



MWENDO

MAKING WELL-INFORMED EFFORTS TO NURTURE DISADVANTAGED ORPHANS & VULNERABLE CHILDREN

PROJECT SUMMARY

MWENDO increases access to health and social services for orphans and vulnerable children (OVC) and their families, strengthens the capacity of households and communities to protect and care for their OVC, and strengthens child welfare and protection structures and systems for effective responses in targeted communities. By 2022, MWENDO is expected to deliver services to at least 326,000 vulnerable children from approximately 90,000 households in counties with the highest HIV prevalence rates in Kenya.

MWENDO APPROACH

MWENDO's holistic, child-focused, and family-centered approach sees child wellbeing as nested within household wellbeing, community resilience and support to vulnerable children, and social service systems. Specifically, the project supports Kenya in reaching the 90-90-90 targets¹ by strengthening the HIV and social support system from the household to the national level, and across systems and sectors, with a specific focus on protection, household economic strengthening, health and HIV, and the intersections between them. This draws directly on evidence that a multi-sectoral approach is the most promising and sustainable way to address HIV and child protection issues. Using approaches and tools validated through CRS' global 4Children project,

QUICK FACTS	
Project Type	Orphans and Vulnerable Children (OVC)
Funder/funding	USAID/\$70 million
Project location	Nyanza, Western, and parts of Northern Rift Valley in Kenya
# of people served	326,000 OVC
Timeframe	2017-2022
Partners	Maestral International, Family AIDS Care and Education Services, and CAP Youth Empowerment Institute (YEI)

MWENDO uses comprehensive case management as the foundation and entry point for an evidence-based and informed program of interventions. The project emphasizes capacity strengthening for community-level social service providers and sustainability planning to create long-term positive change in its operational communities.

¹ By 2020, 90% of all people living with HIV will know their HIV status, 90% of all people with diagnosed HIV infection will receive sustained antiretroviral therapy, and 90% of all people receiving antiretroviral therapy will have viral suppression.

MWENDO has three purposes:

Increased access to health and social services for orphans and vulnerable children and their families.

Through social and behavior change initiatives, MWENDO increases communities' knowledge around child protection and HIV, reduces HIV-related stigma and discrimination, and transforms communities to become advocates for vulnerable children and their families. Leveraging increased community support and involvement, MWENDO uses individualized case management and, through its roster of local implementing partners (LIPs), strengthens the referral pathways between communities and health facilities. LIPs increase awareness of existing services and coordination mechanisms among service providers and sensitize them to the needs and rights of vulnerable children, their families, and other key populations.²

Strengthened capacity of households and communities to protect and care for their vulnerable children.

MWENDO has three strategies tailored to households at different vulnerability levels: helping households recover from shock and/or meet basic needs, building and/or stabilizing assets and income, and helping households grow their resources to improve their economic security. MWENDO facilitates household access to social safety net programs, financial services such as savings and internal lending communities (SILC), and financial education. Smallholder farmers are positioned to engage in markets and youth are provided opportunities to access work readiness and job placement packages. Additionally, the project strengthens household capacity to care and protect vulnerable children through positive parenting approaches.

Strengthened child welfare and protection structures and systems for effective responses in targeted communities. MWENDO trains and mentors LIPs on child rights, protection, and comprehensive OVC service

delivery. Using tools and resources from CRS' Institute for Capacity Strengthening, MWENDO strengthens LIPs' organizational effectiveness, specifically its finance and compliance systems and practices. More so, the project supports LIPs to utilize a management information system to collect and use data for strengthening case management and targeting, facilitating referrals, and informing advocacy for service accessibility and quality.

KEY RESULTS

As of May 2018, the project achieved the following:

- Across the 13 counties, 236,300 OVC received MWENDO support; with 106,631 receiving one or two services, and 129,669 receiving three or more.
- 26,910 OVC caregivers participated in SILC groups, collectively saving KES 71,138,821 (US\$706,092.52). Savings were primarily used to purchase school materials, nutritious food, safe and secure shelter, and clothing for 60,571 OVC. A portion of the savings went into expanding caregivers' small-scale businesses.
- 255 out-of-school OVC aged 18-25 completed the CAP-YEI Basic Employability Skills Training. Of those, 244 are taking on internships, 4 are employed, and 6 transitioned to advanced training in their field of choice.
- Partnered with the International Potato Centre and the Kenya Crops and Dairy Market for OVC households to partake in the Orange Fleshed Sweet Potato value chain and increase market access, respectively.

CONTACT US

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² HIV-affected infants, adolescents, people living with HIV, and adults who engage in high-risk behavior (e.g. sex workers)

