

## About DWELE

Development Work in Education, Livelihoods and Environment (DWELE) is a NGO/Not-For-Profit 501(C)3/International, registered by the NGOs Council of Kenya since January 2003. Our current Headquarters is in Kisumu City in Western Kenya Region.

**DWELE** exists to serve disadvantaged population regardless of gender, race, religion and culture, through Education, Gender, Health and HIV&AIDS, Environment, Governance and Socio-economic Empowerment Programs;

**We** have special focus on Elderly concerns; Vulnerable Children; Women and Girls and their communities. We mainstream Gender, Economic Empowerment and HIV&AIDS as integral part of all our interventions'

**We** foster Partnerships for expanded-reach in development; resource mobilization; synergy and creation of sustainable linkages *that Give Opportunities to the Disadvantaged persons to ensure Dignity for All People.*

## Vision/Mission/Objectives

**Vision:** We envisage a World where society at large works with and enables the poor, the disadvantaged and the vulnerable persons to improve their dignity and quality of lives.

**Mission:** Creating innovative livelihoods solutions that add values and dignity to the lives of the poor, disadvantaged and vulnerable persons of all ages, gender, races and faith.

**Objectives:** Promote, encourage and facilitate holistic development that enables the poor and the disadvantaged to effect meaningful changes in their lives thereby enhancing positive change in the quality of life of communities in Kenya.

## Where We Work

DWELE works in Kenya with current programs locations in Western Kenya Region in Nyanza and Western Provinces - Siaya, Kisumu and Kakamega Counties.

## What We Do

### Our Current Programs

#### 1. Education+Pus Programme for Vulnerable Children affected by Poverty and HIV&AIDS

This is a three-year program that has initiated the implementation of Inception Phase with funds from Global Donors through GlobalGiving.

**Program Goal:** Contribute to the generation of Psychosocial Health Outcome and Education among orphans and vulnerable children (OVC), especially girls. The project intervenes in education and



**Rescued Under-5 years old Salina. DWELE placed Selina with a Rescue Family and provides for her Early Childhood Development education plus psychosocial, care and support.**

psychosocial care and support as a means to breaking generational poverty cycle and hence ensuring long-term socio-economic empowerment among communities members in Western Kenya.

**Target:** The program targets **450** vulnerable children, especially girls. These are children affected by effects of poverty; impacts of HIV&AIDS and culture and gender disparities that are the norms in the project target locations.

DWELE has identified 114 vulnerable children: 62 girls and 52 boys, who are very needy in terms of care, support in psychosocial, and in the areas of basic needs like education, health (including HIV&AIDS), nutrition and secured shelter – especially girls some of who are more vulnerable to sexual abuse. However, Education+Plus programmes is currently working with three OVC Support Groups composed of **37 children** (23 girls and 14 boys): **Two** boys at University/tertiary levels; **one** girls at pre-college; **four** girls in Secondary schools and the rest are in primary and early childhood development.

#### 2. Gender and Women Empowerment Project

This project is on-gong and is based on DWELE facilitated socio-economic capacity building of women participants through training on pro-poor Group Savings and Loaning (GS&L) Methodology that increases access to financial resources at grassroots and promotion of small businesses at individual household levels.

The project mitigates impacts of poverty and HIV&AIDS. It applies Household Livelihood Security model.



#### 3. Elderly Support Programme

The current Phase, the Elderly Support and Resource Centre Project evolved from the collaborative work DWELE did with Ijinja Catholic Church in supporting elderly men and women to address challenges of socialization, and basic needs. They are OVC Carers.

It now aims to achieve social and economic benefits.

## Accomplished Projects

### 1. Mobile HIV Counseling and Testing (HTC) - NACC/TOWA funded Project

**Undertaking HTC with total respect to Patient Confidentiality**



The project successfully worked with 1,035 (638 men, 397 women) *Boda Boda* Transport Operators as Most at Risk Persons (MARPS) to HIV infections the poor target communities in

Bondo District, Siaya County.

**Achievements:** The project achieved 104% of its target, 100 persons in four months.

### 2. Orphans and Vulnerable Children Care and Support Project

Lessons Leant from this project created the basis for Education+Plus Program.

## Community Participation

In-house participatory capacity building forms integral part of DWELE's work in all programme interventions.

We train our program participants, coach and mentor them in their groups, as direct partners. This



ensuring meaningful community participation in identifying, implementing, reviews/monitoring and evaluating our interventions through participatory processes that enable them to nurture project-ownership and hence the sustainability

## Partnership and Linkages

DWELE's partners include relevant Kenya Government Ministries of Education, Gender, Culture and Social Development, Provincial Administration and Justice and Constitutional Affairs – in complicity with our Right-based Approaches. Others are NGOs/ and CSOs for synergy, referrals and sustainable linkages to HIV&AIDS care and support services.

DWELE continuous to look for Development Partners (individual donors, Private Sector, Foundations and Donor Organizations/ Agencies) for Organizational Development and effective programming on areas of Children and Elderly that mainstream gender and socio-economic mitigation on poverty and HIV&AIDS.

## Donors and Resources

1. **Professional Volunteerism:** This is the greatest Resource Donation from DWELE members and friends that keeps our programmes growing.
2. **Members' and Directors' Donations.** Cash and in-kind.
3. **GlobalGiving Global Donors:** USD 3,459 (from two attempted Global Challenges in 2012) for Education+Plus Programme for Vulnerable Child.
4. **NACC/TOWA:** USD 8,235 for HIV&AIDS (2011).

## For More Information, Contact:

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**DEVELOPMENT WORK IN  
EDUCATION,  
LIVELIHOODS AND  
ENVIRONMENT**

***Giving Opportunities to the Disadvantaged!***



# ELDERLY SUPPORT AND RESOURCE CENTRE PROPOSAL

PRESENTED THROUGH

**GLOBALGIVING FOUNDATION CHALLENGE**

**1023 15TH STREET, NW, 12TH FLOOR | WASHINGTON, DC 20005**

**PROJECT PERIOD:** INCEPTION PHASE OF ONE YEAR

**LOCATIONS OF THE PROJECT:** WESTERN REGION, KENYA

**TOTAL REQUIRED BUDGET:** USD 50,000 (FIFTY THOUSAND AND US DOLLARS ONLY)

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**ORGANIZATIONAL INFORMATION/DETAILS:**

**Name and Address of the Organization Submitting the Proposal:**

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P.O. Box 2300-40100, **Kisumu - Kenya**  
**Tel:** +254 (020) 8066898/0733-474792/0720-806519,  
**E-mail:** [admin@dwele.org](mailto:admin@dwele.org)

**Physical HQ Location:** Lutheran Community Centre, **Opposite** Nakumatt Mega City, Kisumu City,  
Along Kisumu – Nairobi Road,

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## EXECUTIVE SUMMARY

The contributions that elderly men and women make as Caregivers, Mediators, Mentors and Breadwinners in the Western Kenya communities are very important in reducing poverty, hunger and other basic livelihood insecurity of their families and households – in a region that bears the highest impacts of poverty and HIV&AIDS in Kenya. However social status of the 1.5 million elderly persons, that represents 4% of Kenya's population of 38.6 million persons, rarely reflects these fundamental contributions they make in the society. Many of them remain the loneliest, the poorest and the most neglected people in the Kenyan communities.

DWELE's practical experience in working with Orphans and Vulnerable Children (OVC) in the Education+Plus Program indicate that more than 50% of the OVC Caregivers of the 450 vulnerable children in the project are elderly grandparents – particularly grandmothers. These parenting elderly caregivers are also not able to turn to family and others for support. Traditional social support structures have eroded and therefore there is no longer social safety-net for the elderly persons who are also forced into additional tasks of taking care of grandchildren as the burden of HIV&AIDS orphans and other vulnerable children increases. In most cases the contributions of elderly persons are no longer recognize. They are only seen as additional burden to already limited and overstretched resources the respective family/household has.

Aging processes and psycho-social neglect lead the elderly persons to reduced quality of health and less physical capacity, which in turn results to less access to gainful involvement in income generating and/or social activities. Many elderly people (including retired professionals) feel they have no place in the society any more and yet they do not have a place to meet with fellow elderly persons with similar experiences or backgrounds to socialize. The elderly are useful human resources for the society and therefore their diverse experiences and lessons learned in life and professional skills cannot be overlooked but should be utilized to fullest extent.

Through the Elderly Support and Resource Centre Project, DWELE will strategically utilize useful and diverse elderly persons' experiences, lessons learned in life and professional skills to reinstate their



*Granny Rosa of Bar Olengo Village in Siaya County is sitting outside her house. She lives with her grown grandson who does casual jobs for income. Her adult children live away from her. Granny Rosa represents the older old Vulnerable Children's Caregivers who are themselves very needy for Social protection – Some are/were professionals!*

traditional roles when ***“They were teachers in families and communities – they shared stories about ways to live and life-skills thereby providing leadership, guidance and advice”***. In return, they were assured of total support from the family and community. Even though family and community remain most effective and important institutions in caring for older persons, their effectiveness is under pressure. Elderly Support and Resource Centre will provide elderly with their own Social and Economic institution, which they will manage and utilize as avenue for facilitating sustainable peer support, learning, socialization and economic oriented old age friendly commercialized activities at the Centre and for individual project participants.

DWELE applies participatory approaches that help to empower elderly people to take responsibilities and claim their rights, challenge discrimination, socialize and establish linkages with care, support and development services that mitigate the impacts of HIV&AIDS and poverty. And as a result, they can

lead dignified, secure, active and healthy lives.

Through The Elderly Support and Resource Centre Project, the organization will enhance socialization and economic empowerment of elderly men and women in their community and **beyond** through creation of **networks** of elderly persons and sustainable **linkages** for the elderly persons individually and/or in groups to other friendly old persons and Donors/ Foundations with similar interests for complementary partnerships. The project will also facilitate participatory processes that will utilize the elderly persons' professional and life long experiential resourcefulness for capacity building of other elderly persons and the older orphans and vulnerable children (OVC) at the Elderly Support and Resource Centre. Together with the targeted elderly persons/project participants, DWELE will facilitate outreach activities that include home visits to elderly persons that are weak and/or sickly that cannot reach the Elderly Support and Resource Centre. It will also facilitate joint complementary Partners' Open Day Forums, that integrate healthcare, recreational and development activities, in collaboration with relevant Kenya Government Ministries and Civil Society Organizations as development partners.

The Elderly Support and Resource Centre Project will provide more than Double-benefits in that it achieves **socialization** of the targeted 200 elderly men and women and other elderly persons in their communities while facilitating the target elderly persons' in **capacity building** for sustainable social-economic empowerment. DWELE will facilitate **Commercialized Activities** for Elderly Persons in accordance to their existing skills and physical energy. The commercialized activities are Handicrafts; Daycare Services for small children in the locality as the young mothers go to the farms/work and Market-oriented cultivation of High Value Vegetables and Herbs for income generation and nutrition. Income from demonstrations plots will sustain practical learning and from individual plots for respective elderly household. The DWELE also will train energetic orphans and vulnerable, who are beneficiaries of incomes of individual elderly caregivers, to complement low energy capacities of the elderly. As part of mitigation on effects of HIV&AIDS and poverty, the project will also train on and promote pro-poor Group Saving and Loaning Methodology so that they access little loans from own savings.

The Centre will also serve as **Rescue Centre for abused vulnerable children** like street and **victims/survivors of Gender-based Violence**, which are common problems in the project target location in Western Kenya.

**Budget for Pilot Phase:** Required Budget for 12-Months Pilot Phase is **USD 50,000** (fifty thousand US Dollars). The project also requires Non-cash Resources for old age and poverty vulnerable elderly men and women in Western Kenya.

## 1. PROBLEM STATEMENT AND RATIONALE/JUSTIFICATION

While the trend of ageing societies is a cause for celebration, it also presents many challenges as it requires completely new approaches to health care, socio-economic security, living arrangements and intergenerational relations within the family household and in the community. The elderly in Kenya grandparents, particularly grandmothers, care for 50% of all orphans and vulnerable children, while some of them are so old, very poor and emotionally so vulnerable that they need care and support for themselves too.



Kenyan population of persons aged 60 years and above was about 1.5 million, representing 4% of Kenya's total population of 38.6 million people, and are expected to reach over 2 million by the year 2020 (*Kenya National Population and Housing Census Report 2009*). As Cultural and social safety-nets continue to break as a result of deteriorating economic conditions and impacts of HIV/AIDS pandemic, many of the elderly persons are left behind to fend for themselves without traditional family support and financial resources – this is particularly common in the project target locations in Nyanza and Western Provinces of Kenya (*ref. marked location on the Map above*). It is evident that elderly women above 60 years of age are the majority in rural areas and are the most disadvantaged as they have little or no control over economic resources and are disempowered by traditional practices. On the other hand, in urban areas, many older persons are crowded in slum areas/informal settlements – the project location include Manyatta slums in Kisumu City. Urban development policies and programmes rarely target the interests and needs of these elderly persons. As population of the old men and women continues to expand, the number of their dependants continues to rise too.

The average poverty rates in the target location in 44% but differs by County: Kakamega 52%; Kisumu: 45% and Siaya 36%. However, Poverty Rates in household with elderly persons are up to 29% higher. The target location also has highest impacts of HIV&AIDS pandemic in Kenya with HIV prevalence rate of 24% against National HIV prevalence rate of 6.4% (*Kenya Demographic Health Survey 2007*).

Many elderly persons in Kenya lack where and means for and, physical and emotional capacities to socialization and are therefore lonely people. They also face challenges of lack of adequate food; lack of income and poverty in general (after spending much of their lives working); poor access to healthcare and inadequate shelter as the old houses they have lived the whole of their lives fall apart due to ware and tear after many years. The personal challenges of the elderly person in Western Kenya are further complicated by the compelling roles of parenting of HIV&AIDS orphans and other vulnerable children.

## 2. PROJECT SOCIAL AND ECONOMIC IMPACTS

The Elderly Support and Resource Centre Project will provide more than Double-profits that achieves **socialization** of targeted elderly men and women and other elderly persons in their communities while their building capacities on commercialized activity interventions for sustainable social-economic empowerment and social fulfillment for retired professionals from using their skills in peer training and learning.

DWELE will train elderly on and promotes pro-poor Group Saving and Loaning (GS&L) Methodology to increase access to financial resources from elderly groups' own savings. The project will also build capacities on other friendly **Commercialized Activities** for Elderly Persons in accordance with their own existing skills - among the project participants. For example Handicrafts; Daycare Services for small children in the locality as the young mothers go to the farms/work and growing market and nutrition oriented herbs and high value easy to grow vegetables at the Elderly Support and Resource Centre and individually at homes where the orphans they care for will also be trained (as part of life-skills learning) to assist the elderly.



The incomes the elderly earn from commercialized-activities at individual levels will play useful purpose in paying for Education+Plus care and support of orphans and vulnerable children that depend on them for parenting. Education will change the lives of the dependants and hence contribute to **breaking vicious cycle of poverty** in the younger generation.

### 3. PROJECT GOAL AND OBJECTIVES

#### 4.1 *Project Target*

The Elderly Support and Resource Centre Project targets 200 elderly men and women aged 55 and above years in three years. The 12-Months Pilot Phase targets 50 elderly. The project will consider younger elderly women of ages 50 years and above who are pressed down with effects of poverty and are Caregivers of more than two HIV&AIDS orphans and other vulnerable children will be enrolled to participate in this project. These younger elderly persons are necessary for providing inter-generational synergy in socio-economic empowerment activities that are important for sustainability the Elderly Support and Resource Centre Project. Inter-generational membership will complement the low physical capacities of the targeted older elderly and facilitate outreach support to weak and sickly elderly persons in their locality.

**DWELE defines** the Elderly population based on 55 year old and above based on the formal retirement age in Kenya and which covers the WHO age of 60 years plus. Inclusion of vulnerable younger elderly grandparents and caregivers aged 50 years is to provide intergenerational synergy within the elderly membership, for effective implementation (as stated above) of the project and for complementary support to the dependants Orphans and Vulnerable Children.

#### 4.2 *Goal and Objectives*

##### ***Goal***

Protect the Elderly men and women in Kenya from risks and vulnerabilities of old age poverty and psychosocial ill-health to enhance their dignified, healthy and active lives.

##### ***Specific Objectives***

- Provide Social and Resource Space in which the elderly persons can come to socialize and meet others of the same age group. And, facilitate old-age friendly activities for the elderly persons with specific purpose of socialization.
- Build and strengthen socio-economic capacity of 200 elderly men and women and their communities in Nyanza and Western Provinces of Kenya to reduce old age vulnerability, poverty and HIV&AIDS orphan-care burden by the end of three years. 50 elderly persons by the end of One-year Pilot Phase.
- Reach out to and assist those elderly in the target communities who are not able to come to the Elderly Support and Resource Centre due to advance ages and health challenges.
- Seek North-South linkages and support so as to provide Social Protection for the needy elderly.



## **4. PROJECT STRATEGIES AND ACTIVITIES**

The Elderly Support Resource Centre (ESRC) Project employs integrated participatory strategies that will ensure full participation of the elderly in decision making and management in the Elderly Support and Resource Centre Project as well as realization of its benefits.

### **5.1 *Establishing the Elderly Support and Resource Centre***

DWELE will establish the Elderly Support Resource Centre (ESRC) Project at an easily to access location for elderly and in close reach to places where other basic services so that the elderly can easily drop-in alongside doing other things they may want to do from time to time.

DWELE will start-up the project and implement the project in the initial phases, while building capacities and social capital (groups) structures of the participating elderly to take over the management and operations of the centre for their own sustainable social and economic benefits. This initial management strategy is due to natural aging process challenges of the elderly and low capacity that may not allow a quick start and learning at the same time. There Centre will be operated as Recreational and Resource place for the elderly members while operating other self-sustaining business services that will pay for centre staff costs.

The Elderly Support and Resource Centre will mainly serve the elderly persons in three but interrelated ways while serving as a Rescue Centre for vulnerable children and victims of Gender-based Violence (GBV):

- Socialization and professional fulfillment;
- Resource Centre for skills learning and recreational activities;
- Income generation centre for the elderly members and
- Rescue/Drop-in Centre for abused vulnerable children, including those from streets, and Gender-based Violence victims.

DWELE will gradually handed-over management of Elderly Support and Resource Centre project to elderly project participants once the benefits are visible. The management take-over will employ democratic electoral process. DWELE and strategic partners (interested individuals and organizations as donors and/or volunteers) will continue to facilitate outreach activities for social protection, care and support of older elderly persons at the community levels.

### **5.2 *Social and Economic Empowerment of the Elderly***

#### **5.2.1 Socialization**

- The Centre will identify the elderly in their respective communities that are too old, weak or ill to participate in the Centre activities and enlist them for Social Protection and provide them with any available basic resources. DWELE in collaboration with elderly participants in the project will develop simple ways of tracking these elderly in the community to ensure someone is giving them care and support.

Working with well-wishers (with interest to work in partnership with DWELE in supporting the elderly), the project will look for/collect basic necessities such as clothing, blankets, soap/cleaning materials and foods, which the members will distribute to these weaker elderly men and women during home visits. Synergy from the inter-generational composition of the elderly membership will be very useful in this community outreach service.

- Organizing social activities for the enjoyment of the elderly and their communities, which are not necessarily geared towards income generation but voluntarily such that professional/ skilled elderly get to do something fulfilling during the day.

While the professional elderly member of the Centre does this for social fulfillment, she/he transfers skills to others and will contribute to their socio-economic status. For example, the Centre will have traditional dancing lessons, arts and crafts training, sports and other life-skills training to its members and older orphans and vulnerable children, utilizing professional and learned skills that elderly have,

- **Rescue/Drop-in Centre for Abused vulnerable children and Gender-based Violence victims:** The Elderly Support and Resource Centre serve as Rescue/Drop-in Centre for abused vulnerable children and victims or survivors of Gender-based Violence for emergency psychosocial support and health and legal mitigation through complementary partnership linkages.

### 5.2.2 Income Generation Centre: Commercialized Activities for Elderly

The Elderly Support and Resource Centre Project will develop business plans for each Income generating activity and the existing skills among the elderly members.

- **Agribusiness Demonstration and Learning Activities:** The Centre will serve as a demonstration and leaning site where DWELE will facilitate training on simple easy to manage **Multi-Storey Kitchen Gardening** to the elderly and their older OVC dependants. The Centre will sell vegetables and herbs on demonstration plots and make some income to sustain its operations.

The elderly will grow vegetables and herbs such as parsley, cilantro, basil and other local vegetables, on the Multi-storey kitchen gardens and small plots, for cooking and selling in local markets, schools and other facilities. They will be taught food preservation techniques so that of excess herbs are dried for an upper market. This will earn elderly household income.

- **Creating a Daycare Centre for children below school-age:** Applying the experience of childcare, in parenting and/or retired early childhood development teachers, the elderly will establish Daycare Centre and manage as volunteers on small stipend while earning a little income for their Centre.

**NB:** For the Daycare the project needs non-cash/in-kind donations of Toys, Play Swings, Balls and other early childhood development equipments. This will ease the childcare demand on the energy of the elderly as well as facilitating proper child development.

- **A One-Room Television and VCR Theatre:** Many households at grassroots communities in the project location have no electricity and yet some members may want to watch TV programmes. The Centre will use TV and VCR, used for entertaining its elderly members, to sell TV and VCR watching services and charge small fees – especially news, football games and thematic life-skills videos. Elderly will manage this.
- **Small Restaurant Targeting the Elderly:** The small restaurant specialized on special foods for the elderly with considerations of their health challenges and “weak/no teeth.” It will also serve the general public but at higher prices. The restaurant will specialize in local dishes to promote product differentiation – the Centre will grow small amount of vegetable or raise livestock for the restaurant.

- **Community-based Technical/Capacity Building Structure:** The project will undertake Skills Audit of the elderly project participants and promote peer learning networks and linkages among participants and with others elderly groups/organizations that including South-to-North linkages. To strengthen project ownership and sustainability, DWELE will select and train potential elderly Community Resource Persons (CRPs) in various subject areas and facilitate them to train, coach and mentor their colleague and outsiders who will come to the centre to learn useful life-skills. The elderly will charge small fees from non-members in order to sustain the Centre operations.

The some of the elderly participating in this project are Caregivers in DWELE's Education+Plus Programme that supports orphans and vulnerable Kenyan children (especially girls) in Education, Psychosocial, care and support. The Centre is therefore a double benefit – for the elderly and the orphans and vulnerable children in the project locations.

### 5.3 *Implementation/Activity Plans*

- Undertaking Skills Audit of the elderly persons to identify existing skills among the participants.
- **Building Social Capital:** The project will facilitate formation of peer support and working groups among the participating 200 elderly in three years, starting with 50 elderly the first 12 months pilot phase. The project will also facilitate group formation of older dependant orphans and vulnerable children and utilize their strengths in complementing the elderly.
- **Providing Psychosocial Therapy, Care and Support:** Trauma and distress that some of the targeted elderly persons experienced due to neglect, isolation/loneliness, ill-health and other challenges of old age call for psychosocial health care and support.
- **Training the Elderly Persons on Group Savings and Loaning Methodology and Selection, Planning And Management of small income generating activities:** The project will build social and economic capacities of the direct target participants and their households and host communities through voluntary Group Savings & Loaning methodology, which is a pro-poor group-managed savings and loaning methodology that increases access to financial resources to the participating Caregivers and their host community members at the grassroots. This is an important strategy for sustaining and expanding the interventions of the proposed project beyond the proposed three years.
- **Creating networks and linkages and complementary Partnership Building:** For synergy in addressing the needs of the target elderly, the project will work in partnerships with Kenya Government Provincial Administration, Health and other relevant Civil Society Organizations. It will also seek to create linkages and networks with other elderly persons and South – North linkages with friendly donors, for sustainability.
- **Mainstreaming Gender and HIV&AIDS:** The project mainstreams gender with focus on introspective centre-based and community dialogues, debates and discussions to enhance social and gender empowerment of the elder women and men.

Detailed Implementation Plan (DIP) for the Pilot Phase is hereby attached: **Ref. Annex I**

## 5.4 Project Monitoring, Evaluation and Learning

DWELE has in-built Monitoring, Evaluation and Learning activities in the development of this proposed project. The planned M&E activities include:

- Project Baseline Survey. This will re-establish the Real Needs of the target elderly in the Western Kenya Region.
- Periodic Reviews, learning and documentation;
- Mid-term Evaluation and
- End-term Evaluation.

DWELE develop and implement Monitoring and Evaluation Plan for Elderly Support and Resource Centre project once the resources are available. The project will produce Periodic and Process Reports and share the same with relevant stakeholders.

## 5. RESULTS: OUTPUTS AND OUTCOMES

### 5.1 Outputs

- Project socially marketed to all stakeholders undertaken and potential elderly persons and their communities mobilized and sensitized on Elderly Support and Resource Centre Project concept, roles and responsibilities and expected benefits – socialization and socio-economic empowerment.



Mobilization and Sensitization meeting of Elderly persons and their Communities members in Siaya County in Kenya

- Procured land for and initiation of inception Elderly Support and Resource Centre project activities as demonstration and learning centre as well as elderly recreational venue.
- 50 Elderly selected and actively participating in the Pilot Phase of the project and are working closely with DWELE in providing outreach social care and support to the too old, weak and sickly elderly in the project communities.
- Identified the existing professional and learned skills among the Elderly project participants and strengthen the respective informal facilitation skills as will be applied to the

elderly centre in supporting.

- Elderly capacities built on: Leadership and governance; Market and nutrition oriented growing of herbs and high value vegetables using old age friendly Multi-storey kitchen gardens and Handicrafts and arts oriented productions.
- Created Complementary Partnership with relevant Kenya Government Ministries and the County Government structure; other NGOs, Faith-based organization and other development agencies to ensure optimum utilization of the project resources that support the elderly persons' referrals and sustainable linkages of direct project participants to HIV&AIDS care and support, social protection and other services within project target locations.



## 5.2 Outcomes

- The Elderly Support and Resource Centre established for and managed by the elderly and is having basic management and operational structures that support social and economic empowerment of Elderly men and women. And, the Centre utilizes participatory socialization, easy-to-manage Commercialized Activities for Elderly Persons to earn income for its sustainability and household income for individual elderly and dependant orphans and vulnerable children under their care and support – especially education that breaks poverty cycle.
- Social Capital Built/Peer Support and Working Groups of elderly are formed and the membership of the actively participating elderly men and women are directly managing the Elderly Support and Resource Centre sustainably.
- Sustainable socialization and development networks of the elderly persons are functional and benefiting the active elderly and other old persons in the community who are too weak to reach the Elderly Support and Resource Centre.
- Created of **Networks** of elderly persons' groups and sustainable **Linkages** with other elderly persons and institutions locally and internationally (like individuals, families, Churches and other global partner organizations like foundations and other donors) for socialization, cross-learning and poverty reduction.
- The Elderly Support and Resource Centre serving as Abused-child Rescue/Drop in Centre for vulnerable children as well as rescue centre to victims of Gender-based Violence.

## 6. SUSTAINABILITY

- **Engaging active community participation:** Involving elderly men and women and other community structure from the project inception creates **community ownership** necessary for sustainability.
- The Elderly Support and Resource Centre in itself is a **socio-economic strategic structure:** The Centre creates a venue for recreation of the elderly; provide professional self-fulfillment for the retired, lonely and idle elderly professionals and earn income from its easy-to-manage commercialized activities. For example sale high value vegetables from demonstration/learning plots, arts and crafts training services, Daycare for young children, and local Television Room services in a community where houses lack TV and electricity.
- **Group Savings & Loaning (GSL) Methodology for Socio-Economic Empowerment:** Building the capacities of direct target participants and their households and host communities through voluntary Group Savings & Loaning (GSL) Methodology is an important strategy for sustaining and expanding the interventions of the proposed project beyond the proposed project period. The pro-poor group-managed GSL methodology increases access to financial resources to the participating elderly, who are mainly Caregivers, and their communities at grassroots. Besides stimulating economic/income generation for care of the vulnerable children, GSL creates assets and wealth.
- **Established Community-based Technical/Capacity Building Structure from among the skilled-Elderly Persons:** To strengthen project expanded reach to non-direct participants and sustainability through cost-sharing of capacity building costs that will form part of exit strategy of the proposed project,

- **Resource Mobilization and Complementary Partnership with Other Stakeholders:** The DWELE is striving to look for complementary partnership with individual/family/Churches/Foundations and other donor organizations with interest in working with Elderly men and women so that together we can partner with the elderly participants for long-term promotion of socialization and development of this project – the Elderly Support and Resource Centre and Outreach to the weak and sickly elderly in the community.

**Synergy with DWELE's OVC Education+Plus Programmes:** This will also supports, by extension, DWELE's Education+Plus Programme that provides Education, Psychosocial care and support to 450 orphans and vulnerable children (OVC) of which elderly grandparents are caregivers to more than 50%. Education intervention give life-changing opportunities to the poverty and HIV&AIDS affected vulnerable children and hence breaking poverty cycle through improved livelihood security in the future generation.

- Created of **networks** of elderly institutions and sustainable South – North **linkages** for the Kenyan Elderly persons and enhanced wider participation in socialization, economic and management capacities will also contribute to sustainability of development and social programmes.

## 7. BUDGET

### 7.1 *Project Budget for Pilot Phase and Budget Notes*

The total budget is **USD 50,000** (fifty thousand US Dollars only) for 12 months. Exchange Rate used is KES 82:1USD to allow for some levels of fluctuations as the KES may strengthen in the market.

**Non-Cash/In-kind Resources:** DWELE is also requesting for Non-Cash donations such as clothes (jacket, sweaters, trousers, dresses and any other basic wears necessary for the elderly men and women), bedding, bed-nets shoes and food items to support the project's home visit outreach supplies to elderly too weak and too sickly to come to the Centre.

### 7.2 *Budget Notes:*

#### **Programme Cost areas**

- 1) **Project Milestone:** The purchase of land for establishing the Elderly Support and Resource Centre and establishing basic operation structure that will support the inception phase of the Centre. This is a major cost line and it is the milestone for this project to achieve its goal and objectives.
- 2) Community mobilization; stakeholder-mapping and project orientation will be key activities to ensure strong project entry and ownership that will support sustainable exit.
- 3) Project Baseline Study/Investigation that will inform and facilitate selection of elderly participants and formation of elderly people's (groups) as social capital for the operation of this project in the target locations. It will also include Professional and Learned Skills Audit among the potential elderly persons.
- 4) The initial activities costs at the Centre will be basic demonstration and learning structures and materials

## **Support Program Costs (SPC)**

Support Program Costs (SPC) will be **15% of the Direct** Project Costs, which is USD 7,500 of the total Pilot Phase and will be used to pay for shared office space/rent, Internet Connectivity, Communication, administrative staff, and field allowances within the organizational policy framework and other contingencies and will be accounted for accordingly. It will also be utilized for DWELE's Institutional Development like setting financial and monitoring systems, developing policies necessary for effectiveness organization.

## **Staff Salaries and Allowances**

- 1) To ensure effective its development, participatory learning, strategic management, coordination and reporting the DWELE Managing Director/CEO will provide direct professional services to the Elderly Support and Resource Centre Project. This direct involvement will reduce from after the end of the 12-month Pilot Phase as the project interventions become stronger and the Elderly participants take up more responsibilities.
  - The project will pay 30% of the MD remunerations, which will be charged from the Support Programme Cost (SPC).
- 2) The project will hire professional/technical services on short-term Task-based Consultancy Services and utilize the services of the skilled/professional target elderly as volunteer facilitators on stipend.
  - Professional and technical services costs are direct Programme costs and will be charged on relevant component Budget Line.

## 8. ANNEX

### Annex I: Project Activity/Implementation Plan

	Activities	Months of the Year in Quarters											
		1			2			3			4		
1.	<b>Inception/Crosscutting Startup activities</b>												
	Resource Mobilization and procurement of Land for establishing the Elderly Support and Resource Centre Project:												
	<ul style="list-style-type: none"> <li>GlobalGiving Challenge and Online Fundraising</li> <li>Share the Project Concept with potential individuals, organizations/institutional donors to partner with DWELE in the implementation of this project.</li> </ul>												
	<b>Mapping Stakeholders and Partnership building and/or strengthening:</b>												
	<ul style="list-style-type: none"> <li>Government Ministries, Complementary partner organizations and community leaders.</li> <li><b>Social Marketing</b> of the project and Stakeholders' Orientation and Joint Action Planning workshop: Initiating community ownership.</li> <li><b>Community Mobilization</b> and sensitizations and. Joint stakeholders' orientation.</li> </ul>												
2.	<b>Monitoring and Evaluation and Learning:</b>												
	<ul style="list-style-type: none"> <li><b>Baseline Study:</b> Investigating the Real Need of the Elderly in the target project locations and setting the project Baseline status.</li> </ul>												
	<b>In-built participatory M&amp;E Reviews:</b>												
	<ul style="list-style-type: none"> <li>Quarterly; Biannual and Annually Reviews and Learning documentation and meetings.</li> <li>Reports Writing: Quarterly to GlobalGiving and other stakeholders.</li> </ul>												
3.	<b>Identification and Selection of the 50 Pilot participants</b>												
	<ul style="list-style-type: none"> <li>Develop criteria for participatory need-based selection and phase-selection of 50 Elderly men and women for the Pilot Phase.</li> </ul>												
4.	<b>Socialization activities</b>												
	<b>Social Capital Building:</b> Facilitating the formation of Elderly support groups for socialization, group therapy and management of community outreach support to old elderly men and women in the communities.												
	<ul style="list-style-type: none"> <li>Elderly Group structures will facilitate project operations and management of the project at the communities.</li> </ul>												
	<b>Psychosocial:</b> Quarterly group therapy meetings												
	<b>Community Outreach Home Visits to weaker and/or sickly elderly:</b>												
	Sanitation and hygiene support to the elderly and home environment.												
	Provision of basic food and non-food supplies.												
5.	<b>Commercialized Activities for Elderly Persons</b>												
	Strengthening existing professional and learned/experiential skills for peer learning and Management of the Elderly Support and Resource Centre Project.												
6.	<b>Mainstreaming Gender and HIV&amp;AIDS</b>												
	Gender and HIV&AIDS considerations will be given attention and concerns by individuals and sex-based groups. Elderly care for over 50% HIV&AIDS orphans and vulnerable children in Kenya												