

JOY BABY CARE PROGRESS REPORT FOR THE MONTHS OF APRIL MAY AND JUNE 2014

Project Name: Safe baby care for single mums in the Nairobi slums

Reporting period: Monthly (March - June)

Geographical location: Kabiria slum district of Nairobi, Kenya

Target group: Children (Boys and Girls)

MAIN OBJECTIVE

Joy Babycare enables unsupported single mums to leave their babies in safety while they seek work on the streets to earn food for the day. This stops the need for babies to be taken into risky work situations or to be left at home alone.



(1. Registration Certificate of Joy Baby Care. 2 Old joy baby care 3. Renovation in process. 4. New Joy Baby Care. 5. Medical Checkup in progress)

Joy Baby care has been busy with,

- The daily nursery routine
- Improving the confidence of our mothers
- Monthly medical Check ups
- Setting up a Training Programme for the care givers (nursery workers)
- Fundraising

Activity 1: Daily Routine and confidence of mothers



We have continued to receive children from their parents on a daily basis. We find it very rewarding being with the children and seeing them develop. We give them shelter, feed them, clean them, put them to rest, play and help them to learn. We have also found that parents are becoming more confident. For example they will show up when they are available to volunteer their services to the project. Some have donated toys and play materials that help them to be active and to play and to learn. Mums are ready to make decisions about the project and how they would like it to develop.

Activity 2: Medical Check-ups

We have continued to host a visiting Doctor for medical checkups for our children. Since he started visiting, the health of the children and attendance have been on an upward trend. Initially they used to fall sick and this was rather upsetting for the mothers. Now mothers are advised on the health status of their children. Diseases are prevented or managed at an early stage and infections have dropped. As is said, "Prevention is better than cure": we strive to cushion parents from this burden, bearing in mind that they are not themselves able to meet the costs of medical treatment for their children. In fact, they usually only seek medical attention when a situation is really serious. To make matters worse, they opt to buy medicines from local pharmacies whose main aim is to sell medicines and not to cure diseases. This is risky since medicines can be abused. So, having a doctor see their children routinely can be life-saving, which makes everyone very happy. .



Activity 3: Training Programme for the care giver



For the last 3 months, the project has hired the services of a community worker who has been training our care givers; teaching them the basics of child care duties, including. how to communicate with the children, how to give them attention, hygiene and cleanliness, how to create and maintain a loving relationship, what to do in an emergency, basic bookkeeping, how/what attention to give to a child and when, how to understand their growth and development We are looking to extend this work to include the mothers; our nursery workers have been empowered to empower others. We also hope to have a profession, specialized in child law to empower mother on the rights of a children.

Activity 3: Fundraising on Global Giving site

We have continued to campaign for further funding of this project. We are currently in need of toys and play/learning materials which can help to stimulate the growth and development of a child as a whole , enhance their manipulative and creative skills, and prepare them for early education . We also need money to pay the staff and the Dr. and running costs until it can be self-financing.

<http://www.globalgiving.co.uk/projects/safe-babycare-for-single-mums-in-the-nairobi-slums/>

Achievements



Hired the service of a trainer

Training the care givers

Maintained the day to day running cost

Paid the monthly bills

Enhanced our relationship with the parents; who feel responsibility for the project

Maintained monthly medical checkups with a visiting doctor.

Challenges

We still need toys and learning materials. We need to find further ways to empower the mothers and enable them to taking more responsibility in their lives and work towards being responsible for the project.

Thank you to our generous donors for continuing to support the development of this project.