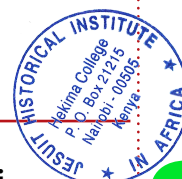


News and Events

Social Transformation Strategies' workshop in Kariobangi By Patricia Sakali



Jesuit Hakimani Centre facilitated a two-day workshop at Kariobangi Women Promotion Training Institute (KWPTI) on 8th to 9th July 2010. Kariobangi is a densely populated suburb on the eastern side of Nairobi city. It was one of the hardest hit estates during the post poll mayhem that erupted on 30 December 2007 and ended in February 2008 with the signing of the National Accord between the Party of National Unity of President Mwai Kibaki and Orange Democratic Movement of Prime Minister Raila Odinga. Although the violence ended towards the end of February 2008, Kariobangi residents still face the challenges of economic recovery, social and psychological healing and peaceful co-existence.

Sr. Loretta of KWPTI invited Jesuit Hakimani Centre for a peace-building workshop for young women who undertake various training courses at KWPTI. Most of them had been living in Kariobangi during the violence hence they were affected. The participants were women aged between 15 and 30 years. In total, Hakimani trained 127 participants.

Objectives of the workshop

- To communicate a comprehensive understanding of peace-building that includes causes and roots of conflict, as well as mapping conflict.
- To enable participants to apply this comprehensive understanding to the contemporary Kenyan reality
- To help participants develop the tools to effect social transformation in their communities
- To help participants understand trauma, identify its causes and provide them with tools on how to manage trauma.
- To promote reconciliation and enhance co-existence among different ethnic groups post-poll violence
- To cultivate positive attitude towards participation in elections/referendums

From the objectives of the workshop, the facilitators came up with the following topics for the sessions: self awareness; conflict and peace-building; trauma and its management; electoral process, democracy and ethnicity; electoral irregularities and voter apathy; elections, human rights and governance.

The pedagogical style of the workshop was mostly facilitative. Key themes covered were drawn from the KWPTI's invitation letter that had outlined the objectives of the workshop as stated above. In some cases, small group assignments were given so that participants could practice using the analytic tools presented.

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Kudos! Bravo!

Congratulations to all Kenyans on holding a peaceful and successful constitutional referendum on 4th August. It is our hope that the Kenya government and other stakeholders will ensure smooth and effective implementation of the new supreme law!

This was followed by group presentations, so that the entire group could benefit from their reflections.

During the small group discussion sessions, the participants found out the following as the causes of conflict in their neighbourhood and Kenya in general: land disputes, politics, cultural beliefs, jealousy, nepotism, disagreements, corruption, revenge, racism, religion, greed, political power, poor distribution of resources, hatred, discrimination, misunderstanding, bad governance, poor salaries, poor leadership, idleness and hate speech among others.

Participants suggested the following as means of resolving conflicts in communities: upholding the spirit of communication and dialogue; encouraging the spirit of forgiveness, brotherhood and sisterhood,

reconciliation, respecting one another's views, self satisfaction, mediation and cooperation; organizing social activities where people from different communities are involved; promotion of good governance, good leadership, social justice, equitable distribution of resources and gender equality; fighting corruption, nepotism, tribalism and various forms of stereotypes; inculcating values in children as they grow up; understanding and appreciating one another; thinking positively about politics and governance

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The Promise of Peace and Reconciliation in Kenya

By Mugo Phares Kirii

August 4th 2010 will forever remain a historical date in hearts of Kenyans. Kenyans from all walks of life turned out in large numbers to vote for a new constitutional dispensation that journeys back 20 years ago ending years of impunity, corruption and nepotism in the public sphere. It is not lost that during this period lots of injustices were perpetuated by previous regimes. The great peace towards which people of good will through out the 20 years have inclined their hearts, of which Kenyans have expressed their vision. For the first time in history it is possible for every Kenyan, with all its myriad diversified peoples, in one perspective. Peace in Kenya is not only possible but inevitable. It is the next stage in the evolution of this country.

Whether peace is to be reached only after unimaginable horrors precipitated by humanity's stubborn clinging to old patterns behaviour, or is to be embraced now by an act of consultative will, is the choice before Kenyans. At this critical juncture when the intractable problems confronting Kenya have been fused into one common concern for the whole nation, failure to stem the tide of conflict and disorder would be unconscionably irresponsible.

Transitional Justice

Transitional Justice aims at sustainable reconciliation and the consolidation of embryonic democracy in societies in transition. Transitional Justice comprises such mechanisms as: violence prevention interventions, the empowerment of victims and other vulnerable groups, relationship building and institutional transformation programmes. Transitional Justice initiatives help redressing the injustices and damage to the social fabric (both material and psychological) that are rooted in a divided past. We are convinced that, within this wide range of possible activities, the Truth Justice and Reconciliation Commission (TJRC) has a specific role to play.

The Truth Commission's Mandate (Terms of Reference)

Experience has taught us that the outcomes of a Truth Commission are usually limited. It is therefore crucial not to raise false expectations among

Kenyans. A Truth Commission should never be presented as a cure-all and should never function as a substitute for other essential transitional justice mechanisms. Already the mere fact of starting hearings by a Task Force (that only investigates the desirability of a future Kenyan society) has raised false hopes among citizens and led them to believe that retributive justice will be provided soon. Extensive civic education on the scope and limitations of a Truth Commission seems to be a vital prerequisite. With the instruments already at its disposal, the government should not wait for a Truth Commission to do what needs to be done immediately like: resettlement of the displaced persons, investigations into past crimes, recovery of public wealth, restitution and reinstatement.

The specific benefit of a Truth Commission is its capacity to address psychological and spiritual healing processes in the victims of past abuse. Rather than promising material benefits in terms of compensation and retributive justice, a Truth Commission should operate, almost entirely, in the symbolic, literary and liturgical realm. By contrast, an all too comprehensive Truth, Justice and Reconciliation Commission will be, too costly and time-consuming. Such a Commission may even delay justice.

The Truth Commission should be designed and organised without haste. Instead, great care, circumspection, and prudence should be exercised before, during and after the activities of the Truth Commission. A. In designing the mandate of a Truth Commission the following principles could be followed:

1. A selective scope of acts are taken under investigation (e.g. only 'serious, outrageous acts with great societal impact);
2. A brief period of Kenya's history to be investigated;
3. Investigation restricted to acts committed within Kenya's boundaries;
4. Only minimal legal powers are granted to the Commission;
5. Comprehensiveness in reporting the victims' names, but great prudence in the naming of alleged perpetrators;
6. Full access to information;
7. A limited scope of recommendations to be given by the Commission (e.g. only realistic and feasible recommendations a Kenyan Government could and would implement);

8. High operational clarity;
 9. The freedom allowed to the Commission should be restricted;
 10. Clarity in the Commission's methodology (e.g. public hearings vs. private ones that guarantee confidentiality);
 11. The members of the Truth Commission be persons of high moral standing who enjoy credibility;
 12. The final report of the Truth commission should be submitted within one year and three months from the date of its becoming operational.
- B. During its activities, great care should be taken to warrant the following:
1. Expert psycho-spiritual accompaniment of the victims and their families should be provided;
 2. Comprehensiveness in publicising the names of the victims – no one should be forgotten.
 3. Representatives of the affected communities and its religious leaders must be encouraged to celebrate each positive step towards reconciliation and healing in formal functions.
- C. After the Truth Commission has given recommendations in its final report, some guarantees must be provided to ensure the implementation of these recommendations. The Truth Commission, therefore, must take care that:
1. The Truth Commission's recommendations in its final report are desirable and feasible, taking into account financial and other constraints of the nation-state.
 2. The Truth Commission specifies with great clarity what state-organs will be responsible for further action in the ongoing process of national reconstruction.
 3. Based on its findings, the Truth Commission suggests reform measures of existing state organs or call for the creation of new ones.

The Role of Faith-based Organisations August 2010

The investigation and reporting processes by the Commission can easily be accompanied by Church initiatives such as:

1. The Psycho-spiritual accompaniment of the victims and their families
2. Appropriate, well-organised liturgical celebrations
3. The erection/blessing of durable memorials that display all the names of the victims
4. The promotion of a sophisticated understanding of evil, forgiveness, national reconciliation, grace and redemption
5. The recognition of guilt by all (1Jo 1:8)
6. Help people discover and experience God's forgiveness
7. Highly visible initiatives of ecumenical and interreligious dialogue
8. Sustained campaigns for structural/institutional reform at all levels
9. Support the moral reconstruction of the nation, (e.g. by giving publicity to the Commission's Report)
10. Conveying the key message: "Never Again!"

The Kenyan Government should encourage Faith-Based Organisations and provide the necessary infrastructure to help them fulfil the tasks outlined above.

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Maternal and child health are critical to human development

By Paul Odhiambo

The fifteenth African Union Summit was held in Kampala, Uganda from 25th to 27th July 2010. The theme of the Ordinary Session was: “Maternal, newborn and child health and development in Africa.” While some efforts have been made at continental, regional and national levels to address the problem of maternal and infant morbidity and mortality, many African countries still have a disproportionately high level of morbidity and mortality among mothers and infants due to preventable causes. Though access to quality healthcare is a human right, many people in Africa are still facing numerous hurdles in realizing their dreams. Lack of access to adequate healthcare undermines the dignity of women and children in Africa, leading to morbidity or death. In order for Africa’s full development to be a reality, there is a need for the AU and national governments to invest in healthcare system.

During the AU summit, the Heads of State and Government reaffirmed their previous commitments aimed at accelerating the health of Africans and the social development in the continent. They pledged to re-dedicate themselves and commit their countries to accelerate efforts to improve the state of health of Africa’s women and children in order to attain all the Millennium Development Goals (MDGs) especially goals 4, 5 and 6 by 2015. The eight MDGs are; eradicate extreme poverty and hunger (1); achieve universal primary school (2); promote gender equality and empower women (3); reduce child mortality (4); improve maternal health (5); combat HIV/AIDS, malaria and other diseases (6), ensure environmental sustainability (7); and develop a global partnership for development (8).

Secondly, African leaders committed to launch CARMMA (Campaign on Accelerated Reduction of Maternal Mortality in Africa) in their countries and broaden it as an advocacy strategy for the promotion of maternal, newborn and child health and involve all stakeholders such as women, children and young people, persons with disabilities, parliamentarians, community and religious leaders, civil society organizations, the media and the private sector. The African leaders also pledged to strengthen the health system to provide comprehensive, integrated, maternal, newborn and child health care services

through primary health care, infrastructure development and skilled human resources for health in particular to train community health workers to mitigate the human resource crisis in the health sector.

Thirdly, the AU’s Heads of State and Government committed to provide stewardship as national governments and achieve policy coherence by developing integrated health plans within the development plan with cross disease and cross sector health goals and coordinate multi-sectoral actions and multi-agency partnerships. Fourthly, the leaders also promised to provide strong support for sharing and scaling up of identified good practices that have high impact and are cost effective. Fifthly, African leaders pledged to support sustainable financing by enhancing domestic resources by mobilizing resources through public-private partnerships and waiving of user fees for pregnant women and children under five and also by instituting national health insurance. They also promised to request AU Commission in collaboration with partners (e.g. G-8) to develop a mechanism for accessing such fund by AU Member States.

Sixthly, African leaders also swore to continue engaging the Global Fund for fight against HIV/AIDS, malaria and TB to create a new window to fund maternal, newborn and child health. Finally, African leaders promised to institute a strong and functional monitoring and evaluation framework at country level to provide accurate, reliable and timely maternal, newborn and child data to monitor progress against agreed indicators and targets, measure health performance and for informed decisions and actions including making maternal deaths notifiable and institute maternal death reviews.

From the Kampala Summit deliberations, it is clear that there is an urgent need to address maternal and infant morbidity and mortality. While the governments have pledged to take concrete actions at national levels to address the challenges facing mothers and infants, more needs to be done so that maternal health and child health are improved. A country that does not invest in ante-natal care and post-natal care neglects an important factor in human development. A society that does not take care of children faces a bleak future. In Kenya, The Millennium Development Goals Report 2010 indicates that the 'ring-fencing' policy on the budget expenditure on health projects has helped improve maternal health. Ring fencing is the case in which the agreed allocations to a particular sector are not supposed to be reduced no matter what happens to

the revenue. While other sectors may experience cuts in budgets, the 'ring-fencing' protects the health, education and poverty sectors from such cuts. The proportion of births attended by skilled health personnel increased from 42% in 2003 to 56% by 2007. Despite this considerable improvement, it is imperative for all stakeholders to ensure that achieving MDG 5 (that is, improvement of maternal health) becomes a priority in the government's development programmes.

The Millennium Development Goals Report 2010 also shows that Kenya government has increased the coverage on immunization to over 80% and facilities have improved in public health centres and drugs accessibility. The successful implementation of the MDG-based Economic Recovery Strategy has seen immunization coverage rise to 72% in 2007. About 68% of under-five children years are also receiving bed nets to protect them against mosquitoes that facilitate the spread of Malaria.

Health is an important aspect of human development hence there is a need to have a sustainable health system in the country. What is human development? It is a new development paradigm whose

central focus is human well-being. In this new development model, increase in income is seen an essential means, but not as the end of development. Human development is about creating an environment in which people can develop their full potential and lead productive, creative lives in accord with their needs and interests. People are the real "wealth" of nations. Development is thus about expanding the choices people have to lead lives that they value. It is about much more than economic growth, which is only a means of enlarging people's choices.

It is, therefore, important that national governments and other stakeholders in Africa take seriously maternal health and the well being of infants. The society owns a lot to women who play a critical role in both biological and social reproduction. Children should also be given material, moral, social and spiritual support as they grow up.

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Jesuit Hakimani Centre is the social justice, research and advocacy centre of the Eastern Africa Province of the Society of Jesus. The province comprises of Ethiopia, Kenya, Sudan, Uganda and Tanzania.

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