LINKING VULNERABLE GROUPS TO SOCIAL PROTECTION INTERVENTIONS IN NAIROBI **INFORMAL SETTLEMENTS**

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BACKGROUND

The ARISE research study in the Korogocho, Viwandani and Mathare informal settlements in Nairobi found that the most vulnerable community members such as people with disabilities (PWDs), children heading households (CHH) and older persons are often invisible to government support and lack agency, causing them to miss out on essential government services, including those specifically intended for them such as social protection programs. The Ajibika project under ARISE embraced the 'leaving no one behind' agenda to enhance equity for vulnerable community members, amplifying their voices and making them visible.

STORY OF CHANGE

ARISE has provided evidence of the needs of the most vulnerable populations within informal settlements, highlighting the key challenges that need to be addressed by the CBOs. Prior to Ajibika project, there were limited programmes supporting these groups.

LVCT Health mapped CBOs working in Korogocho and Viwandani to implement the Ajibika project, a project that aims to respond to the issues identified by the photovoice study conducted in Korogocho and Viwandani. LVCT Health identified three community based organisations, two in Viwandani and one in Korogocho; Mukuru Slum Development Project (MSDP), Sinai Unified and Restoring Dignity Korogocho (RDK). These CBOs were selected because they are located and operate in Viwandani and Korogocho and have a focus on serving vulnerable community members.

The CBOs received capacity strengthening training and mentorship to enable work with the vulnerable community members in addressing pertinent issues in the lives of the three target populations: PWDs, CHH and older persons. The three CBOs created shared platforms in the form of support groups that has allowed vulnerable community members to come together, exchange information about their vulnerabilities and to understand the different laws and policies in existence for each of these populations.

Issues raised through the support group platforms have been escalated through the CBOs to the relevant authorities within Korogocho and Viwandani, including to the informal settlements leadership. For instance, through ARISE's Ajibika project, the Viwandani ward leadership under the newly elected local Member of the County Assembly has aligned the ward priorities to include the needs of vulnerable community members, including PWDs, older persons and CHH.

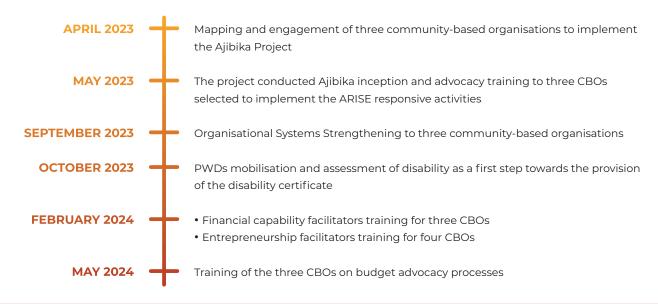


KEY MESSAGES

- ARISE strengthened the capacity of community-based organisations (CBOs) through Organisational Systems Strengthening (OSS) training and continuous mentorship to implement the Ajibika project that serves older persons, people with disabilities (PWDs) and their caregivers, and child headed households (CHH) within the Viwandani and Korogocho informal settlements of Nairobi.
- Through the Ajibika project, the CBOs created groups for vulnerable community members namely older persons, PWDs and their caregivers. These groups have served as advocacy platforms where the vulnerable community members meet to discuss their issues and seek solutions.
- Older persons and PWD groups had the opportunity to meet with duty bearers through stakeholder forums, including those running health facilities, social development officers, agricultural extension officers, administrative officers, and community leaders, among others.
- Vulnerable community members in Viwandani and Korogocho, through accessing this advocacy platform, could engage with the duty bearers, discuss their concerns, voice their grievances collectively and ultimately help them seek solutions to the issues presented.
- · The groups established have also created opportunities for the vulnerable community members to register for government social protection programs, join savings groups, and receive support for micro-enterprise.



STORY OF CHANGE



CAPACITY DEVELOPMENT

Capacity development involved conducting an organisational capacity assessment that identified the CBOs' strengths and areas of improvement. The three CBOs were taken through Organisational Systems Strengthening (OSS) training and mentorship aimed at strengthening their organisational structures, policies, procedures and strategies. The OSS training acted as a springboard for continued mentorship to improve their organisational systems.

The three CBOs were sensitised to the ARISE research project aims, objectives, methods and findings and received multiple trainings to enhance their capacity on various areas namely; advocacy, organisational system strengthening, quality improvement cycles and budget advocacy, all geared to enable them to adequately serve the vulnerable community members.

In addition, the CBOs received technical training in financial capability and entrepreneurship. These trainings were conducted to impact facilitation skills in personal financial management and entrepreneurship acumen which the CBOs cascaded to the community members.

EMPOWERMENT OF VULNERABLE COMMUNITY MEMBERS

During the responsive phase inception training, the three CBOs identified priority issues and populations as informed by the ARISE photovoice study findings. MSDP chose to focus on PWDs, Sinai Unified chose to focus on older persons while RDK settled on mental health as the issue they would focus on.

The three CBOs mapped and registered PWDs, older persons and persons with mental health issues in Viwandani and Korogocho. Those identified were supported to create

their own support groups. These support groups act as advocacy platforms where the members meet to discuss and document matters affecting their lives and seek solutions. Ajibika has created a sense of hope among PWDs and older persons who for most of their lives felt neglected and not useful to their communities. They can now meet in safe spaces where they share their experiences freely.

GROUP SAVINGS AND INCOME GENERATING ACTIVITIES

In addition to discussing issues important to the groups, the groups also started saving money to improve their livelihoods. Active membership has been maintained through table banking activities that entail mobilising group savings and advancing loans to select members each time the group members meet.



Alice is a child heading a household and lives in Viwandani informal settlement. Image taken from the ARISE Kenya photobook.

Two PWDs support groups in Viwandani have 30 and 25 active members respectively and meet fortnightly. One group gives loans to the members and the other has opened a joint account with Cooperative Bank (a local bank in Kenya) for members to deposit money at their convenience using a mobile money transfer service. This was done to improve their financial security because this way, no one is the custodian of the group's money. As the two PWD support groups became more established, there was a need identified to start a PWD caregivers' mutual support groups. This led to the establishment of two PWDs caregiver support groups with 30 and 22 active members respectively. These groups meet bi-monthly to share their caregiving journey, experiences and insights for overcoming caregiver challenges.

In Korogocho, RDK supported the formation of three support groups with ten people in each. These support groups meet and discuss issues affecting their mental health and seek

Sinai Unified helped to establish three support groups for older people in Viwandani which provides them with a safe place to meet. The older persons have so far benefited from joint income generating activities such as making household detergents and selling them. The older persons also receive some free health check-ups such as blood pressure monitoring done by a community health promoter (CHP) every time they meet. One of the older person groups meet twice every month for a Merry Go Round (a table banking model). Each member contributes Ksh100 (USD. 0.77). The cash is then shared between a different two people each time they meet. This brings them together, motivates them to meet, supports issues of livelihood and boosts business for those who have them.

"I didn't have money to buy food on that day and during the support group I am the one who was given the cash, it really helped me."

The second older persons support group have been contributing Ksh100 every time they meet to start poultry farming using a donated space.

DISABILITY SCREENING

ARISE supported mass disability assessment for PWDs in Viwandani. MSDP mobilised PWDs in Viwandani who had never been assessed for disability due to the cost of assessment or due to other access challenges, such as long distances to the assessment facilities. MSPD mobilised 209 PWDs for the assessment that was conducted within their premises by the national council of PWDs. Among these, 186 were assessed for disability, out of which 126 qualified for the

disability certificate. So far, 103 have received their certificates. This activity enabled PWDs who did not have disability certificates to be assessed and get registered by the National Council of People with Disability (NCPWD). The certificate enables them access to social protection services and other legal rights as stipulated by law, such as tax exemption and assistive devices.

ACCESS TO GOVERNMENT SERVICES AND SUPPORT

The CBOs utilised the advocacy knowledge and skills gained through ARISE to advocate for more cash transfer slots for the vulnerable persons in Viwandani and Korogocho. This resulted in the enrolment of 39 PWDs, 55 older persons, and 12 CHH in the Inua Jamii program. Inua jamii is a cash transfer program for vulnerable persons, namely orphans and vulnerable children, PWDs and older persons where all those enrolled receive Ksh.4000 (USD 31) every two months.

Following a successful stakeholder meeting where the Viwandani Ward Member of the County Assembly (MCA) promised to support the PWD groups as part of his political declaration, thus increasing the likelihood that national and county governments will take over this work once the ARISE project ends. The MCA has allocated 20% of their bursary to children with disabilities or children of PWDs. He also employed a young man with a disability to work as a clerk in his office.

ARISE facilitated the enrolment of 75 vulnerable community members into the National Health Insurance Fund (NHIF) by registering them onto the fund and paying the one-year premium for all 75 community members. This has enabled them access to quality and free healthcare, reducing the outof-pocket money usually spent on accessing health care.



Martin is blind and lives in Viwandani informal settlement. Image taken from the ARISE Kenya photobook.



RIGHTS EDUCATION AND ACTION

Twenty-three PWD leaders attended a two-day sensitisation meeting with Makadara sub-county PWD coordinator to understand the Disability Act and its different policies. They were also sensitised on leadership styles and their roles to empower other PWDs in the support group. The PWDs were informed about their rights and what government benefits and exemptions they were entitled to, including the exemption from business operating costs like business permits and certain taxes for business owners with disabilities, once they receive their exemption letter from NCPWD. Two PWDs were informed that as civil servants, they should be completely exempted from paying taxes.

Following this knowledge sharing, during a stakeholder meeting with governance actors, the PWDs advocated for the construction of accessibility ramps at the administrative offices and health centre in Viwandani. The ramp has now been constructed and one PWD was selected as a board member in one of the health facilities in Viwandani (Sinai Rehabilitation Centre), and four were sponsored for vocational training.

REFLECTIONS

The ARISE Ajibika project led to improved responsiveness to priority problems at the community level to promote equity in access to social protection programs, and other benefits of collective action that facilitate more expendable income for vulnerable people. This was achieved by addressing the barriers vulnerable populations face such as stigma and a lack of; PWD identification, collective action, a means to save money, and information. These marginalised and vulnerable populations were given a platform for reflecting on their lived experiences, challenges and priorities for change, which, alongside the capacity strengthening by governance actors/ CBOs was key to improving equity in access to services and resources. Through this platform they advocated the need to have the special ID cards which led to the mass assessment. Structured meetings between communities and CBOs led to building trust and deepening communication channels, as well as allowing learning from action. Vulnerable populations were given stronger autonomy through their support groups which facilitated money-saving and developing skills for microenterprise.

County-level goodwill for PWDs made it possible for the mass assessment of PWDs to take place. During the stakeholders' meeting the officials invited were excited to meet and learn about the PWD platform at Viwandani. The marginalised

and the vulnerable are now able to present their challenges directly to governance actors through the CBOs and there has been a shift in perceptions by governance actors, leading to coordinated efforts and commitment to action.

FURTHER RESOURCES

LVCT Health (2023) ARISE Kenya Photobook, ARISE Consortium, https://www.ariseconsortium.org/learn-morearchive/kenyan-photobook-project/

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Beatrice is an older person and lives in Korogocho informal settlement. Image taken from the ARISE Kenya photobook.







The UKRI GCRF Accountability for Informal Urban Equity Hub is a multicountry hub with partners in the UK, Sierra Leone, India, Bangladesh and Kenya which we call ARISE. The Hub works with communities in slums and informal settlements to support processes of accountability related to health. It is funded through the UKRI Collective Fund.

