

**Kathryn Davis 100 Projects for Peace, Kenya:  
The Zuia! Initiative**  
*Heri kuzuia kuliko kuuguza. Prevention is better than cure.*

-Swahili Proverb

### ***Historical Context***

Since the first case of acquired immunodeficiency syndrome (AIDS) in 1981, over 20 million people around the world have died of AIDS.<sup>1</sup> Sub-Saharan Africa, according to a study conducted in 2004, was the hardest hit region. Our project concerns Kenya. The Kenyan HIV/AIDS epidemic has significantly impacted the nation's demographic and socio-economic development.<sup>2</sup> Kenyan women are particularly susceptible to the disease, due to a combination of biological and social factors. In 2006, 57% of HIV patients in Sub-Saharan Africa were women. Seventy five percent of afflicted young people were girls.<sup>3</sup>

The Luo women of Ugenya, located in southwestern Kenya, are particularly concerned about their susceptibility to the disease. Ugenya is a region of impoverished subsistence-farmers and sparsely distributed, ill-equipped medical facilities. Ugenyan people suffer from a wide range of diseases and health conditions, including tuberculosis, typhoid, tropical ulcers, trachoma, leprosy, severe scabies, fungal skin diseases, jiggers, and helminthic parasites<sup>4</sup> Twenty four percent of the population also has either HIV or full-blown AIDS, which enhances their susceptibility to other conditions.<sup>5</sup> Many women in the area are concerned with certain tribal cultural practices that exacerbate HIV transmission, including male promiscuity, polygamy, men's unwillingness to use condoms, and "wife inheritance"—a custom that requires widows to re-marry into the same family.

### ***Objective and Vision***

HIV afflicted women in Ugenya are often the disenfranchised. Many are low-income mothers who resort to prostitution to feed their children. The issue is thus twofold: it is both a public health crisis and an economic one. Nevertheless, Luo women are active participants in championing their own reproductive rights. As voiced by the local non-profit Matibabu Foundation Clinic (MFC), the local women hope to change certain cultural practices that exacerbate disease transmission. Through this project and with their compliance, we hope to honor their requests. We will do this by working with MFC to offer Ugenyan women a path to improved financial and health status. It provides medical treatment at no cost to the residents of Ugenya while also conducting extensive epidemiological research. The organization demonstrated a need to tackle the area of improving preventative medicine with regards to HIV by heightening women's economic mobility and independence.<sup>6</sup>

In addressing these needs, our objective is to elevate the health and economic status of 50 women and their families in Ugenya, and to provide reproductive education to the girls and boys of the community at large. We hope to reduce susceptibility to HIV infection through education and increasing women's employment opportunities. We will do this by creating a "Youth Friendly Center" that provides reproductive health education to boys and girls along with vocational training to the 50 disenfranchised young women. In Ugenya, studies have shown that the empowerment of women translates to the empowerment of the whole community through a 'trickle-down effect.'<sup>7</sup> Therefore, our vision is to prevent, or *zuia* in Swahili, the spread of HIV and other sexually transmitted diseases to the young women and thus the entire Ukwala community.

Peace means honoring all needs and desires of stakeholders in a community. We can help foster a more peaceful Ugenya if we listen to and help realize the reproductive rights and ideals of half the population, Ugenyan women. Peace is the ability to not have to sell one's body to feed your children. Peace is having personal agency over your own body.

### ***Process***

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<sup>1</sup> Hélène Voeten, *HIV in Kenya*, thesis, Erasmus University Rotterdam, 2006 (Enschede: Printpartners Ipskamp, 2006), 9.

<sup>2</sup> *Ibid.*, 13.

<sup>3</sup> *Ibid.*, 11.

<sup>4</sup> "Where We Work," Matibabu Foundation-Kenya, section goes here, accessed December 15, 2010,

[http://www.matibabukenya.org/index.php?option=com\\_content&view=article&id=21&Itemid=62](http://www.matibabukenya.org/index.php?option=com_content&view=article&id=21&Itemid=62).

<sup>5</sup> Dan Ogola.

<sup>6</sup> Daniel Ogola, Telephone conversation with Daniel Ogola, December 12, 2010, raw data, Matibabu Foundation Clinic, Ukwala.

<sup>7</sup> *Ibid.*

*Preliminary Work* The project duration will be 3 months long. The team will arrive two weeks in advance to design the “Youth Friendly Center.” With aid from Matibabu Foundation Clinic (MFC) co-founder and current country director Daniel Ogola, we will purchase 10 regular tailoring machines and 1 ‘jersey’ tailoring machine. We will select the premises, pay the rent, and hire a tailoring instructor with the help of Dan Ogola. We will sit down with an educator provided by MFC to go over the final stages of the ‘sex-education’ component, which we have designed. MFC will provide us with a pool table, movies, and a television, which we may use for the duration of the summer.

*Reproductive Education* In conjunction with local health experts and American doctors we have designed our own reproductive and sex education curriculum. Boys and girls (ages 13-16) will attend class at different times so that their specific needs are met. The curriculum addresses issues and concepts including contraceptives, disease types and transmission, and tribal customs that exacerbate disease. While we will teach the classes, MFC will provide us with translators if they are necessary (many students speak English). The classes will be interactive, involving both films and group discussions. While classes are not in session, students may use the facility to learn and interact with each other in a safe environment; they may play pool, watch movies, or just sit down and talk. We hope to hold hour-long classes roughly four times a week for both the boys and girls. The schedule will be determined upon our arrival to meet the needs of students who may need to help with farming during the daytime.

*Vocational Training* Fifty, disenfranchised women will be selected for the vocational training program, on the grounds that they are at higher risk of contracting HIV. Only women who have dropped out of school for economic reasons will be eligible for the program. A teacher will instruct them on tailoring daily for 2-hour-long sessions. The women will also be required to attend discussion-based seminars involving reproductive health, employment opportunities, and addressing reproductive issues of their children. We will co-teach these classes with an MCF volunteer and translator.

*Sustainability* We hope the project will be sustainable in a number of ways. The tailoring machines will be donated to MFC, which will use them to teach future generations of students. The education of women is also a sustainability activity. Their vocational training ensures economic independence, while the sex education ensures the continued education of their children.

## ***Personnel***

### *The Team*

Akie Mochizuki is a senior biochemistry major at Colorado College and has taken service-learning courses on HIV/AIDS, volunteered with the Southern Colorado AIDS Project, and worked with young children as a teaching assistant.

Erin Yamamoto is a senior neuroscience major at Colorado College, and organized and implemented outreach programs targeted at Colorado Springs youth.

Nikhil Ranadive, a junior at Colorado College, is a UWC-USA Graduate and a Davis UWC Scholar. He has experience in education, working with children, and community organizing.

Melissa Serafin, a senior at Colorado College, has extensive experience in sociological fieldwork, education, working with children, and civic engagement.

Women and Children of Ukwala, residents of Ugenya, motivated to lead healthy, happy lives.

### *Contacts*

Daniel Ogola, Country Director of the Matibabu Foundation Clinic. He is a friend of Nikhil’s family, and will be an active participant in this project and a constantly available resource.

Dr. Norma Bozzini, M.D., founder of Matibabu, board member of Matibabu’s American sister organization, the Tiba Foundation, Nikhil’s aunt.

Dr. Gail Wagner, M.D., founder of Matibabu, Tiba Foundation board member, Nikhil’s aunt.

*Translators* will be provided by MFC.

### *Additional personnel*

A tailoring instructor will be hired with help from MFC.

## Budget for Colorado College's Zuia Project

At time of proposal submission, currency exchange from USD to KES is 1:80.62.

<u>Item</u>	<u>Cost</u>
Vocational training*	
12 regular sewing machines	\$4800
1 jersey sewing machine	\$1200
Fabric, thread, miscellaneous materials	\$1700
<b>Subtotal for vocational training</b>	<b>\$7700</b>
Administrative costs	
Tailoring instructor wage	\$1000
Premises and rent for three months	\$800
<b>Subtotal for administrative costs</b>	<b>\$1800</b>
Youth friendly center	
School supplies (paper, pens, chalkboard, etc.)	
Drinks, snacks	
Recreational items (soccer balls, movies, etc.)	
<b>Subtotal for youth friendly center</b>	<b>\$500</b>
Food**	
\$14 per day per person for NUMBER OF DAYS	
<b>Subtotal for food (for four team members)</b>	<b>\$0</b>
Lodging**	
Team member home stays (\$12.40 per person per day)	
<b>Subtotal for lodging</b>	<b>\$0</b>
Traveling expenses***	
Airfare	
Land transportation	
<b>Subtotal for travel</b>	<b>\$0</b>
<b><u>TOTAL</u></b>	<b>\$10,000</b>

\*Cost of all of materials and supplies quoted by our main contact, Dan Ogola, co-founder and current country director of the Matibabu Foundation.

\*\*Team members will be personally responsible for home-stay and food costs. Home stay families will provide most meals for team members.

\*\*\*Airline tickets and land transportation for each of the team members range from \$2,500 to \$3,000 each. Team members will take full responsibility for the entire cost of their own ticket. Ticket cost will be covered by a combination of Colorado College Venture Grants, the McHugh Leadership Fund, team members' own savings, and family contributions.