



# Overview of this Children's Home

## **Background & Mission**

Huruma Children's Home Ngong is located in Olkeri Village, near Ngong Town, Kajiado North Sub-County. The founder and director, Mama Zipporah, started a bible club in her house in 1984 and was invited to an open air meeting in one of the slum areas of Ngong (Mathare). She saw many children scrambling for food, which moved her to start a club and later establish a feeding program through the help of wellwishers. Some land which had been donated to her was later taken back so she moved to family land on which the home stands to date. In 1989, Mama Zipporah and her husband founded Huruma Trust Fund, which is composed of representatives from the department of social services, local administration, the local church and the community. The trust started the home that same year in a housing structure that was made of mud and wattle and accommodated 7 children. Later, the Trust saw a need to start a primary school and eventually a secondary school. Over the years, the number of children supported has increased to over 150 girls and boys. The age of children ranges from 0-18 years old.

The vision of Huruma Children's Home is that every child who comes to Huruma will have a personal relationship with Jesus Christ and excel in academics so that they are fully equipped to become future Christian leaders. Their mission is to empower children in need to become productive members of society through rehabilitation, education and self reliance skills.



### **The Thrive Assessment**

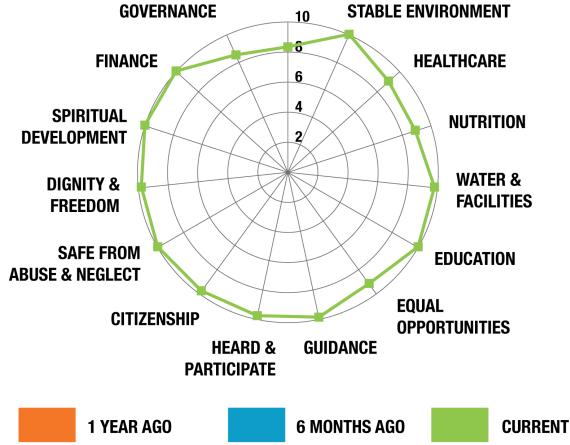
#### What is the Thrive Assessment?

In 1959, the United Nations (UN) adopted the Declaration of the Rights of the Child, which defines children's rights to protection, education, healthcare, shelter, nutrition and more. We have codified all 13 Rights, as well as a Finance Standard and a Governance and Human Resource Standard, resulting in a total of 15 standards. These standards ensure that children receive care that truly helps them to thrive, now and in the future.

The Thrive Assessment will be administered every 6 months with each partner home to chart the progress of each standard. Our team works with caregivers to outline next steps which and compiled into an Improvement Roadmap.

#### **Current Thrive Scale**

## **FAMILY ENVIRONMENT**



# **Strategic Initiatives**

#### HIRE A SOCIAL WORKER

PROJECT DESCRIPTION	The home does not have a social worker specifically for the job, the counselor takes up the role as well. In order for her to offer better therapy services to the children, she needs help with social work programs.
ESTIMATED FUNDING	\$ KES 25000 \$ 175 USD

#### TRAINING FOR CAREGIVERS

PROJECT DESCRIPTION	All training has been done in house for the Caregivers(Dorm Matrons). There is a need for them to receive professional Trauma awareness training so as to better understand the children they are serving.
ESTIMATED FUNDING	\$ KES 15000 per session \$ 105 USD per session



#### Right to Live with Family

**SURVIVING** 

SUSTAINING

**THRIVING** 

Currently the home has a total of 77 children and 8 caregivers. The home runs a boarding school and the children are accommodated in dormitories according to their ages, with a matron for each dormitory. All staff including the director act as caregivers for the children. The youngest babies sleep in the director's main house while there is a caregiver allocated to care for them during the day. One caregiver is assigned to supervise 9 children. The caregivers stay with the children at least 5 days a week, hence functioning as a family. The home keeps a record of each child in individual files. Trauma care training for caregivers happens, but it is in-house. Monthly orientations for caregivers are also done in-house from the senior staff. Sibling bonding is encouraged to ensure the family bonds don't fade. The home works with a counselor who doubles as a social worker and identifies possibilities of facilitating or unifying children with families, where possible. The home has a transition house where children go to after high school to be prepared for independence. Caregivers have no access to external therapists on the care they are providing to the children, but on a monthly basis the internal counselor gets to talk with them. Family visitation is also done monthly.

☐ Hire a social worker to alleviate the burden of work on the current counselor.



#### Right to a Stable Environment

**SURVIVING** 

**SUSTAINING** 

**THRIVING** 

House rules are explained clearly and communicated appropriately to the children so they can understand expectations. Consequences for infractions of rules are done positively based on their age and ability. Caregivers, staff and children ensure that preferred names are used. It is not common to have cases of nicknames. The children engage in unstructured play such as watching television, playing and styling each others' hair. They eat and play together according to their family groups based on age, gender or living groups. Caregiver meetings happen twice a month internally to help effectively teach and discipline the children under their care. Every caregiver goes on leave for 4 days each month, which are broken up weekly. On a daily basis, a caregiver receives a day off and the following day a different one gets time off. There are no turnovers, and the current turnover rate is under 20% since caregivers commit to at least 2 years of service or more. They have activities such as scouting, watching movies, farming, playing and celebrating birthdays on a monthly basis. For the abandoned babies, the children's birth dates are created and celebrated.



**SURVIVING SUSTAINING THRIVING** 

The home has a health clinic and a nurse who does frequent wellness checks on the children. Deworming is also done for the children frequently. For the younger ones, the home ensures they are vaccinated and that documentation is kept. For the older ones, not all documentation is available since they are abandonment cases, so information about their records is not available. Soap and water are readily available near all dining areas, toilet facilities and nursing areas. The caregivers always remind children daily to wash their hands after using the bathroom and before eating. The home has identified a specific hospital where the children are taken and those with HIV are taken to special hospitals. Adolescent girls have access to feminine hygiene products in sufficient quantities as well as appropriate disposal methods, which involve burning them daily. The children brush their teeth once a day and children are changed immediately after soiling themselves. There are no vision or dental exams scheduled to happen annually, but cases are addressed as they arise. No cases of lice have been seen, but the children are checked monthly for ringworms which are treated if spotted. Each child has a file that includes all their details, and the home has fully stocked first aid kits. Children are able to see doctors when needed, but there is no specific fund for medical matters. The clinic is fully stocked and a professional nurse is available all the time. Proper measures, training, and treatment plans are in place for children with special medical conditions. There are no children needing orthodontics checks at the moment, but this would be addressed if it is required.

Encourage children to brush their teeth at least twice a day.



**SURVIVING** 

SUSTAINING

**THRIVING** 

Children eat enough calories to sustain their growth and their food is prepared in a hygienic manner. The home has four cooks who are certified for the job. Kitchen, dining and food storage areas are free of toxic substances and pest control is done regularly. The kitchen is kept clean and the area well ventilated. There are adequate open windows and a sufficient chimney. Children receive appetizing and tasty foods. Proteins and vegetables are incorporated daily whereas fruits are given when available. There is no professional nutritionist who ensures children are receiving appropriate nutrients, but there is an in-house check. Cooks are not trained annually on food safety, but internally instruction is provided to ensure proper guidelines are followed.

Consider annual training for the cooks.



#### Right to Safe & Adequate Water & Facilities

**SURVIVING** 

**SUSTAINING** 

**THRIVING** 

The home has a borehole from where they get water for all use. The facility has been inspected by a qualified individual from the ministry of health and the water is certified to be safe. Each bathroom and living area has at least 1 functioning bulb. The home has a safe disposal method for sewage and wastewater that does not contaminate the drinking water. They have understood emergency plans in case of fire and black outs (fire extinguishers and solar power). The home has reliable support and skilled personnel to attend to maintenance needs that arise. Safety concerns have been addressed and the facilities are safe and capable of withstanding the elements. The children can access safe drinking water at any time. For bathing, the children use buckets since there are no shower heads in place. There are smoke alarms which are checked annually. The outdoor premises are adequately lit. Children do not participate in drills with the staff, but are informed of the actions to take in case of such emergencies. The home also has a generator as an alternative power source in case of outages. The children are informed on the importance of drinking water, and training on safe drinking water is done in-house for the staff.

Establish a way of conducting fire drills



#### Right to Quality Education

**SURVIVING** 

**SUSTAINING** 

**THRIVING** 

Every child is able to go to school as required. There is a primary and secondary school in the home. Children 7 years and over are able to identify each letter of the alphabet and articulate their sounds and if not, they are supported effectively by teachers from the school. 11 years and over are able to read and write and assistance is offered for the few children identified to have difficulties. 9 years and over are able to do basic addition, subtraction and multiplication with a specific teacher assigned for those with lower math abilities. Regular activities are conducted with children below school age including a play group and childcare room where daily activities take place. Quality evaluations are used to identify children with learning disabilities. There is internet access and group tutoring for the children. They also have a library with 75+ books based on age and reading levels. The children are able to be assessed and there is a plan in place to improve their literacy abilities. The home has put in place funding and housing available for children to transition to independent living and pursue additional education. Children below school age have access to and play with toys in sufficient quantities. A mentor and a tutor discusses grades and makes a plan for each child. The children are able to access computers as the home has a computer lab and a computer technician. There are age-appropriate art supplies available for all children as well. One on one tutoring is available based on need and teachers from the school are available to offer assistance. Continue with the current practices.

## Right to Equal Opportunities

**SURVIVING** 

**SUSTAINING** 

**THRIVING** 

Each child has a box which is the dedicated space for their own personal items. They all receive equal opportunities to develop in their education and those with disabilities have reasonable accommodations. The home provides a transition opportunity into independent living. Both male and female adults act as role models and there are resources and materials available for those with learning disabilities. The home does not have physical disability cases, hence no measures have been put in place to accommodate them. For the few children with mild cognitive disabilities, resources and expertise have been identified to accommodate them.

Continue with the current practices.



**SURVIVING** 

SUSTAINING

**THRIVING** 

The home has a profile and a job description to use when looking for new caregivers. Caregivers model respectful behaviors and children are educated about their bodies and on their respective boundaries. There are simple guidelines set to help children understand expectations. Every Friday morning they hold life skills sessions and on Thursdays they have mentorship sessions. Resources are provided weekly on psychological healing and therapeutic needs. Caregivers are evaluated in-house to ensure that they qualify to offer mentorship to the children. Changes expected during puberty are well explained to adolescents by a trusted person. The caregivers are trained internally on how to model, teach and reinforce basic life skills and behaviors. Children above 11 years receive education about sexual behavior every Friday. There is a child protection policy in place. In-house training for caregivers is provided on sexual behaviors. Children are provided with psychological healing and therapeutic resources on a weekly basis. Children ages 15+ are exposed to different work including farming in the home garden. They are also prepared early enough about the transition to adulthood and there is a written document concerning the transition procedures. They have a transition home where young adults gain independence and are guided to look for jobs while working in the home. After a certain period at the transition home, they start paying rent of a thousand shillings per month to the home for upkeep and food support. A documented life skills program is present and used regularly. Communication and support is done for those in vocational training. There are 26 young adults currently in vocational training and universities. A monthly meeting is done with them as well to assess progress and receive guidance. They are also taught on matters of banking for the future, which has proven to be an essential skill.



#### Right to Be Heard and Participate in Decisions

**SURVIVING** 

**SUSTAINING** 

**THRIVING** 

There are plans and expectations well communicated to the children, but they have a choice to decide on what they want to do with their free time. When children verbalize and express their needs, they are looked into. Children do not often participate in menu planning since the home works on a budget, but they can participate once in a while, especially during special holidays. Children can pick out what outfit they would wish to wear, as long as it is decent. Children and caregivers are given information on healthcare procedures prior to their administration and they are also given a chance to ask questions. The children can opt out of non essential activities considering their preferences. Individual development plans have been made for all the children and are updated periodically. The home has activities for leadership roles in all areas e.g in class, dormitories, church and other areas where the children are involved.

Continue with the current practices.



**SURVIVING** 

**SUSTAINING** 

**THRIVING** 

There is a birth certificate for every child. Caregivers are trained in-house to help the children learn and practice responsibility. Personal responsibilities like age appropriate chores such as cleaning are assigned. They observe national and local holidays and major events are shared with the children. The home is free from litter and all objects are stored appropriately. The children are taught about ethics and governing processes in an age appropriate course. Every Thursday, the caregivers are given a class in the school to teach on life skills. There are opportunities for creating shopping lists as they go to purchase their products with their pocket money given by the management. Service in the community is only done when the school is called upon by different entities.



**SURVIVING** 

**SUSTAINING** 

**THRIVING** 

The home security is adequate and there have never been any security concerns. There are private facilities for bathing, toilets and dressing. There are 43 boys and 34 girls with separate sleeping facilities for the two genders. Dormitories are divided into cubicles and shared with children in the boarding wing of the school. Internal training on positive discipline techniques is done with the staff and a policy that enforces no one on one time between individuals is in place. There is a child protection policy that ensures children are not abused or exploited by caregivers. The caregivers are trained in-house consistently on procedures to recognize and prevent abuse. Abuse awareness is addressed every week with the children as well. The children are accompanied for outings by their caregivers or teachers. There is a visitor policy in place which is well adhered to by guardians and children. The home has an established process for checking staff background. In this particular case, police clearance certificates are a requirement during intake assessments and are used by the professionals in the home and school to evaluate a child's need to work through trauma and receive counseling.

Continue with the current practices.



**SURVIVING** 

SUSTAINING

**THRIVING** 

The children are bathed daily and every child has their own bed. They are instructed against belittling and bullying each other and if any case is reported, appropriate discipline and correction is done immediately. Children are encouraged to do as much for themselves as possible, depending on their age. Consequences for infractions of rules are discussed with children ahead of time. Proper bed linens are available, cleaned weekly, and changed daily for the soiled ones. Each child has their own tooth brush and their own towel. They have an adequate outdoor play area, access to toys and are encouraged to speak in English and Kiswahili, rather than in their native language. Children have an opportunity to do extra chores/work at the orphanage to earn an allowance. Older children also have the opportunity to work in the community in a safe environment and keep what they earn.



SURVIVING SUSTAINING

**THRIVING** 

The children have an opportunity to be part of a spiritual community. The home has a chapel where the chaplain is an alumni of the home and children are free to practice Christian communal prayers two hours daily. They participate in religious holidays and have spiritual and religious materials accessible. Children are given service opportunities to practice their learnings through preaching, singing, worshiping and ushering. There is also a quiet place available for prayer and meditation.

Continue with the current practices.



**SURVIVING** 

SUSTAINING

**THRIVING** 

The home has a form of keeping records and all receipts are well kept. A financial software is available for the same purpose. Records are maintained and available for review. Income tax fillings have been done accordingly with records being reviewed monthly. They have a monthly and annual procedure whereby they follow budgets and create profit and loss statements. Bank accounts are reconciled monthly. An external review is done on the financials. The home has detailed plans for their major expenses. They have an external auditor who does the review as well as an internal one.

## எத்த Governance and Human Resource Standard

**SURVIVING** 

**SUSTAINING** 

**THRIVING** 

The land has not been secured in the name of the orphanage since it is owned by the director's family and was started through an individual initiative. Orientation is done appropriately for new caregivers who then sign contracts detailing their terms of employment. Caregivers and staff also get job descriptions outlining their responsibilities. The home complies with all governance requirements and is fully licenced to operate as a charitable institution. In-house training for the staff is done on attachment and child development and they attend annual training on caring for sick children and promoting good hygiene to prevent illness. They are internally trained on the importance and practical ways to facilitate child participation. However, currently the home lacks training specific to trauma informed care. The home abides by a vacation and a leave policy for all staff and has an active board of directors.

Provide trauma informed care training for caregivers.

# Current **Improvement Partners**



#### Child in Family Focus

Child in Family Focus - Kenya champions family-based care for Orphaned and Vulnerable Children through Supporting National Care Reform efforts.

The organization engages, enlightens and empowers Charitable Children's Institutions and families for life-changing outcomes through offering technical support in project reviews, organizational capacity development and mentoring on transitioning models of care for OVC.

At Child in Family Focus, all is done to God's glory - pressing toward the mark for the prize of the high calling of God in Christ Jesus. (Philippians 3:14)

> For a list of projects and opportunities to coordinate on go to www.ACHF.org/Projects





A CHILD'S HOPE