



HOME OF HOPE JINJA UGANDA

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MONTHLY PERFORMANCE REPORT FOR JUNE 2024
PERFORMANCE AGAINST THE PLANNED ACTIVITIES FOR THE MONTH OF JUNE 2024
3RD JULY 2024

PLANNED ACTIVITY	TARGET	ACHIEVEMENT	LESSONS LEARNT, COMMENT, CHALLENGES AND WAY FORWARD
Centre Clinic	One clinic	During the month under review, one centre clinic was conducted and two new cases were registered. During the clinic, clients were able to share with the team on how they were coping up with medication and there were no complaints of any complications registered. Clients claim stability in their health due to constant uptake of the medication and this has improved on their wellbeing especially the relationship between the patients and the entire community.	<p>New clients are sensitised, counselled and guided on how to overcome the challenges that they are most likely to undergo resulting from their condition.</p> <p>Some of the clients have come to meet their expectations as a result of joining the programme. This is evident with their testimonies over time.</p>
Outreach clinics	Two outreach clinics.	All the two outreach activities were conducted and two new cases were registered during the exercise. All the new cases have been on medication for epilepsy but stated that they have not been consistent in uptake due to lack of access to medication hence having serious complications and continued seizures. The	Care givers are advised to take caution of the recommended medical terms to avoid complications resulting from non-drug compliance. Some clients still report of being abused and

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		<p>care takers also recounted on how the high costs of the medication have negatively impacted on their wellbeing.</p> <p>During the outreach clinics, clients in need of counselling services were also able to be attended to while children from the hard to reach areas but in need of therapy services also had access to the service.</p>	<p>segregated by other community members due to their condition.</p> <p>There is need to follow up on the clients counselled to assess how they are coping up with the various conditions that they reported</p>
Drop in Clinics	8 clinics	<p>During the month under review, there has been an increase in the number of clients attended to during the drop-in clinics and 14 new cases were registered. Some of the children are responding to the therapy by exhibiting potential in enhancing their capabilities while the care givers have also been able to explore the techniques attained while at home which has helped give the children more therapy time.</p> <p>All new clients are counselled on how to overcome the challenges that come along with the conditions of their children and they also get the opportunity to share experience with other care givers that builds their confidence, love and sense of belonging.</p>	<p>Due to the increasing number of beneficiaries, there is need to procure more therapy equipment while other equipment are worn out and need replacement.</p> <p>Home visits to the new clients help establish the social background of the children and also helps identify more challenges that the face while in the community and how best to overcome them in the bid to promote social acceptance and protection.</p>
Follow up on Action plans	Four cases	<p>Two of the referred children were able to receive nutritional treatment form Jinja Children’s Hospital and have since been discharged having improved in condition but can not yet start attending to the therapy sessions till they fully recover while the child referred for orthopaedic services and were attended to but are still awaiting for the necessary supportive devices to be delivered to them having gone through the necessary procedures.</p>	<p>Care givers of the referred children face financial constraints and are in need of support to meet their day to day needs while at the hospital while those referred for orthopaedic services also need to meet some costs for other special services offered.</p>

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<p>Medical review</p>	<p>Four children</p>	<p>Four children with hydrocephalus were taken for medical review at Cure Children’s Hospital and these turned out to be in good condition having been managed well since the previous review. During the month of June, we were also able to facilitate three children from the community geared programmes to receive medical review that had been overdue two of whom had hydrocephalus and one with spine bifida.</p>	<p>All the responsible staff members to abide by the set medical conditions to avoid set backs while the community members are also to be followed up by the responsible staff members to ensure that the next review dates are observed and the care givers adhere to the medical advice</p>
<p>Capacity building</p>	<p>None</p>	<p>Through the support of a partner organisations, staff members of stake holders in disability related issues were trained in mental health management and home of Hope Jinja was represented by Steve the Social worker who is now transferring the knowledge attained to all community members in our areas of operation and also equipping other staff members with the same knowledge.</p>	<p>All technical staff members have become a resource in passing on the knowledge to the community at all platforms which has helped create awareness on mental health and control measures among the communities.</p>
<p>Medication</p>	<p>All children in need of treatment</p>	<p>This time round, there was a reduction in the number of children treated with various infections such as Respiratory Tract infections(RTI) and malaria among others. Twenty children were treated in total most of whom have recovered/fully healed while others are still undergoing the final stages of their treatment.</p> <p>42 children on daily medication were also able to receive their medication and have been stable with no complications related to their various conditions.</p>	<p>More precautions are to be taken to avoid further infections and all staff are to follow the various strategies put in place to control continued infections. Due to proper management by the medical team, there was no child referred for further management.</p> <p>Constant and proper uptake of the medication reduces the risks of attacks among the children.</p>

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Prayer points

- *Good health of all the children and staff at the home.*
- *Expansion of the Therapy section*
- *Establishment of a maternity wing at the health facility*
- *Procurement of more assistive devices and equipment such as wheel chairs.*
- *Renovation of the old Home of Hope building*
- *Construction of supported homes for transition of the young adults*
- *Provision for the procurement of more outreach and centre clinic medication whose prices have escalated yet the beneficiaries have increased.*
- *Establishment of a special needs school.*

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 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 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. **“BE BLESSED”***

Pictorial



Figure 1: Health education and community sensitisation is one of the components of the centre clinics and these always act as a platform for disseminating information. Above is Social Worker Stephen sensitising the beneficiaries of the Centre Clinic during the month of June 2024.

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Figure 2: During the Centre clinics, beneficiaries get the opportunity to share personal experience and also develop strategies to some of the problems affecting them.



Figure 3: New clients are prepared to face the reality of their condition since some of them are not knowledgeable of the different conditions and how they are caused. Above is Home of Hope Intern student Jessica explaining and counselling new clients during the Centre clinic in June 2024.

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Figure 4: Jessica receives money from beneficiaries who save every month in the Busede outreach. Having personal Savings was introduced in all Outreach programmes as a mode of enhancing the economic muscle of the care givers and beneficiaries to meet their needs.



Figure 5: Care givers are encouraged to always pay attention and master the therapy techniques that they are taught to enable them apply on the children while at home. Above is a care giver observing Alex the Therapist during the outreach in Busede.

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Figure 6: During the Outreach clinics, care givers/beneficiaries not only gain access to medication but also get the opportunity to access information, share experience and ask the unknown questions. Above is a care giver asking a question during the Buwenge outreach.



Figure 7: Having hands on is one of the best practices that have helped the caregivers master the necessary therapy techniques during the drop-in clinics. Above is Therapist Alex doing it together with the care giver at the drop-in clinic in the month of June 2024

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Figure 8: As 1st time appearance in the therapy session, some of the children get excessive pains while the care givers feel pity for the children however, this becomes normal especially among care givers who have received adequate counselling. Above is Eddy the Home of Hope Therapist at work as the care giver looks on during one of the Drop-in clinics in June 2024

Submitted by:

EDITH LUKABWE
EXECUTIVE DIRECTOR

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