

Sharing Resources – Conversation Guide

It all started in 2009 when individuals who are living positively with HIV used to come to the clinic where I was working and asking bus fare to and from their homes so as to make it for clinic appointments as well as ask for money from the social workers so as to help buy basic food stuff like maize flour, sugar, cooking oil and vegetables for the families. Most of the population receiving treatment at the clinic are living on less than USD1 per day. This made life so unbearable and harsh.

Gradually, we devised a method of asking the clients to contribute Ksh.50 [less than a USD1] each time they came to the clinic and we could approach the manufactures of the asked commodities like sugar, maize flour, rice...we managed through the help of the company directors to procure at a very cheap price and give to the clients. This they would then distribute amongst themselves. The portions received motivated the other clients until a bigger number later joined the group. We then asked the members to increase the contributed amounts to USD 2. This was well received and the produce was bigger and more. The membership grew.

The group was then encouraged to choose three officials who would help with leadership and management logistics other than depending on our staff for their organization and coordination purposes.

The group was so big that, the members decided through their able leadership to split into several groupings depending with their geographical locations and strengths. The women started making carpets and mats (of different sizes) and the men went into rabbit rearing and soap making.

Other groups, on realizing the good work coming from their peers, came asking for best practices which made the members to gain more confidence and skills which as per now, they no longer ask for money for transport and food from Health Solutions. This is my highest point. Again, we no longer buy detergents, soaps (made from palm oil and aloe vera), mosquito repellent candles from the supermarket, we promote our community groupings. It's more than fun and so satisfying. By the way, we have also very nice African shopping bags which are tailor-made to the needs are requirement of the buyer. You can buy and try for yourself. It is very eco-friendly too.

“Foster individual and community empowerment,” the communities transformed the legacy of colonized perceptual and cognitive behavior, expressed in a belief system of powerlessness that prevented individual and collective action, to produce an antidote of cultural affirmation, personal and political efficacy, supportive structures for knowledge and skill building, and motivation to protect health and well-being at the individual and collective levels. The synergy of all these elements combined in this TEACH concoction produced a powerful response of human agency by community residents and other participants in the campaign to end the hunger, one that asserted the individual and collective ability to mobilize the resources necessary to change environmental conditions jeopardizing health and quality of life.

We focused on the following elements for success:-

Perspectives for Community Health Education

1. Start where the people are.
2. Recognize and build on community strengths.
3. Honor thy community—be the bank.
4. Foster high level community participation.
5. Laughter is good medicine—and good health education.
6. Health education is educational—but it is also political.
7. Thou shalt not tolerate the bad “isms.”
8. Think globally, act locally.
9. Foster individual and community empowerment.
10. Work for social justice.

Health Solutions is my personal initiative. My family members love every move we make and we have involved the community in a tactful way which at the end of it all impacts the planet Earth.

To attain the fourth TEACH commitment, “*Fostering high level community participation,*” the best tool used in the community will work to further link self-efficacy to collective efficacy by reaffirming that every participant’s contribution is important for the success of the campaign. This dynamic coalition succeeded in creating an action-oriented movement of the civil society from very distinct, and in some cases oppositional, social agendas and ideological orientations. Faith-based organizations, professional groups, community groups, academic institutions, nongovernmental organization, and thousands of concerned citizens will join the campaign.

Creating social capital brings people together. Working with general community, HS has created a credible, practical savings mechanism easily done through T.E.A.C.H concept, **to resolve the mismatch between having money and falling ill** i.e. *Save little by little and use when you need it most for health care as well as establish food security in the community*

An organized TEACH group can be thought of as the "added value" endowed to a community in the thoughts, words, and actions of members. There are many different ways that this added value can be created for a community.

Therefore, it is important that TEACH concept should be nourished and replenished, since the members can reap the benefits of their hard earned resources.

Health Solutions if has a partner like PCI, we can achieve more than we currently offer the community. We are meeting with TWO other community groups this coming 29/09/2012 so as to learn best practices from each other. I believe the involvement of PCI in Kenya will be an added advantage to Health Solutions.

You can see that when a group becomes TEACHable, it is said to have equity. This happens when members use what they have as premium and can stand out in the community or the difference between the perceived value and the intrinsic value of what they were.