



HOME OF HOPE JINJA UGANDA

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MONTHLY PERFORMANCE REPORT FOR FEBRUARY 2024
PERFORMANCE AGAINST THE PLANNED ACTIVITIES FOR THE MONTH OF FEBRUARY 2024
4TH MARCH 2024

PLANNED ACTIVITY	TARGET	ACHIEVEMENT	LESSONS LEARNT, COMMENT, CHALLENGES AND WAY FORWARD
Education	20 children	Following the government programme all schools commenced early in the month of February and therefore scholastic materials were provided for all the 20 school going children and they were able to resume the school programme. All children are attending the new levels they were promoted to and are getting through the adoptive stages of their new classes.	The children's performance shall closely be monitored together with the school administration to ensure that they perfect their performance
Outreach clinics	2 clinics	2 outreach clinics were conducted i.e one in Busede sub county and the other in Buwenge sub county. In the bid to reach out to all sub counties in the district, the 2 outreaches are targeted to reach three sub counties each while the centre clinic also covers three sub counties. Following continued uptake of the medication, there has been a steady progress in the health of the beneficiaries. There has also been an increase in the number of people with epilepsy and sickle cells having	There is need to increase on the quantity of medication procured per outreach clinic following a raise in the number of people reached out to. Some of the care givers fail to turn up for the clinics on a regular basis due to challenges caused

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		access to both medical and other social services in the target areas following Home of Hope interventions. Children in need of therapy services in the hard to reach areas are also able to receive the service during the outreaches.	by the bad terrain leading to a raise in the transport costs.
Drop in clinics	8 clinics	Having made adjustments to the programme due to increase in the number of clients, 9 drop in clinics were conducted during the month under review and a total of 11 new clients were registered. During the clinics all the new clients were taken through counselling based on the conditions of their children and made to understand and accept their children's conditions. They were also able to share their expectations of the services offered and able to develop their children's management plans.	Some of the care givers especially among the new clients don't have knowledge of the various conditions of their children suffer from and therefore needed to be sensitised on the various conditions of their children
General medication	15 children	A total of 21 children were treated and fully recovered during the month of February. Most of whom suffered from infections that are transferred from person to person through contact such as cough and flue while a few malaria cases were registered. 3 of the total cases registered were also as a result of their chronic illnesses such as sickle cells but all were effectively managed and there was no case referred for further management.	Earlier detection of illness reduces the risks of having children referred for further management since the situation is managed at an early stage which also reduces on the costs of treatment.
Routine medication	42 children	Care givers and other line departments such as the medical and social have ensured that all the 42 children undertaking daily medication have received their medication timely which has kept them in good health. These include those with illnesses such as sickle cells, hydrocephalus, HIV and other mental conditions.	There have been price fluctuations in the cost of the drugs required for the children's daily medication which has led to a rise in the expenditure on drugs.

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Centre clinic	1 clinic	<p>One new client was registered during the month of February during the centre clinic. All beneficiaries of the programme have been able to testify how being part of the programme has helped them be more productive and impacted to their day to day wellbeing in the community resulting from social acceptance and better health conditions.</p>	<p>The progress of the beneficiaries is to be monitored for better impact through continued phone calls and home visits.</p> <p>Some of the beneficiaries don't turn up but send other family members making it difficult to ascertain their condition over time.</p>
Medical review	3 children	<p>3 children with hydrocephalus were taken for medical review as per their schedules and they were all declared to be in good medical condition following adherence to the set precautions by the medical team.</p>	<p>The next review dates are to be observed and all staff are to follow the new guidelines set on the review date.</p>
Staff wellbeing	All staff members	<p>In the bid to keep all staff capable of performing their duties, we introduced aerobics which are done every Tuesday and Thursday of every week and in the month of February, staff members fully participated in the exercise. This has eliminated complaints resulting from the nature of work they do.</p>	<p>For more effectiveness of staff, the activity is to continue being held as it has yielded in staff performance which has improved on service delivery.</p>
Admission of new children	None	<p>1 girl aged 17 years from Mukono district was referred to Home of Hope for alternative care following community threats of abuse with some cases of intended rape being reported to police. This was as a result of lack of social protection. According to preliminary checks it is thought that she developed neural complications 3 years back which caused paralysis of the lower limbs.</p>	<p>There were no medical records of her condition and therefore requires to be taken for medical review and further check ups to ascertain her condition and possible interventions required. Currently, she has been subjected to therapy, counselling and guidance.</p>

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In house therapy	All resident children	Having developed and followed care plans for the children, some of the children undergoing therapy have been able to adopt new daily living skills and enhanced their mobility capabilities. Continued and regular therapy has helped minimise the risks of developing secondary disabilities among the children as they grow.	All care plans are to be reviewed and followed. Care plans for the newly admitted children also have to be developed for proper management.
Family tracing	1 child	As per the provisions of the laws of Uganda, we are required to re-unify older children with their families, however, it has been challenging to trace these families since most of the children have no information pertaining their family backgrounds. Having got some clues pertaining Daniels family, we were able to trace his family to Mayuge district and we managed to visit the family together with Daniel. This was a psychological transformation in Daniel's life having met some of his family members after a long time.	According to our findings during the visit, both Daniel's parents past on and the closest would be care giver to Daniel is his grand mother who is in bad health and can't meet Daniel's day to day needs. Social inquiries on other relatives are on going for a possible re-unification with potential family members

Prayer points

- *Good health of all the children and staff at the home.*
- *Pray for perfect health for all the children and staff at the home.*
- *Construction of supported homes for the young adults*
- *Establishment of more income generating activities for sustainability*
- *Pray for more provision in abundance at the home to be able to meet all home needs*

Conclusion

On behalf of the children, staff and administration of Home of Hope Jinja Uganda, I take this opportunity to thank all those who have supported us in one way or the other to ensure that we achieve and meet our needs during the month of February. I would also request all those capable and willing to support our cause to join us in the struggle we are in to promote the rights of children and persons with disabilities and ensure that they have a befitting life just like any other person in the community. With your support, we have been able to achieve beyond our expectations. "MAY GOD BLESS YOU"

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Pictorial



Figure 1: Social acceptance is key in the development and performance of children with disabilities. Home of Hope children being welcomed by some of their friends at school on the reporting date. the children go to different disability user friendly schools.



Figure 2: Having access to services amidst no hope is every parents' joy. through our outreach programmes, children in hard to reach areas are able to get therapy services that are a rare option in the community. above, a parent of a child with cerebral palsy gets a smile for her child to access free therapy services having lost hope. We restore hope where there is no hope.

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Figure 3: During the outreaches clients are able to share their personal experiences having got access to the required services provided by Home of Hope.



Figure 4: Prior to distribution of drugs, care givers are educated/sensitised on various issues during the outreach programme. above are some of the participants of the Busede outreach being sensitised.

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Figure 5: Immediate care givers are always encouraged to attend the drop-in clinics. Above, a mother receives therapy tips from Edward Opio (Occupational Therapist) during one of the drop-in clinics in February 2024.



Figure 6: Bringing together care givers helps them get knowledge and personal experience from one another. Above are some of the care givers having a discussion during a drop-in clinic in February 2024

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Figure 7: Just like our outreach clinics, care givers and beneficiaries have the opportunity to be educated on key issues affecting them and also find ways of solving their own problems.



Figure 8: Teamwork is a fundamental factor in service delivery. above, Home of Hope staff work together during aerobics in the month of February 2024

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Figure 9: Leading by example is paramount and sets an example for other staff members. above is the Executive Director taking lead during the aerobics during the month of February 2024.



Figure 10: It was all joy for Juliana (on a wheel chair) being introduced to her new home and meeting new friends. she was referred to Home of hope for social protection and alternative care.

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Figure 11: Having lost both parents at a young age, Daniel had never met any of his community members after setting foot at Home of Hope. Above is Daniel sharing his personal experience with some of the community members during the re-unification meeting at his ancestral home in Mayuge district. Home of Hope was able to trace his family lineage after 9 years at home of Hope.

Submitted by:

EDITH LUKABWE
EXECUTIVE DIRECTOR

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