



HOME OF HOPE JINJA UGANDA

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MONTHLY PERFORMANCE REPORT FOR NOVEMBER 2024
PERFORMANCE AGAINST THE PLANNED ACTIVITIES FOR THE MONTH OF NOVEMBER 2024
4TH DECEMBER 2024

PLANNED ACTIVITY	TARGET	ACHIEVEMENT	LESSONS LEARNT, COMMENT, CHALLENGES AND WAY FORWARD
Education and skilling programme	Both informal and formal sector	<p>During the period under review, all children under the formal education system received holidays as per the government schedule and all of them were promoted to the next levels of education with all of them showing great improvement in their performance. These include the children under the Home of Hope class.</p> <p>The art class has also been very vital in developing the children's natural capabilities and enhancing their innovation skills since they are now able to manufacture a variety of items. Art and craft has also helped stimulate the children's intellectual capabilities.</p>	<p>The children are to be engaged in the art class and the social team is also to guide them through their holiday packages to help them maintain their performance.</p> <p>The cost of some of the instruction materials has hiked which has impacted on our budget.</p>
Drop-in clinics	8 clinics	All the 8 clinics were conducted and a total of 4 new clinics were registered and all the new clients were psychologically prepared to cope with the conditions of the children through counselling. Many of the care	During the home visits we intend to have all family members taking care of the children equipped with therapy techniques to enable

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		<p>givers have been able to encourage others to embrace therapy based on the changes that they have realised from their children and this has helped build hope and confidence especially among the new clients.</p> <p>Much as realising changes among the children takes some time, some of the children have developed different capabilities such as sitting, reaching for objects or even movement from one place to the other which they did not have due to continuity and consistency on the programme.</p>	<p>the child have access to therapy at all times.</p> <p>It has been noted that different family members turn up for the drop-in clinics making it difficult to consolidate the skilling strategy of the care givers hence calling for the need to train all family members.</p> <p>Three more children who have been beneficiaries of this programme were pronounced dead during the month of November and all these died while receiving medication at the Children's referral hospital and Home of Hope condoled with the families. Some of the care givers have not recovered from this trauma and need to be comforted. May the souls of Hilda, Gift and Haksam rest in eternal peace.</p>
Therapy outreach	Three outreaches	<p>Following an increase in the number of cases registered from Budondo and Butagaya sub counties, we have been able to start up a therapy outreach centre in Budondo Health Centre IV which helps reduce on the workload during the drop-in clinics and also reduce on the expenditure on transport facilitation to the clients while also bringing the service nearer to the community. The outreach clinic helps provide access to the service by people in the two sub counties. A total of three therapy outreaches were conducted and 31</p>	<p>Some of the care givers have high expectations from the organisation having had experience with the past organisations that facilitated clients for participating in their programmes of the same nature.</p> <p>According to sources available, there are many children in need of the therapy services in the target</p>

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		<p>people in need of the service were reached out to 8 of whom were adults.</p> <p>The activity is to be conducted every Wednesday of the week and with the support of the health centre administration, we were allocated a room to accommodate the therapy equipment and also conduct the therapy from.</p>	<p>community but some of the care givers lost hope due to the past experience and therefore mind less about the exercise but with continued sensitisation there shall be grate mind set change.</p>
Centre clinics	1 clinic	<p>During the month under review, our team took the beneficiaries through calendars that were developed to guiding clients on the uptake of the medication to enable the team understand if complications developed by the patients are as a result of poor drug compliance and also help clients comprehend their daily medication schedules.</p> <p>The newly registered clients on the programme have reported great improvement in their day to day wellbeing resulting from having access to medication and also testified on reduction on household expenditure since they are now able to save from what would be used for medication.</p>	<p>There were no new cases registered while some of the clients sent other people to pick their medication making it difficult for the team to get the rightful information on their well-being and response to the medication especially for the newly enrolled patients.</p> <p>During the home visits we intend to put emphasis on the households of those that have taken long without turning up for the activity.</p>
Outreach clinics	2 outreach clinics	<p>2 outreach clinics were conducted in the month of November and during the Buwenge clinic 1 new case was registered from the neighbouring district of Mayuge while none was registered in Busede. Despite the poor weather and bad road network, beneficiaries in Busede have improved on their consistence in participation and improved on drug compliancy compared to the group in Buwenge who send representatives to pick medication yet some of whom are not well</p>	<p>Much as there has been improvement in drug compliance, a few of the patients especially those without immediate and concerned care givers are still finding challenges in drug uptake procedures hence end up taking dosages that are not recommended that lead to complications. There is need to facilitate the</p>

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		<p>informed of their conditions. Just like the centre clinic, the Home of Hope staff also distributed calendars and trained the beneficiaries together with the care givers on how to use them.</p> <p>During the outreach clinic in Busede, we registered a complaint of a 13 year old girl with Cerebral palsy who had been impregnated by a 37 year old man and the issue was handed over to the police to take action for justice.</p>	<p>coordinators to make follow up at household level to ensure proper drug compliance.</p> <p>Some of the local leaders facilitated the offender to disappear from the community and have become a threat to the offended family which may cause a hiccup in the process to find justice and penalise the offender.</p>
Home visits	4 home visits	<p>Due to other commitments, a team comprising of the Social, Therapy and medical staff conducted a total of 3 home visits reaching out to 25 households and these were taken through how to improve on the social and health wellbeing of the children in their care and how to improve on social acceptance among others. Through the visits, we were also able to give a boost to those families empowered economically to start up income generating activities for house hold income enhancement through providing tips and skills on financial literacy.</p> <p>We were also blessed with a visit from a team of two officials from Our Hope International who got joined the home of hope team to conduct the home visits.</p>	<p>Some of the care givers leave the children in the care of fellow children hence making it hard to pass over the intended information to the beneficiaries.</p> <p>All families supported/empowered economically have established small scale enterprises as a source of income to sustain their families.</p>
Nutritional support	None	<p>Following the high numbers of malnourished children with multiple disabilities registered during the implementation of our duties, we managed to support a total of 8 children</p>	<p>We intend/plan to make a follow up on the progress of the children supported to ensure that they don't fall back health wise.</p>

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		participating in our various programmes with nutritional support to boost their immunity and also enhance their growth. These were supplied with nutritional food staff such as porridge, modified rice among others. Some of the children who required additional medical supplies were referred to Nalufenya Children's hospital for further management.	In the bid to save for the resident children, we are unable to meet all the needs of the children in need of nutritional support due to inadequate logistics.
In house therapy	All resident children	A total of 67 resident children were able to receive therapy services on a daily basis with the support of the care givers and the therapy team during the month under review. As a result of daily therapy application on the children, we are able to minimise the development of secondary disabilities such as contractures and the children have also been able to develop more capabilities especially in daily living skills. The children were also engaged in hydrotherapy activities	It was resolved that the therapy team equips the care givers with more therapy techniques since they provide additional support during the therapy.
Assistive devices	None	One child from Busede Sub County was issued a wheel chair to facilitate his mobility within the home and the community. This will also reduce on the burden of the care givers of having them carry him everywhere. The child will also now be able to enrol in school to attain formal education since he is now able to move from one place to another.	There is need for lobbying for more assistive devices from development partners since there are many other children in need of various devices but can't access them.
Medical review	3 children	1 child living positively with HIV and 2 children with Spine bifida were taken for medical review and all these were found to be responding positively to the set medication as per the previous review. We also got replacement for the assistive	Other review dates are to be observed to avoid the development of any complications in future.

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		devises used by the 2 children with spine bifida to assist in their day to day life.	
Routine medication	30 children	There has been an out break of respiratory infections that have spread among the children even by contact and this escalated the rate of infection hence rising the number of children treated during the month under review. A total of 47 cases/children were treated for the various infections and much as some of the children are still undergoing treatment, most of them have healed with no case referred for further management.	<p>The medical team together with the social team are to further sensitise the care givers on how to managed the various conditions to avoid further infections</p> <p>Some of the children respond slowly to the medication given hence taking long to heal.</p>
Admission of new children	None	<p>Upon kick starting the Therapy outreach in Budondo, we were able to rescue one child who was at the verge of death due to poor nutrition and management by the family members. Alone as known by his father was temporarily admitted at home of hope for alternative. This was upon the recommendation of the Local Council Chairperson and the medical team.</p> <p>Alone was abandoned with the father at the age of 6 years however, his father has become too alcoholic and no longer cares for his needs. At the time of rescue, Alone was too malnourished.</p>	Alone has now improved and has now gained his stamina to walk around. His health still needs to be monitored much has he is responding positively and thereafter; a resettlement plan shall be developed together with his father.

Prayer points

- *Good health of all the children and staff at the home.*
- *Expansion of the Therapy section*
- *Procurement of more assistive devises and equipment such as wheel chairs.*
- *Renovation of the old Home of Hope building*
- *Procurement of interior items for the supported home*
- *Establishment of a special needs school.*

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Conclusion

*The social welfare and wellbeing of children with multiple disabilities is paramount and with the interventions of home of hope, service delivery to children with multiple disabilities have been greatly improved however, more efforts are still needed in achieving the full potential these children. Without the support of well-wishers, we have been able to achieve some of the objectives. 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 goals. 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. **"MAY GOD BLESS YOU ALL"***

Pictorial



Figure 1: Abudu has been undergoing therapy for the past five years under the Drop-in clinic programme and his mother has never given up due to the progress that he has made and every day that goes by, Abudu shows progress and improvement in his capabilities. Abudu is now able to sit without any support and also stretch himself/make sit-ups with minimal support.

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Figure 2: Coming together gives care givers the opportunity to share experience, get encouragement and hope. Above is Social Workers Stephen leading a discussion with care givers who had turned up for the Therapy Outreach clinic in Budondo during the month of November 2024 as they wait for their turn.



Figure 3: In all Home of Hope programmes, beneficiaries are given the opportunity to share their views on how best to improve on the services they receive. Above is Denis the Programme Administrator listening to a care giver during the therapy outreach in Busede in the month of November 2024.

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Figure 4: Having a one-on-one session with the care givers makes them open up on the social challenges that they face in the community. Above is Stephen having a counselling session with one of the care givers during the Budondo Therapy outreach.



Figure 5: Introduction of daily medication calendars will help clients manage their medication up-take. Above is a client raising his concern on the calendars during the Centre clinic of November 2024.

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Figure 6: During the month of November 2024, we were blessed with a visit from officials from Our Hope International. They took part in the Busede Outreach clinic.



Figure 7: At every outreach, clients/beneficiaries have issues to be responded to. Above is the Home of Hope Social Worker responding to some of the issues during the Buwenge outreach in November 2024.

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Figure 8: At Home of Hope, even the top administration gets the opportunity to engage in programme activities. Above is the Executive Director – Edith leading a team of Home of Hope staff, Volunteers and funders in a home visit during the month of November 2024.



Figure 9: Hydro-therapy is one of the in-house therapy activities that help the children gain their capabilities. Above is Home of Hope Volunteer, Brenda and Social worker Stephen engaging children in a hydrotherapy exercise in November 2024.

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Figure 10: Assistive devices such as wheel chairs not only ease the workload for care givers but also help the children in mobility. above is Alex the Therapist explaining to a care giver how to use the wheel chair as Peter the Programme Coordinator looks on during one of the Drop-in clinics in November 2024.



Figure 11: Alone (as called by the father) was rescued from the suffering he had under gone due to lack of care leading to malnutrition and is now under the care of Home of Hope. His mother abandoned him with the father who would always leave him at home with no food to go and drink. Above is Eddie a therapist at Home of Hope communicating to local leaders on the day of his rescue in November 2024.

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Alone had lost some of his capabilities such as walking and speech due to lack of care but two weeks later after being rescued by Home of Hope, he is now able to walk and is slowly recovering from the trauma he had undergone before. Big thanks go to the Local authorities and Budondo Health Centre IV staff (mental health unit) who notified Home of Hope on his condition during the therapy outreach.

There are many such children in the community who have ended up dying due to the negligence of their parents and care givers yet no one cares about them. Home of Hope has saved many lives and would still love to continue doing the same but due to limitations in the budget, we are unable to reach out to the entire communities in need of our services.

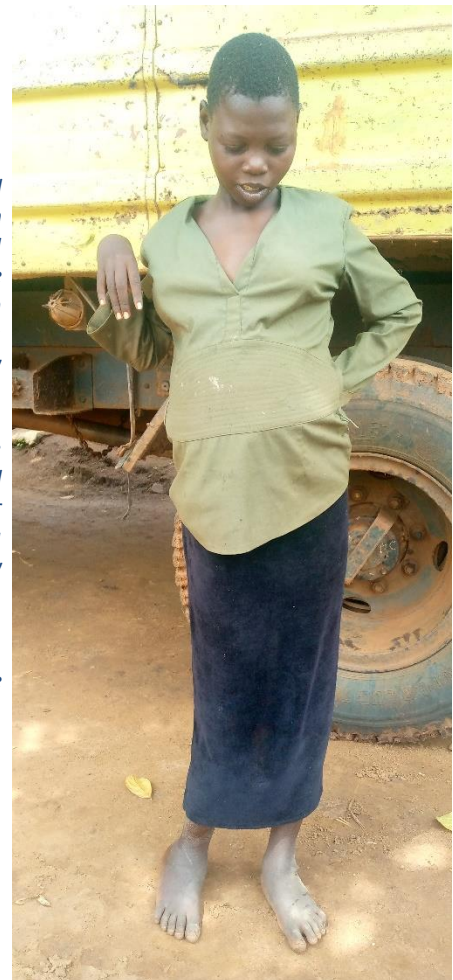
Figure 12: Anna is a 13-year-old girl suffering from cerebral palsy and with intellectual disability who was made pregnant by a 37-year-old drug addict in Busede Sub County. When her mother realised that she was pregnant, she tried to seek for justice with the local authorities but her efforts were brought down after the people who were supposed to give her justice connived with the offenders' family and threatened her not to push forward with the case in return for 2 kilograms of sugar, 1 bar of soap and 30,000UGX per month as a contribution towards Anna's welfare till she gives birth. Unfortunately, Anna's family only received 1 bar of soap after 7 months of pregnancy.

Having no where to run to, Anna's mother brought the matter to our notice during the Outreach clinic in November 2024. As advocates for persons with disabilities, we registered the case with the police in Busede who later transferred it to Kakira police station for further management. Unfortunately the offender is on the run making it hard to find justice for Anna yet. The police is in the search for him though the process is taking long due to some family members and community members who aid the offender to further disappear.

Home of Hope is currently supporting her wellbeing and closely monitoring her condition through the health team as we wait for justice to happen. We are also engaging other stakeholders to ensure that the offender is brought to record.

Submitted by:

EDITH LUKABWE
EXECUTIVE DIRECTOR



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