

Lea Toto

THE NEED

Lea Toto, Swahili for "to raise the child", is a community-based outreach program providing services to HIV+ children and their families in the Kangemi, Waitthaka, Kawangware, Riruta, Mutuini, Ruthimitu, Kibera and Kariobangi communities of Nairobi, Kenya.

Recognizing that the orphanage was unable to provide direct support to the growing number of HIV+ children in the Nairobi area, Nyumbani launched the Lea Toto Program in 1998. Initially based out of an office at the Children's Home, Lea Toto workers established a support program through which HIV+ children could remain with their caregivers in their communities. In 1999, with funding from USAID, Lea Toto became a full community-based care program charged to carry out a project targeting HIV+ children in the Kangemi slums of Nairobi.

The Lea Toto project uses the Home Based Care (HBC) model. All HBC programs have one goal in common - "improvement of the quality of life of the affected through a package of comprehensive care for the client and his/her family". This package usually includes:

Basic medical and nursing care
Counseling and psychological support
Spiritual guidance
Relief for social needs
HIV transmission prevention education
Promotion of community empowerment/ownership
Self-help

Experience has shown that Home Based Care and counseling enables clients to live more positively and saves money that would otherwise be spent on hospital care. In this sense HBC is cost-effective, leading to reduced in-patient hospital stays and a reduced cost per beneficiary.

Other Program Services

- VCT (Voluntary Counseling & Testing)
- Clinical Care for home bound clients
- ART (anti-retroviral treatment) (since 2005)
- Permanency planning
- Training of Caregivers
- Nutritional Support
- Business development training/Income generation activities
- Providing Micro credit services to caregivers.

Program Goal

Mitigate the impact of HIV/AIDS and decrease the risk of transmission through the provision of comprehensive home-based community care.

Objectives

- Provide 3,000 HIV positive children and an estimated 15,000 family members with high quality home based care and counseling services by June 2006.
- Provide a package of social support services to at least 50% of the 3,000 HIV positive children and their families
- To enhance the ability of targeted local communities to prioritize the needs of HIV+ children and their families and to carry out activities to meet these needs
- To provide the target communities with the skills necessary to negotiate support and maintain safe behavior

Program Challenges

- Poverty among the people served. Priority is given to basic needs: food & housing.
- Social Hindrances: Illiteracy, Relocation, Change of the caregiver.
- Cultural/Religious factors: Beliefs, Stereotypes and Misinformation about ART, The program is as equally stigmatized as the disease.
- Disclosing the HIV status to the growing children.
- Client inaccessibility due to security reasons.
- Possibility of accessing treatment from more than one ART provider.

HISTORY

1998 – Launching of Lea Toto Outreach Program from Children's Home.

1999 – Lea Toto becomes a full Community Based Care Program in Kangemi, funded by USAID. Nyumbani funds Lea Toto services provided in Kariobangi.
Lea Toto Program: **135**

2001 – Lea Toto Program: **398**

2002 – Lea Toto Kangemi program is re-authorized by USAID and services are expanded to include Waithaka, Kawangware, Riruta, Mutuini, Ruthimitu.
Lea Toto Program: **626**

2003 – Nyumbani funded Lea Toto program in Kariobangi expands to include Kibera
Lea Toto Program: **1,084**

2004 – Lea Toto Program: **1,786**

2005 – Anti-Retroviral Treatment program launched in Kangemi & Kawangware in January and in Kibera & Kariobangi in May
Lea Toto Program:

Cumulative clients to date **2,089**

Current active clients **1,565**

Information from the Nyumbani website www.nyumbani.org