

BARAKA SMILES FOUNDATION STRATEGIC PLAN

**AUGUST 2024 TO JULY 2027** 





As the Executive Chairperson of Baraka Smiles Foundation, I am honored to present our new 3-year strategic plan. This strategy marks a pivotal moment in our journey as we shift focus to serve specific vulnerable populations with renewed commitment and targeted programs. Our aim is to impact elderly persons, children with special needs such as with autism and cerebral palsy, orphans, street children, school children and other vulnerable populations,. The goal is to reach 1 million vulnerable individuals by 2027, centering on their oral health restoration needs.

Over the next three years, we will build on our existing success, expand our outreach, and create impactful programs that leave a lasting legacy. I am grateful for the support of our team and partners as we work to bring this vision to life and ensure healthier, brighter smiles for all.

Ruth Gacheru

President/Executive Chairperson, Baraka Smiles Foundation



It is my pleasure to introduce this strategic plan, focusing on: elderly persons, children with special needs such as with autism and cerebral palsy orphans, street children, school children and other vulnerable populations. This plan sets an inspiring target of transforming 1,000,000 smiles, across the targeted beneficiaries with much needed dental care.

This strategy reflects our evolved focus, guided by the needs of these groups. I look forward to working closely with our team and partners to ensure that Baraka Smiles Foundation delivers its mission and reaches every vulnerable person in our target populations.

Kenneth Mwangi Chege

Vice Chairman, Board of trustee Baraka Smiles Foundation





Established in 2014 by Baraka Smiles Dental Clinic, Baraka Smiles Foundation (formerly known as Smile Changers Foundation) is a registered organisation committed to transforming lives through comprehensive dental care, oral health awareness and teeth restoration focusing on the most vulnerable groups in society. Our outreach programs targets the elderly, children with special needs such as cerebral palsy and autism, orphans, street families and school children; ensuring they receive vital dental care. Through our holistic approach, we aim to address the widespread depressive, neglected dental issues in Kenya and abroad.

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### **Our Vision**

To reduce the prevalence of dental disease by raising oral health awareness, Changing Smiles, Restoring hope and Confidence to the vulnerable and encouraging positive oral hygiene practices in all segments of society.



### **Our Goal**

Our goal is to ensure that every vulnerable individual, whether a child or elderly, has access to comprehensive dental care. This promotes healthier smiles and brighter futures, improving overall well-being for those in need of essential dental services.



### **Our Mission**

Our mission is to promote Healthy Smiles within our community by championing proper oral hygiene and providing essential resources such as toothbrushes, toothpaste, and soap. Through these efforts, we aim to shape a brighter, healthier future for all.

## **Values**

- Integrity: Upholding honesty and transparency in all our endeavors.
- Inclusivity: Ensuring everyone, regardless of geographic location or socio-economic status, is given equal access to oral health services.
- Sustainability: Implementing initiatives that can be maintained over time, fostering long-term community impact.
- Empowerment: Equipping communities with the tools and knowledge to lead healthier lives.

## THE PROBLEM STATEMENT

**Baraka Smiles Foundation** has spent years working on dental issues, reaching various populations such as school children, elderly persons, special needs children, and street families. As we prepare for the next phase of our work, we recognize that a deeper emphasis must be placed on the most vulnerable groups who face severe dental challenges and have limited access to care.

- Elderly: Many older adults suffer from untreated tooth decay, gum disease, and tooth loss, leading to chronic pain, difficulty in eating, and low quality of life. Access to dental care for the elderly, especially in rural areas, is minimal and often, they cannot afford basic dental services.
- Children with Special Needs (Cerebral Palsy and Autism): These children often struggle with oral hygiene due to physical and cognitive challenges. Their condition makes it difficult for them to access routine dental care, leading to severe dental issues like cavities, gum disease, and infections that exacerbate their existing health challenges.



• Orphans and Street Families: These groups are often neglected when it comes to healthcare, and oral health is no exception. Orphaned and homeless children frequently experience untreated dental problems, leading to chronic pain, infections and malnutrition, further entrenching their vulnerability.

#### Vulnerable School children:

In each of these cases, the consequences of poor oral health extend beyond just dental pain - impacting nutrition, speech, self-esteem, and overall well-being. These challenges are prevalent across the country, and the urgency to act is critical. These issues are consistent across the 47 counties, making a targeted, devolved solution necessary.



#### **Background and Pilot Programs**

Baraka Smiles Foundation, formerly known as Smiles Changers Foundation, has a long-standing history of improving oral health across Kenya. Before expanding the foundation dental outreach initiative to all 47 counties, pilot programs were successfully conducted in Nairobi and Kiambu counties. These pilots provided crucial insights into service delivery, community engagement, and logistical challenges that will inform the national rollout.

During these pilot programs, the foundation worked with local healthcare providers, county governments, and school administrations to reach over 300,000 elderly persons and children. These individuals received a range of dental services, including:

- Screening for common oral health issues, such as cavities, gum disease, and oral infections.
- Curative treatments, such as filling cavities and providing dental cleaning services to prevent tooth decay.
- Restorative treatments such as tooth replacements

The primary focus of the pilots was to target vulnerable populations — specifically children in public schools and elderly citizens who typically lack access to dental care. The outcome of these pilots provided both quantitative and qualitative evidence of the immense need for accessible dental care, especially in underprivileged communities.

#### **Key Outcomes from Pilot Programs**

- 1.Reach: Over 300,000 beneficiaries were screened and treated for various dental issues.
- 2. Oral Health Awareness: Promoted good oral hygiene practices as a part of the broader effort to prevent dental diseases and oral through cancer. Our awareness program also focused on educating children and their wider community about the importance of oral health.
- 3. Services Provided: A combination of dental screenings, cleaning, fillings, and restorative treatments were conducted.
- 4. Community Impact: Positive feedback from beneficiaries highlighted improvements in overall oral health and education on maintaining good hygiene practices.
- 5. Partnerships: Strong collaborations were established with local government health departments, NGOs, and corporate sponsors, laying the foundation for future partnerships.
- 6. Over 1,500 teachers trained on oral health, emphasizing the urgent need to improve dental care awareness and practices within schools.

#### Why Oral Health?

The Kenya National Oral Health Survey 2015 indicates that oral health seeking behavior in Kenya is below par, affecting the quality of life due to oral health diseases/ conditions that exist. This is majorly contributed by poor oral hygiene practices of the population leading to high burden of dental caries, gum related treatment needs that greatly affect the quality of life in the general population.

Oral health is essential to overall well-being, but its neglect leads to a cascade of negative effects, particularly in the vulnerable groups we serve. Poor oral health can result in:

- Chronic pain that affects daily activities, sleep, and mental health.
- Infections that can spread beyond the mouth, leading to more severe health problems.
- Poor nutrition due to difficulty in eating, especially among the elderly and children.

 Social isolation due to embarrassment about oral appearance, further marginalizing already vulnerable populations.

For the elderly and those with special needs, dental health issues significantly reduce their quality of life. Addressing these challenges through preventive care, education, and treatment is not just a health priority but a social necessity. For children, poor oral health can lead to lower academic achievement due to absenteeism caused by dental pain.



# OUR STRATEGY & APPROACH: A DEVOLVED SOLUTION



**Baraka Smiles Foundation** is shifting its efforts towards a more impactful approach targeting four key vulnerable groups. Our goal is to bring life-changing dental care to 1 million people over the next three years by concentrating on:

- 1. Elderly Persons Teeth Restoration
- 2. Special Children
- 3. Orphan/Street Children
- 4. Vulnerable School Children

Together, these groups represent our pathway to transforming 1 million lives through better oral health. Through our holistic approach, we aim to address widespread dental issues, often neglected within the communities we serve. The foundation will operate in alignment with the national government's devolved health units, ensuring local participation and support for long-term success.

We are working a with 3 prong - approach towards achieving this goal.

- Restorative Care: Restoring smiles to damaged oral systems and teeth in the elderly, special needs children (with autism and cerebral palsy) who are often forgotten and/or neglected.
- Curative Care: Offering treatment to the rural and underserved through mobile clinics, medical camps and special visits
- Preventative Care: Promoting good oral hygiene practices as part of broader effort to prevent oral and throat cancer that is so rampant. Our awareness program focuses on educating children and the wider community on the importance of health.

We recognize the critical role county governments play in addressing health challenges at a local level and to ensure the success and sustainability of our programs, we are partnering with county governments to roll out our programs across 47 counties, with the aim of expanding nationwide. The three-years strategic plan is aimed at guiding our approach in these counties.

By potentially working with the Council of Governors, we ensure that each county plays a part in identifying the most vulnerable cases and offering logistical and material support. In return, Baraka Smiles Foundation will provide training, resources, and mobile clinics that will reach even the most remote populations.

#### Key Strategic Objectives:

- I. Restore oral health and dignity, by giving healthy smiles to 1,000,000 individuals by 2027.
- II. Mobilize County partnerships to expand access to dental services.
- III. Promote sustainable and long-term impact in oral health care through mobile outreach, training programs, partnership and adoption of oral campaigns by local communities.

Our collaboration will ensure that critical resources and logistical support are provided, allowing us to extend our reach and improve oral health outcomes for Kenya's most vulnerable populations. Through this strategy, Baraka Smiles Foundation is committed to making smiles that last.

#### **Key Target Groups & Beneficiary Projections**

Our recalibrated focus over the next three years is to better serve Kenya's most vulnerable populations. While our past efforts concentrated heavily on school children, our new strategic direction puts greater emphasis on four key groups that will help us reach our target of 1,000,000 beneficiaries. These groups are:

#### 1. Elderly Persons' Teeth Restoration

Restoring the oral health of the elderly is a top priority in our strategy. Many elderly individuals across the country suffer from untreated dental problems such as tooth decay, tooth loss, and gum disease, which significantly impact their quality of life. By focusing on restoring teeth for this group, we aim to provide essential relief from pain, improve nutrition, and boost self-esteem.

- Goal: Restore smiles and improve the quality of life for elderly persons across 47 counties.
- Focus: Provide teeth restoration services to 600,000 elderly people, a demographic often overlooked in oral health care.
- Approach: Mobile clinics will visit targeted regions, focusing on dental restoration, treatment, and education for the elderly.
- Impact: Improved nutrition, overall health, enhanced dignity, and quality of life and social re-integration for elderly populations.

#### 2. Children with special needs

Children with special needs, particularly those with cerebral palsy and autism, require specialized dental care that is often unavailable or difficult to access. Our Special Children Program will cater to 150,000 children, ensuring they receive proper dental attention and education on oral hygiene. This program will be critical in improving the overall health and well-being of these children, reducing the risk of infections and long-term complications related to poor oral health.

- Goal: Provide specialized dental care to 150,000 children with autism, cerebral palsy, and other special needs.
- Approach: Collaborate with special schools, care centers, community health practitioners and families to ensure accessible and appropriate care.
- Impact: Improved quality of life and reduced risk of dental-related health complications.

#### 3. Orphans and Street Children

Street children are among the most marginalized members of society, with limited access to healthcare, including dental services. Our Street Children Program will provide dental care to 250,000 street children, ensuring they receive essential oral treatments and education on maintaining good oral hygiene. By focusing on this group, we aim to enhance their quality of life, making a lasting difference in their health and future opportunities.

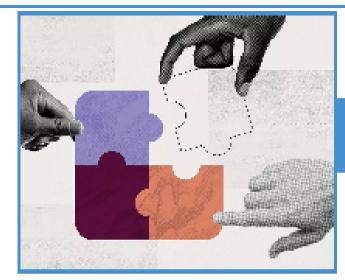
- Goal: Reach 250,000 street children with essential dental care.
- Approach: Partner with shelters, NGOs, and street outreach teams to bring dental care directly to where these children live and gather.
- Impact: Reduced suffering from untreated dental conditions and improved opportunities for better futures.

#### 4. Vulnerable school children

Many school children in the society go through the challenges of pain, feeding difficulties, poor sleep, loss of school day and low self-esteem all arising from oral disease.

- Goal: Reach 500,000 vulnerable school going children with essential dental care.
- Approach: Partner with minister of health, ministry of education, county government, and dental supply companies to both access the schools and offer vital dental supplies to the children.
- Impact: Bridging the gap for the desperately dental awareness, dental screening, oral care supply such as tooth brush and tooth paste to the less privilege children in the society.

These four core programs will be the correstone of our three yearstrategy, and we are committed to reaching these target populations through sustained outreach and partneships. Our mobile clinics will play a key role in ensuring access to dental care in even the most remote parts of the country.



#### IMPLEMENTATION STRATESY

Year 1 (2024/2025) :

- Establish partneships with local governments, religious organizations, and community groups to identify and mobilize elderly pessons, special needs children, orphans and street children.
- Begin mobile dental dinictous across 10 counties, targeting urban and rural areas with high concentrations of our target groups.

Expans bin Year 2 (2025-2026):

- Expand the oral health program to an additional 20 counties.
- Rull implementation Year 3 (2026-2027):
- Reach the full target of 1,000,000 beneficiaries by intensitying street children and special needs programs in the remaining 17 counties.
- Ensure comprehensive core through follow-ups and dental health education for all groups.

#### TABLE: YEAR-BY-YEAR ROLLOUT PLAN

YEA		TARGET 2027	ALLOCATION	
	TARGETED	IARWEI AWAI	ALLOOMION	
YEAR	1 10 COUNTIES	PILOT SERVICES, EVALUATION OF NEEDS	KSH 1.68N	
YEAR	2 20 ADDITIONAL COUNTIES	FULL-SCALE SERVICES, FEEDBACK AND REFINEMENT	KSH 2BK	
YEAR	3 17 REMAINING COUNTIES	COMPLETE COVERAGE, PROGRAM FINAL EVALUATION	KSH 1.5BN	

#### Strategio Enablers

- 1. Resource Mobilization
- Expand funding thiough perpendic portnerships and international grants.
- Toiget funding subport of \$2 million over three years.
- 2. Portnerships
- 🖶 Loster collaborations with governmental coches, NSOs, interredictional erganizations & community argumed ansi
- Focusion shalegic attaices that enhance the import and sustainability of our injudyes.
- Portner with community argonizations to reach larget populations effectively.
- 3. Employee Engagement in CSR Activities
- Encourage staff participation in CSR potty tes related to our mission.
- Integrate internal compagns to support volunteerism.
- 4. Eranding, Marketing, and Communication
- Invest in trya keling comparans to raise awareness of our programs
- Use digital platforms, media, and local events to increase visibility.
- 5. Management, Monttering, and Evaluation
- Regularly raview programs for offeetiveness and officiency.
- Establish monitoring systems to ensure oil gament with strategic goots.



#### **Partnerships and Stakeholder Engagement**

To achieve these ambitious goals, we will:

- Collaborate with County Governments: Leverage county health units for local support and implementation.
- Engage Corporate Sponsors: Seek financial support and material donations through corporate social responsibility (CSR) initiatives.
- Work with NGOs, Children Homes, Schools and Local
   Community Organisations: Partner with community
   organizations to reach target populations effectively.

Collaboration with county governments will be critical to facilitate access to public health facilities, logistical support, and community health networks. Schools will be important for reaching vulnerable children, and NGOs will help connect the foundation to children in special care, such as those affected by autism and cerebral palsy. Healthcare organizations, particularly dental associations, will contribute technical expertise and volunteers. Additionally, corporate sponsors will be engaged to provide financial backing and material resources through corporate social responsibility (CSR) initiatives.

A Stakeholder Engagement Plan will be developed to manage relationships, ensure clear communication, and align all parties with the goals of the program. Engagement mechanisms will include regular meetings, progress updates, joint events, and collaborative campaigns to promote the outreach program, creating buy-in from a wide array of stakeholders.

#### **Innovation and Modern Approach**

To maximize transparency and efficiency, we will:

• Utilize Mobile Clinics to deliver care directly to underserved areas, ensuring we can reach even the most remote populations.

#### HOW WE WILL MEASURE SUCCESS: MONITORING AND EVALUATION

A robust monitoring and evaluation (M&E) framework will be established to ensure the effective implementation of this strategy. Baseline data will be collected at the program's start, and regular evaluations will be conducted every quarter to measure progress. Feedback will be gathered from county health departments and schools to assess community impact.

A reporting structure will be implemented, with quarterly and annual reports prepared by the Monitoring and Evaluation team. These reports will be shared with stakeholders, sponsors, and donors to ensure transparency and accountability. The reports will also guide adjustments to the strategy based on the data collected.

- Quarterly Reports: Prepared by Project Managers to evaluate the reach and impact of programs. More detailed reports will be prepared on an annual basis.
- Annual Impact Assessments: Conducted by auditors to measure outcomes against our strategic objectives.
- Real-time Data Collection: Our IT team will collect performance data to monitor progress in real-time. Impact:
- Number of individuals reached across each target group (Elderly, Clergy, Special Children, and Street Children).
- Geographic reach and expansion into new counties (target: 47 counties).
   Number of partnerships and funding secured.

#### Sustainability:

- Ongoing evaluations of programs to ensure long-term benefits for the target populations.
- Annual reviews and stakeholder feedback to refine our approaches.
- Partnerships with local and community stakeholders to support a healthy oral culture is maintained in the communities.

#### Growth:

• By the end of 2027, our goal is to have mobilized significant resources to continue these programs beyond the current strategic plan, leaving a lasting impact on the vulnerable populations of Kenya and with a target of expanding beyond our local boarders.

Other Key performance indicators (KPIs) include:

- Number of individuals treated (by group and county).
- Success rate of treatments (measured through follow-ups and patient satisfaction surveys).
- Community engagement (through county partnerships and local outreach programs).
- Training outcomes (number of local health workers trained in oral health).

Monthly and quarterly reports will be prepared and shared with stakeholders, including county governments and partner organizations.

N	<b>1&amp;E ACTIVITY</b>	FREQUENCY	RESPONSIBLE TEAM	KPI MEASUREMENT
QU	JARTERLY REPORTING	EVERY 3 MONTHS	PROJECT MANAGERS	NO. OF COUNTIES COVERED
	INUAL IMPACT SESSMENT ANNUALLY		AUDITORS	NO. OF BENEFICIARIES SERVED
	al-time app data Ollection	ONGOING	IT TEAM	PERFORMANCE AGAINST TARGETS

#### PROJECT MANAGEMENT AND STAFFING

The program will be overseen by the Foundation's Chairman and CEO, supported by a board of trustees, management team support staff and volunteers. They will ensure professionalism, accountability, and the successful implementation of the strategy.

A steering committee will be established to oversee daily operations and provide guidance to field teams. The program management structure will be hierarchical to ensure smooth operations across all counties.

- Project Coordinators will oversee activities in different regions, managing local teams of dentists, support staff, and volunteers.
- Project Managers will handle overall project execution, liaising with stakeholders and overseeing day-to-day operations.
- Each team will include qualified dentists, who will provide treatment.
- Support staff to manage logistics, patient records, and assist with the outreach process.
- Volunteers, including dental students and other healthcare workers, will be vital in supporting administrative and treatment-related tasks.

An Administrative Structure will ensure proper coordination across counties, including centralized reporting, scheduling, and resource management.

• Key roles will also include an Outreach Director to oversee the entire program, an Accountant to handle financial management, and a Monitoring and Evaluation Officer to track progress.



#### **RISK MANAGEMENT AND MITIGATION STRATEGIES**

- We will implement partnerships with local government and transportation companies will be explored.
- Resource limitations will be addressed through continuous fundraising and supply management.
- To address community resistance, a Community Sensitization Program will be launched, educating the public on the importance of oral health and the benefits of the outreach program. Regular community engagement will foster trust and participation.
- We will also work with local Community Health Practitioners (CHP's) to sensitize and bring awareness to the communities.

RISK	LIKELIHOOD	IMPACT	MITIGATION STRATEGY
FUNDING SHORTFALLS	MEDIUM	MEDIUM	DIVERSIFY FUNDING STREAMS, SEEK INTERNATIONAL DONORS
TRANSPORTATION CHALLENGES	HIGH	HIGH	OPTIMIZE LOGISTICS WITH ROUTE PLANNING
GOVERNMENT POLICY CHANGES	LOW	LOW	BUILD STRONG RELATIONSHIPS WITH LOCAL AUTHORITIES

#### **Impact Assessment and Projected Outcomes**

- The outreach program is expected to impact over one million vulnerable individuals in 47 counties, with a focus on improving oral health standards among vulnerable children and the elderly.
- Immediate outcomes will include improved dental hygiene, treatment of oral diseases, and oral health education within communities.
- Long-term benefits will include a healthier population, reduced oral health complications, and increased awareness of dental care. This will directly align with Kenya's national health objectives, particularly in improving access to healthcare for underserved populations.
- The project will also follow international standards for community health programs, ensuring that the services provided are both high-quality and impactful.

Baraka Smiles Foundation will continuously measure the program's success through impact assessments, including changes in oral health indicators and feedback from beneficiaries.

#### SUSTAINABILITY PLAN

To sustain the program beyond its initial implementation, Baraka Smiles Foundation will focus on establishing long-term partnerships with corporate sponsors, government agencies, and healthcare organizations. By aligning the program with national healthcare goals, there will be opportunities to receive support from public health budgets.

Efforts will also be made to integrate dental care into local healthcare systems, so that even after the outreach program ends, local clinics and hospitals can continue to offer basic dental services to the underserved population.

Ongoing fundraising strategies will include grant applications to international health organizations and CSR initiatives from private companies. The program will aim to become part of the national health policy for vulnerable populations, ensuring its long-term relevance.

#### **BUDGET AND FINANCIAL PROJECTIONS**

To successfully implement our strategy, we estimate a total budget of Ksh 50 Billion over three years, with emphasis on cost-efficiency through partnerships with suppliers and bulk purchasing of materials. The projections will highlight revenue from corporate sponsors, individual donations, and grants. A clear financial management plan will be established to ensure transparency, with quarterly financial audits and reports made publicly available.

#### This budget covers:

Mobile clinics and medical equipment.

Staff Van for transportation of staff from one locality to another.

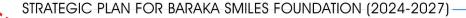
Ministry truck to evangelize to the communities receiving treatment.

Personnel costs (dentists, volunteers, support staff).

Training programs for local healthcare workers and volunteers.

Outreach programs (transport, accommodation, logistics).

Operational costs (administration, monitoring, and reporting).



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Operational costs (administration, monitoring, and reporting).

Funding Sources:

- Corporate sponsorships
- Grants from international health organizations
- Individual donations

#### CONCLUSION

The Baraka Smiles Foundation 2024-2027 strategic plan is designed to transform the oral health landscape for Kenya's most vulnerable populations. With a clear focus on elderly persons, clergy, special children, and street children, we will deliver 1 million smiles over the next three years. Our success will be driven by partnerships, innovation, and a dedicated team working to bring our vision to life. Together, we will create a lasting legacy of health, hope, and happiness.





# Ruth Gacheru

President/ Executive Chairperson, Baraka Smiles Foundation Sign:

Durgop.

# Kenneth Mwangi Chege

Executive Vice Chairman Baraka Smiles Foundation Sign:



