



"Feeding our elders is our responsibility"

MONTHLY REPORT.

REPORTING PERIOD FEBRUARY 2017

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MONTHLY REPORT

REPORTING PERIOD: FEBRUARY 2017

SECTION A - MONTHLY BRIEF

Stakeholders Meeting

The MICF team in the company of the President held a meeting on the 11th February 2017 at the Isiolo offices. The main agenda of the meeting was to discuss the feeding programme.

During the meeting, the team evaluated the previous year's challenges and target achievements that were realized. The team further discussed the progressive recruitment exercise which targets 500 households by the end of this year, as well as the next medical camp which is scheduled for 29th July 2017.

The President also got an opportunity to interact with beneficiaries as the visit coincided with food distribution. The President was able to get feedback from the beneficiaries with regards to the feeding programme.



Figure 1: MICF team interacting with beneficiaries.

Recruitment

This quarter an additional 50 households were shortlisted for the feeding programme pending approval from the Board. Upon acceptance, MICF and MIC will be supporting a total of 350 households.

During recruitment, majority and minority communities were considered to emphasize on the principal of impartiality. During the same exercise, MICF established that there are other major challenges facing the elderly apart from food. The challenges include; a need for housing, health care provision and psychosocial support.

With regards to their health, the Isiolo team went an extra mile to ensure that those in the government cash transfer scheme are sensitized on their health entitlements, which most were not aware of. Of the entire 100% recruited, in this phase, only 16% are eligible for health care through the government sponsored NHIF Medical Programme as they are registered with the Government Cash transfer programme.

The table below shows the % of male and female recruited into the programme.

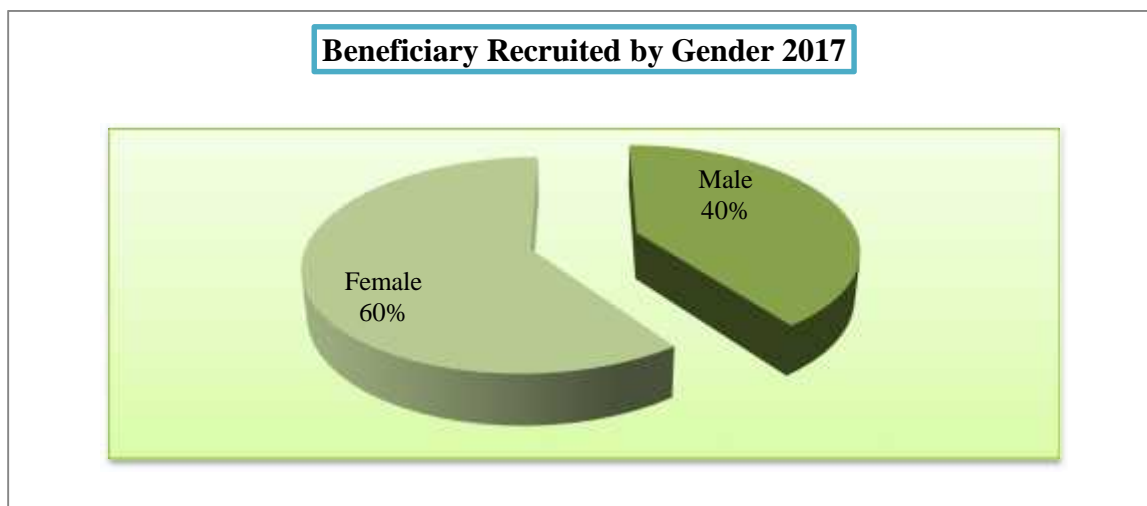


Figure 2: Male and female beneficiaries recruited into the programme

This recruitment exercise resulted in the registration of more women against men with 30 and 20 households respectively. Most of the women recruited are widowed or single parents and in the company of orphans.

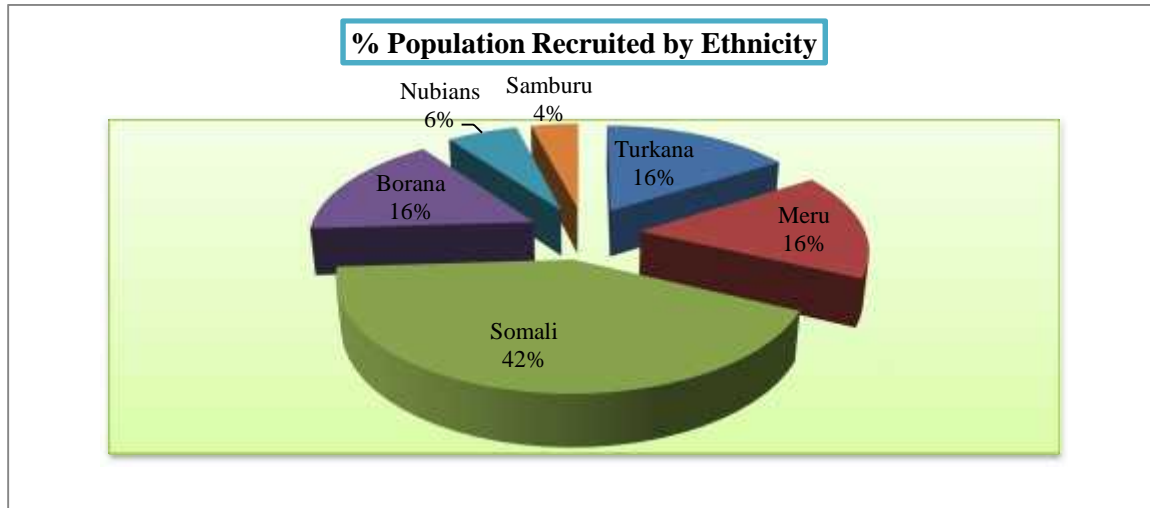


Figure 3: Diverse communities recruited into the programme



Figure 4: left to right: An elderly woman and man reached during the recruitment exercise

Challenges encountered during the recruitment exercise

Some of the elderly, whose centers were earmarked for the exercise in the previous year, were no longer available. This is because they moved and settled elsewhere unknown to the foundation, after the community land they occupied was repossessed and sold to investors for development.

In addition, the number of the Samburu Community required could not be met because many relocated to the Meru –Isiolo border due to insecurity issues. Thus going beyond our geographical scope

Food Security

Efforts to mitigate effects of drought have been ongoing in Isiolo County. The most current being distribution of livestock feeds by the County governments , as most of the communities are pastoralists and depend on livestock as their source of livelihood.

SECTION B - FOOD DISTRIBUTION

Food Distribution

The food distribution exercise for the month of February 2017 commenced on the 9th February, 2017, and ended on the 18th February, 2017. A total of 300 beneficiaries received their ration from the Foundation. The delay in food distribution was due to shortage in rice and cooking oil from the local suppliers.

Door to Door deliveries

Only one beneficiary had his food delivered to his home as he is bedridden.

The graph below is a presentation of the food quantities and varieties distributed during the month of February 2017.

The graph below presents food ration distributed to 300HH.

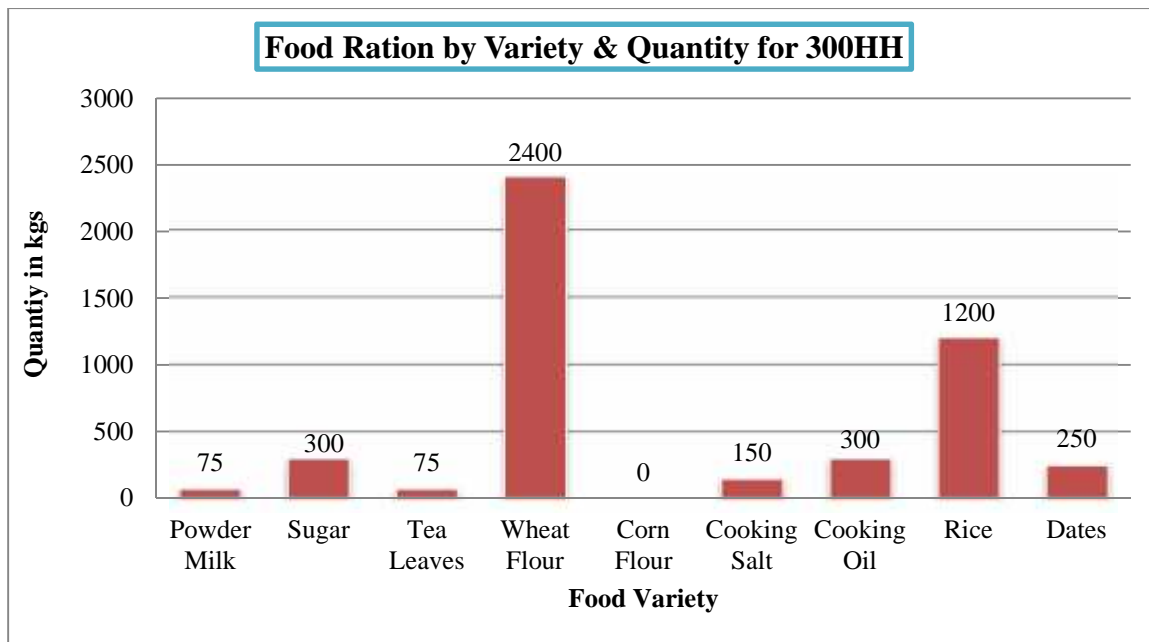


Figure 5: Food Rations Distributed to 300 Households in February 2017

SECTION C - BENEFICIARY UPDATES

HEALTH

SURGICAL CAMP

The Pedro Cavadas Foundation partnered with KRCS to hold a free surgical camp in Marsabit. Two of MICF beneficiaries were among the recipients who received free medical attention.

Accompanying the team was the KRCS Governor; Dr. Mohamoud Said. The MICF beneficiaries underwent a successful surgery and were required to spend three days in Marsabit. One of the beneficiaries had surgery on his left hand to get rid of neuromas and he will have to undergo subsequent procedures before being fitted with a prosthesis limb. The other beneficiary who also underwent the surgery had a tumor removed from his neck area.

IQRA Medical Centre agreed to dress the wounds of those beneficiaries at a small fee.



Figure 6: The team of doctors from KRCS and Perdo Cavadas Foundation examine patients.

Beneficiary Updates

The data represents hospitalized cases 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	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	Bilal 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	Ali Gielo	c/011		yes	Stroke,Hypertension	Yes

Figure 7: Health of beneficiaries

Household Accidents

Mr. Batula Isaack and Mrs. Bilal Hassan are nursing fractured bones after being involved in accidents. Mr. Batula fell and broke his pelvic bone while trying to avoid a fast moving motorist in the town center and Mrs. Bilal fell in her house and suffered a minor fracture on her hand. Both have received medical attention and are recovering at home.

Transfer of Wheelchair

Mr. Ali Gielo, one of the beneficiaries recruited at the inception of the programme, suffered a stroke leaving him paralyzed and unable to move. Due to limited resources and shortage of wheelchairs, Mr. Gielo was put on a waiting list and only received one after the passing on of Mr. Maalim Mohamed the previous year.

SECTION D - FINANCIAL REPORT

Price Comparison

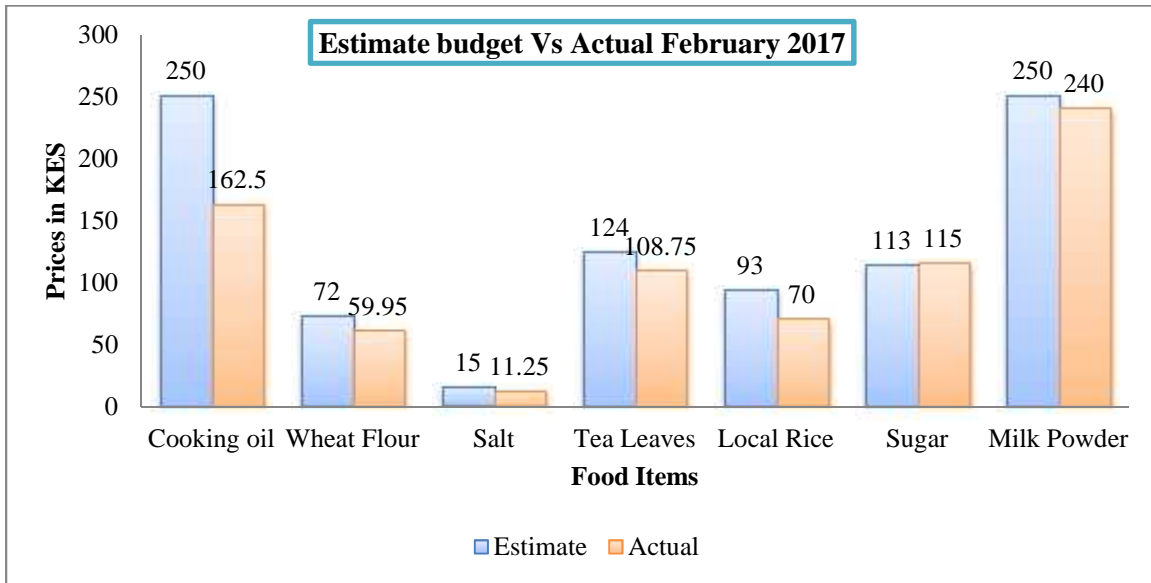


Figure 8: Cost estimates

The above chart is representing the estimated Budget Costs against the Actual Expenditure Costs for Food for the month of February 2017.

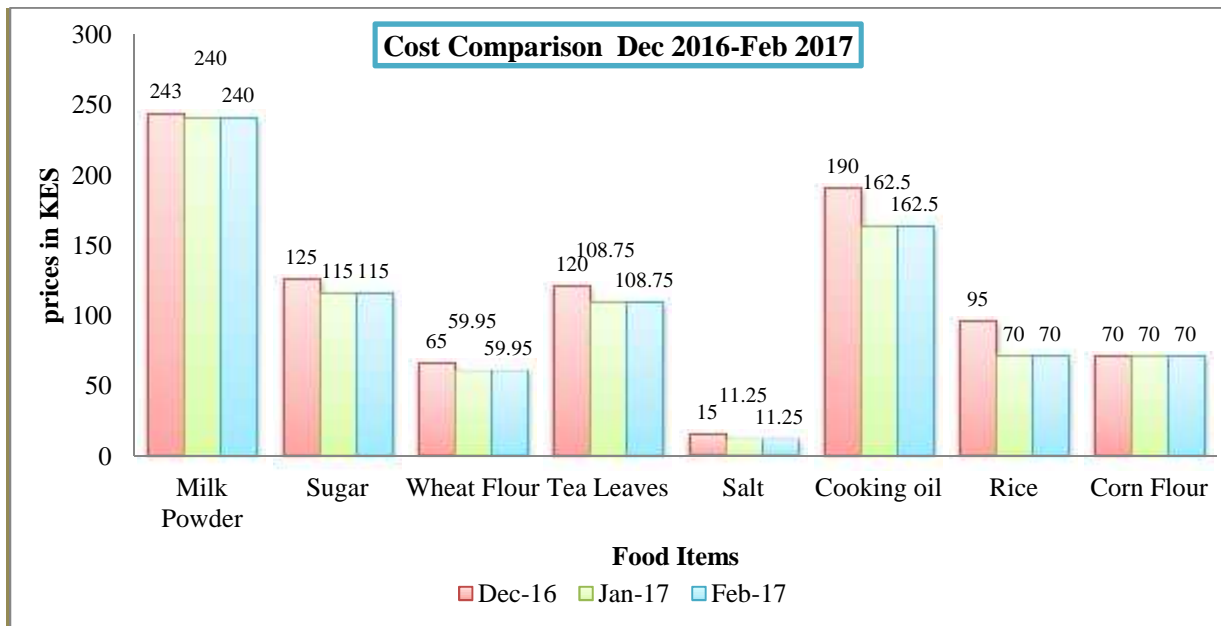


Figure 9: Above is the cost comparison chart for the food rations procured in three months of December 2016, January & February 2017.

The most utilized household products have retained their costs and are fair in price and these include Wheat Flour, Corn Flour and salt. Cooking oil, Powder Milk, Rice and Tea leaves are the most expensive though very essential in every household. The only change is in the cost of milk powder which has reduced by KES. 3 currently selling at KES. 240.