



HOME OF HOPE JINJA UGANDA

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ANNUAL PERFORMANCE REPORT FOR 2024
PERFORMANCE AGAINST THE PLANNED ACTIVITIES FOR THE YEAR 2024
3RD JANUARY 2025

PLANNED ACTIVITY	TARGET	ACHIEVEMENT	LESSONS LEARNT, COMMENT, CHALLENGES AND WAY FORWARD
Therapy outreach	6 outreaches	<p>Due to the increased enrolment in the drop-in clinic, a weekly therapy outreach session was started in Budondo sub county to cover beneficiaries of Budondo and Butagaya. This did not only improve on service delivery to the community but reduced on our expense on transport refund during the drop-in clinic and also reduced on the work load of the therapy team during the drop-in clinic.</p> <p>We were able to conduct 5 therapy sessions from initiation in November to the end of the year 2024 and the beneficiaries to this programme not only included children with multiple disabilities but also adults who were recommended to have therapy but had no access to therapy services</p>	<p>There are no service providers of therapy services within the sub counties of Budondo and Butagaya yet there is a high number of children with multiple disabilities in need of the service and care givers either lack the knowledge of where to access the service or can't afford the high transportation costs involved while accessing the services.</p> <p>There is need for continued mobilisation to create awareness of availability of the service within the community</p>
Home visits	48 home visits	63 home visits were conducted and during the home visits, Home of Hope staff provide a range of services such as psychosocial support, counselling and guidance, sensitisation aimed at promoting social acceptance of children	For one to understand the exact conditions of the children while in the community, sudden/abrupt visits are made without prior communication yet the care

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		<p>with multiple disabilities by all community members and also advocate for social inclusion. The home visits also help in assessing the wellbeing of the children in various aspects such as environment and also help in making follow up on the agreed action plans.</p>	<p>givers prefer being called before the visit such that they prepare for it and this may not give a clear presentation of the child's day to day life.</p>
Drop in clinics	96 clinics	<p>A total of 98 drop in clinics were conducted and 69 new cases were registered and this is attributed to the benefits gained from the service. Many children have been able to develop various capabilities over time.</p> <p>Following continued therapy, consistency and devotion to therapy, a total of 3 children were able to gain full potential to walk independently without any support. Big thanks not only go to home of hope staff but also the care givers of these children due to the commitment they had to the programme.</p>	<p>The increasing number of beneficiaries not only calls for increase in funds to facilitate their transport but also increases on the workload for the team hence requiring to device means of controlling the numbers per day such as setting up other therapy centres closer to the beneficiaries.</p> <p>Improvising supportive devices with local materials at household level facilitated the adaptive process of the children.</p> <p>It is also on a sad note that we lost five children under this programme while they were receiving treatment at different government facilities.</p>
Economic empowerment	2 care givers per sub county	<p>With the meagre funding, we were able to facilitate 7 care givers of children with multiple disabilities to establish small scale income generating activities aimed at enhancing household incomes throughout the year. We also boosted already existing projects/business of care givers during the period under review.</p>	<p>Much as the care givers have been facilitated, the current inflation rate still affects their business plans and inflicts on their expenditure which affects their business plans hence calling for additional unplanned funds or inappropriate procurement of business input.</p>

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		The care givers were taken through financial literacy tips and also guided on making better business choices and plans and for those who were already engaged in business, they were mentored on how to improve on their businesses. Care givers are now in position to meet some of the basic needs of the children with the small profits made from the income generating projects they are engaged in.	With close monitoring of their business enterprises by our team, care givers have been able to monitor the progress of their businesses and understanding the causes of their business downfall.
Staff welfare	One retreat	Refreshing minds and sharing what transpired throughout the year and also be able to lay strategies of improving service delivery for the good of the children in the coming year was very key for all staff members. Having worked hard for the whole year, it was deemed necessary that all staff be taken for a retreat. For the good of the children, the team was split into two groups. The activity also gave the staff an opportunity to explore and discover new adventures such as the wild life education centre, having a view of the airport and there after having time to relax and freshen up as a team where they were engaged in team building activities while at the beach in Entebbe.	More of such activities should be organised for the good of the team and need to be made annual events. Some of the employees/staff had never visited such places before and had also never got the opportunity to see some of the animals exhibited and this was a great learning opportunity to them.
Assistive devices	None	Six wheel chairs were distributed to six children with multiple disabilities to support them in mobility. Some of the children were school going but were challenged with movement from home to school and while at school but with the support of the wheelchairs, they have fully become engaged in the school programmes to pursue their dreams. This has only not eased their mobility	Much as we have supported the children with assistive devices, the demand for more assorted devices is high and we keep on lobbying for continued support. This is attributed to the increasing number of beneficiaries in the various programmes

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		<p>but also reduced on over dependency on the care givers and also reduce the work load an attempt that has made care givers more productive.</p> <p>We also received a batch of 10 wheel chairs from a well-wisher and these were assigned to the resident children.</p>	<p>We intend to secure funds for the maintenance and repair of wheel chairs that are out of shape at the home.</p>
Education and skilling	20 children	<p>In the bid to support and promote independent living among children with disabilities two of the children in the education programme qualified in various professions and we were able to secure them meaningful employment for self-reliance. Amina the deaf who qualified in catering now works with a restaurant for the deaf and lives independently while Jessica has also accomplished a Bachelor's degree in Social work and will be soon employed under the Home of Hope Social department. All other school going children were promoted to the next levels of learning.</p> <p>We also had an excellent performance from the children of Home of Hope-based learning programme where we have three children with cerebral palsy who are undergoing the formal system.</p>	<p>Upon completion of their education, employers tend not to consider persons with disabilities which poses a threat to their efforts in the formal education system. As advocates for the rights of persons with disabilities, we have always advocated for social inclusion and acceptance at all levels and platforms.</p> <p>Some children with cerebral palsy have the potential to participate in the formal education system but learn at a very slow pace compared to normal children hence necessitating to provide specialised learning facilities for them.</p>
Centre clinics	12 clinics	<p>One centre clinic was conducted per month making a total of 12 centre clinics throughout the year. 19 new cases were registered and these have registered great improvement in their day to day life following proper subscription of medication and these have changed in their daily living activities. During the clinics, beneficiaries are given a variety of services ranging from psychosocial</p>	<p>The overwhelming number of beneficiaries have increased on the demand for more medication which in turn impacts on our budget allocations yet the costs of the medication are increasing each day that goes by.</p>

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		<p>support, counselling, guidance, health education among others. They also receive financial literacy and some of the beneficiaries have been saving funds for personal development. This is aimed at enhancing personal incomes and increasing investment for development.</p> <p>Adherence to proper medication procedures was a major cause of development of complications among clients however home of hope staff developed calendars to guide beneficiaries and also act as a check list for compliance to medical schedules and these were explained and distributed to all care givers for reference purposes.</p>	<p>On a sad note, during the period under review, a total of 4 clients past on while under the care of their care givers.</p> <p>Home of Hope staff is to always review the calendars to as a follow up of the uptake of the drugs and these shall be used as a basis to determine one's adherence.</p>
Nutritional support	20 children	<p>This is always given to identified malnourished children in the community. We have offered nutritional food staff to the children aimed at boosting their health status and we have also sensitised/educated care givers how to provide nutritional local food staff to the children while at home without necessarily needing the manufactured foods. Through the use of local food staff, the children under their care have been able to get first class organic food nutrients which are easy to access and always available at almost no cost.</p> <p>A total of 126 children were supported to access manufactured food nutrients while all care givers taking part in the Home of Hope programmes such as the centre, drop-in and outreach clinics were trained on how to prepare the food staffs locally.</p>	<p>During the dry season, some of the vegetables rich in other nutrients are rear to be got which requires the care givers to procure additional manufactured food staff yet they are financially un able to afford some of the items which affects the growth of the children and response to service delivery due to low immune systems.</p> <p>Due to the overwhelming numbers of children who need nutritional support, we are unable to meet the needs of all of them due to lack of adequate resources and funds.</p> <p>Some of the children who were at their extreme were referred to the Children's</p>

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			referral hospital for further management.
In house therapy	67 children	<p>With the admission of new children in the home, there has been an increase in the number of resident children offered therapy services on a daily basis. Much as little progress is noticed over time, continued therapy has given the resident children an opportunity to explore their capabilities and improve on their daily living skills.</p> <p>With the skilling of the care givers in therapy techniques, the children are now able to get more therapy time than before and more children are covered per day compared to before. Some children have now started taking steps in moving from one place to another while others are now capable of positioning themselves based on their convenience.</p>	<p>Some of the children need specialised therapy equipment which are still lacking at the home yet even the available equipment are not adequate for the children hence slowing the children's engagement.</p> <p>Some of the young adults have reached the pick of their flexibility and can therefore no longer adjust to the therapy techniques applied to them but just need to be maintained at the current status to avoid development of secondary disabilities.</p>
Outreach clinics	24 clinics	<p>All the 24 outreach clinics were conducted successfully with 2 outreaches conducted per month and a total of 49 new cases were registered during the year. As a result of our intervention, all beneficiaries of the programme have reported a great improvement in their health and this has influenced many community members to join the programme.</p> <p>During the outreaches, beneficiaries are sensitised on various issues while some are also engaged in dialogues to discuss key issues of their concern. They also receive psychosocial support, counselling and guidance. Members are also engaged in personal savings which</p>	<p>Due to unavoidable circumstances we lost 2 beneficiaries of the outreach of Buwenge sub county and 4 from the outreach of Busede (all children with epilepsy and cerebral palsy). Care takers were urged to always ensure that any changes in the children's health are immediately reported to the medical personnel to avoid any short comings.</p> <p>There has been an influx of beneficiaries from the neighbouring districts who need the services but due to high costs of transport, they</p>

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		<p>money they receive at the end of the year for personal use.</p> <p>We were also able to support one child with cerebral palsy and intellectual disability (13 yrs) to seek legal redress after being impregnated by a 37-year-old and left without any support.</p>	<p>are unable to attend regularly which affects their response to the medication and the children in need of therapy.</p> <p>With the establishment of calendars to be followed while taking the drugs, it shall be easy to monitor uptake of the medicine as a measure of checking on drug compliance</p>
Medical review	20 children	<p>During the period under review, 29 children were able to attend their medical review dates as recommended by the medical team and as per the results, all the children are in good condition and are responding positively to their medical treatment.</p> <p>The children taken for review included those with hydrocephalus, spine bifida and those living positively with HIV. Some of the children especially those with spine bifida had to get their assistive devices replaced due to their advancement in age and other factors.</p>	<p>Home of hope staff always ensure that all the set terms and conditions by the medical team are observed with utmost care and this has diminished any risks on the children.</p> <p>The next medical review dates are to be observed and all staff are aware of the response strategies put in place in case of any shortcomings.</p>
Admission of new children	None	<p>During the period under review, 1 child with intellectual disability and 1 young adult in need of alternative care were registered and admitted at Home of Hope. Aloni (9 years) had been left for dead after his mother abandoned him with the father who is an alcoholic only to be rescued by Home of Hope while Hajara a 21 year young adult who developed disability at the age of 16 years (paralysis of the lower limbs) started living on the streets after attempted rape by her biological father</p>	<p>Aloni shall be at home of hope specifically for rehabilitation purposes as the home of hope team identifies the rightful family members who can take good care of him and also psychologically prepare his father for a possible reunification.</p> <p>Hajara was there after reunified with her biological sister having been prepared</p>

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		where she was picked by a local church member who took her to the authorities and then referred to home of hope for refuge.	psychologically and she is now happy at home.
Routine medication	42 children	<p>Due to their various medical conditions among the children, some of the children are subjected to daily medication however, with the new admissions a total of 43 children are now receiving medication on a daily basis and these have conditions such as sickle cells, epilepsy and mental issues and these are conditions that are chronic.</p> <p>Following continued uptake of the medication, there has been no complication reported from any of the children throughout the period under review.</p>	<p>High costs of the required medication has highly inflicted on the organisation's budget.</p> <p>All responsible staff members always ensure that the children's schedules of uptake are adhered to and records are always made.</p>
Medical Referrals	None	Having equipped our medical facility with the necessary equipment to handle the various conditions of our children, there has been a reduction in the number of children referred for further management to other medical facilities and these were specialised cases that could not be handled at our facility such as skin infections, neurological cases and acute sickle cell conditions. A total of 13 children were referred during the period under review and all of whom received the required attention.	Only four cases were from the resident children while the rest were from community members taking part in the various Home of Hope programme areas such as the drop-in clinics and outreaches.
General medication	All children	During the period under review, the children have been treated of various conditions such as malaria, typhoid and respiratory tract infections. All conditions have been managed with success and the children have fully	All of the children attended to recovered fully and year round, we thank God that there was no death that was registered among the resident children.

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		recovered. Other conditions included chronic conditions such as sickle cells and preventive measures to avoid further occurrences have also been put in place.	More precautions are to be set and followed to avoid further occurrence of some of the cases.
Construction of a supported home	One home	The construction of a supported home for the relocation of young adults who have surpassed the required age for one to be in a children's home as per the laws of Uganda (18 years and above) is at a completion rate of 98% and we hope that by the start of January 2025, we shall be shifting the first batch of the young adults. This shall give way and space for the possible admission of more children to the home.	The number of children who have surpassed the required age keeps on growing every day that goes by and there is therefore need for the construction of more supported homes to meet the growing number. Admission of new children as replacement implies an increment in the budget allocations yet we have minimal funding.
Family tracing	Two children	<p>Having got some provisional information regarding the family links of the children, we were able to trace the family background of two children. We traced the household members of Mwesigwa Daniel and it was discovered that both Daniel's parents passed on and the only surviving relative is his paternal grandmother who is too aged to manage Daniel's condition. Daniel also has other siblings who stay with their grandmother but she can hardly afford their day to day basic needs.</p> <p>We also managed to trace for the household of Hajara's sister having been directed by Hajara and upon discussion with her she was able to accept taking care and being responsible of Hajara.</p>	<p>Given the condition of Daniel's grandmother and their social setting, it is unhealthy to reunify Daniel with the family members and it is therefore advisable that Daniel remains at Home of Hope. However, the family members can be allowed to visit him at home of hope. Home of Hope will keep on following up Hajara's well-being while at the sister's place.</p> <p>Hajara's sister was also advised to always counsel Hajara such that she overcomes the trauma she underwent.</p>
Capacity building	2 trainings	One staff member (therapy department) was facilitated to attend a	

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		<p>training/seminar on muscular dystrophy in Kampala. We also trained care givers in child care techniques ranging from parenting, positioning, health talks, disease control and management among others. This has improved service delivery among all staff members. With the availability of competent staff in various fields, we have been able to reduce on the costs of hiring external trainers for this purpose.</p>	<p>We conduct internal capacity building trainings based on the gaps identified.</p> <p>With continued capacity building trainings, staff get exposed to all sectors which minimises the effects of specialisation</p>
Re-unification with family members	None	<p>Having rescued Hajara from the possibility of being raped by her biological father, we were able to counsel her and psychologically align her to accept being reunified by her closest family members who happened to be her biological sister. Hajara had for long suffered in this trauma having tried for so long to seek for social justice yet no one would believe in her not until she decided to take on to the streets. Hajara had good relations with her sister but only did not have connection with her however, with her admission at home of Hope, she was able to connect and also open up her story to the sister with ease.</p>	<p>Some of the family members were not aware of the challenges that Hajara was encountering yet even those who knew about it blamed her for notifying authorities an act that is contrary to the provisions of the laws.</p> <p>Follow up of the family is still on going to ensure that Hajara blends well with other all family members.</p>
Follow up on action plans	All action points	<p>Through various home of hope programmes, there have been action points developed with the beneficiaries and home of Hope staff have made sure that the set plans are achieved by the responsible persons. This has helped the concerned persons develop strategies of improving on their weak points for the better.</p>	<p>Failure to fulfil the action plans always causes a set back in programming and the concerned individuals are always urged to ensure that they are achieved.</p>
Engaging in income	2 projects	<p>Having sold off the first batch of the layer chicken due to low yields, we were</p>	<p>There has been an increase in the costs of the farm input</p>

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generating activities		<p>able to restock the poultry project and by November 2024 we had started harvesting eggs from the new stock and the children are now able to boost their nutrition with eating at least an egg per day. This has help boost their immunity.</p> <p>Through out the year, we have also been able to harvest adequate milk for both domestic consumption and sale of the surplus milk and other dairy products which has helped reduce on the organisation's expenditure on such products.</p>	<p>which has due to the current inflation rate which has raised the cost of maintenance of the project.</p> <p>Due to prolonged illness, we lost one of the heifers hence affecting the quantity of milk produced on a daily basis however, this was due to a general outbreak which was noticed late but later well managed.</p>
Participating in national celebrations	All celebrations	<p>Home of Hope joined the rest of the world to celebrate recognised international and national celebrations as a sign of solidarity with those people that the day is intended for. Among the days celebrated include;</p> <ul style="list-style-type: none"> - The day of the African Child - International Day for persons with Disability - World Autism day - The cerebral palsy day - The world albinism day <p>Some of the days were organised in by the City Authorities in partnership with Home of Hope while other days were celebrated at national level. Through participation by the children we were able to echo out messages advocating for the recognition of that particular group of the marginalised persons in the community.</p>	<p>Due to the high costs involved in the participation of some of the events, we were unable to physically take part in some of the national celebrations but organised our own celebrations to commemorate some of the days at the home to symbolise our recognition of such categories of the marginalised groups in the community.</p>
Exchange visits	2 exchange visits	<p>A selected team of 15 care givers from the Busede outreach were facilitated to visit the care givers in Buwenge and likewise the team from the centre clinic</p>	<p>The exchange visits have created mindset change in the community for the best of the persons with disabilities</p>

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		<p>were also facilitated to visit the Busede outreach where they had the opportunity to share experiences of their day to day lives and remedies of overcoming challenges once they set.</p> <p>Giving life time testimonies of improvement in their well-being due to the interventions made by Home of Hope has attracted more beneficiaries to the various programmes.</p>	<p>which has increased on the level of social acceptance of people with multiple disabilities.</p>
Home based activities	Various activities	<p>Both Home of Hope staff and children have been engaged in various team building activities that have helped not only to relax their minds but also improve on their health conditions. A variety of activities such as aerobics, in-door and out-door games were organised during the period under review.</p> <p>The children together with the staff have also been involved in community walks which have helped build the relationship between Home of Hope children, staff and the community</p>	<p>Having a very innovative team has helped us develop more team building activities which have increased on the children's participation at all times.</p> <p>Community walks have helped build more ties between home of hope and the surrounding community.</p>
Networking and advocacy	All partners	<p>Through various platforms, home of hope has actively engaged in promoting the interests of people with disabilities and this has strengthened our referral system with other development partners in the in all fraternities.</p> <p>We have been able to engage various stakeholders to promote the rights of people with disabilities at all levels of administration and this has improved on service delivery, social inclusion and acceptance.</p>	<p>There is still low participation of some of the stake holders in the other activities aimed at creating awareness, and advocacy in the community.</p> <p>The high costs involved in preparation and holding some advocacy activities limits us from holding such activities in various parts of the district.</p>

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Mentoring and training		<p>Due to the vast learning opportunities at home of Hope, we have become a learning hub of disability related issues for both local and international students and other institutions. During the year under review, we have hosted students for internship from all parts of the world who have benefited from our professional staff and this has helped build their careers. We also hosted institutions with students especially in health and orthopaedic fields.</p>	<p>Home of Hope has given students the best experience in managing various situations not only at individual basis but also communal and institutional.</p>
Strengthening health systems and services	All communities	<p>Through the establishment of Derrick and Emily Memorial medical centre we have been able to reach out/provide health services to dozens of children with multiple disabilities at no cost while the community members also get access to subsidize health services which has acted as a solution to the lacking government services in the community.</p> <p>The health facility has not only provided a lasting solution to the health problems in the community but also eased access to health services by home of hope children which has reduced the risks encountered while searching for befitting health services which was the lead cause of the children's death.</p>	<p>There are still other sectors/services that need to be put in place such as the Maternity ward, radiology systems, etc but due to inadequate funding we are unable to set them up.</p> <p>We also lack a specialised van/ambulance to serve our customers though we try to improvise when needed</p>
Meetings	Management committee, BoD, and staff meetings	<p>We were able to conduct 4 management committee meetings, 4 Board of Directors' meetings and these were very fruitful in planning for the progress of the organisation and also checking on the short comings and developing strategies to mitigate them.</p> <p>We also conducted general staff meetings and administrative staff</p>	<p>All meetings were conducted as scheduled in our work plan and there is need to follow up on the implementation of the agreed action plans.</p> <p>Both general meetings and administrative staff meetings</p>

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		meetings to harmonise the implementation of all programme activities.	are conducted every two months.
Radio talk shows	4 radio talk shows	Radio talk shows have always acted as a means of mobilisation, sensitisation, advocacy and dissemination of information and during the period under review, we conducted 4 talk shows. During the talk shows presenters were selected based on their knowledge of the set topic of discussion.	We need to develop more Information, Education and Communication (IEC) materials for dissemination in the community.
Community dialogues	All sub counties	One community dialogue was conducted per sub county making a total of 9 community dialogues held. The participants included religious leaders, opinion leaders, representatives of administrative structures, representatives of persons with disabilities and representatives of care givers of persons with disabilities. During the dialogues, community members are able to discuss patinate issues affecting people with disabilities and also develop strategies to counter the challenges. The dialogues give the various stake holders the opportunity to directly engage with the affected persons.	If not given the opportunity to air out their grievances people with disabilities tend to conceal their feelings and experiences which affects them socially while sometimes they are not given the opportunity to be heard. Agreed action points during the dialogues are to be followed up by the responsible persons.
Stake holders review meetings	4 review meetings	In the bid to minimise costs and time, we were able to conduct three stake holders review meetings targeting key players and local council administrative staff in our areas of operation. Each review meeting targeted a total of 3 sub counties and the participants were from both the technical and political wings of administration. The review meetings help all stake holders monitor progress of the previously agreed action plans	Some of the key stake holders do not turn up for the meetings once invited due to unknown reasons and this gives a gap in understanding the progress of their line departments hence making it hard to ascertain strategies of intervention.

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		and also set priorities for the fourth coming quarter.	
Strengthening community structures.	At lower local government	Having identified community led structures and advocates, home of hope trained the members of these structures on how to integrate disability related issues in their programming and these included child rights advocates and other vulnerable groups such as the youth, women and the elderly.	The structures especially in the hard to reach areas find hard time in reaching out to all parts of their communities and need some facilitation to perform their duties with ease yet there are no funds planned for this hence failing to implement some of the agreed plans.

Prayer points

- *Good health of all the children and staff at the home.*
- *Expansion of the Therapy section*
- *Procurement of more assistive devices 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.*

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” and Happy 2025.

Pictorial

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Figure 1: Skilling local structures in disability related issues helps build a strong network for advocacy at all levels. Above is Social Worker Stephen conducting a training of the Namaganga local Council committee on their role in the disability fraternity



Figure 2: integrating disability affairs in all sectors and ages helps build a strong bonding in society. While advocating for social acceptance, it's very important that children are mentored to understand and accept disability. Above is a member of the Budondo "B" village child rights committee demonstrating how to manage a person attacked by Epilepsy during a training by Home of Hope in December 2024.

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Figure 3: 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 4: Community dialogues give all people the opportunity to give a personal view of issues affecting persons with disabilities. Above is Social Worker Stephen guiding a community dialogue in Buwenge Sub County.

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Figure 5: 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 6: A day out for staff boosts team building, relaxation and a sense of belonging among staff. above; the 1st lot of Home of Hope staff members on arrival at the Uganda Wildlife Education Centre during their retreat in December 2024.



Figure 7: People with disability in Jinja City in conjunction with Home of Hope Jinja Uganda organised a march through the city to advocate for and create awareness on disability.

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Figure 8: New clients in all programmes are prepared psychologically to accept the facts about their condition and how to manage the hardships that come along with it in their day to day life. Above is one of our Own Jessica (in a wheelchair) counselling new clients during one of the centre clinic in 2024. Jessica is also among the beneficiaries of the Home of Hope Education programme and currently awaits for graduation with a bachelor in Social Work come 2025.



Figure 9: Having a one-on-one session with the care givers makes them open up on the social challenges that they face / the community. Above is Stephen having a counselling session with one of the care givers during the Budondo Therapy outreach.

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Figure 10: Engaging schools in taking part in promoting social inclusion helps groom the young children to promote the rights of persons with disabilities.



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Figure 12: with the restocking of the poultry project the children's nutrition has been greatly improved while the surplus is sold off to meet other needs of the children at the home.



Figure 13: Beneficiaries of the outreach programme keep on growing every day due to the trust, confidentiality and reliability that the beneficiaries have in our team. the increasing number however, inflicts on the budget allocations of the home.

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Figure 14: Home of Hope is always at the fore front of recognising national celebrations for the most vulnerable persons as a platform for advocacy. Above is the Home of Hope team posing for a photo with the Minister for Children and Youth affairs during the celebrations of the Day of the African Child 2024.



Figure 15: 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.

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Figure 16: 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.

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Figure 17: 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.



Figure 18: 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.

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Figure 19: Alone (as called by the father) was rescued from the suffering he had 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.



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.

Submitted by:

EDITH LUKABWE
EXECUTIVE DIRECTOR

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