: I am listening very clearly, I am very attentive to the outcomes," he said. "The threeday conference has given you, the youth, a voice and power to contribute in transforming challenges into opportunities. You know your potential. The three day conference has emboldened you to realise that potential."

Of the African continent's 1.2 billion people, an estimated 200 million are between ages 15 and 24, making employability a challenge at the global, regional and national levels.

Empowering young people is critical to give them the tools, experience and jobs they need to succeed in life. The 2030 Sustainable Development Agenda Goal 8, Africa Union Agenda 2063 Aspiration 6 and SOS

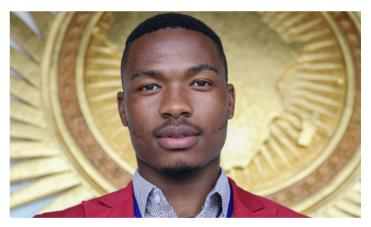
Children's Villages Strategy 2030 Objective 3 provide a new opportunity to mobilise broad global partnerships to support action on a more significant scale.

A CALL FOR ACTION

Based on the discussions at the conference, the youth participants developed outcomes which include calls to action for young people, governments, nongovernmental organisations and corporations.

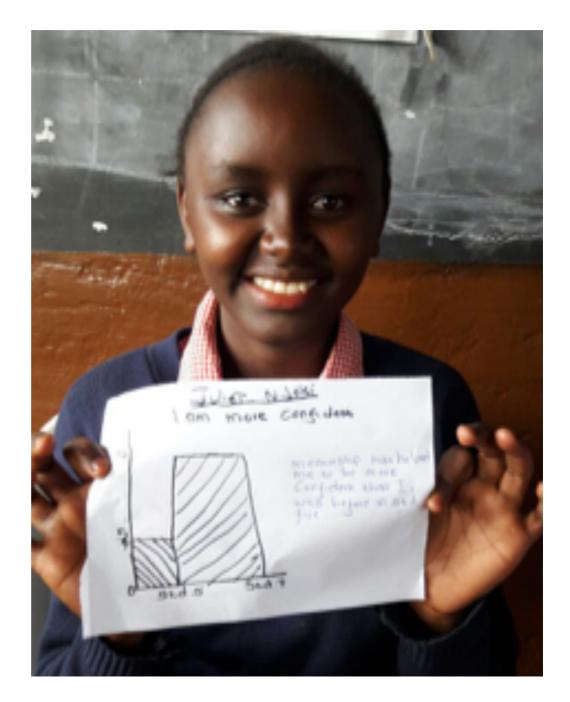
The outcome statement was presented by Winnifred Johnson, a young woman from Nigeria, who emphasised that young people in Africa have what it takes to face the challenge of youth employability and effect change: "Despite all the problems and struggles that young people in Africa are going through, it is true that there is always light at the end of the tunnel. We believe that Africa will rise and shine, powered by its young people." The participants will return home and share their findings, experiences and outcomes with their peers. The next step is up to them – to use this chance to reach out to governments, non-governmental organisations and companies, finding ways to work together to address the challenge of youth employability. A possible next step is for the outcome statement to be integrated within national and regional youth strategies.

In total, 250 people attended the conference. Representatives from companies as Allianz, DHL, Microsoft and Coca-Cola shared their insights on programmes that support young people at the start of their careers looking to build experience.



Thabang Maake of South Africa was among the young people who attended the PAYE Conference. Photo by Leonora Barclay / SOS Children's Villages International

MENTORSHIP IMPROVES JULIET'S SELF CONFIDENCE

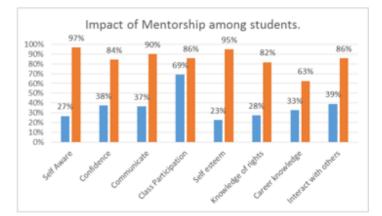


JULIET IS A STANDARD 7 GIRL AT GIKUMENE PRIMARY SCHOOL, TMENTT NORTH SUB-COUNTY IN MERU COUNTY. SHE IS ENTHUSIASTIC, JOVIAL AND ASPIRES TO BECOME A JOURNALIST WHEN SHE GROWS UP.

In a survey conducted by Jielimishe GEC Project in September 2017, it was revealed that the confidence of the students was at 84% as compared to 38% in 2015, marking a 46% improvement over two years. This improvement is attributed to the student academic and career mentorship conducted by the project aimed at improving motivation and inspiration for the students to stay in school, learn and transition to the next level. With the improved confidence, Juliet is able to participate more in class, engage the teacher in instances where she did not understand and ask questions freely.

While conducting the mentorship, the project also focuses on improving the self-awareness among the students, self-esteem as well as improving knowledge about careers and child rights. Majority students have applauded mentorship as one of those interventions that has directly impacted on their lives as individuals within the school and home environment.

The survey revealed that self-awareness among the pupils improved from 27% to 97% within the two year period. The students' self-esteem consequently improved from 23% in 2015 to 95% in 2017. As a result, the pupils were able to communicate better and interact with their peers confidently.



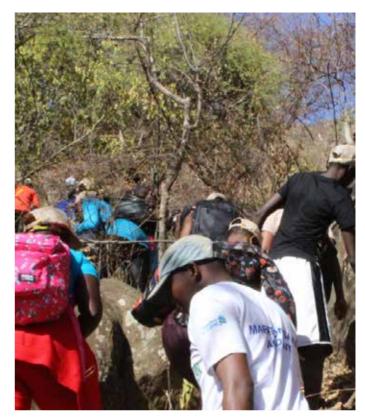
ACTIVITIES AROUND THE VILLAGES 2017



T.T.I Graduation



TTI Graduation



Mt Ololokwe FR Climb



Mt Ololokwe FR Climb



President Helmet Kutin's visit



President Helmet Kutin's visit



President Helmet Kutin's visit



President Helmet Kutin's visit

OUR CORPORATE PARTNERS SPONSOR, SHARE, DONATE, PARTNER, JOIN US







East African Cables



TOTAL









CHERISH OUR CHILDREN INTERNATIONAL



ABBREVIARIONS

SOS	Societes socialis (Social Societies)	
CV	Children's Villages	
AC	Alternative Care	
CPP	Child Protection Policy	
CS	Child Safeguarding	
СР	Child Participation	
FSP	Family Strengthening Programme	
МС	Medical Centre	
ECD	Early Childhood Development	
NGO	Non-governmental Organization	
OVC	Orphans and Vulnerable Children	
UNHCR	United Nations Convention on the Rights of the Child	
UNICEF	United Nations Children's Fund	
ANC	Ante Natal Clinic	
ART	Anti Retroviral Therapy	
GBV	Gender Based Violence	
HIV	Human Immuno deficiency Virus	
OTP	Outpatient Therapy Programme	
UNAIDS	United Nations Programme on HIV & AIDS	

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