



SAFE Samburu

## Annual Impact Report

August 2020 – July 2021

### Introduction

The SAFE Samburu team has continued to serve the community, make progress against their aims and have a significant impact. The team has seen a continuation of the dialogue and commitments to action from each section of the community. This is building on the significant shifts which were observed between the 2016 baseline and the data collected in the workshops at the beginning of 2020 and presented in the 2020 annual report.

Samburu's continued messaging and educational interventions have increased the level of knowledge on HIV, meaning that more people are using condoms and more women are visiting the dispensaries to give birth. Although stigma for people living with HIV continues, there are more calls for PLWHA to be looked after in the community

The updated screening activity, and the continuation of the smaller workshops has made space for the conversation to develop. Events that have happened in the community, such as the Kisima Declaration, have aided the team's progress in building support for FGC abandonment, gaining the support of leadership groups, and are creating an environment where an alternative rite of passage can begin to be accepted.

This report builds on the progress report submitted at the end of August, breaking the impact down into the six key aims that SAFE Samburu set themselves at the beginning of this grant period in 2019.

### Monitoring, Evaluation and Data Collection

To collect data for last year's report, the team created a pre and post-workshop survey. This survey was given to a sample of participants before, and then after workshops. Although the team was able to get accurate data, they reported that the method of collecting data was not sustainable, as they struggled to write the narrative report of the workshop, facilitate and fill out the surveys at the same time.

In addition, the team wanted to measure the information that was retained by participants in the weeks and months after an activity. Conducting M&E immediately after an activity could have shown a higher level of knowledge and understanding than was the reality.

S.A.F.E. therefore created a new specialised M&E activity - Focus Group Discussions - in order to gain feedback from the community, and gather data to measure progress against the aims of the project.

The data in this report has been extracted from focus group discussions, dispensaries and workshops in both Nyiro and Westgate. The switch to Focus Group Discussions allowed for both a qualitative and quantitative way of tracking the progress made. It has helped create a picture of the why behind the numbers. The sessions are moderated by the SAFE Samburu team but the input is all from the community.

## **FGC**

### **Aim 1: Increase in families who are willing to abandon FGC**

As stated in the progress reports. The team has seen a significant increase in the number of participants who are supportive of FGC abandonment. Both the men and women report in the workshops that they see the need for FGC to end, and report wanting the leadership to provide them with an alternative way forward.

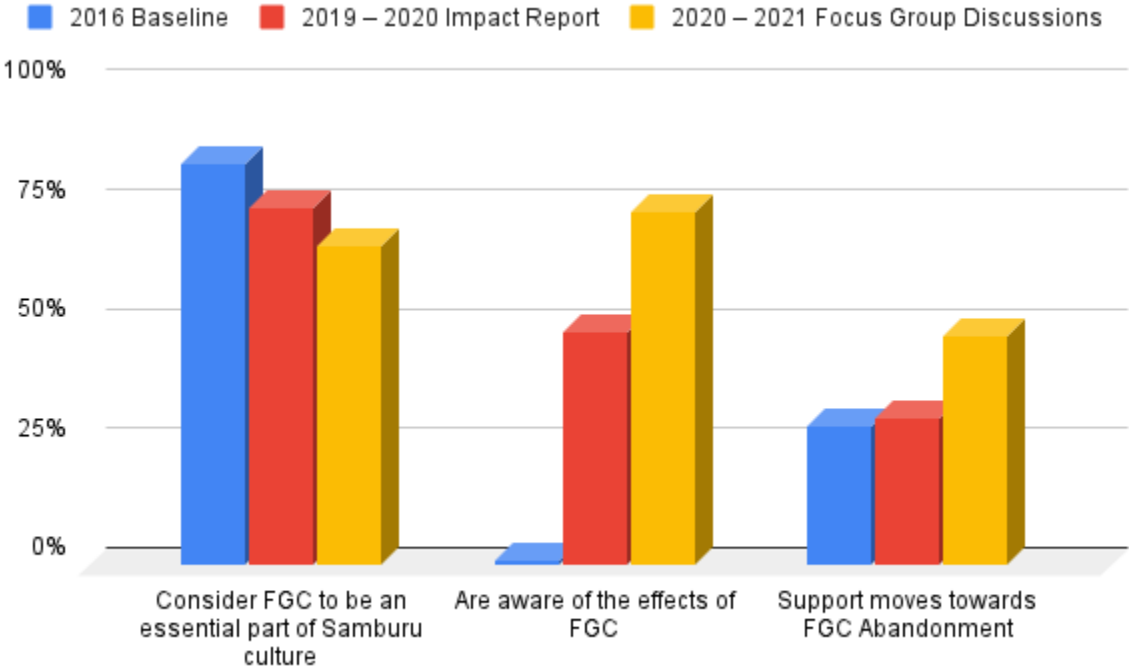
The Kisima declaration has also had a positive impact on this aim – now that the process towards FGC abandonment has been blessed, the community feels freer to show support. The team has also reported a change in the tone and types of questions they are receiving in activities. Before, the questions were about why SAFE Samburu was trying to abandon the culture, but now they are more focused on understanding why FGC is being abandoned. This is because there is a better understanding that SAFE Samburu is not against the way of life of the Samburu community, but only against the practices that are harmful to the health and wellbeing of the community.

The focus group discussions showed that across all of the social groups, just under half of the participants supported FGC abandonment (49%). This was significantly higher amongst the women at 78%. It was also interesting to note that 23% of participants neither agreed nor disagreed – showing they were yet to make up their minds on FGC abandonment.

Knowledge of the effects of FGC is growing, and this is helping to shift people's attitudes. Not only are people more aware that FGC has harmful effects but they have a wider knowledge of them and can list more than one effect. The top 3 responses were complications during childbirth (24%), excessive bleeding (21%), and scarring (8%).

Below is a table showing how the attitude shift has taken place:

	2016 Baseline	2019 - 2020 Impact Report	2020 - 2021 Focus Group Discussions
Consider FGC to be an essential part of Samburu culture	84%	75%	67%
Are aware of the effects of FGC	1%	49%	74%
Support moves towards FGC Abandonment	29%	31%	48%



**Figure 1: Attitudes towards FGC in Samburu**

**Aim 2: Increase influential groups supporting SAFE Samburu’s FGC campaign**

At the beginning of this project period, and inspired by SAFE Maa’s declaration of abandonment, SAFE Samburu set out to engage with their own local leaders, both in Westgate, and in the culturally significant Nyiro. Their objective was to get the support of the leaders and create a strategy in partnership with them.

The team have made considerable progress in this area, and has made connections with and got the support of leaders in both areas. The Kisima

Declaration also had an impact in this area, as it set an expectation that leaders from throughout Samburu County should become active in the abandonment of FGC. This was particularly true of the leaders from Nyiro who were closely involved in the event:

*“We need to come together as Samburu leaders to rescue our culture because if it is not done, then the illegality of FGC will force us to abandon not only FGC but all the cultural practices which are attached to it and are so dear to us as Samburu people.”*

Lesikoyo who was among the planners of the Kisima declaration

*‘Although Kisima declaration was a rushed thought, it is still good for the Samburu people because it has opened the door for many people who already abandoned the practice but are still afraid of losing their culture and identity as Samburu. This is because they can now comfortably conduct their ceremonies without cutting their girls and without fear of shame from the community members*

Lemarlani a leader from Nyiro Location

Although they are active in the FGC abandonment campaign, the leaders from Westgate had more reservations about Kisima, and believed that an alternative should have been found before the blessing was done:

*“The time was not yet due to do the blessing because activities should have been done to discuss and approve the possible alternative rite. Major cultural norms that have changed over time have negative setbacks if not well directed, hence the Kisima event needs further deliberations before its implementation. FGC is a major cultural norm that is embraced in the culture. The Marsabit communities are important in this process of change because they had conducted similar major changes of the culture in the past, therefore they could be crucial in building ideas to abandon FGC.”*

Lekarkaraule, A leader from Westgate

### **Aim 3: Creation of a Samburu Specific Alternative Rite of Passage (ARP)**

At the beginning of the project period, SAFE Samburu planned interventions with the TBAs in order to create an ARP. They found that this group, as well as other women and men in the community, felt that it was not their place to suggest an alternate rite. They said this should be left to the leaders from all of the regions where the Samburu live together. The team, therefore, shifted their attention to creating an environment where an ARP could be accepted, whilst pushing the leadership towards a solution.

The data collected in the Focus Group Discussions, as well as the feedback from the participants in the workshops, have shown that the SAFE Samburu

intervention, combined with the Kisima Declaration has created an environment where an alternative rite of passage can be created. Participants across the different workshops are calling for the leadership to come together, discuss the rituals attached to FGC and come up with alternatives to save the culture. The community feels that although the Declaration was a step in the right direction, the biggest challenge would be identifying what should be done instead of the cut.

Alongside these calls, the team is also seeing other signs that the community is ready for an ARP. From the focus group discussions, 49% either strongly agree or agree with girls choosing their own rite of passage. The majority were women followed by youth. A girl from Sukuroi said she did not want to go through FGC because she did not want to get any infections. Another in the same focus group discussion said that she wanted to choose for herself because her parents may not want what she wants for herself. In Kiltamany a youth said that since the girls are the ones who will suffer the effects of FGC, they should be able to choose whether to get cut or not. A moran from Lonjorin encouraged consultation between the parents and the girls to make the right choices

In one of the focus group discussions, a moran from Lonjorin said sunna had become more common as people try to balance culture and the law. Sunna is a lesser cut, thought to be type 1 circumcision or similar, and is seen by some in the community as a stepping stone to FGC abandonment.

This shows that the cultures around FGC are already changing, an indication that an ARP can be accepted.

## HIV/AIDS

### Aim 4: Increase in condom use/ VCT services

<b>Condom Use</b>		
Data Source	Number of boxes of condoms used per month (1 box $\cong$ 144 condoms) April - September	
	2020	2021
Ng'utuk Ong'iron Dispensary	5	8
Remot Dispensary	3	4
Westgate Dispensary	1	4
Kiltamany Dispensary	No data provided	4
<b>Total</b>	<b>54 boxes</b>	<b>120 boxes</b>

Overall, condom use has gone up in the area. Following the setting up of condom dispensers managed by the team, the health centres have been encouraged to

improvise condom dispensers in their own facilities to meet the demand from the community. The dispensers provide their users with anonymity, and are not reliant on staff in being attendance at the dispensary, and have therefore increased the numbers which are distributed.

<b>HTC Data</b>			
Location	Number of people tested for HIV April – September		Comment
	2020	2021	
Ng’utuk Ong’iron Dispensary	1579	33	The attendant at the dispensary said that the drought had really affected the number of people going for VCT services. Only 1 man had come for testing out of the 33 people in the last 6 months. The men were out with their livestock and others were out of the area trying to find alternative sources of income.
Remot Dispensary	106	No data provided	The team visited the Remot dispensary on two separate occasions, and the nurse was not there each time.
Westgate Dispensary	82	82	The dispensary did not have testing kits for two months and had to turn away people who came for testing.
Kitimany Dispensary	No data provided	114	
<b>Total</b>	<b>1677</b>	<b>229</b>	

The SAFE Samburu team have experienced considerable challenges in conducting their activities and gathering data due to the worsening drought situation. Desperate for food and money, morans have been attacking and robbing cars on the road. S.A.F.E.’s land rover was one of many vehicles attacked in the area. It has therefore been hard for the team to visit the health centres regularly to get accurate data. As a result, the data in the table above is incomplete.

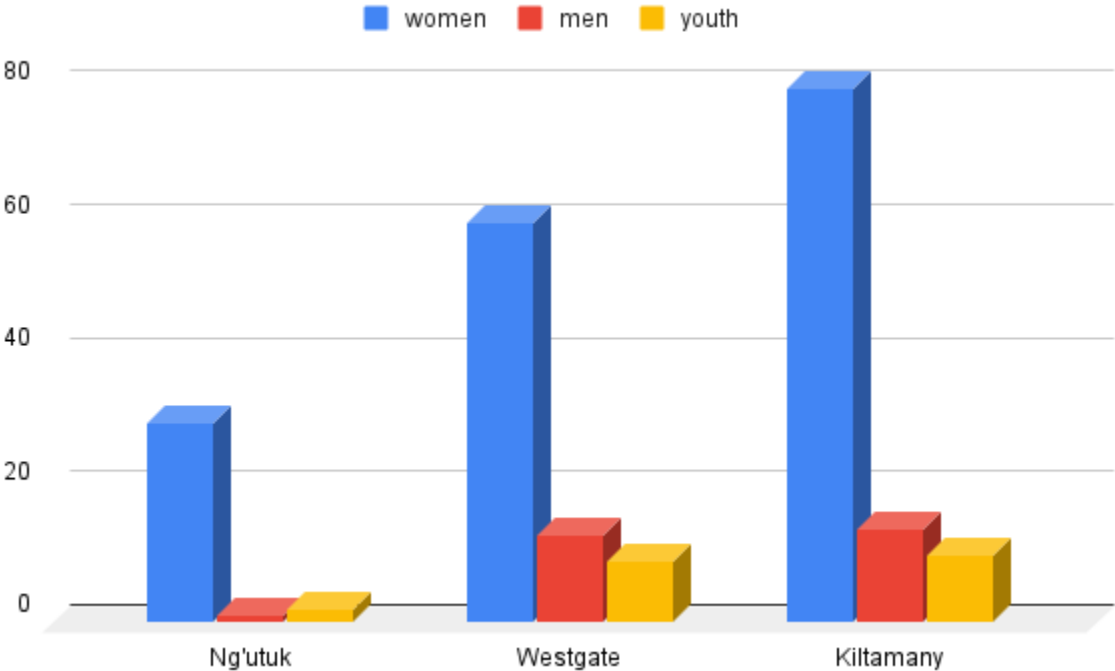
The initial surge in numbers for those going for HIV testing in 2020 and early 2021 was very encouraging, however, the data collected for the past 6 months, although incomplete, shows a much less positive picture. Low testing has also been attributed to the worsening drought which has caused people to move away from the community in search of pasture, and has stopped a lot of health activity due to insecurity.

The lack of staff and equipment at the dispensaries is also a considerable stumbling block to success under this aim. Even prior to the drought, residents of each zone have undergone challenges when trying to go for testing. The

residents of Naisunyai have not had any access to health care throughout the period, and they have narrated their frustration to the team during the workshops. A new dispensary was built there three years ago, but it does not function. One participant, Agnes Lekumoisa told the team that she had to make the journey to a dispensary in Lengusaka, outside of Westgate, in order to be tested. She said that others in her community would go for testing, if the services were available to them. The team believes that people are willing to go for testing, but only if it is convenient for them. In this period of drought, earning an income is eclipsing all other activities.

The team is also aware that people often do not do repeat testing, contributing to surges and then lulls in testing certain areas, such as Ng’utuk. However, it is very difficult to get a clear read of this, due to the other significant challenges the community are facing in accessing the health centres.

**HIV testing broken down per social group**



*Figure 2: Persons tested for HIV over the last 6 months*

Women continue to be the largest group of people seeking VCT services. This can be attributed largely to antenatal care requirements. Below is a breakdown of the people who sought VCT services in the health centres. The drought has made many men move away from the community in search of pasture for livestock, leading to a drop in population in the area.

The team is eager to start their new activities, one of which is community health days which aim to promote and improve the accessibility of testing for the community. These results show that there is a desperate need for this activity – to build the capacity of the health centres, involve more men and youth in HTC testing, and promote regular testing within the community.

### **Aim 5: Increase in acceptance of those who are HIV positive**

Over this period, the team has seen a small increase in the number of people who are coming forward and requesting support from the SAFE Samburu team, revealing their status to them and requesting support. This was encouraging because it shows that there are people living in the community with HIV, and that they feel able to reveal their status.

In addition, workshops participants, particularly the women, have been active in discussing the psychological stress involved in receiving a positive status, and how people need to be supported within the community in order that they can live healthier lives. Nariku from Kiltamany, encouraged fellow women to take care of PLWHA and advised them to try and reduce the stress on PLWHA generated by the illness. Nowuoso added that PLWHA needed to go to health care services to retain their good health, but admitted this was a difficult thing to do.

However, these case studies also showed the challenges that individuals living with HIV are encountering, making it difficult for them to adhere to their medication. People have said they are not comfortable going to the dispensaries because there are too many people there, and someone might discover their status. The feedback from the workshop participants in Sukuroi highlighted the stigma which is still prevalent in the community. The participants in the mixed workshop identified HIV with sex work only, with some insisting that you could tell someone was HIV positive by looking at them - that they were thin, unfriendly, had yellow hair and looked skeletal.

Despite these persistent prejudices, there have been positive changes, but the team is aware that there is much room for improvement. Care of PLWHA and the removal of stigma will continue to be key themes in SAFE Samburu's work. The new support group activity will also be a key part of pushing forward change under this aim.



## **Aim 6: Improved general knowledge on HIV transmission, prevention and treatment**

Both Westgate and Nyiro residents are showing an increased level of knowledge. The type of questions asked in the workshops has changed. Over the past two years, community members are asking more specific questions around treatment and management. It is no longer an issue of whether or not HIV is real, it is a matter of how do they protect themselves and how do they manage it if they are infected.

Questions asked include:

- How is it possible for a couple to get a child who is HIV negative while both of them are HIV positive?
- How then can a mother ensure that the child is not infected by breast milk if she is HIV positive?
- Are condoms also useful in preventing sexually transmitted infections?
- Is it possible that fluids like saliva, urine and sweat can transmit HIV/AIDS?
- If one uses a condom properly and one at a time can it prevent me from getting infected even if they engage in sex with an infected person?
- How many times can one use one condom in case they don't have many condoms?
- Why do people use ARVs despite the fact that they do not cure HIV/AIDS?

In addition, at the beginning of workshops, when asked what they know about HIV, participants no longer only say that it is a killer disease without any cure, they talk about the ways that it is transmitted and show a desire to find out more details so that they can take action against it.

Traditional Birth Attendants (TBAs) are also more vigilant. They know that they are at risk of contracting and spreading HIV. They are taking the necessary measures such as using gloves when assisting women, to protect themselves and those they serve. They are also encouraging more women to go to antenatal clinics and to deliver at the health centres.

## **Conclusion and recommendations**

### **FGC**

The SAFE Samburu team is encouraged by the progress which has been made in the FGC project over the past two years. They are seeing a significant change in attitudes towards the importance of FGC as part of the graduation for girls, and continue to see more and more people come forward at the end of workshops and show their support for FGC abandonment.

Although there is support, there are still fears of stigma if girls are not cut, and what will happen to the other cultural rituals surrounding FGC if it is abandoned. Therefore, answering these questions and filling in the gaps left by the Kisima Declaration will be a key part of the team's strategy for the next couple of years. This will involve close interaction with the leadership, and building a consensus on the necessary components for an alternative rite of passage - ensuring that all the community is involved - and no one feels left behind.

### **HIV**

The knowledge is now firmly with the community. The workshops are moving forward, away from basic knowledge and towards more specific information and pushing for active behaviour change. The increase in condom use is a very positive sign of the community taking action to protect themselves and each other. The positive actions reported by the TBAs and reports from health centres are showing that women are going for testing, and giving birth in health centres. This is proof of increased awareness of mother to child transmission which had been a key area for improvement identified in the previous impact report.

However, the provision and take up of testing, and the stigma towards and disempowerment of PLWHA are two areas which need urgent attention. The data from this year has shown the progress in this area is not linear and the team need to continue to promote testing, and increase the accessibility of testing if there is to be sustainable change in this area.