



# Annual Report 2018

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Development Pamoja is a registered Community Based Organisation in Kenya (No. NKU/DSS/CBO/041).

Development Pamoja Ltd. is a registered Charity in Ireland. CHY No 19370.

# 1 MISSION STATEMENT

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To relieve poverty by assisting in the establishment of viable community-based co-operative enterprises in Kenya and providing financial, technical and all relevant assistance to such community-based co-operative enterprises.

In our operation our core values are:

- Transparency in both Irish and Kenyan operations and reporting to our donors and regulatory authorities
- Ensuring collaboration with the local community on all projects
- Efficient and innovative use of funds
- To keep salary and administration costs to a minimum.
- To learn from past projects and experiences

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### 3 CERTIFICATION

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Development Pamoja (Kenya) was registered as a Self Help Group in Kenya in June 2010 and we upgraded our status in 2011 to that of a Community Based Organisation(CBO), allowing us to work in more districts in the Rift Valley province.

Funding for the projects carried out by Development Pamoja, CBO is provided by the Irish Registered Company, Development Pamoja Ltd., incorporated in June 2010. (CRO No 487136).Charitable Exemption was granted by the Revenue Commissioners to Development Pamoja Ltd on 27/8/2012 (Charity No: CHY 19370).

Authorisation as an “eligible charity” for the purposes of Section 848A Taxes Consolidation Act 1997 (Donations to Eligible Charities and Other Approved Bodies) was granted to Development Pamoja Ltd on 30/10/2014.

Development Pamoja Ltd is registered with the Charities Regulatory Authority in Ireland (Charity No: 20075859).

## 4 GOVERNANCE

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Development Pamoja CBO is governed and funded by Development Pamoja Ltd. The Project Co-ordinator of Development CBO reports to the board of directors of Development Pamoja Ltd.

### 4.1 DEVELOPMENT PAMOJA LTD. (IRELAND)

Development Pamoja Ltd. is governed by a board of directors, based in Ireland. The primary role of the board of directors is to ensure the success of Development Pamoja by directing its affairs, ensuring its principles are upheld and ensuring compliance with all legislation and regulation.

The board of directors meets quarterly and members are elected at the AGM. All members of the board serve on a voluntary basis and the current membership of the board is as follows: Rachel Gordon (Chairperson), Catherine Hennessy (Secretary), Lynn Sheehy, Thomas Cussen, Mary O'Connor, Deirdre Hennessy, Alva Sheehy and Brian Lyons.

### 4.2 DEVELOPMENT PAMOJA CBO (KENYA)

There are three permanent staff employed by Development Pamoja CBO to run the charity in Kenya; they are James Hennessy, Kipruto Maasai and David Okinja. There are also medical staff employed in the medical centre and a person employed to oversee the security of Development Pamoja's buildings and assets.

James Hennessy is the Project Co-ordinator of Development Pamoja CBO. His two primary responsibilities are (1) the management and running of all current projects and (2) the identification and planning of future projects. He reports directly to the board of directors of Development Pamoja Ltd.

## 5 GENERAL UPDATES

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During 2018 we were very happy to welcome a number of different visitors to Kenya to see the good work being done by our team. These included the following;

- Rachel Gordon and Brendan McGuire (on behalf of the Board of Directors)
- Mary Lou , Eoghan and Joe Murray (from Afri Ireland)
- Fr. John Dunphy (from the Kiltegan Society)
- Fr. Francis Murray
- Ciara Kilbride and Cormac Fitzgerald
- Steve Kiely

We would like to thank everyone for their time and interest. We look forward to working together again in the future.

One of the visitors Cormac Fitzgerald, a reporter for TheJournal.ie, visited Development Pamoja in 2018 and following his visit wrote an article in TheJournal.ie about his stay and his experiences visiting the different projects. The full article is included at the end of this report.

## 6 PROJECT UPDATES

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### 6.1 MEDICAL CENTRE

*Funded by Development Pamoja Ltd and CASA*

In June 2015 we opened a Medical Centre on the grounds of our demonstration farm. We cater for a community of over 3,000 people and are the nearest medical facility for 2,000 locals. We have the only physiotherapy unit in the Rongai constituency and are the first facility in the Mogotio area to provide ultra sound services (started in 2018).

Our medical centre has led to a significant increase in preventive health care in the area. Ailments such as hypertension and diabetes are much easier to manage with our facility nearby and this has led to a reduction in the amount of people dying from these manageable diseases. Access to our medical centre for laboratory services for diseases such as malaria, typhoid, brucella etc. has led to more accurate diagnosis.

So far over 7,000 people have availed of our services, between the clinic and the outreaches, with approximately 70% availing of our services on more than one occasion.

The following are the services we provide to the community:

- General consultancy (small fee €0.50 per adult and €0.20 per child)
- Vaccination programs (free - in association with the Ministry of Health)
- Ante-natal care (free - in association with the Ministry of Health)
- Laboratory services
- Family planning
- Dispensary service for low-cost medication (as close to wholesale cost as possible)
- Physiotherapy
- Occupational therapy
- Mobile outreach clinics
- Ultrasound service

In addition to being able to add ultrasound services in 2018 we have also increased the equipment available in the physiotherapy unit.

Our medical centre is staffed by a clinical officer, a laboratory technician, a nurse, a physiotherapist and a cleaner. (Note: the physiotherapist's salary is part-funded by CASA through the Disability Program and the members of the CASA program avail of these services free of charge.) The addition of a nurse to our staff in 2018 has enabled house calls for the elderly and the disabled which proved to be very successful.

In 2018 we continued running our two mobile outreach clinics in the remote areas of Kirima and Mutukanio. We closed the Kirima clinic at the end of the year as the government opened a dispensary in the area. However in July 2018 we commenced an outreach clinic in the village of Mangu. These clinics have not only benefitted the communities but they have

helped us greatly in establishing our reputation. Over 500 people used the three clinics in 2018. We successfully hired a nurse this year for the outreach clinics. He has proven to be an excellent addition to the staff and we intend to keep him on fulltime in 2019.

The numbers attending the medical centre was lower than in previous years for a number of reasons. There was less disposable income in the local economy due to a big drop in the price of maize, which is a major source of income for farmers in our area. Also, in September the price of petrol in Kenya rose by 15% overnight which led to all public transport (matatu buses and motorbike taxis) increasing their prices by 50%. For those living outside of Sarambei it became very expensive to reach our clinic. As a result we saw a huge decrease in the number of people coming to us for regular check-ups for ailments such as hypertension, diabetes and arthritis.

The first rainy season was prolonged and we experienced heavier than normal rains. This meant that it was harder for people to reach both our medical centre and the outreach clinics. On one day in May not one person made it to our clinic as the roads were impassable.

We also saw a significant increase in the amount of people who came seeking emergency medical care e.g. extreme cases of diabetes and malaria. This was probably linked to the difficulties mentioned above as earlier treatment would have prevented many of these emergencies. Unfortunately the more extreme the medical case, the more expensive the treatment. In many cases the patients were unable to settle the bill in full. As an organisation whose aim is to contribute positively to society we cannot justify detaining a patient because of a debt of €10. As a result we have subsidised more cases this year than in other years.





## 6.2 DEMONSTRATION FARM

*Partly Self-Financing, with support from Development Pamoja Ltd.*

2018 was an erratic year weather-wise throughout Kenya and that brought certain challenges for our demonstration farm. The long rains were unusually long while the short rains in November never materialised. The progress on each of the main components of our farm is as follows:

### Greenhouse Farming

In February we planted tomatoes in one of the greenhouses and local vegetables in the second. The tomatoes as always were very productive. The local vegetables were successfully harvested, however the profit margins from such vegetables is minimal.

For the first time on the farm we planted cabbages, but these were less productive than we hoped. We suspect that the quality of the seeds was inadequate (seeds were difficult to source and we only found one type of seed available).

In November we prepared both greenhouses but because the short rains never materialised we were unable to plant them as we needed to preserve the available water for our cows.



### Open Field Farming

For the past two years the open field farming has proven far more successful than the greenhouse farming. In March we planted the bottom acre of our three-acre land with maize and beans. In total we harvested 13 bags of maize which equates to 1.2 tonnes of maize. We sold some of this maize, made more available to our various feeding programs and have 8 bags (720Kg) stored for use in 2019. From our bean crop, we harvested 180 kg and stored these beans on the farm for use in 2019.

Because of their success in previous years we again grew cassava and sweet potato. The cassava was harvested and sold but the sweet potatoes are still not ready for harvesting.

The fruit trees had their best year to date. The paw paw trees in particular proved very successful. We were also able to sell bananas and lemons but not on a large

scale. We were disappointed with the income yield from the lemons. We do expect the banana trees to be a success.

Our avocado trees and mango trees are still two years from producing fruits on a large scale. They are difficult to germinate and are proving difficult to protect from cows who are coming into the farm and snapping the plant when it is still young. Once they reach maturity however, the potential as an income source is great. As our other projects grow we feel that it would be a good move to plant more avocado, paw paw and mango trees. Farming them is less labour intensive, does not depend on the rainy seasons and are not susceptible to price shocks as is maize. The drawback is that it is a long-term project but provided the plant survives the first 18 months its long-term viability is strong.



### Zero Grazing Dairy Farm

2018 was a positive year for the zero-grazing project. In January we purchased a heifer from our neighbour, a cross breed of Ayrshire and Siwahal. For the first 6 months milk production was negligible for a number of reasons; in the early part of the year the cows were surviving on hay which is more for sustenance than milk production, two cows were pregnant at this time and a third cow had health problems during 2017 and has always had low milk output.

In July two of the cows gave birth. The first to calf was the Friesian which produced a Friesian heifer in early July. This was the first female calf born on the farm since the inception of this project. The Ayreshire cow gave birth to its second calf two weeks later, producing a bull calf.

Milk production increased significantly when we started milking these two cows, however the Friesian cow's production is not at a satisfactory level yet when you consider the amount of fodder she consumes.

In 2019 we will review whether it is worth keeping her or finding a mixed breed cow which will probably produce less milk but will eat a lot less of our limited supply of grass.



### New Land

For the past three years we have been looking for opportunities to purchase new land but without success. However in August 2018 we finally secured a second plot of land of eleven acres. We are delighted that we can now expand our demonstration farm and look forward to reporting on our progress in the future.

Towards the end of the year we repaired the fence on the new farm and had a gate installed. We also divided the farm into two paddocks of three acres and eight acres. The front three are for grazing the cows so they have some fresh grass and the eight acres to the back of the farm are being used for hay to be harvested in 2019.

The grass on the new farm was planted in 2017 so there isn't an urgent need to replant it. We should conceivably be able to harvest it for two years, however that depends on favourable rains.



### Grass & Hay

We have been using land made available to us by a generous neighbour to date. We have grazed the cows on this land but in future we will be using the new land for this purpose.

We cut hay on two occasions in 2018. In January we baled 356 bales of hay while in August we baled 629 bale of hay, providing us with a yearly harvest of 985 bales.

We used the majority on the farm, sold 110 bales throughout the year and ended the year with a balance of approximately 350 bales on the farm.

As in previous years the grass used for the bales was Bomes Rhodes grass. We also grow Napier grass and thanks to the excellent long rains in 2018 this gave a very good harvest. We used this grass to provide green fodder for the cows (cut in the morning and provided to the cows the same day).

We didn't plant any other varieties of grass in 2018, but this is an option we can explore in 2019 as we now have more land to experiment with. Due to the non-existent short rains, the Napier grass died off towards the end of the year, however this will start to grow again when it begins to rain in early 2019.

In 2018 we also donated 20kg of grass seed to a farmer in the area who did not have the means to purchase the grass seed himself.



### 6.3 DISABILITY PROGRAM

*Funded by Caring and Sharing Association (CASA) Ireland, Fr. Francis McAuliffe (Kiltegan Society), Rachel Irungi & friends.*

All costs incurred in the disabled program continue to be funded by the Caring and Sharing Association. However there were some additional donations (not specifically for the disability program) which benefited members of the disability program: Fr. Francis McAuliffe (from the Kiltegan Society) funded education costs and the purchase of relief food and Rachel Irungi & her friends funded Christmas food parcels.

The three Disability groups are Majani Mingi-Banita, Athina-Sarambei and Lomolo-Alphega.

For the first social of the year we had the pleasure of having Carole Boylan and Paddy Murray visit us from CASA in Ireland. They were accompanied by Fr. Francis Murray who said Mass for the participants of the program on January 14th, 2018.

This program is well established and continues to be of great benefit to the participants. 2018 was the sixth full year of the program, and we have streamlined the format of the program over the past three years. We have twelve monthly meetings at our medical centre. At these meetings members of the program come together and we provide them with a hot meal, physiotherapy and free medical treatment.

Apart from the monthly meetings any member of the program who requires physiotherapy can avail of it free of charge each Monday and Tuesday. We also provide food aid and clothing to certain members of the program. In 2018 we also paid the fees of one child who entered Mogotio Polytechnic and paid fees for three children attending primary school.

The following were the program's main achievements in 2018:

- Program reach totaled 132 members, including the disabled, their carers and in some cases children of the disabled person.
- Medical assistance was provided to 97 members of the program free of charge. The majority were disabled people but we treated their guardians and children also.
- Physiotherapy was provided to 23 people, with 17 attending on a weekly basis.
- 23 patients were referred to specialist medical facilities and their costs covered.
- Food aid was provided to 13 families, helping to feed approximately 70 people. Three families received regular food support.
- School costs were provided to four children.

During 2018 two children left the program and unfortunately one woman passed away.



## 6.4 ELDERLY PROGRAM

*Funded by Kiltegan Fathers, Kenyan Irish Society and Development Pamoja Ltd.*

In May 2018 the Kenyan Irish Society in Nairobi provided us with a grant to help with this program.

Like the disabled program, the main event of the program is a monthly meeting at our medical centre. Here the participants avail of free health care and physiotherapy. They are also provided with a hot meal.

The main objective of the program is to make the elderly feel more included in society as many of them lead very isolated lives as they are immobile and live far from their nearest neighbour.

Our biggest expense in this project is transport. The most popular mode of transport in rural Kenya is motorbike taxi however for the majority of the elderly, who are aged seventy years and over, they cannot travel by motorbike. Therefore, we have to hire a sixty-seater bus to transport the elderly from their homes to our medical centre to attend our monthly meeting. The bus has to make two trips because there are more than sixty people in the program and all the participants must be returned each evening. It costs approximately €100 to hire the bus to do this work on each day of the meeting. Some of the participants live up to twenty kilometres from the medical centre so it is a lot of work transporting them to and from the medical centre.

In 2018 we also started visiting the elderly in their homes because of the fact they live such isolated lives. Those who suffer from ailments such as arthritis, hypertension and diabetes are treated at our medical centre the day of their monthly meeting but do not have any health check up again until the next meeting. While we cannot see everyone in the program in their homes each month we do try to visit the most needy. We travel with the nurse from our medical centre who treats the elderly in their homes.

The program has proved hugely successful. The participants are grateful that they have an event to look forward to each month and crucially, members of the group are provided with medical assistance without which their health would be adversely affected.

The elderly group is made up of distinct groups, divided along village lines. The villages in each group are close in proximity and this has allowed the members themselves (those who are mobile) to meet once per month on a separate day in their villages. They also try to visit any member who is housebound. Also, when members of the groups are hospitalised, they nominate people to visit the member of the group in hospital. Finally, one of the groups in Sarambei started a savings scheme with Development Pamoja acting as their bank where individual members can take small loans when needed. While it has just started it has proved very successful.

The following are some of the achievements of the project:

- Over 100 people over the age of 65 attended our monthly elderly meetings.
- Over 80 people were provided with medical assistance.

- 25 people received regular physiotherapy.
- 12 elderly people were visited in their homes on a monthly basis.
- 3 separate elderly groups were formed and registered.
- One group has saved approximately €500 and will be issued with loans from Development Pamoja in 2019.

Unfortunately, in 2018 three members of the group died.





## 6.5 EDUCATION PROGRAM

*Funded by Davis family and friends and Development Pamoja Ltd.*



### 6.5.1 Davis Education Program

2018 was the fourth year of our education program funded fully by Anne Davis and her family and friends.

As in other years we provided full educational support to a number of children and in other cases provided financial support to their guardians.

Of these children 2 were in nursery school, 4 were in primary school, 6 in secondary and 2 in polytechnic colleges. There were 9 boys and 6 girls.

### 6.5.2 Other Educational Support

Development Pamoja has sponsored the education of Brian Kipchirchir since 2012 when he entered secondary school and we continue to fund his education into third level. In 2016 he started studying for a degree in Economics at Egerton University. He is currently in third year of the four-year degree. Brian's education is fully funded by a very generous donor.

Note: the educational support given to disabled children is covered under the Disability program.

## 6.6 LOAN BOOK

*Funded by Development Pamoja Ltd.*

In 2018 Development Pamoja continued to provide interest-free loans to those who wish to set up / develop a small business.

We provided less loans this year as we wish to phase out this program. While we have become more selective at providing loans, we still find that people are slow to repay the loan mainly because we have no way of enforcing the terms of the loan, it is entirely based on good faith.

From 2019 we will be providing no loans on an individual basis but to people who are in groups and have already saved a certain amount of money.

## 6.7 SOLAR LAMPS

*Funded by Afri Ireland and Development Pamoja Ltd.*

The area where we work in Kenya is almost on the equator and therefore night and day have equal length all year long. This also means that it gets dark at about 6pm every evening. Most people in the area have no electricity, and therefore no light after 6pm.

Solar lamps are a cheap, safe and reliable way of lighting homes. They can be installed in individual homes quickly and easily and take advantage of the most abundant local resource - the sun.

A single lamp is sufficient to light each home's living space. It allows children to do homework, mothers to cook and do other chores and everyone to enjoy reading. They can also charge mobile phones.

In 2018 we installed 40 lamps. Since 2017, we have reached 80 families in this project (for 1 family we replaced a lamp that was stolen). We continue to identify the most vulnerable in society and provide them with the lamps.

In July of 2018 we welcomed Joe Murray of Afri Ireland and his family to see for themselves the impact the project has had in Sarambei and the surrounding villages.

The cost of a lamp increased by 50 shillings in 2018 meaning each lamp costs 1,750 Kshs (€15). We hope to hit 100 families provided with lamps in 2019.



## 6.8 TABLE BANKING

*Funded by Misesan Cara, Electric Aid and Development Pamoja Ltd.*

In Sarambei, like most of rural Kenya, women are the drivers of the local economy – the majority of small business in the village of Sarambei is run by women and women are also expected to run the family home and raise the children (this includes providing the money for education). However, the potential for women in Sarambei to access credit from commercial banks is very limited as most women have no collateral and high interest rates (~14%) are a huge deterrent.

This program aims to empower women by giving them access to adequate funding to develop or start their own business or cover the cost of education for their children (with particular support for the education of girls). Table Banking is a group funding initiative where members save within a group and borrow from that group (according to agreed terms).

The groups are small (10 women per group) and to facilitate sufficient loans at high demand times (e.g. start of school year), Development Pamoja has provided an up-front amount of capital to supplement members savings. We also act as a bank for each group and meetings are held at our medical centre. Members take small loans from the available money and pay it back in agreed instalments over a defined period.

In September 2018 we registered three groups for table banking. The members are from groups of women we have already worked with, through women's groups and the disability group. Misesan Cara funded one of the groups and Electric Aid funded the other two.

In 2019 we will recruit more groups (Misesan Cara have provided funding which we will use for this) and co-opt two other disability groups into the program. The amount of the loans will be linked to savings. This program aims to have six fully functioning groups and to provide loans to a minimum of forty people in 2019.



## 6.9 WATER TANKS

*Funded by Development Pamoja Ltd. and a donor who wishes to remain anonymous.*

In November we identified six vulnerable households to provide with water tanks. We focused on people from our disability program and elderly program where sourcing water is a source of difficulty on a daily basis.

We provided the tanks and in three cases we also built the base for the tank and put guttering on the structures used to trap the rain water. We purposely purchased tanks with a large volume of water. We could have reached more households by purchasing smaller tanks, however smaller tanks with volumes such as 1,000 litres or 2,500 litres will service families with water for less than three months meaning families will again have to source water during the prolonged dry season. A 5,000-litre water tank will ensure that a family of five will have enough water to see them through the prolonged dry season of December to April.

This program of distributing water tanks has proved very successful and we would hope to replicate the program in 2019, focusing again on the neediest families. We will also purchase tanks for families who will pay back the costs (interest-free) over a period of 1-2 years.



## 6.10 OTHER PROJECTS

*Funded by Development Pamoja Ltd and Fr. Francis Murray.*

The activities we undertook in 2018 that do not fit in any of the above budget lines are as follows;

### Repairs

First, we had to undertake repairs on certain capital projects – the underground tank, the solar system and the water kiosk. All these repairs were as a result of initial poor workmanship. In future we will ensure any big projects are overseen by a qualified engineer to give assurance of the quality of the work.

The water kiosk roof was leaking and was repaired in May. We added an iron roof on the kiosk to protect the water tank from the sun so that the quality of the plastic will not be compromised.

We observed that the water tank walls were absorbing water leading to decreasing water levels. Following consultation with two different builders (who both agreed), the cause was either poor quality cement used in its construction, or insufficient curing of the walls when built. To remedy the problem we applied a bitumen mix to the walls in October. As it has not rained yet we do not know if this has solved the problem. If there is still a problem we will need to line the tank with plastic.

The final issue was with our solar system. Throughout the year we had difficulties with our inverter and charge collector. We had contracted a local man to build the necessary items required for the solar system but it continued to cause problems. On one occasion the system failed when we were using the ultrasound in the medical centre so we decided to completely upgrade the system. We purchased another solar panel - we now have four 100-watt panels. We changed the batteries purchasing two 200-watt batteries, a new inverter and charge controller. Once the new system was installed we had no further issues with electricity in the clinic.

### Tent & Chairs

As part of the elderly program we previously purchased a 100-seater tent and 100 chairs. These items are used just once a month, for the rest of the month they are not in use. We began to utilise these assets in other ways, namely providing them to families in times of need, particularly during funerals. In other cases, we also provided them for weddings and graduations. In total we donated these assets to community events on forty-five occasions throughout 2018. If the tent is damaged or a chair damaged we charge the family for its repair but otherwise we provide the service free of charge. Four chairs were damaged during the year and the four of them were replaced by the individuals who availed of this service.

### Community Event Area

The community event area which was built in 2017 has been a very successful project. It is used regularly for meetings of the disability group, the elderly group and the table banking groups. It's also used by us to give talks to the local community on various issues.

### Loan Payment

The last payment for a government loan was due in 2018. This was for the purchase of livestock a number of years ago.

### Community Contributions

Throughout the year we donated food aid to twelve families outside of our food program in the disability program. In all cases we donated food from our own harvest of maize and beans.

This year was a difficult year for the community and so the need for our support was higher than in previous years. All donations were assessed by our team to ensure support went to the most in need in the community. We donated to thirty-six community initiatives in 2018. The breakdown is as follows:

- 19 funerals in Sarambei and surrounding villages.
- 8 medical appeals for people requiring medical attention that we cannot provide the most common being cancer treatment.
- 1 wedding of our immediate neighbour.
- Purchased uniforms for the Athinai Catholic Choir who perform at various events at our centre. This was funded by Fr. Francis Murray who visited us in January 2018 with CASA.
- Donated to four education fundraisers for children in Sarambei who wished to attend third level education and are outside of our education program.
- Purchased footballs and 4,000 tree seedlings for Koyumtich Primary School in Sarambei.
- Purchased both beds and mattresses for two families who had no means to purchase such items and were sleeping on the ground.



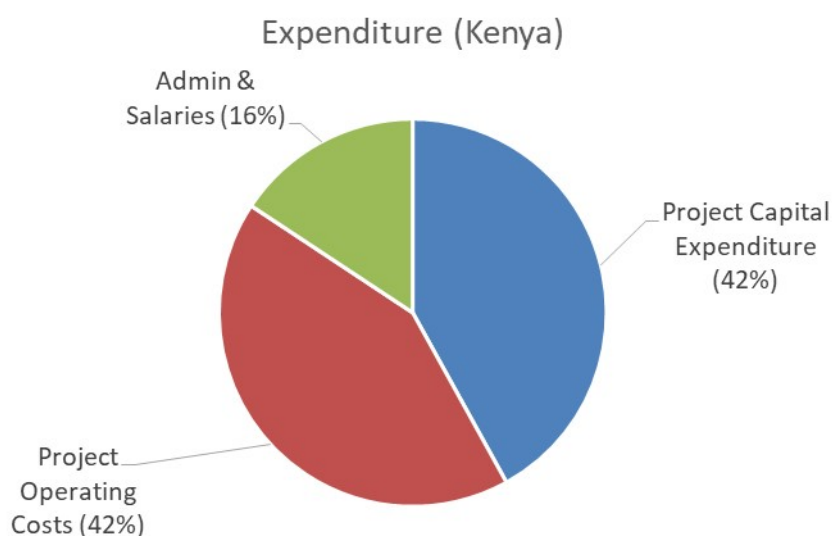
## 7 FINANCIAL STATEMENT

More details on the financials of each project can be provided to any prospective donor. Please feel free to contact us.

### 7.1 EXPENDITURE (KENYA)

The total expenditure for 2018 includes project expenditure (capital expenditure and operating costs) and administration costs. Expenditure on projects is by far the largest cost at 84%. Expenditure was greater than in 2017 due to the purchase of the new land.

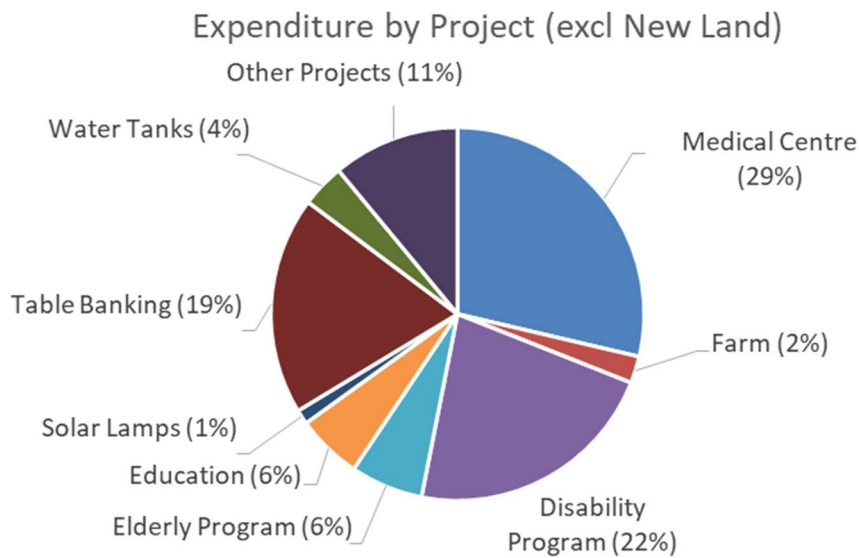
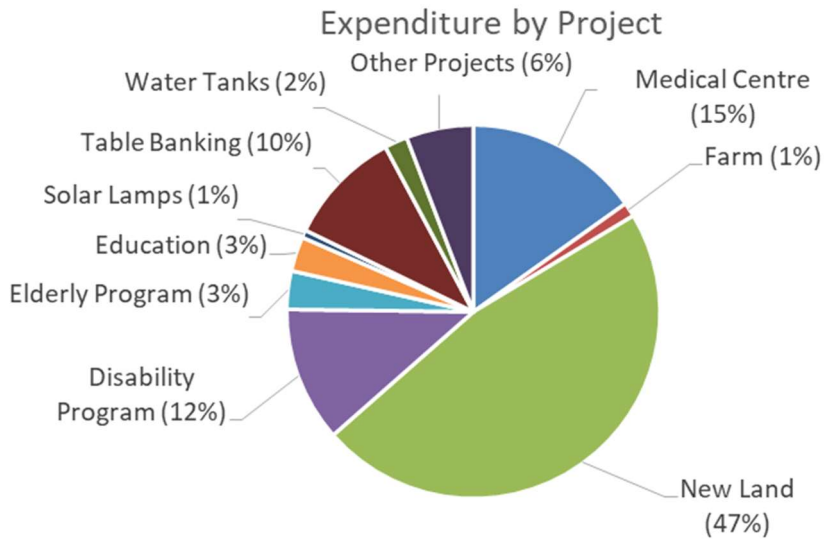
Note: the salaries of the medical staff are included in the project operating costs of the medical centre (the physiotherapist's salary is covered by CASA in the disability program and the rest of the medical centre salaries are covered by the income from the medical centre).



#### 7.1.1 Project Expenditure

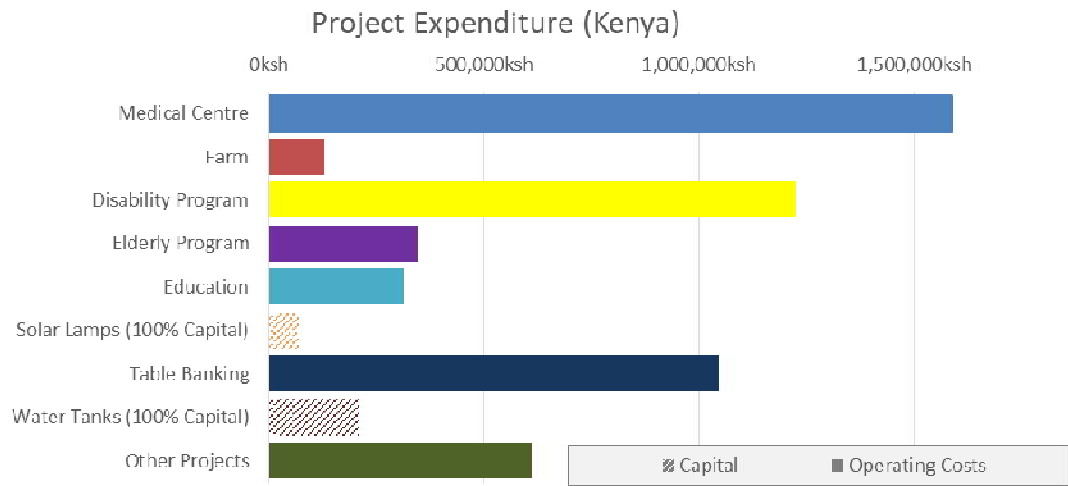
Total project expenditure breakdown for 2018 by project (both with and without the purchase of the new land) is shown below.





It should be noted that both the Farm and Medical Centre are also sources of income. As stated previously, the medical centre covered 93% of its costs this year and the farm covered all of its operating costs (not including the purchase of the new land).

The breakdown of expenditure into capital expenditure and operating costs for each project is as follows. Note: the graph excludes the purchase of the new land.



For all projects combined, capital expenditure was 50% versus operating costs at 50%. Excluding the purchase of new land this would be capital expenditure of 5% versus operating costs at 95%.

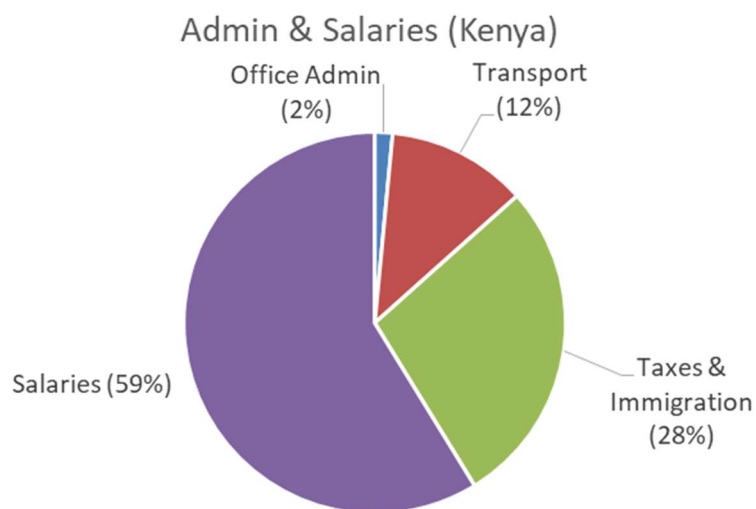
### 7.1.2 Administration & Salary Costs (Kenya)

The total expenditure in Kenya outside of project costs for 2018 was slightly higher than last year due to two main reasons as follows;

Statutory deductions were higher this year than previous years as our employees have now been registered with the Kenyan health insurance scheme. There was also a large expense incurred as our project co-ordinator's work permit needed to be renewed. This is a bi-annual charge so was not incurred last year.

Note: The salary costs include the 3 permanent Development Pamoja staff and the security person. The salaries of the medical staff are not included here and are instead part of the medical centre expenditure.

The breakdown is as follows;



Note: Salaries included salaries and casual labour. Taxes & Immigration included statutory deductions.

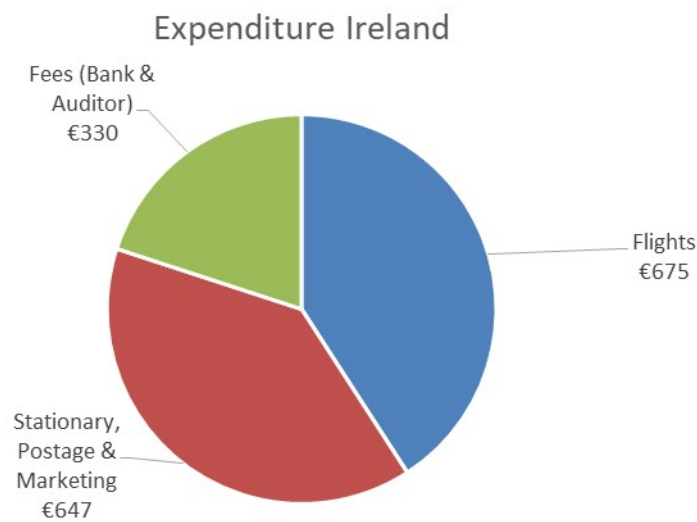
## 7.2 EXPENDITURE (IRELAND)

Expenses in Ireland are kept to an absolute minimum and all work is done on a voluntary basis – our board members or volunteers do not receive any remuneration.

In order to ensure the best level of governance Development Pamoja will ensure that the project co-ordinator will report in person to the board once a year at least. From 2018 on flights from Kenya will be included under expenses incurred in Ireland.

There was a large increase in bank fees this year. The purchase of land this year led to more funds being transferred from Irish bank accounts to Kenyan accounts, resulting in more fees.

Total expenses amounted to €1,652 for the 2018 financial year, the breakdown of which is as follows.



### 7.3 PROJECT INCOME

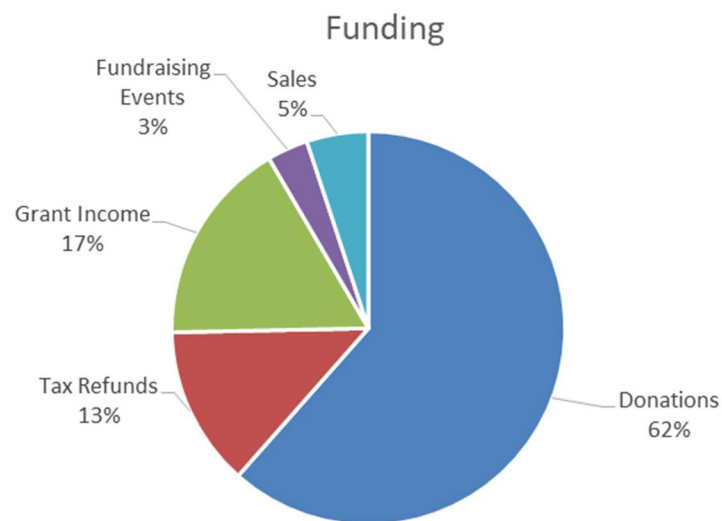
Income was generated from both our farm and our medical centre this year.

## 8 FUNDING

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As can be seen from the graph below we rely heavily on donations so we would like to thank everyone who donated to Development Pamoja during 2018.

All general donations to Development Pamoja Ltd in 2018 and earlier years have been spent exclusively on project costs. None of this money was spent on staff salaries or other administrative costs (in Ireland or in Kenya) – these are funded separately, through sales or specific donations.



Note: funding graph above does not include funding from CASA (which was €10,000 in 2018) that specifically funded the majority of the Disability Program. (A separate financial report is provided to CASA)

## 8.1 PROJECT FUNDING

The money used to implement / support our projects in 2018 came from various sources. Some funding was for specific projects. The funding for each project in 2018 was as follows:

<b>Project</b>	<b>Source</b>
1. Medical Centre	Development Pamoja Ltd and Caring and Sharing Association (CASA) Ireland.
2. Demonstration Farm	Development Pamoja Ltd.
3. Disability Program	Caring and Sharing Association (CASA) Ireland, Kiltegan Fathers, Rachel Irungi & friends.
4. Elderly Program	Kenyan Irish Society, Kiltegan Fathers and Development Pamoja Ltd.
5. Education	Davis family/ friends and Development Pamoja Ltd.
6. Loan Book	Underwritten by Development Pamoja Ltd.
7. Solar Lamps	Afri Ireland and Development Pamoja Ltd.
8. Table Banking	Misean Cara , ElectricAid and Development Pamoja Ltd.
9. Water Tanks	Development Pamoja Ltd. and donor who wishes to remain anonymous.
10. Other Projects	Development Pamoja Ltd. and Fr. Francis Murray

## 9 ACKNOWLEDGEMENTS

Development Pamoja Ltd. would like to thank all our sponsors, donors (including those who wish to remain anonymous) and volunteers for their help throughout 2018. We would also like to thank our excellent staff who have worked so hard during the year to deliver the projects.

In no specific order, we would especially like to thank:

- CASA Ireland
- Afri Ireland
- Fr. Francis McAuliffe
- Fr. Victor Dunne
- The Kelly family (Kevin, Pamela & Caitrin)
- The Davis Family
- The Kiltegan Fathers
- Eithne Dunford
- Kenyan Irish Society
- Misean Cara
- ElectricAid
- CRS Refrigeration Ltd



## 10 CONTACT DETAILS

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For more information or to donate please visit our website/facebook page or contact us by email.

Website: [www.developmentpamoja.org](http://www.developmentpamoja.org)

Email: [devpamoja@gmail.com](mailto:devpamoja@gmail.com)

Facebook: Development Pamoja Ltd.

## 11 ARTICLE IN THE JOURNAL.IE

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### Irish charity founder in Kenya works 6 days a week and pays himself €300 a month

"I CAN DO MORE HERE," JAMES HENNESSY SAYS OF HIS LIFE IN THE GREAT RIFT VALLEY.

Aug 26th 2018, 9:01 PM

JAMES HENNESSY STANDS in the doorway of Mama Matthew's rented two-room hut on the outskirts of a small village in Kenya's Great Rift Valley, surrounded by tall maize crops.

The two are conversing in Swahili about the trouble Mama Matthew has been having in securing the smallest bit of government support for her disabled son, Matthew.

Hennessy – who is originally from Glenville in Cork – speaks Swahili fluently, and listens as Mama Matthew tells him her troubles.

At 28 years old she is disabled herself, cannot read or write, has no discernible income, has been a victim of serious domestic abuse and is extremely vulnerable. She lives with her three children in a rented two room hut made from sticks and mud with an iron roof.

Mama Matthew is what Hennessy – who has worked in the area for nine years – terms a "hard case". She is highly vulnerable, uneducated and has no social supports. The future prospects of her and her children are bleak.

She has been trying to get Matthew registered with the county government, so that she will be entitled to the equivalent of about €17.50 a month – the only benefit of any kind she is eligible for.

Tired, demoralised and with hungry children to feed, Mama Matthew looks to Hennessy for help.

She is just one of the hundreds of Kenyans that he and his colleagues assist through their organisation Development Pamoja, a small Irish charity dedicated to providing rural communities in Kenya with the tools and assistance they need to make better lives for themselves.



*Hennessy (left) sits with a local woman Evelyn Chelule (centre) and Mama Matthew (right). Source: Ciara Kilbride*

#### **A country of contrasts**

Kenya is a country of deep economic contrasts. With a population of over 48 million, it is one of the more secure and established states in sub-Saharan Africa, with a growing middle class.

In the main metropolitan areas, in one of the many shopping malls that have sprung up on the outskirts of cities and towns, you can buy an Americano and avocado sandwich for about 1,000 Kenyan shillings (Ksh) – the equivalent of €9, not too far off Dublin prices.

Meanwhile, in nearby teeming slums and in isolated rural areas, millions eke out a living on less than €2 a day, struggling to feed themselves and their families.

Despite a massive swelling in urban population (mainly in the ever-growing slums on the outskirts of major cities) the vast majority (close to 75%) of Kenyans still live in rural areas, many in highly isolated, inaccessible places cut off from any services or supports.

A recent report from the Kenyan National Bureau of Statistics found that in total 16.4 million Kenyans live in poverty across the country – with 11.4 million of these in rural areas.

Lack of basic healthcare and sanitation services, no electricity, no running water, poor transport access, high rates of disease and infant mortality and no access to finance are some of the main issues facing large swathes of the population.

### **An Irishman in Kenya**

Hennessy first arrived in Kenya in 2007. Fresh off completing a master's degree in International Development in UCC, he travelled to work with an Irish charity operating in the area.

Friendly, energetic and quick to smile, 35-year-old Hennessy talks easily with whoever he meets and quickly has people laughing.



*Hennessy speaks with a local woman as he goes to buy groceries for her and her daughter. Source: Cormac Fitzgerald*

He left the charity he had worked for after becoming disillusioned and in 2009 formed Development Pamoja with three Kenyan colleagues: David Okinja, Masai Kipruto and Mary Waruguru.

They set up operations in the villages around the town of Mogotio in northern Nakuru county, about 90 minutes north of the major urban centre of Nakuru, where Hennessy lives, and just a few miles south of the equator.

People living in this area are for the most part subsistence farmers – growing just enough to feed themselves and their families. But a semi-arid climate, lengthy periods of drought, and poor land and farming techniques mean that food poverty is an issue here.

Hennessy is candid about why the founding members chose that area: “It was where we saw the need and felt we could be useful.”

Development Pamoja (Pamoja means “together” in Swahili) is committed to providing communities and families with the tools and the know-how to help themselves. “Trade without aid,” is the motto on its banner.

It also does a lot more than this, providing free medical care and assistance to the disabled and elderly in the region.



*Mama Matthew stands outside her home with her children and local kids from the village. Source: Ciara Kilbride*

### **The operation**

*TheJournal.ie* joined Hennessy and the Development Pamoja team for a few days last month to see the work they carry out across the region.

The group has as its base a model farm located in Sarambei, about 25 minutes on motorcycle from Mogotio town. On the farm, a medical dispensary – where locals can come for check-ups, consultations and to buy medicine like antibiotics – was built and completed in 2015.

Every day begins with tea at about 9am in a small shed that also serves as a sort of mess hall in a corner of the farm. The team gathers to drink tea and eat some food, laughs, jokes and discusses the day ahead.

This year saw good rains, and the farm is bursting with vegetables. Avocado trees, fresh coriander, banana trees, sweet potatoes, cassava, oranges, tomatoes in a greenhouse and more are all growing.



The farm is fully self-sustainable, requiring no donations to function.

Food is sold at market and handed out to families with the greatest need. As well as this, the team dug large ponds and invested money in a giant underground tank for storing rainwater, to give themselves a constant supply which they sell at a low cost to villagers in need, as well as using the water all year round.

It also serves as an example to locals on what can be done with the right farming techniques and investment in the right areas.

On the Monday we are with them, people start arriving from the surrounding countryside to use the clinic generally at about 10am. A doctor and lab technician are employed to carry out consultations and provide prescriptions, while a physiotherapist also works at the centre.

People pay a small fee to see the doctor and physiotherapist, while the elderly and anyone with a disability are given free care by the team.

On other days, Development Pamoja operates a mobile clinic, while on two Saturdays every month large communal events are held for the disabled and the elderly from surrounding areas – some of the most marginalised groups in Kenya.

### **A typical day**

On the days we visit, Hennessy and Masai wind on motorcyces down dusty, unpaved roads, passed fields of maize and grass, over bumps and through waterlogged stretches, up hills passed goats and cattle grazing on the roads in order to check in with their clients.

Like Mama Matthew, most families live in one or two room huts made from mud and sticks, with iron roofs on top, miles from any services. The houses themselves are sparsely furnished – many lacking even beds, most having no couches and almost all lacking electricity of any sort.



*Local women in one of the villages visited by the Development Pamoja team. Source: Ciara Kilbride*

There is no running water in most homes, with people instead drinking water from dirty streams where cattle are led to drink.

As a result, water-borne diseases like typhoid are common. Many houses now have rainwater tanks installed by either Development Pamoja or other charities in order to provide them with a better source of water.

On Monday, Hennessy is delivering solar panels that can be used as lights and also to charge mobile phones – a vital lifeline for many of the people here, due to the lack of electricity.

As it is so close to the equator, it gets dark at about 6pm all year and stays dark until 6am. The lights are of great use to villagers, and were donated by Afri Ireland.

The plight of many of the families and people we visit – living with no government support in areas cut off from main roads – is severe.

One woman lives with her severely autistic daughter in a small hut. They have no bed, no income, and the mother is an alcoholic. Hennessy brings them to buy food so that the daughter will be able to eat. In the past, she has been raped by a man the mother had been seeing.

In another home, only reachable by walking through thick plantations of maize and grass, a disabled woman is asking for help to raise the money for an operation. Helen walks with the aid of a stick, has four children and lives cut off even from the isolated communities of this area.



*Helen takes a chair for herself outside of her home. Source: Cormac Fitzgerald*

Elsewhere, an elderly man lives in a small, crumbling shack and sleeps on soiled blankets. His exact age is unknown, but Hennessy estimates he is older than 85.



*Hennessy speaks to Arap Agogo outside of his home. Source: Ciara Kilbride*

When we arrive, Hennessy is frustrated as the local community was supposed to have carried out repairs to the man's house, but nothing has been done.

"Members of the community approached us and asked if we could help him out and get a bed," he explains.

"We agreed to get a bed, if they took some share of the responsibility and fixed up his house.

"But look," he says, pointing to areas where sticks are poking out of the house. "They've done absolutely nothing here."

The individual hardships and problems multiply as we drive miles from area to area:

A young girl who lost her foot after being attacked during the post-election violence of 2007; two brothers whose parents died years ago, who had leprosy, one of whom lost his legs; a woman who had a stroke and lives in a small hut with no support.



*Arap Agogo's bed. Source: Ciara Kilbride*

### **"Teach a man to fish"**

Community efforts, self-sustaining initiatives, education and support without giving unfiltered aid are the practices at the core of Development Pamoja.

"As you've seen, there are certain things that are purely charity-based... But we're also interested in having like a social enterprise here," says Hennessy.

People who come here they do pay to get treatment. If people want to get water off us they do have to pay for that.

Education and no free handouts (except in cases where people are disabled or elderly) is a constant theme of the charity's work.

Teaching farmers about better techniques, helping them dig their own ponds for collecting rainwater, encouraging them to grow grass which is easier to cultivate and fetches a good price at market – these are just some of the practices used by Hennessy and his colleagues to assist the locals.

### **Learning from past mistakes**

Development Pamoja also has as one of the core points of its mission statement to “learn from past projects and experiences”.

For example, the group used to give out micro-finance loans to locals for various reasons at low-interest rates, but a high rate of repayment failures meant that they had to stop.

Instead, Hennessy and his team now oversee small community credit groups that save with the charity and through which someone can get a loan only if it's guaranteed by the group as a whole and has the support of someone who has shown themselves to be trustworthy in the past.

Already, the method is seeing more success than the previous approach, with people more quick to repay the loan if they are answerable to their peers, rather than the charity.

Aid organisations come under frequent criticism in Kenya over what positive impact they have on the groups they are supposed to be helping. In some of Nairobi's slums, some charities have developed bad reputations as places to go for free handouts.

Hennessy says that Development Pamoja is committed to focusing its efforts to where they will have the greatest impact, to not spreading itself too thin on the ground, and to keeping costs to an absolute minimum.

He and his colleagues are committed to leading by example to show how much good work can be done for a fraction of the budget of other organisations.

Last year, the total expenditure was just over €66,072. Of this, the vast majority (80%) went on project costs. Just under €13,000 (20%) was spent on the yearly salaries of Hennessy, a security guard and the other three founding members (one of whom, Mary, has since left the organisation).

The medical dispensary more or less pays for itself with the small amounts it charges for medicine and consultations, as does the cost of running the farm.

Other projects – like the disability programme, the elderly programme and an education programme that helps local children through school – are all funded through specific donations and support from other Irish and international charities and funds, like Electric Aid, the Caring and Sharing Association (CASA), the Davis family and friends, the Irish embassy in Kenya and others.

On the Irish side, all the operations – from fundraising to administration – are carried out on an entirely voluntary basis.

### **The Irish connection**

Standing in the heat on Development Pamoja's model farm, surrounded by avocado and banana trees and listening to Kenyan workers speak to each other in Swahili, it's hard to imagine it as an Irish charity.

In fact, without Hennessy's presence here it would be hard to see anything Irish about the charity. But this would disguise the efforts of volunteers on this side of the world to keep things ticking over.

Development Pamoja is registered as a community-based organisation in Kenya – meaning it can only operate on a local level in a contained district, and not nationally. In Ireland, it is a registered charity with seven board members.

The group is supported by fundraising efforts in Ireland, particularly in and around Hennessy's local area in Cork. Notably, his aunt is always active doing car boot sales and other buy-and-sell initiatives to raise money for the Kenya operations.

### **Giving back**

Hennessy's relaxed nature and easy-going demeanour masks a fierce commitment to his work and to the Kenyan people Development Pamoja is trying to help.

On one of the days we visit the centre, he finds out that an elderly man the charity had worked with and who Hennessy had visited in hospital had died.

“That pisses me off now,” Hennessy says, visibly angry.

He had an operation three weeks ago. We had a harambe (community fundraiser) and everything. I visited him in hospital and all they said was that they got the growth on his neck.

“They said it wasn't cancerous. But it fucking was.”

He is also realistic about the impact Development Pamoja can have on the lives of the people they assist.

For people like Mama Matthew and her family, it's about working hard to ensure they are given support to enhance their quality of life, while also recognising that her case is highly complex and may never be resolved without increased government help or more sizeable support from other groups.



*Masai Kipruto speaks with Mama Matthew. Source: Ciara Kilbride*

But Hennessy also points to families whose lives have improved measurably since Development Pamoja started. In relation to the girl with autism who lives with her mother, Hennessy says:

“When I see that girl I know there is a difference. She’s cleaner because we give her the clothes, she’s less sick because when she comes here we give her drugs and that and we’ll do proper drug tests on her.

“Unfortunately with someone like that I can’t ever see a situation where she’ll be living what we would call a middle-class existence. It’s just not going to happen.

“At least last night I know that child ate yesterday, she’ll eat today and at least she’s away from that man.”

In another case, a local woman – Mama Sabina – was able to secure a series of loans from Development Pamoja and now lives a far more comfortable existence in her home with her family.

As opposed to the “hard cases”, these are the ones that show that the work done by the team can have a positive impact on people’s lives.



*Mama Sabina sits on a couch in her home. Source: Cormac Fitzgerald*

That impact – trying to improve the lot of people less fortunate – is what motivates Hennessy, who says he can’t seem himself leaving Kenya any time soon.

“I’m a fairly privileged person. I’m white middle class, was educated privately by my parents... Never had to worry about anything really in my life.

“I would regard my politics as left of centre and I just think if I can give something back it’s a fairly good position to be in.

“And someone can ask well why don’t I do that in Ireland but I know that I can have a bigger impact on people here. Less money goes further and that’s what would motivate me.

“I know we will never solve the problems of everyone we work with but we can make their lives a bit easier.

“And it’s good to be able to do that.”