



2016 End of year report

Nosy Komba Solidarité

Ampangorina

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MADAGASCAR



Project details

1. Please summarise in a few words the project supported by TFWA CARE, including the principle objectives and duration.

The sustained demographic increase of Nosy Komba and particularly of the village of Ampangorina, has created a fresh outbreak of serious infectious diseases. Because of their increased occurrence, typhoid, cholera, diphtheria, dysentery, malaria and tuberculosis affect the Nosy Komba vulnerable people more and more (such as pregnant women, children and elderly people)

Considering this worrying situation, our 2016 actions have mainly dealt with the prevention of these diseases by improving the living conditions of the villages:

- furthering the installation of sanitation blocks, whether public or private,
- improving and renovating the water piping network,
- managing food waste.

NKS has simultaneously addressed several one-off, no less important needs:

- constructing a nursery school,
- take on the medical care for children from resourceless families.

2. What activities were carried out within the scope of the project over the course of the year?

During 2016, we have undertaken the following programmes:

- building eleven additional private sanitation blocks (Ampangorina and two neighbouring villages),
- refurbishing five old sanitation blocks (Ampangorina),
- improving the water piping network (Ampangorina),
- setting up a refuse incinerator (Ampangorina),
- completing the construction of a nursery school (Andrekareka),
- Continue the medical support of Naedine, the child suffering from acute hydrocephalus.

Evaluation

- 3. Has the project been successful? Please outline the success factors for each objective as well as the challenges encountered and solutions adopted to overcome them.**

In 2016 our main actions focused on continuing the efforts linked to hygiene which NKS have been carrying out successfully since 2012:

- The use of toilets functions very successfully and the applications from families for new facilities is in constant progress. The notion of hygiene is now part and parcel of the everyday life of 120 families,
- The management of waste close to houses enables the reduction of rubbish heaps responsible for the generation of transmittable germs and bacteria,
- The completion of the building of a nursery school, equipped with a sanitation block exclusive to the village of Andrekareka, enables the permanent schooling of children,
- The prolongation of the medical care, and of the urgent treatments still enable Naedine, the village child suffering from acute hydrocephalus, to continue his recovery slowly (motor function, speech). The heavy treatment will last several years.

- 4. Did the work accomplished this year help you learn lessons that will benefit future work?**

Considering the high demographic increase and the present success of our sanitation installations, we need to undertake some new constructions in order to satisfy the 220 families inhabiting the village of Ampangorina (three-year plan).

Conversely, the villagers' awareness of a healthier environment and the completion of the building of the incinerator lead us to undertake the daily management of food waste.

Sustainability

- 5. How has the project had a positive impact on the community/ies at the core of the project and what will be the long term benefits? Please explain if the project has helped empower the beneficiaries by providing greater autonomy.**

The success of our programmes (massive and regular use of the sanitation blocks by the villagers) and the realisation of the importance of keeping the premises clean, have lead us to continue on this track. The villagers have changed their habits. The importance of a hygiene quality shared by everyone has emerged. These awareness and habit modifications mostly concern the new generation who represents the future of Ampangorina.

6. Will the project continue in the future or is it now complete? Will further funding be required in the future to complete the work? Please indicate if the initial funding request was a multi-year project. ** (see footnote)

As for the previous years, the local needs in terms of hygiene remain the prevailing factors to fight infectious diseases as well as the epidemics affecting primarily the vulnerable people, such as pregnant women, children and elderly people. Approximately 120 out of the 220 families now use our installations. This remains insufficient. Therefore, we owe it to ourselves to continue on this track.

The donations remitted by TFWA Care for the 2016 actions have been spent for the programmes completed, up to 83 %. The balance (i.e. 4.3 k€) will help out with the completion of the 2017 projects.

Finance

7. Please provide a summarised breakdown of how TFWA Care funds were utilised for the project.

Here is the summary of our 2016 expenses in Euros.

The donations remitted in 2016 by TFWA Care have been used for up to 83 % of the budget for the various actions mentioned hereafter. The positive balance (i.e. 4.3 k€) will contribute to the completion of our 2017 projects

2016	Achieved actions 2016	Qty	Unit cost	Cost / Euro
2016	Additional sanitation blocks	11	950	10,450
2016	Renovation / maintenance of sanitation blocks	6	300	1,800
2016	Renewal of part of the water supply network.	1	500	500
2016	Completion of the construction of a nursery school	1	1000	1,000
2016	Completion of the building of an incinerator	1	2500	2,500
2016	Care of several children (medical)	1	200	200
2016	Annual salary (local Malagasy person in charge + accountant)	12	150	1,800
2016	Extra fees (miscellaneous tasks)	1	450	450
	Total expenses 2016			18,700
	Budget 2016			23,086
	Positive balance 2016 to be transferred to 2017			4,386