



CAROLINA FOR KIBERA, INC.

Tabitha Medical Clinic

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EXECUTIVE SUMMARY

Kibera, east Africa's largest slum, is a microcosm of many of the world's most vexing issues – poverty, poor healthcare, severe water shortage, the spread of HIV infection and lack of women's rights. More than 700,000 people live in a 630-acre area (about 2.5 square kilometers)¹ outside of Nairobi, Kenya. It is one of the **most densely** populated urban settlements in the world. The vast majority of Kibera's residents live in abject **poverty** with few government services. Kibera faces an exploding **youth** population, representing over half of the slum's entire population – a population that is largely unemployed and will continue to multiply. Much of our global population growth will occur in developing, **urban** settlements like Kibera. A myriad of Kenyan ethnic groups from various religious backgrounds call Kibera home, and the slum has a violent history of **ethnic clashes** between these groups. An estimated 12 to 15% of Kibera's population is infected with **HIV/AIDS**,² a situation exacerbated by the lack of basic **human rights** for girls and young women. Like billions of people in the world, even the most exceptional and promising youth in Kibera lack opportunities to get an **education**, live healthy lives, and lead others as agents of **social change**.

Established by college students in 2001, **Carolina for Kibera** (CFK) is doing something about it. With an innovative, holistic approach, CFK tackles some of Kibera's most desperate problems from the ground up. CFK bridges the gap between Kibera and concerned outsiders who want to help. In this regard, the organization is a model of effective **participatory development**. Kibera youth lead CFK, and the community drives the work on the ground. Meanwhile, CFK volunteers from the United States, Canada, and Europe help mobilize communities, network, advise and fundraise.

¹ <http://www.warmafrica.com/index/geo/8/cat/1/a/a/artid/541>

² Carolina for Kibera, Inc. <http://cfk.unc.edu>



It's working. TIME Magazine and the Gates Foundation recognized CFK as one of only ten **'Heroes of Global Health'** in 2005. In six short years, CFK's programs have grown to include 5,000 youth. Our healthcare services reach tens of thousands. CFK members from Kenya have traveled all over the world to share the CFK participatory **model** with other developing countries. Most recently, CFK alumna Fatuma Roba traveled to New York City where she formally addressed the **United Nations Assembly** about her life as a woman in Kibera and her experiences with CFK's women's reproductive health center.

So, in this world of plenty, we say: **we must do more.** Everyday CFK saves lives and creates opportunities in a place that outside observers often cast away as hopeless. CFK is shaping a **new generation** of African leadership – a generation that has risen above the unforgiving cauldron of poverty to inspire and lead others to do the same. **Join us. Tujiunge tuangaze. (Let's unite and shed light.)**

THE COMMUNITY: *Why Invest in Kibera*

Kibera – Community Size and Key Trends

A group of Nubians (Sudanese) first settled Kibera after fighting with the British army in World War I. Today, over 700,000 people, half of whom are under the age of 15, live in an area of Nairobi, Kenya that is the size of Manhattan's Central Park. Homes are generally one-story, one-room, 10 ft. x 10 ft. huts made of mud and corrugated tin roofing. On average, five people live in each room. There are an estimated





2,000 people living per hectare, according to a report by the Water and Sanitation Program.³ The same report estimates Kibera's population at over one-fourth of Nairobi's entire population.⁴

There is a severe shortage of basic government services, such as the provision of clean water, healthcare, education, and sewage disposal. Water runs through corroded, plastic pipes that, when cracked, are repaired with duct tape or remain open for contamination by waterborne diseases. The water pipes run alongside the exposed sewage trenches, carrying human waste and refuse to a river feeding the Nairobi Dam where people swim, bathe and wash clothes. Moreover, official estimates indicate that over 12 to 15% of the population is HIV positive.

Kibera has a violent history of ethnic and religious conflict. Five of Kenya's six largest ethnic groups (Kikuyu, Kisii, Luo, Luhya, and Kamba) call Kibera "home," and the Nubians, a Muslim group, claim land tenure rights to the slum. Kibera has experienced a handful of intense, bloody ethnic clashes. In each case of collective violence in Kibera, the combatants were predominately unemployed youth, aged 16-30 years. According to a 2003 study by Oxfam, 37% of school-going age children were not even in the educational system and 70% of the children attending school only have limited access to informal schools and community centers. Approximately 80% of all youth in Kibera lack formal employment,⁵ while the UN estimates that 35-45% of the entire slum population is unemployed or underemployed.⁶

Kibera is a microcosm of the rapid growth of slums worldwide. The UN projects the world's population to increase by over two billion the next 25 years. Nearly 90% of that growth will occur in developing urban areas across the globe.⁷

Community Analysis

Residents of Kibera perform basic market analyses of their environment every day. It is the only way in which they can survive on less than a dollar a day. Consider, for example,

³ "Understanding Small Scale Providers of Sanitation Services: A Case Study of Kibera." Water and Sanitation Program. (June 2005) p 2.

⁴ Ibid.

⁵ Carolina for Kibera, Inc., located at <http://cfk.unc.edu/kibera.html>

⁶ <http://statehousekenya.go.ke/oafla/speeches/f-lady/sept04/2004050901.htm>

⁷ <http://www.un.org/esa/population/publications/sixbillion/sixbilpart1.pdf>



the late Tabitha Atieno Festo, a registered nurse and founder of CFK's Tabitha Medical Clinic. In 2000, Festo approached Barcott with a small business plan for which she needed financing. Festo had done some research and discovered that if she bought vegetables in Kibera and sold them in a wealthier Nairobi neighborhood, she could undercut her competition's prices and still make a profit. Barcott gave her US \$26. When Barcott returned to Kibera a year later to establish the youth sports league, Festo had turned a profit on the gift and opened a small medical clinic in her home where she had begun to treat patients. Kibera is bursting with social entrepreneurs like Festo. CFK attracts young leaders with Festo's spirit, ingenuity, and business acumen by offering the professional structure, networking and resources with which residents of Kibera develop ways to improve their community.

Tabitha Medical Clinic

Tabitha Medical Clinic is a community-based clinic that provides primary healthcare and youth-friendly services to Kibera residents. Tabitha Clinic offers healthcare to all residents on a sliding-fee scale. The clinic treats approximately 20,000 patients each year and offers basic laboratory and pharmaceutical services. CFK has provided training for volunteers in the community to become home-based care providers, a program that has received generous support from Stop Hunger Now. Tabitha Clinic receives supplementary medicine and supplies from UNC's MedWorld and welcomes volunteer medical students and faculty from UNC and Duke University Medical Schools. HIV/AIDS is a major focus of Tabitha Clinic's work, through the volunteer counseling and testing (VCT) program.

In 2007, CFK formalized its partnership with the U.S. Centers for Disease Control and Prevention's (CDC) International Emerging Infections Program. As part of the CDC's efforts to track and target specific causes of morbidity in Kibera through an ongoing household surveillance program, CFK's Tabitha Clinic has become the community referral clinic for over 20,000 residents to receive free healthcare. In order to accommodate the increased patient load, which now exceeds 100 patients every day, CFK has benefited from the pro-bono services of Dr. Ruben Mutiso of Architecture for Humanity. Dr. Mutiso, a Harvard-trained architect, drafted the plans for an eco-friendly clinic in Kibera that will offer higher quality and comprehensive healthcare services previously unavailable



to residents of Kibera, including an expanded pharmacy, laboratory, and x-ray capabilities. The eco-friendly design of the clinic will include solar panels, passive rainwater catchment, composting waste disposal, and recycled building materials. We hope that the clinic will serve as a model for appropriate building in other urban slum communities in Kenya and around the world.

ACCOMPLISHMENTS

- Over 20,000 patients treated in the Tabitha Medical Clinic last year.
- CFK Executive Director Salim Mohamed selected as an Africa Fellow for the 2007 TED Global Conference in Tanzania.
- 40 girls trained on financial literacy
- 67 youth currently employed in Taka ni Pato; nearly 200 youth engaged since inception.
- 18 youth employed through Base of the Pyramid self-initiated businesses.
- 250 girls reached by Safe Spaces program.
- 28 girls' secondary school scholarships provided last year.
- Sponsored by the Ford Foundation, CFK Executive Director Salim Mohamed presented at the International AIDS Conference in Bangkok, Thailand in 2003.
- One of only a few medical clinics in Kibera that provide full-time medical doctors in partnership with the U.S. Centers for Disease Control and Prevention (CDC).
- The only grassroots organization invited to participate in the 2006 Brookings-Blum Roundtable on "Poverty and Insecurity" at the Aspen Institute.
- Sales of Light Box (see p. 17) have raised \$69,537 in girls' scholarship funds.
- CFK's Board member Sammy Gitau received a full scholarship to attend the University of Manchester to study for a Masters in Social Development, despite the fact he never completed high school.
- Over 5,000 youth engaged through the CFK Youth Sports Program since its inception.
- 42 American, Canadian, and European college-students have volunteered with CFK on the ground in Kibera.
- One of ten organizations worldwide named a TIME Magazine and Gates Foundation 'Hero of Global Health' at the 2005 Global Health Summit in NYC.
- Over 2,000 tons of trash cleared from Kibera by Taka Ni Pato in 2006.
- CFK featured on the cover of TIME for Kids Magazine, March 30, 2007, "A Higher Goal: Soccer is Helping Kenyan Kids Get Set for the Future."
- Binti Pamoja alumna and Kibera resident Fatuma Roba addressed the United Nations Assembly and attended the UN Commission on the Status of Women in March 2007 in New York City.
- 85 current members and 18 alumni of the Binti Pamoja Center.
- One of seven programs worldwide identified as an example "of innovation and...effective work" in HIV Prevention with Especially Vulnerable Young People, a book published by the Thomas Coram Research Unit at the University of London.
- Founder Rye Barcott named an ABC World News Person of the Year for 2006.
- Recognized and visited on the ground by leaders such as Graca Machel (wife of Nelson Mandela), Barack Obama, Melinda Gates and Pamela Omidyar.



- Binti Pamoja founder Karen Austrian and program coordinator Caroline Sakwa developed a financial literacy curriculum for poor girls, which will be distributed globally by the Global Financial Education Program (funded by The Citigroup Foundation).
- CFK's Salim Mohamed featured in Somali hip hop artist K'Naan's video "4REAL Kenya"
- 31 youth trained in computer literacy skills.
- Global media recognition: BBC The World, ABC World News, The Christian Science Monitor, Los Angeles Times, TIME Magazine, Reuters, Associated Press, Financial Times, Sarah McLachlan's "World On Fire" music video.
- Raised over \$1,000,000 in private donations and grants from individuals and major foundations, such as the Ford Foundation, Reuters Foundation, William R. Kenan Charitable Trust, Nike Foundation, American Jewish World Services, and the Omidyar Network.

LEADERSHIP: Our Team

HILLARY OKHIDI OMALA, Tabitha Medical Clinic Manager, holds a BA in Sociology and Communication from the University of Nairobi. Before CFK, Hillary was the chair of the Funyula University Students Association, as well as a member of Students Against Drug Abuse and Africa Peace Forum. In 2004, Hillary was a development facilitator intern with World Vision Kenya in the Rift Valley. He has also taken courses at the Centre for Finance and Project Management (Nairobi) in project planning, management, monitoring and evaluation.

DR. HENRY NJENGA NJUGUNA, Medical Doctor, holds a medical degree from the University of Nairobi, as well as a degree in Accounting from Strathmore College. While in medical school, Dr. Njenga was elected pre-clinical representative of the Association of Medical Students and chosen to represent his school in an exchange program sponsored by the International AIDS Research and Training Program at the University of Washington. He is the author of "ARV Drug Use in Management of HIV/AIDS in a Resource Poor Setting," which was published by the University of Nairobi Medical School Journal (2004). Dr. Njenga did his medical internship at Kenyatta National Hospital in Nairobi. In the future, he plans to pursue a Masters in Public Health (MPH). Dr. Njenga is also an elder at his church.

DR. SALLY OKUTOYI GITARI, Medical Doctor, holds her medical degree from the University of Nairobi. She is currently pursuing a master's degree in public health in the evenings. Upon graduating from medical school, Dr. Okutoyi interned at Moi Referral Hospital, Pumwani Maternity Hospital, Aga Khan Hospital, and Spinal Injury Hospital before joining the Tabitha Medical Clinic in March 2006.

MARY WAITHERA, HIV/AIDS & Sexual Reproductive Health Program Officer, grew up in Kibera and joined CFK in 2006. She attended The Senior Chief Koinange High School and later joined Daystar University, where she is double majoring in Social Sciences and Political Science. Before CFK, Mary worked as a volunteer with Plan International Nairobi in the youth economic empowerment program. She worked with peer educators to develop reproductive health campaigns for youth, through participatory educational theatre pieces, youth forums, and one-on-one individual sessions.