



Community Needs Assessment Form

Explanation: Matching Grant applications requesting US\$25,001 or above must include a community needs assessment. Please provide detailed answers to the following questions. The boxes will expand as you type. Attach this completed form to the Matching Grant application.

1. Name of community: Marera sub-location, Northwest Kisumu, Maseno Division, Kisumu West District, Nyanza Province, Kenya, Africa.

2. Describe the benefiting community. Include any relevant statistics as well as geographic and demographic information about the community.

The Marera sub-location is a very poor community covering an area of approximately 7.4 square kilometers located outside the city of Kisumu in the Nyanza Province of southwest Kenya. The community sits near the equator at an elevation of 1,332 meters above sea level on undulating terrain. The prevailing climate is sub-tropical savannah characterized by temperatures ranging between 55-85 degrees fahrenheit and rainfall of 200 inches/year. The area community can be seen at:

<http://maps.google.com/maps?f=q&hl=en&geocode=&q=kisumu+kenya&layer=c&ie=UTF8&ll=0.047121,34.604745&spn=0.014699,0.018711&t=h&z=16>

Marera has an overall population of about 15,000 (permanent and transitional) people, including approximately 2,500 family households. Also located within this community are Huma High School (800 students), Huma Primary School (450 students), Marera Primary School (300 students), and Arude Primary School (350 students), and numerous other community structures such as the community center, churches, and a health center. The health center serves an average of 200 out-patients a day.

Although located approximately 10-12km north of Lake Victoria, there are no close streams, dams, pans, or rivers within the project area. Existing water points include two small, "protected" springs (Soko Kayona to the far east and Marango to the south), two shallow wells equipped with hand-pumps, and a number of private, hand-dug, unprotected, shallow wells. The springs are located over 3 km from the community center and can only serve a small percentage of the population. Likewise, the hand-pumps have limited draw capacity and long-lines of people form each day to draw water from them. As a result, a significant number of the population within the Marera sub-location draw their water from traditional ponds found in the wet section in the southern part of the project area and are thus exposed to contaminated water.



3. What community needs were identified?

The need for clean drinking water. The community suffers the typical health and social effects of not having a sufficient local source of clean drinking water. Women and (primarily female) children must walk long distances each day to fetch water for their families from questionable sources. Muddy springs, small ponds, and other sources of unclean water result in high incidences of stomach ailments and diarrhea and contribute to an increased mortality rate, especially among children under the age of five years. Women lose the ability to contribute to the economic well-being of their families children lose their opportunity to attend school on a regular basis. Families are unable to practice proper hygiene due to the limited amounts of water that can be collected and carried back to the households.

The need for safe-sex education. Unsafe sexual practices among the youth in this area endanger their health and social well-being. A 2002 study by Missie L. Oindo concluded that “there was a wide disparity between contraceptive knowledge and practice” among the youth of Kisumu (Afr Health Sci. 2002 April; 2(1): 33–39). This has resulted in both a high rate of sexually transmitted diseases (including HIV/Aids) and unwanted pregnancies.

The need for support of orphans. As in many other parts of Kenya and sub-Saharan Africa, a high level of HIV/Aids-related deaths has left many orphans that are raised in child-headed households or by aging, over-burdened grandparents. These children are at risk of additional health problems related to malnutrition, are often unable to attend school because of a lack of funding for fees and uniforms, and are physically vulnerable due to the lack of protective guardians.

The need for community reconciliation. Following the election crisis in early 2008, communities were torn by civil strife and ethnic division. Educational and support programs to bring the various factions back to normal relationships with one another will be critical to heal the emotional wounds resulting from the upheaval. Central to many disputes is the historical ownership of land, sometimes unfairly redistributed by colonial powers and therefore subject to multiple seemingly legitimate claims of ownership.

4. What is already being done to respond to the need(s)?

There are a number of cooperative projects that have been undertaken in the greater Kisumu area to address issues like those described above. Sister City projects such as the one between Roanoke, Virginia and Kisumu have helped expand and support the Kisumu Rotary Vocational Center, designed to teach boys a trade and keep them off the streets. School twinning agreements, such as the one between the Dago Kokore Primary School in Kisumu and the Ruarden Primary School in Forest of Dean, Gloucestershire, have provided books, cd's, and even a water tank for the school.

Projects to address different community needs in and around Kisumu have also been conducted by both the Rotary Club of Kisumu and the Rotoract Club of Kisumu. A book drive in 2006/2007 resulted in almost 5,000 books being collected and distributed to schools. Monthly sugar supplies are provided to schools that cater to high orphan and street children populations. The majority of these projects affect small, distinct populations within the greater Kisumu area and surrounding communities.

5. What resources are available locally to help meet the needs(s)?

The Marera Community Self-Help Project (MCSHP) – a registered 501 (C) (3) Non- Profit Organization registered in California, U.S.A. U.S Tax ID # 20-8099738 has taken the lead in addressing some of the major needs identified above that do not require extensive funding. Focusing on “promoting a strong caregiver-child relationship to ensure vulnerable children are nurtured and protected in a family environment” (<http://www.mareracshp.org/>), the MCSHP is actively working to address the orphan, youth education, and community reconciliation needs.

Numerous Health Care Providers are available to the Marera community, including the Maseno Mission Hospital, Chulaimbo Provincial Rural Health Training Center, Siriba Dispensary, and the Nyarea Health Center. They are able to provide both direct medical support and health education programs.

NGOs such as the Kenya Voluntary Development Association provides support to many Kenyan communities, including Kisumu and Marera. These volunteers work with specific programs and projects such as the Hope Orphanage Project in Marera and the Otiende Thim Self-Help Group in the Kisumu District.

Both the Rotary Club of Kisumu and the Roteract Club of Kisumu are engaged with projects in support of their town and surrounding communities such as Marera.

6. What opportunities for projects did you identify?

a. Implement a large-scale water project to serve the long-term clean water needs of the entire community.

b. Provide treatment and support for HIV/Aids infected individuals and develop a “safe-sex” education campaign for the youth.

c. Provide furniture, supplies, uniforms, and school fees for orphans in the communities and develop microcredit enterprises for institutions or families supporting orphans.

7. Which project did you select? Why did you select this project?

The water project was selected as the most viable initial project and one that we believe will have the greatest impact and return-on-investment. While the safe-sex and orphan-support projects would be great humanitarian projects that would provide comfort and relief to a number of individuals in the community, the clean-water project will provide comfort and relief to a vast majority of the community and thus should be undertaken first.

With contaminated water being one of the primary causes of illnesses in impoverished communities, as well as a leading cause of death among children under the age of five, this project will alleviate countless illnesses, diseases, and deaths, and improve the overall quality of life and vitality of the people tremendously. It will also free up the women to provide more time for child-raising and economic development. Young girls will also be freed up to attend school rather than making the daily trek to and from the distant water sources. Once this basic foundational human need is addressed, other projects such as economic empowerment through microcredit arrangements, education, and standards of living can be undertaken. Without clean water, the individuals are unlikely to be healthy enough or motivated enough to successfully undertake economic improvement projects.

8. What challenges to implementation of this project did you identify? How does the project plan take these challenges into account?

The first challenge with a water project is always the location and availability of a water table sufficient to meet the needs of the community. Prior to agreeing to undertake the project, a hydro geological survey was completed. The Ministry of Water and Irrigation conducted the survey in November 2007 and concluded “the analyzed Geophysical data revealed the possible existence of aquifer within weathered fractured zone” and identified the chances of hitting water shallower than 180M as “good”.

A second challenge was to ensure the availability of an appropriate supply of clean water to the community through this project. Since a limited supply of untreated water is available via a natural

spring in proximity to the project location, providing a local source of clean drinking water would be important to prevent some portions of the population from continuing to draw from this untreated source. Phase 2 of this project will be to channel and treat the spring water in conjunction with the treating of the borehole water in a large 100 cubic meter sump tank.

A third challenge will be to distribute this clean water to the surrounding communities such as the schools to provide localized clean water to large concentrations of individuals. This distribution system will be taken on as a separate Matching Grant project once the primary project is in place and operational. The clubs felt it more important to address the more immediate need of providing clean drinking water to the community centrally than wait for the building of a wide scale distribution system.

A fourth challenge to implementation of this project was community “ownership” and “buy-in” to the project. This was addressed through the partnership with the Marera Community Self-Help project, designed to include community members in the planning, development, and operation of the project. By using community members who will benefit from the project during the implementation phase for labor, they develop a sense of ownership and buy-in. Community members have already demonstrated the willingness to provide sweat equity on beneficial projects, such as the building of churches and community centers. Water for the cement for these projects was obtained by women transporting thousands of buckets of water between the local water sources and the construction projects.



A fifth challenge was the power needs of a large-scale borehole that must draw large quantities of water from a great depth and pump it into distribution tanks. While electricity is available at the proposed site, a special transformer to transform three-phase power will need to be installed to handle the needs of the pump.

A sixth challenge will be the ongoing support and maintenance of a water system of this magnitude. Unlike smaller hand-operated pumps that require little oversight or maintenance once installed, an electric pump with a water tank and chlorination system is not only more complicated, but costs money to operate. In order to address this financial need, a small water levy of around 2 Kenyan Shillings (2-3 U.S. cents) per 20 liters will be assessed. This money will be used to pay for the ongoing costs and maintenance of the water system to make it self-sustaining and viable. The levy will be administered by the Marera Community Self-Help Project under the oversight of the Rotary Club of Kisumu.

9. How will the benefiting community be involved in the project?

Community members will be asked to participate in sweat equity, as they have done for many other projects. Site preparation, trench-digging, pipe-laying, supply transportation, water-hauling, and

concrete preparation can all be performed by community members. They will also be involved in the project financially through the water levy assessment and can earn water “credits” through participation in the project implementation and ongoing maintenance of the system.

10. Describe the viability of the project and how it will be maintained by the benefiting community after grant funds have been expended.

The prospects for both successful completion of the water project and ongoing sustainability are very high. A strong, committed partnership has formed between a number of entities within the host and sponsoring communities of Kisumu, Kenya and Southern California, USA, including Rotary clubs and lead individuals in both the host and the sponsoring countries. Led by the respective Rotary Clubs, these organizations have formed a long-term bond committed to improving the lives of the Marera Community. In addition, the Hon. Raila Odinga, Prime Minister of Kenya, has been directly involved in local Harambee (fundraising) efforts for the Marera Community Self-Help Project.

The primary Rotary Clubs are Upland, California (District 5300) and Kisumu, Kenya (District 9200). This project is intended to be the first of many the clubs will partner on to address health, hunger, and humanity needs in this community. Joining the Rotary Club of Upland in this project are numerous other District 5300 clubs: Pomona, Claremont, Las Vegas, Alhambra, and Chino. Kenyan expatriates in District 5300 provide the international sponsoring clubs with local knowledge and expertise. They will be a catalyst for future project identification as they travel back and forth between the two communities. Through both local Rotarian oversight by members of the Rotary Club of Kisumu and these visits, the partnering Rotary Clubs will remain involved to ensure the project is viable well into the future.

For ongoing physical support, local community members will be trained to maintain and operate the pump and supply system. For ongoing financial support, a small water levy of around 2 Kenyan Shillings (2-3 U.S. cents) per 20 liters will be assessed. This money will be used to pay for the ongoing costs and maintenance of the water system to make it self-sustaining and viable once grant funds have been expended.