



**“Feeding our elders is our responsibility”**

**MONTHLY REPORT**

**REPORTING PERIOD APRIL 2017**

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## SECTION A - MONTHLY BRIEF

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### 1.0 Current Food And Income Situation Of Elderly

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The current food shortage accompanied by low income has created a grim situation for the elderly. A large percentage of households continue to deal with the problems that come with inflation in price of basic household food commodities considering that inflation has arisen to 11.48 % by April 2017.

According to the elderly community in Isiolo County, other than the high cost of food commodities, a big proportion of beneficiaries of the cash transfer programme haven't received a dime this year. The increasing arrears in unpaid funds and the unexplained change in the transfer schedule have taken a toll on these households.

A heartbreaking result of scarcity of resources is that the vendors closest to these elderly persons, who loan and supply them with household commodities, have refused to give more credits. Usually, the credits are for foodstuffs such as; sugar, cooking oil, corn/wheat flour and non-food items such as bar-soap and paraffin for lighting lamps, which are later paid for when they receive the cash incentive.

Meanwhile, MICF beneficiaries' are pleading to the foundation to increase their current food rations. This is as result of overreliance on this food among the beneficiaries' and their dependents.



Figure 1: Beneficiaries queue for food rations, while others wait hopefully for admission into the programme.

### 1.1 Elderly Open Day

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The Foundation held another open day ceremony for newly recruited beneficiaries on 23<sup>rd</sup> April, 2017, at the Foundation's office. The ceremony was intended to educate the beneficiaries on the foundation policies which includes among other things; the scope of services offered, food management, and disciplinary measures.

There was a high turnout by the beneficiaries for the event as it was expected. Most the beneficiaries were accompanied by their care givers and family members, who upon their consent will collect subsequent rations on their behalf. Further, among the attendees of the event, were the community representatives who came to offer translation services to their community members.

Beneficiaries, who were unable to attend, had their food baskets delivered to their homes by the foundation staff and volunteers.



Figure 2: New Entrants during the Elderly open day

### 1.2 Recruitment of Additional Beneficiaries

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The identification and registration of additional beneficiaries is in progress. This quarter an additional 50 homes were registered and confirmed for membership in preparation for the next phase of the feeding programme. This brings the total number of beneficiaries being supported to 350. The recruitment considered balanced representation of minority and majority communities. In addition, the recruitment process also considered elderly persons receiving cash incentive from the government.

## SECTION B - FOOD DISTRIBUTION

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### 2.0 Food Distribution

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The monthly routine food issuance exercise commenced 8th April 2017 and ended on the 24<sup>th</sup> April 2017. The exercise was behind schedule as a result of scarcity of three basic commodities, being; rice, sugar and milk. Nevertheless, a total of 350 households received their food rations.

MICF staff and volunteers used this platform to remind the beneficiaries on the upcoming medical camp as well as encourage them to utilize their membership with the National Hospital Insurance Fund Office (a government subsidized healthcare programme).

On another note, in a survey that was carried out by the foundation, it was discovered that there was a high demand and preference by households to the reintroduce the corn soya blend flour. The corn soya blend flour was donated by Insta Products Company last year.



Figure 3: MICF staff during a home visit and food delivery at a beneficiary's home

2.1 Door To Door Deliveries

This month, the foundation delivered food rations to only seven beneficiaries.

The table below shows the food quantities distributed in the month of April.

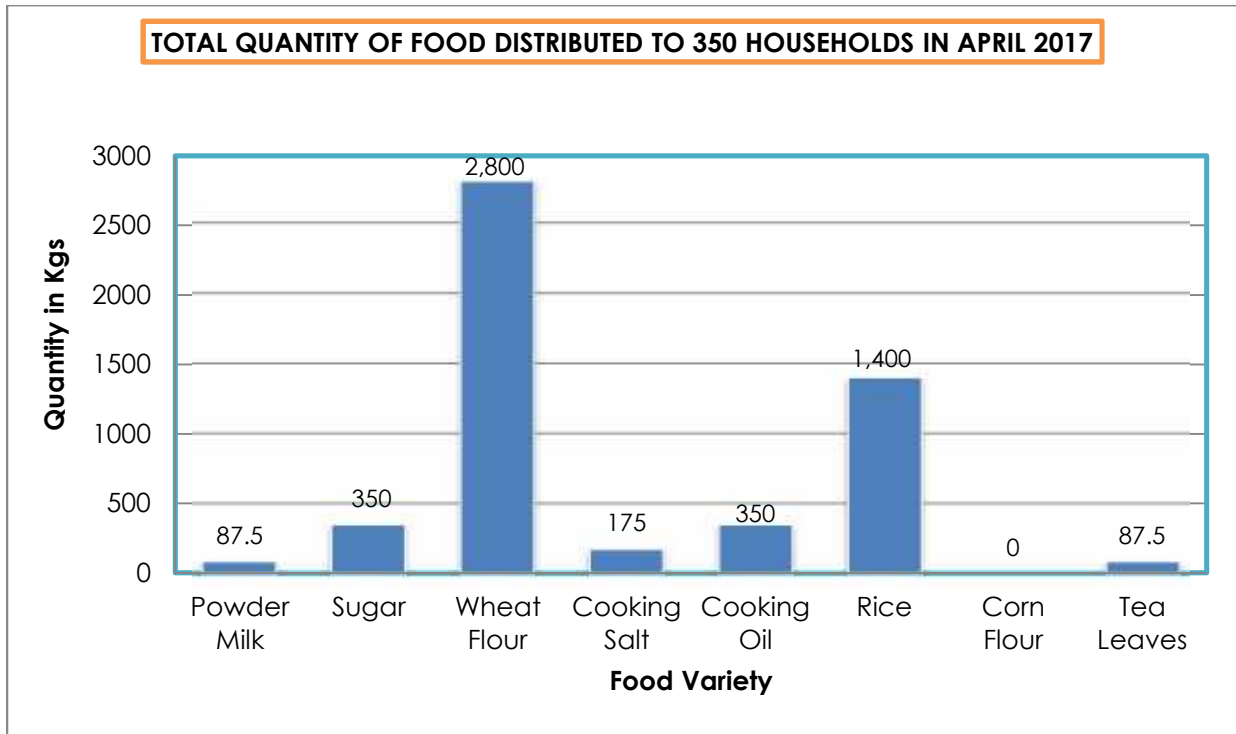


Figure 4: Rations distributed to 350 households in April 2017

SECTION C – BENEFICIARY UPDATES

3.0 Mortality Rate

The chart below is a compilation of mortality data since the foundation’s inception in 2011.

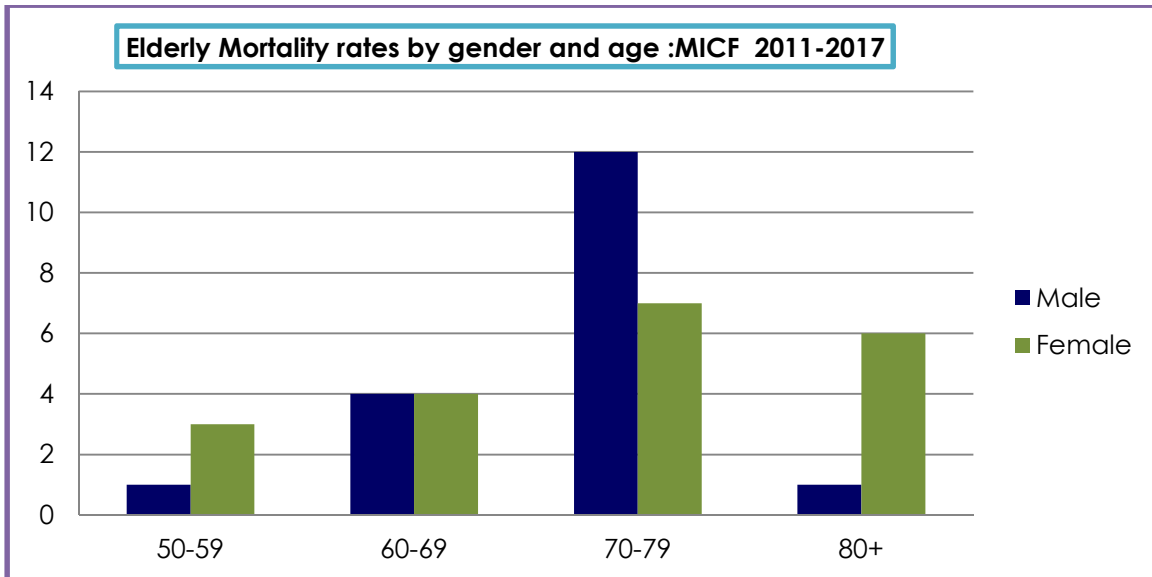


Figure 5: Elderly mortality October 2011 to April 2017

From the chart above, we can conclude as follows:

- The death of male are higher compared to the female; between the years 2011 and 2017.
- There has been a significant increase in age-specific-mortality, which is between ages 70-79.

3.1 Beneficiary Demise

MICF reports the sad demise of two of our beneficiaries in the month of April. First is the late Ndunda Nduba who died on the 8<sup>th</sup> of April, 2017 after succumbing to high blood pressure and other old age related complications at her home in Kiwanjani. The late has left behind a daughter and three grandchildren. The late Nduba was bedridden and paralyzed for over 3 years and was among the beneficiaries who benefited from the wheel chair programme. The late Ndabu Nduba Ndida died at the age of 83.

Second is the Late Khadija Osman who died on 10<sup>th</sup> April, 2017 after suffering from permanent paralysis and succumbing to hypertension at her home in Bula Rera. Until her death, she was in the care of her daughter. She was also a beneficiary of the wheel chair programme. The late Khadija died at the age of 79.



Figure 6: Left to right: The Late Khadija Osman and The Late Nduba Ndida at their respective homes

### 3.2 BENEFICIARY UPDATES

The data below represents hospitalized and out- patient cases that have been reported to the Foundation and /or recorded through close monitoring which is made through family members and occasional visits to households.

No	Beneficiary Name	Bn.No	Hospitalized Cases	Bedridden at home	Ailment/Disease	Receiving any medication
1	Ali Gielo	k/011		Yes	Stroke/Hypertension	Yes
1	Yusuf Yassin	K/012	In/Out	-	Diabetes, High blood Pressure ,asthma	Yes
2	Elmi Ibrahim	K/048	In		Stroke, High blood pressure, Insomnia	Yes
3	Ibrahim Farah	K/042	In /Out	Yes	Pneumonia	Yes
4	Amina Nuro Jama	K/046	In/Ou	-	Heart Condition	Yes
5	Bilai Hassan	K/098	In /Out	Yes	Gastric Ulcers	Yes
6	Yusuf Hashi	K/105	-	Recovering	Heart Condition	Yes
7	Kamara Adan Maow	K/120	In/Out		Bleeding gastric ulcers	Yes
8	Mwanasomo Guyo Galgallo	K/144	-	Yes	High Blood Pressure	Yes
9	Warsame Ibado Dalal	K/008	In/Out	Yes	High Blood Pressure/Gastric Ulcers	Yes
10	Mbonaiya Rulla Juma	K/031	-	-	High Blood Pressure, Diabetes, Arthritis	Yes
11	Mamo Robe Ali	C/086	In	-	Tuberculosis	Yes
12	Ahmed Jama	k/002	In/out		Loose bladder, prolapse of rectum	Yes



Figure 7: Health of beneficiaries

SECTION D - FINANCIAL REPORT

4.0 Price Comparison

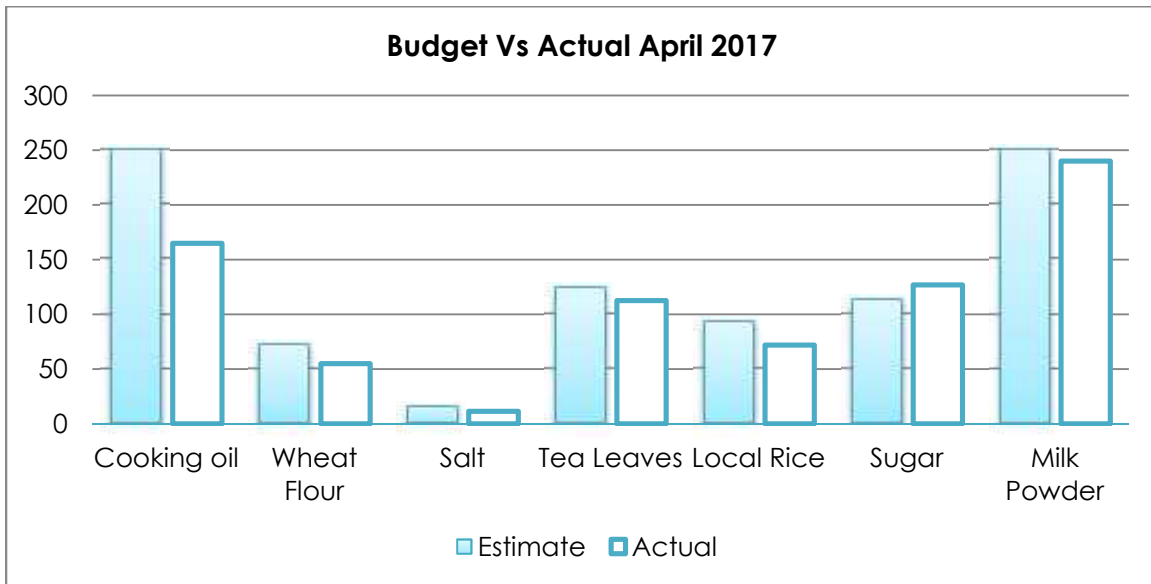


Figure 10: Comparison of budget against actual costs

The above chart represents the estimated Budget Costs against the Actual Expenditure Costs for Food for the month of April 2017.

The most utilized household products have increased in price and these include Wheat Flour, Corn Flour and salt. Cooking oil, Rice and Tea leaves are the most expensive though very essential in every household. The cost of Powder milk slightly dropped.