



International Federation  
of Red Cross and Red Crescent Societies



**Kenya**  
Red Cross

Lamu Rehabilitation centre  
for people who use drugs





# Overview of social inclusion intervention

- Profile of targeted excluded group
  1. People who use Drugs
- Services provided / approach taken / advocacy made
  1. Rehabilitation services for PWUDs
  2. Approach (Community Engagement, Client Assessment, Rehabilitation Services, Family Engagement, Integrated services)
  3. Advocacy (National and County Government, Religious Leaders)



- Main achievements
  1. Support from the community – donation of the land, labour in fencing etc
  2. 65 clients have so far been admitted at the centre, with 24 of them being discharged
  3. 8 initial clients support through the NGAAF
- Challenges and issues
  1. Funding for services (cost of services) so plan has not been implemented as envisioned
  2. High expectation from the community – send clients to rehab for free
  3. Vocational Training not implemented increasing risk as clients don't have any activities to engage in after discharge but we have been linking them up with EU project for vocational training and IGAs



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| <p><b>Addressing attitudes, behaviours and laws.</b></p>   | <ul style="list-style-type: none"> <li>• Community Sensitization sessions</li> <li>• Meetings with leaders including religious leaders, community members</li> <li>• Sessions with other stakeholders including; county government, judiciary, prison services</li> </ul>  |
| <p><b>Full, equal and meaningful access to NS programs and services.</b></p>                     | <ul style="list-style-type: none"> <li>• Provision of services to all members of the society without discrimination</li> <li>• Discussions with local leaders and other stakeholders to support clients access services</li> <li>• Outpatient services to local community as it's the nearest facility around</li> </ul>                           |
| <p><b>Participation of excluded people in economic, social, political and cultural life.</b></p> | <ul style="list-style-type: none"> <li>• Assessment of clients before being admitted to ensure they are ready for services and avoid defaulting on treatment</li> <li>• CEA - Planning, implementation and monitoring with the community members – community consultation and engagement to ensure the most vulnerable get the services</li> </ul> |

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| <p><b>Meaningful involvement of excluded people.</b></p> | <ul style="list-style-type: none"><li>• Feasibility study, baseline, implementation and monitoring</li><li>• Bring out the project management framework and how they are engaged</li><li>• Community engagement - gate keepers e.g. local leaders etc. for buy-in; validation of tools and protocols</li><li>• Reflect and review sessions (Follow up with discharged clients to provide feedback on services provided)</li></ul> |
| <p><b>Diverse staff and volunteers</b></p>               | <ul style="list-style-type: none"><li>• Sensitization of staff and volunteers on diversity for purposes of ensuring inclusion</li><li>• Working with local volunteers including recovered PWUDs</li><li>• Peer Educators from the different areas to ensure they are able to reach their local communities</li></ul>  |

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| <b>Partnerships</b> | <ul style="list-style-type: none"><li>• Movement partners – ItRC; QRCS</li><li>• GoK – National and County Governments</li><li>• Stakeholders – rehabs; health service providers</li></ul> |
| <b>Resourcing</b>   | <ul style="list-style-type: none"><li>• Continuous fundraising</li></ul>   |