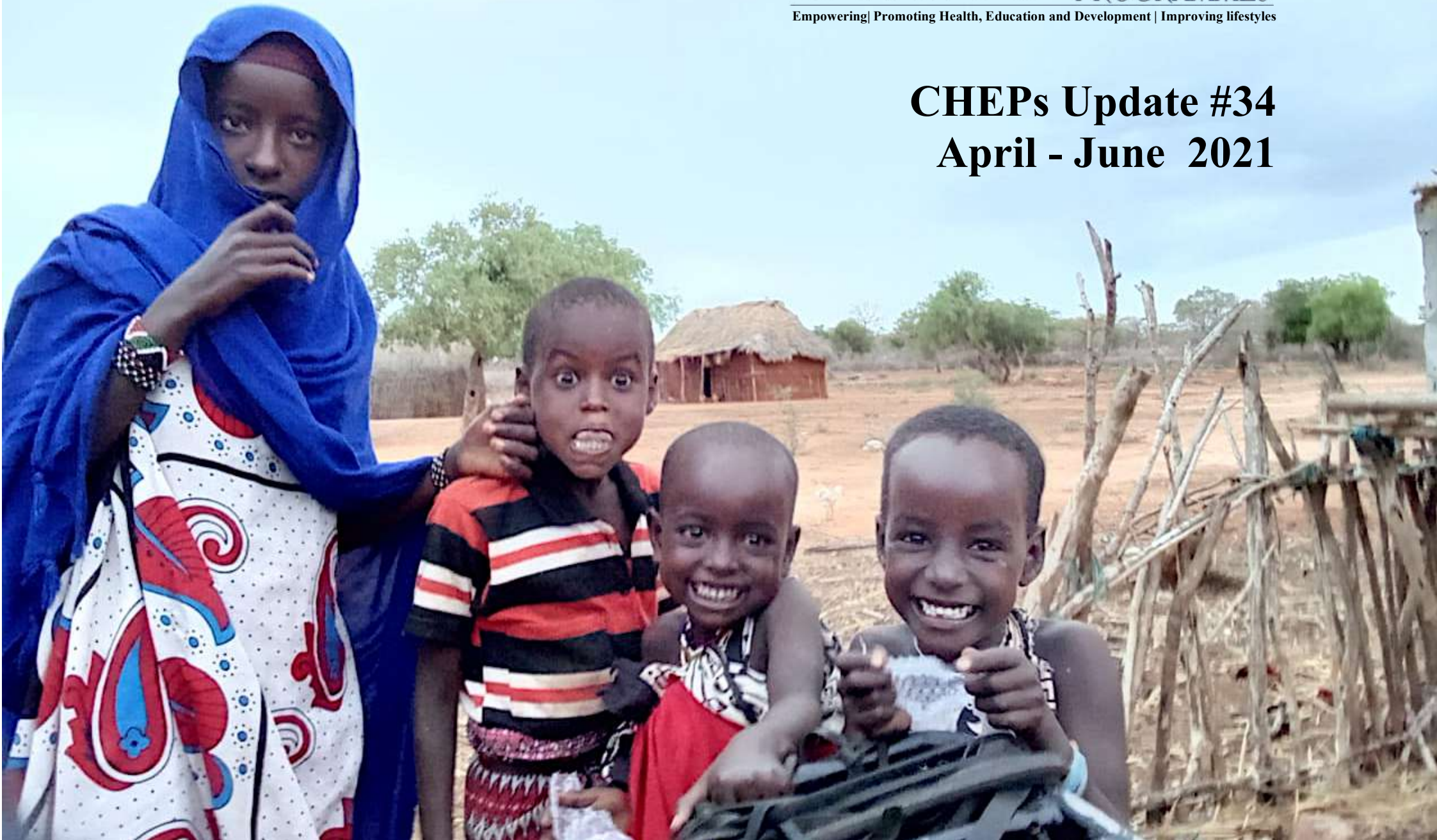




CENTRES for  
HEALTH &  
EDUCATION  
PROGRAMMES

Empowering | Promoting Health, Education and Development | Improving lifestyles

## **CHEPs Update #34** **April - June 2021**



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## ABOUT US

The Centres for Health and Education Programmes (CHEPs) is a registered Non-Governmental Organisation (NGO) in Kenya. Its goal is to empower, promote access and improve quality of health and education for the benefit of under resourced individuals and communities.

## VISION

CHEPs' envisions the underprivileged across Kenya empowered with equal access to quality health and education services, improved agriculture and environment for a dignified lifestyle.

## MISSION

CHEPs' mission is to empower the underprivileged individuals and communities of Kenya, while instilling hope and dignity, by providing sustainable and quality health, education, agriculture, environment conservation, development and humanitarian projects through local initiatives, resources, and involvement of local volunteers willing to serve the community.

## PROJECTS

**Health care:** eye camps, emergency medical treatment, limb prosthesis, disability support

**Education:** infrastructure, student sponsorship, student mentorship, libraries, solar lighting, school furniture support, books and stationery distribution to students.

**Agriculture:** farming support, irrigation projects, animal husbandry

**Environment:** tree planting, organizing clean up/hygiene projects in villages

**Development:** water and sanitation, microfinance and infrastructure for promotion of health and education,

**Humanitarian:** emergency relief during famine & drought, welfare of street children, feeding programmes

## THIS QUARTER IN SUMMARY

- Close to 8000 COVID-19 prevention reusable masks produced and distributed.
- Two wheel chairs donated to the disabled.
- Twenty-five shallow wells dug, capped and fit with hand pumps.
- Drinking water purification chemicals and oral rehydration solution donated to 1000 families.
- Thirty-two families that were living in darkness given solar lighting kits.
- Two houses build for the elderly.
- Over 85 tons of relief food distributed to the hungry.
- Close to 400 trees planted to restore the environment.
- New urban slums empowerment project started in Kawangware.

## IMPACT

To date CHEPs has achieved the following:

<b>Sr.No</b>	<b>Indicators of activity progress</b>	<b>Units</b>
1	Number of people provided with food support in emergencies:	220,301
2	Number of villages provided food support in emergencies:	63
3	Amount of food distributed in emergencies: (tons)	531
4	Number of eye camps organized:	104
5	Number of people screened for eye conditions:	44,498
6	Number of people provided eye glasses for refractive errors:	13,726
7	Number of people provided with eyedrops for various eye conditions:	32,086
8	Number of cataract blind people operated to see again:	5,339
9	Number of individuals assisted for emergency medical treatment:	78
10	Number of amputees provided with limb prosthesis:	28
11	Number of students ever supported with fees:	154
12	Number of students currently supported with fees:	6
13	Number of university students ever supported with fees:	85
14	Number of university students currently supported with fees:	3
15	Number of disabled students ever supported with fees:	15
16	Number of disabled students currently supported with fees:	3
17	Number of boarding schools in rural areas supported in food for fees project:	13
18	Number of students benefited from food for fees project:	524
19	Amount of food distributed in food for fees project:	Over 40 tons
20	Number of student mentorship centres set up:	3
21	Number of books distributed:	7809
22	Number of schools/institutions given books:	40
23	Number of libraries set up for schools/communities:	4
24	Number of classrooms constructed:	15
25	Number of sanitary facilities constructed:	67
26	Number of desks given to schools:	830



27	Number of solar lights given to schools:	2504
28	Number of solar lights given to institutions:	42
29	Number of trees planted:	13380
30	Number of wells dug:	424
31	Number of wells rehabilitated:	557
32	Number of dried wells re-dug:	50
33	Number of 'berkets' water storage tanks constructed:	2
34	Number of kitchen gardens supported:	329
35	Number of farmers supported	2000
36	Number of large irrigation (greenhouse)/farming projects:	3
37	Number of goats distributed to poor families:	90
38	Number of official presentations made at scientific conferences:	6
39	Number of workshops, seminars & community presentations:	8
40	Number of conferences and workshops organized:	3
41	Number of clothes distributed:	1600
42	Number of schools/institutions given clothes:	10
43	Number of water filters distributed	200
44	Number of families received water purification chemical	6400
45	Number of families received water buckets for water storage	2750
46	Number of households educated on COVID-19	6000
47	Number of masks produced	Over 42,000
48	Number of masks distributed	Over 37,000
49	Number of thermo gun given to schools	6
50	Number of sanitary pad kits produced	Over 4000
51	Number of sanitary pad kits distributed to school going girls	Over 2000
52	Number of houses constructed for seniors	24
53	Number of individuals assisted with wheelchairs	2
54	Number of households received solar lights	40

# HEALTH





## COVID-19 PREVENTION

The world is currently facing a major pandemic. COVID-19, caused by a novel strain of Corona virus is spreading fast and wreaking havoc worldwide. Over 167 million cases and 3.5 million deaths have been recorded so far. In Kenya, more than 192,000 cases and over 3,700 deaths have occurred. Health systems have been stretched beyond limits in developed countries that have advanced health services. Socio-economic conditions have taken devastating downturn, not sparing the economic giants. The health services and socio-economic situation in developing countries is much worse especially affecting the poor and vulnerable in the population.

### Production and Distribution of Masks in Kilifi County

COVID-19 may be transmitted by infected persons even in the absence of symptoms of disease. While social distancing and good hand hygiene are important methods to prevent virus transmission, guidelines recommend that healthy individuals should wear masks in public, wash hands frequently and maintain social distance to limit its spread. Governments including that of Kenya have therefore set directives making it mandatory for masks to be worn in public. Such directives have however not been adhered to by most rural inhabitants who not only cannot afford the masks but also have other more pressing priorities including lack of food and drinking water. Such communities are therefore at risk of rapid spread of the disease and subsequently devastating morbidity and mortality.

Communities, in the areas that we operate, live under very harsh conditions, and lack access to essential needs including clean water, food, healthcare, electricity, sanitation and accessibility. They are living in extreme poverty and at the risk of starvation. Disease outbreaks such as COVID-19 lead to worsening of their situation and hence prevention is even more important.

Last year, CHEPs set up a face mask production unit in Chakama through support from Beta Charitable Trust - UK. Chakama is a remote area located within Kenya's Kilifi County, one of the poorest of the 47 counties in Kenya. Kilifi is also one of the counties in Kenya suffering significantly due to high number of COVID-19 cases. CHEPs has, so far, produced over 40,000 reusable masks. These are being distributed to rural schools. This is in recognition of the fact that schools provide a fertile environment for the spread of COVID-19 since they draw children from different villages to a common area with difficulty in maintaining social distance among them. Since most children remain asymptomatic despite being infected, they serve as effective carriers to spread the virus to their elderly parents when they return home in the evening.

This quarter, CHEPs produced and distributed 7820 reusable masks which were distributed to 8 schools in Kilifi County.









## RESTORING HOPE TO THE DISABLED

According to the 2019 census, 2.2% (0.9 million people) of Kenyans live with some form of disability. The statistics further indicate that there are more people with disabilities living in rural than urban areas. Such people are commonly neglected and denied basic human rights including sufficient food, suitable shelter and medication. They are also stigmatized and denied the opportunity to participate in social community activities.

CHEPs has observed many suffering from a variety of disabilities in Chakama, a remote, completely rural location in Kilifi County, with people living in extreme poverty and marginalization, poor health, education and social welfare services. In order to increase services to the most vulnerable in these villages, an area we have served for years, and as never turned a blind eye to the people's suffering, CHEPs has embarked upon a disability mapping exercise, across all the 38 villages in Chakama.

Below are two cases which got immediate assistance.



### John

An 18 years old boy who has been disabled since birth. Born with Cerebral Palsy, he has over the years been completely dependant on his very dedicated mother. The family live in a mud house in Ademayi, Chakama Location of Kilifi county. His father makes traditional mats to sustain the family but the income is very limited and cannot cater for their needs. They often go hungry and are unable to regularly procure

John's epilepsy medication. This has led John to get fits which have been worsening his condition. John is unable to sit up and all the time lies completely helpless on a mat indoors.

His mother had requested for a special wheelchair so that she could sit him outdoors for sometime everyday. CHEPs managed to obtain a special cerebral palsy wheelchair, through support from Bilal Muslim Mission. The mother will now be able to care for him better and move him around using the wheel chair, including taking him outside their home to bask in the sun. CHEPs is also supporting him with his medications. However, due to the severity of his condition and total dependance, the family needs further support to sustain him and enable him have a normal life.

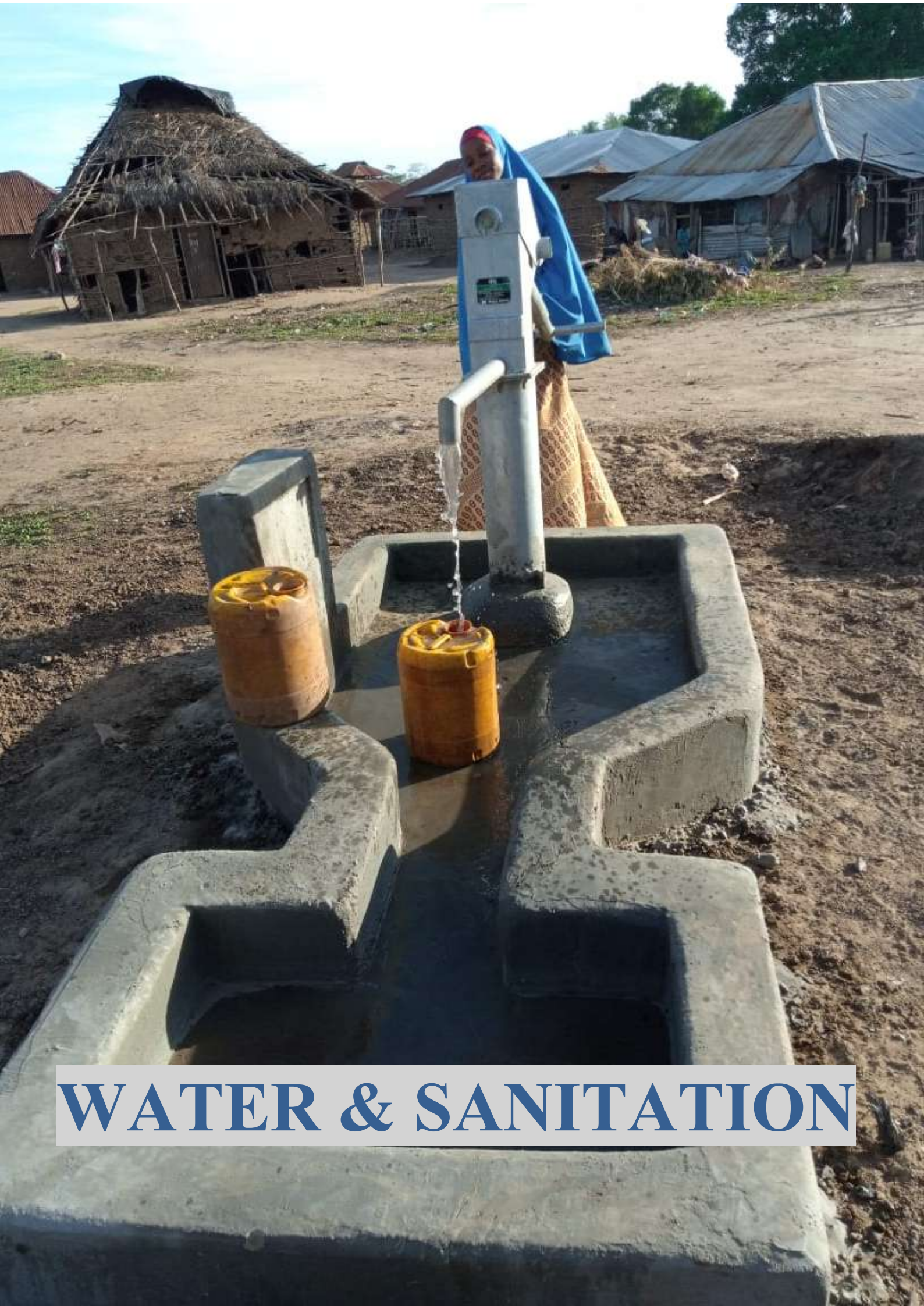
### Grace Katumbi

Grace is a 72 years old mother of six children. She suffered a stroke one year ago. This caused her paralysis of half of her body, making her unable to engage in her usual daily activities. She has mostly been bed ridden over the period, suffering silently.

Bilal Muslim Mission again came in to assist with a wheelchair. Grace will now be able to be moved around and reintegrate with the community. Her daughter says she is now able to move her outdoors to get some sunlight as well as take her to the neighbours and market to socialize with people.







# WATER & SANITATION



## **WATER SUPPLY IN TANA RIVER COUNTY.**

Lack of access to safe drinking water is the number one crisis worldwide. Over 1 billion people lack access to safe drinking water, more than 80% of whom live in rural areas. Kenya is no exception. With most of its land found in arid and semi-arid areas, recurrent droughts, increased water demand and poor management of water supply have led more than 40% of the 54 million people living in the country to lack access to safe water supply. Since most Kenyans rely on agriculture for food, the lack of access to water leads, not only to thirst, but also to extreme hunger and disease.

Communities where CHEPs operates are commonly seen dedicating a lot of time and effort in search for this precious commodity. Young children in these rural areas, opposed to their urban counterparts, are commonly seen carrying jerrycans every day in search of water rather than going to school or engaging in other child development activities.

CHEPs aims to alleviate the problem in marginalised communities. It has dug and rehabilitated 916 shallow wells and drilled 3 boreholes so as to improve supply of this precious commodity that is not only needed for drinking and farming, but also for improving hygiene and sanitation. The wells are also capped to ensure that neither people, animals nor dirt would fall in, ensuring safety and hygiene.

Mnazini, Mnguvuni, Ngumu and Kitere villages in Garsen, Tana River County, located 582 km from Nairobi. With more than 8000 people living there, they all depend on few shallow wells and the distant river for water. Young children and women can be seen carrying jerrycans and spend several hours every day in search of water.

This quarter, CHEPs constructed 25 shallow wells, complete with hand-pumps for the villages. The villagers are now relieved of the long distances they used to trek searching for water and have the opportunity to practice better hygiene and even subsistence farming to grow their own food.



















## SAFE DRINKING WATER INITIATIVE

It is reported that 80% of diseases in developing countries are caused by unsafe water and poor sanitation. Sadly 2.5 billion people (37% of global population) lack access to adequate sanitation. Such people commonly practice open defecation, which poses great danger to the communities due to the high likelihood of water and food contamination. This often leads to outbreaks of diarrhoea diseases that often lead to mass mortality. It is reported that every 20 seconds, a child dies due to poor sanitation and access to good sanitation and safe water could save 1.5 million children per year.

The situation in Kenya is no different. With a population of 54 million, 40% of Kenyans still rely on unimproved water sources, such as ponds, shallow wells and rivers, while 70 percent of Kenyans use unimproved sanitation solutions. These challenges are especially evident in the rural areas and the urban slums. According to reports, only 9 out of 55 public water service providers in Kenya provide continuous water supply, leaving people to find their own ways of searching for appropriate solutions to these basic needs.

For many years, in Kenya, there have been recurrent outbreaks of such diarrhoeal diseases including cholera. Cholera is a severe disease caused by the consumption of food and water contaminated by a bacteria known as *Vibrio cholerae* causing a life threatening severe diarrhoea. Cholera causes mass morbidity and mortality, and is able to spread very fast. It is directly linked to insufficient access to safe water and sanitation facilities.

CHEPs therefore aims to alleviate the problem by providing vulnerable communities with water purification chemicals, so as to improve quality and safety of water they consume. In addition, Oral Rehydration Salts (ORS) are provided to prevent and urgently treat dehydration in the unfortunate event of diarrhea and cholera so as to prevent mortality.



Image captured by our volunteers showing the stagnant dirty water that villagers commonly rely on for drinking



## DISTRIBUTION OF WATER PURIFICATION CHEMICALS AND ORS

CHEPs strives to improve the accessibility of water and improve sanitation in the marginalized communities. Through support from WF-AID, water purification chemicals and ORS was distributed to 1000 families in Kilifi and Tana River Counties of Kenya with the aim of reducing the incidence of water borne diseases and prevent mortality from such diarrhoeal diseases. They were also educated on purpose and use of these items as well as about general health and hygiene.



CHEPs volunteers educating the communities on the use of water purification chemicals and ORS







# RURAL LIGHTING



## SOLAR LIGHTING INITIATIVE

Rural electrification is a challenge that Kenyans face and this impacts the communities negatively. Lack of lighting adversely affects the elderly, disabled, sick and especially children in poor and remote villages that lack basic amenities for their holistic development. Such disadvantaged children have difficulty in doing schoolwork when the sun sets, thereby performing poorer than their urban counterparts. Poverty and education are intertwined at multiple levels. Such children have less access to quality education and grow up uneducated, preventing them from becoming productive members of a very competitive society. They, in turn give rise to poverty stricken off springs, who in turn are unable to access education giving rise to a vicious cycle. The situation only gets worse with the rising cost of living and increasing competition among societies. It is therefore imperative to break this cycle, and the most sustainable intervention is that of promoting access to education to curb poverty.

The CHEPs' solar lighting initiative is committed to enable students, institutions and homes without electricity to get access to light for studying and income generation activities. For the majority that have no lighting whatsoever, this creates opportunities for better livelihoods both at the individual and communal level. For the few that have kerosene lanterns, solar lighting provides better illumination and a smoke/pollution free indoor environment protecting from multiple health hazards.

Chakama, located in remote Kilifi County, is one of such locations where communities are living in extreme poverty. For many years they have been neglected, therefore having poor accessibility due to lack of basic infrastructure such as roads, water supply and electricity. Trade is therefore minimal. They are also uneducated and unemployed, having little economic activities to earn a living. The 38 villages in Chakama are not connected to national grid for electricity supply hence only those having a "decent" income can afford to buy a basic solar powered light. This leaves over 80% of the households in darkness.



Poverty in Chakama, Kilifi county is high. Residents cannot afford decent housing, nor lighting. There is no electricity grid in any of the 38 villages!



CHEPs, through support from Dattoo's Charity Trust, distributed 32 solar powered lighting kits to villagers in Chakama, targeting households that had both elderly and school going children. With the solar powered lights, the elderly are now safer at night, and school going children are able to study at night hence improving their literacy and performance.












# HOUSING

CHEPS/002/2020

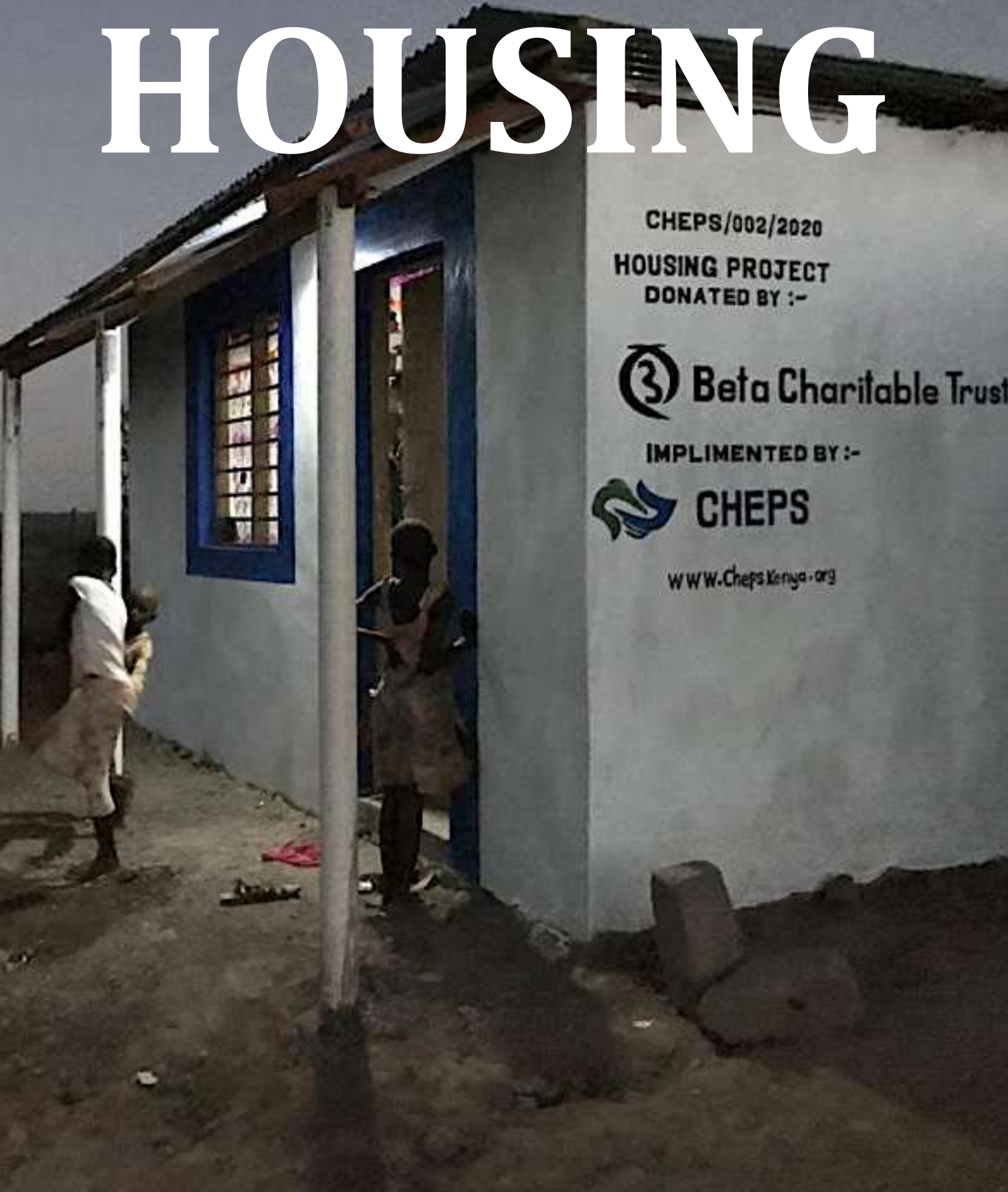
HOUSING PROJECT  
DONATED BY :-

 Beta Charitable Trust

IMPLIMENTED BY :-

 CHEPS

[www.ChepsKenya.org](http://www.ChepsKenya.org)





## HOUSING FOR ELDERLY AND WIDOWS IN CHAKAMA

Shelter is one of the basic necessities for a human being. According to the United Nations:

- 100 million people worldwide are homeless
- 1.6 billion lack adequate and secure housing
- 100,000 people die every year due to lack housing
- The housing deficit in Kenya stands at 2 million and continues to grow by 200,000 annually.

The worst affected are the elderly in remote rural areas, who are commonly neglected by their children who move to towns leaving them in the villages. Some societies including those living in Kilifi even accuse the elderly of witchcraft and isolate or even murder them.

CHEPs has so far constructed 24 homes for elderly and widows. This quarter we constructed 2 more houses for neglected elderly people and are in the process of constructing more similar homes.

**BEFORE**

**CHEPs HOUSE NUMBER 023**

**AFTER**

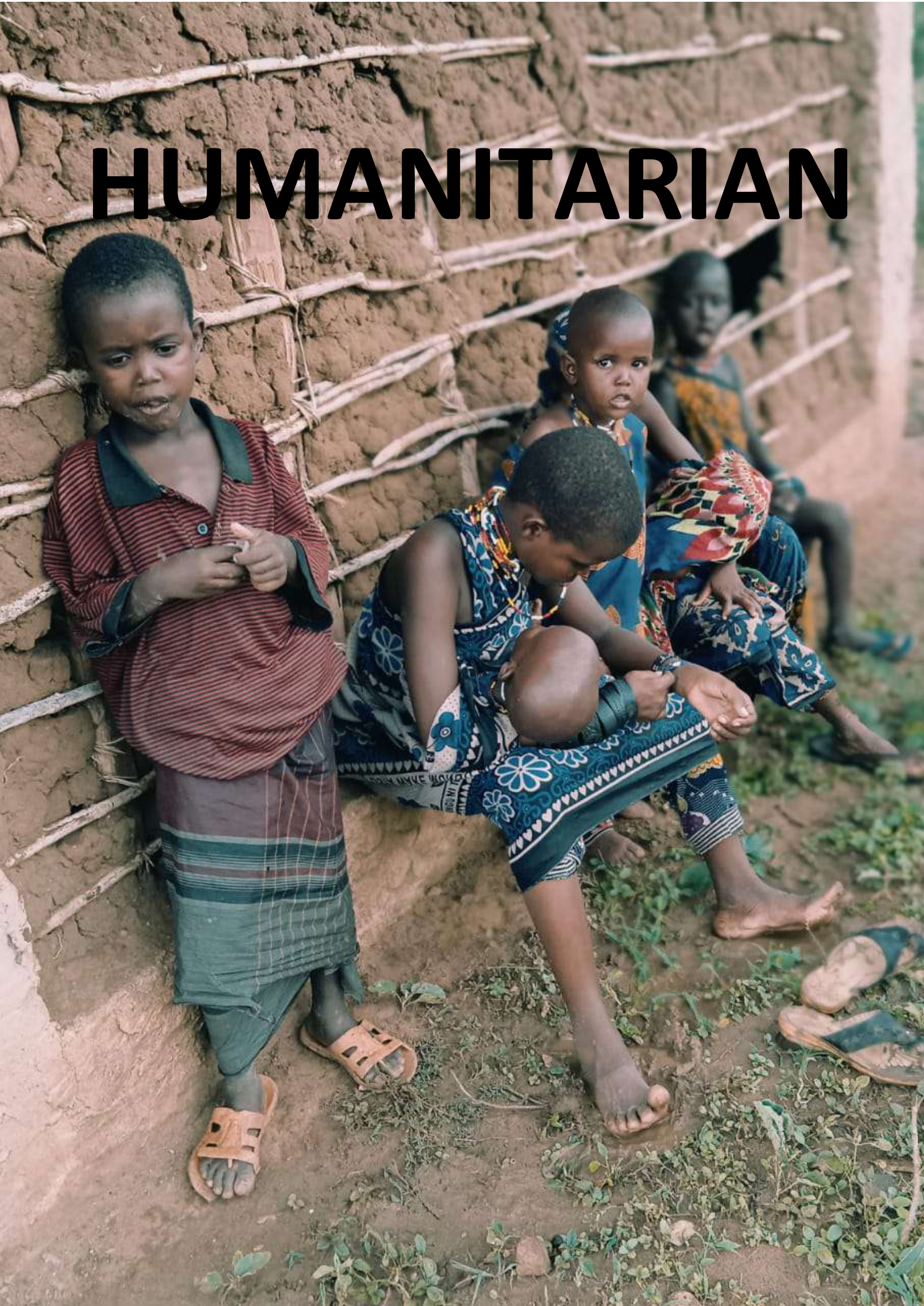


**CHEPs HOUSE NUMBER 024**





# HUMANITARIAN





## FOOD DISTRIBUTION

Rural communities in Kenya are currently facing severe food insecurity. With failure of rains and floods that destroyed infrastructure and farms, the year 2020 saw very little food production and exhaustion of food reserves. The country also experienced the worst locust infestation in 70 years causing widespread destruction of farms adding injury to an already ailing country leading to increase in hunger and despair. And now, with the multiple waves of Corona virus pandemic, resources have shifted to epidemic response. Marginalized, remote rural communities like Chakama in Kilifi County are already suffering from hunger. CHEPs has been receiving many appeals for urgent food support from most villages in Chakama area. The food insecurity and hunger situation in those villages has been verified by CHEPs field staff and volunteers.

Kilifi and Tana River Counties are such areas where communities are living in extreme poverty and at the risk of starvation. For many years villages in Chakama and Mnazini have been neglected therefore having poor accessibility due to lack of basic infrastructure such as roads. Trade is therefore minimal. They are also uneducated and unemployed, having little economic activities to earn a living. They mostly rely on subsistence farming to obtain food but due to harsh environmental and climatic factors, they grow very little food. Furthermore, the little they are able to grow is often destroyed by free moving domestic as well as wild animals, pests, drought and floods.

In order to avert potential loss of lives, CHEPs distributed over 85 tons of relief food to over 2775 of the most vulnerable households in remote Kilifi and Tana River counties. The families also received water purification chemicals, water storage buckets and hand washing soap to improve drinking water quality and improve hygiene.

Motorcycles were used during the exercise to deliver the supplies door to door and to access the most remote and marginalized households. Furthermore the distribution was done in small groups, maintaining social distancing in order to minimize the risk of spread of COVID-19.

















# ENVIRONMENT





## TREE PLANTING INITIATIVE

The global rate of deforestation is alarmingly high. It is estimated that the world uses 25% more forest resource than can be sustained every year. Forests are quickly being cleared by human activities including settlement, timber harvest, and energy production, and being replaced by desert.

This is leading to severe climate changes that are resulting in harsh conditions such as the drought experienced in Kenya last year and the destructive floods this year. Over 1 billion people worldwide lack access to safe drinking water, and over 800 million people lack access to food due to unfavorable climatic conditions. Most Kenyans rely on agriculture directly or indirectly, and lack of access to water leads to hunger in addition to thirst.

The United Nations Sustainable Development Goal no. 15 aims to protect restore and promote ecosystems and combat desertification. In keeping with this goal, CHEPs strives to preserve the environment by planting trees. We have so far planted 13500 trees in rural parts of Kenya with emphasis of arid and semi arid areas.

Through the support from WF-AID and The 767 Group of Visa Oshwal Primary School, CHEPs planted 214 neem, 100 moringa, and 80 mango trees. These were planted within Mkondoni Secondary School in order to ensure that they are maintained, and also to promote a culture of reforestation and environmental consciousness among the students. Each student was assigned few seedlings to plant and care as part of their co-curricular activities. CHEPs, together with the school administration, shall closely monitor the progress of the trees and eventually award the students that care for the trees the best.

For many years, charcoal burning has been one of the main economic activities in rural areas where CHEPs operates, leading to widespread desertification and, as a result, failing farming efforts. Very little food production is currently taking place due to harsh climatic conditions as well as strong winds. The trees are expected to not only provide shade within the school compound but also restore the destroyed environment. In a community that routinely cuts down trees, we aim to break the culture through the youth and specifically school students. We plan to expand the program to more schools and eventually the broader community.

Plans are underway to reward high performing students with fruit, timber, neem and moringa seedlings to plant in their own homes and farms. Over time these trees may provide them an income through sale of the fruits and timber, which can support their fees and livelihood. Neem and Moringa have medicinal properties. Moringa is highly nutritious and can be used to reduce malnutrition especially among children. Furthermore, as an incentive to the students and school, we plan to offset part of fees balances for every student who cares for his/her tree, allowing it to survive and grow well. This will be highly motivating as in that area most households live in extreme poverty and students are unable to pay even the subsidized fees and miss or even drop out of school. Thus the CHEPs tree planting project is not only beneficial to the environment but also conducive to learning and education, improve nutrition and health, as well as lifting the people economically.





CHEPs CEO Dr. Muhsin Sheriff initiating the tree planting exercise









## CHEPS URBAN SLUM EMPOWERMENT PROGRAMME

### **Introduction:**

Kenya has a rising population of 54.2 million people with 72 % in rural areas. The growth rate is declining and currently at 2.3 % per year. It shares borders with Tanzania, Ethiopia, South Sudan and Somalia. The population density is 94 per km<sup>2</sup>. Over 40% of the population is below 15 years of age and a median age of 20.1 years. 2.7% of the population are over 65 years of age. Life expectancy is rising and higher among females (69.9 years) compared to men (65 years) with overall average 67.5 years. The Under-5 mortality rate is 40 per 1000 live births and Infant mortality rate 30.6 per 1000 live births. The urban population has been rising while rural population reducing over the past years. In the next ten years the urban population is expected to rise to a third of the total population of 66.4 million.

Nairobi is the largest city in the country with a population of over 4 million people spread over 696 sq km with a density of 4,850 per sq km. It is ethnically diverse including Kikuyu, Luo, Luhya, Kamba, Asians, Europeans and Somalis calling it home. About a quarter live in extreme poverty in the many slums spread over the city in which almost 40% of the city's population live. The slums include Kawangware, Kibera, Mathare, Kayule, Dandora, Baba Ndogo, Fuata Nyayo, Huruma, Kangemi, Kariobangi, Githurai. Many of these are next to posh high-income areas.

### **Problem statement:**

Kawangware slum, located next to the high-income Lavington area, is densely populated and home to people of diverse background, most living in extreme poverty, very high unemployment, with low literacy levels and poor access to education and health services. Two thirds are women and children. Most survive on petty casual labour and hunger is common. Women, even if they have any skills, cannot find adequate market to get a decent earning. Moreover, women and post-puberty girls cannot afford sanitary pads thus leading them to using unhygienic materials which cause diseases and indignity. There are public and private schools in the area but many students drop out and academic performance is low. Many girls regularly miss school and even drop out because of lack of sanitary pads. Most children go to school without being provided with any breakfast much less a nutritious one. Diseases are common and access to quality health services is very poor. Many single mother families have the added burden of disabled children without adequate and appropriate support. This leaves the disabled children at a disadvantage as specialized care as their parents and caregivers cannot afford it. Many of the elders are on their own without any family or social support. They are left to fend for themselves which adds to their misery, marginalized with many going hungry and unable to access health services. Even the blind among them cannot access vision restoring curative surgeries. The COVID19 epidemic has added to the misery of these people.







**Solution:**

Simple, sustainable intervention is required to provide support to the disabled, elderly, school going children and destitute women to improve their lives. In keeping with its objectives to provide health, education, development and humanitarian services to marginalized, needy individuals and communities, CHEPs set up its latest programme in Kwangware slum of Nairobi city in June 2021. A community centre at the heart of the slum was rented from the local community management committee. It comprises of five rooms including two large and three small ones.

**Aims:**

1. To provide healthcare (including occupational therapy, education and nutrition) to disabled children and adults to enable them to improve their lives as well as to support their careers.



2. To provide vocational training and market access to needy women to improve their earnings and livelihood.
3. To provide nutritious meal to school going destitute children.
4. To produce and distribute sanitary pads to female students and women in the area to improve their health and lifestyle.
5. To provide school eye care services.
6. To restore sight to the blind through cataract surgeries.
7. To undertake other projects as needed to improve lives of needy people in the area eg literacy classes, kitchen gardens to grow some staple vegetables, student mentorship.

**Benefits of the programme:**

1. Provides needed health and education services to disabled children.
2. Provides useful skills to local women to improve earning and livelihood.
3. Improves nutrition and motivation of school going children in the area.
4. Provides menstrual hygiene dignity to women and girls.
5. Supports the marginalized and destitute elders with nutrition and health services.
6. Provides eye care services in schools and vision restorative surgeries for the blind.

The necessary regulatory approvals were obtained, renovations to the center done, equipment procured, staff recruited, beneficiaries mapped and local community made aware of the new projects. The women’s empowerment and eye care projects commenced on 1<sup>st</sup> July 2021, while the remaining projects await funding.







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