



# HOME OF HOPE JINJA UGANDA

P.O. Box 5047, Jinja- Uganda  
Mob: +256772183058  
Office line 0393217663  
email: [edith.homeofhope@outlook.com](mailto:edith.homeofhope@outlook.com)  
[www.homeofhopeuganda.org](http://www.homeofhopeuganda.org)

**MONTHLY PERFORMANCE REPORT FOR OCTOBER 2023**  
**PERFORMANCE AGAINST THE PLANNED ACTIVITIES FOR THE MONTH OF OCTOBER 2023**  
**3<sup>RD</sup> NOVEMBER 2023**

<b>PLANNED ACTIVITY</b>	<b>TARGET</b>	<b>ACHIEVEMENT</b>	<b>LESSONS LEARNT, COMMENT, CHALLENGES AND WAY FORWARD</b>
Drop in clinics	Four drop in clinics	<p>Noticeable improvement in the capabilities of the children, has promoted consistency in attendance of the drop in clinics. There has also been an increase in the attendance by care givers and this gives them the opportunity to enhance their therapy techniques which helps give more therapy time to the children while at home. Some of the care givers have ensured that more family members are equipped with therapy skills by encouraging various family members to come along with them during the drop in clinics.</p> <p>At the end of every month, the Therapy and Social team together with care givers have a dialogue to discuss key issues of concern they have faced during the month and are also treated to refresher theoretical practices based on the various conditions of the children. During the dialogue, care givers were also able to share personal experience from the Executive Director/Founder of Home of Hope which helped build confidence, enthusiasm and self-esteem among care givers.</p>	<p>A raise in the cost of living due to inflation has subjected care givers to challenges such as increase in transportation costs to attend the weekly sessions and there is therefore need to support them by facilitating their transportation costs yet the organisation is incapacitated to fully meet these bills.</p> <p>Through the dialogues, the teams are able to develop action points and way forward on how to improve the programme.</p>

**OUR VISION: A socially accepted, included, well cared for and involved community of children with multiple disabilities with self-help skills in order to live an independent life in.**

		During the month under review, five drop in clinics were conducted and four new cases were registered.	
Centre clinics	One centre clinic	<p>Beneficiaries of the programme together with care givers have reported positive response to the medication they receive and are appreciative of the services they offered during the centre clinic. While at the centre clinic, beneficiaries also receive counselling services which has helped improve their psychological and social wellbeing. The new cases in the previous months have also been able to cope up with the medication and are also reporting improvement in their general health.</p> <p>During the centre clinic, three new cases were registered and all these were managed by the team on the day and there was no case referred.</p> <p>As a result of continued uptake of the medication, some of the clients have stopped developing seizures</p>	Care givers need to always monitor the movements of those clients whose conditions are known to be delicate to avoid any further short comings. This follows a report of the death of one of the beneficiaries who suffocated while alone in the gardens. During the centre clinic some of the clients never turned up due to climate changes hence making it hard for the medical team to assess their response to the medication.
Outreach clinics	Two outreach clinics	<p>Through the outreach clinics, children with multiple disabilities are able to access services such as therapy, psychosocial support, and medication among others that they are not able to find elsewhere. The clinics also give opportunity for creating awareness among the community and other stake holders on issues affecting children with disabilities and advocating for improved service delivery.</p> <p>During the outreach in Busede three new beneficiaries were registered and six children received therapy services. Care givers were also equipped with skills of how to offer therapy to the children while at home.</p>	Some of the care givers have had difficult times in turning up for the outreach clinics due to transport and the bad terrain caused by heavy rains and these may find it hard to access medication since the drugs are sold expensively and they are most likely to deteriorate.

OUR VISION: A socially accepted, included, well cared for and involved community of children with multiple disabilities with self-help skills in order to live an independent life in.

<p>In house therapy</p>	<p>All children</p>	<p>With continued therapy, provided to the resident children on a daily basis, come of the children have been able to display remarkable improvements in their mobility and adoptive skills. This is witnessed in their ability to stand alone, sit without any support while others are now able to work upright though still strengthening their balance. Case in point if Byakatonda Yeeko who is now able to walk upright without any support.</p> <p>With the skilling of the care givers in therapy techniques, the children are also now able to provide therapy to the children which has increased on the work force of the therapy team and also ensured that the children get more therapy time.</p>	<p>Care givers are now able to administer the various therapy techniques with minimal supervision by the therapy team, whoever with the breakdown of the washing machine, care givers now have to spend part of the time that would be spent on the children washing. This therefore calls for the immediate repair of the machine.</p>
<p>Home based activities</p>	<p>Variety</p>	<p>During the period under review, the children together with the staff have been engage in various activities ranging from indoor and outdoor games, aerobics, art and craft, play among others. This has not only helped accelerate the relationship/team building between staff and the children but also strengthen their bonding. Having a relaxed mind by both staff and the children helps keep them in good health. With the procurement and installation of a children’s swimming pool, the children are now able to receive hydrotherapy services extensively.</p>	<p>More activities need to be designed to meet all the children’s needs especially the outdoor activities.</p> <p>More playing kits for the children are required</p>
<p>Education</p>	<p>All school going children</p>	<p>All schools held school visitations and it was mandatory for home of Hope to attend the visitation days as scheduled. Participation in these days helped our staff discuss with the teaching staff on the performance of each children and also developed strategies of improvement.</p>	<p>Follow up on the agreed action points is to be made and we need to ensure that there is a close relationship between the school administration, children and home of hope staff</p>

OUR VISION: A socially accepted, included, well cared for and involved community of children with multiple disabilities with self-help skills in order to live an independent life in.

		<p>Through the school visits, we were able to make recommendations for areas of improvement based on the children’s nature of disabilities and also share with the school administration concerns raised by the children. This helped the schools in improving on their inclusive education strategies.</p>	<p>to ensure positive service delivery to the children.</p> <p>As a result of continued sensitisation of school administration and pupils the schools have been made friendly for children with disabilities’</p>
General medication	20 children	<p>Compared to the previous months, there has been a decline in the number of child illnesses registered and these have been managed appropriately with no child being referred for further management. This is attributed to the stringent measures that have been put in place to curb the high rates of infection.</p> <p>During the month of October sixteen children were treated of various illness such as Malaria and bacterial infections while others were treated of chronic diseases like sickle cells.</p>	<p>Some of the nets used by the children need replacement to reduce the risks of malaria infections while there is need to isolate children suffering from illnesses caused as a result of contact with the infected persons.</p>
Medical review	3 children	<p>All the three children that were scheduled for medical reviews were taken for the reviews and they are all in stable condition. These included one child living with HIV and two children with hydrocephalus.</p>	<p>There is need to observe the next review dates to avoid any short comings and also follow the set precautions by the medical team.</p>
Routine medication	42 children	<p>Following continued uptake of medication by all the 42 children, there have been no complications registered during the month under review. Some of the children have now stopped developing seizures on a regular basis following regular uptake of the medication. This also follows the regular monitoring by the medical team.</p>	<p>All responsible staff have played a key role in ensuring that this is achieved and there is need to always report any changes noticed on every child to the concerned persons.</p>

OUR VISION: A socially accepted, included, well cared for and involved community of children with multiple disabilities with self-help skills in order to live an independent life in.

Economic empowerment	4 care givers	3 care givers from Bugembe Town Council engaged in retail businesses were funded with capital to boost their economic activities/businesses to enhance their livelihoods. All the three care givers are single mothers with children with multiple disabilities who were neglected and abandoned by the fathers to the children but were already engaged in the retail business as a source of income.	The care givers need to be monitored closely and guided appropriately to avoid set-backs in their businesses.  More care givers need to be facilitated to boost the various income generating activities they are engaged in.
Medical supplies	Equipping the blood bank	Having applied to the Blood Transfusion Society for supply of blood, in the month of October we received blood and on a good note we shall now be able to supply blood not only to children of Home of Hope but also those in the community in need of it. This shall not only reduce the risks we have been going through in search of blood but also the expenses incurred when in need of the service.	There is need to create awareness to the community of the availability of the service at our health facility
Supported home for young adults	Purchase of land	As a requirement by the Government guidelines that all persons aged 18 and above are not allowed in children's homes, there has been need for the purchase of land to set up supported homes for the young adults under the care of the home. With the support of well-wishers and friends, we were able to secure land for the said project in Kagoma, Jinja district. Apartments shall be constructed on the land to accommodate all the young adults of the home.	Currently, the organisation lacks funds to kick start the said projects and there is need to acquire architectural plans for the project.

***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.*
- *Provision of an alternative power point for the water pump*

**OUR VISION: A socially accepted, included, well cared for and involved community of children with multiple disabilities with self-help skills in order to live an independent life in.**

- *Pray for more provision in abundance at the home to be able to meet all home needs*
- *Pray for the establishment of more income generating activities within the home for sustainability*

### **Conclusion**

*Without the support of all friends and well-wishers of Home of Hope, the above achievements would not have been made possible and it is therefore our prayer that the Almighty God keeps on protecting and providing for all those who have stood together with us at all times. Grate thanks also go out to the Management and staff of Home of Hope Jinja Uganda for their dedication and commitment in ensuring the success of the home and well-being of the children. **"BE BLESSED"***

### **Pictorial**



*Figure 1: Care givers having hands-on therapy sessions is the best way of mastering the techniques they apply on their children while at home. Above is a care giver applying the techniques on her child with the close monitoring of Afusa the Therapist.*

**OUR VISION: A socially accepted, included, well cared for and involved community of children with multiple disabilities with self-help skills in order to live an independent life in.**



Figure 2: Every last Tuesday of the month, care givers are taken through theoretical sessions and also develop plans for their children in the next month. Above is the Executive Director sharing with the care givers during the last drop in clinic of the month



Figure 3: Having registered positive results from the centre clinic, care givers never miss out to attend the programme for the good of their children

OUR VISION: A socially accepted, included, well cared for and involved community of children with multiple disabilities with self-help skills in order to live an independent life in.



Figure 4: Due to financial constraints, care givers who are not able to attend the weekly therapy sessions at Home of Hope are given the opportunity to get the service once every month during the outreach clinics. Above is Afusa the Therapist giving therapy to a child in Busede during the outreach clinic as the care giver looks on. Care givers are always encouraged to do the same while at home.



Figure 5: Communities are always sensitised and given opportunity to raise their concerns during the outreach clinics. Above is Social worker Stephen responding to some of the issues raised by community members in Busede Sub County.

OUR VISION: A socially accepted, included, well cared for and involved community of children with multiple disabilities with self-help skills in order to live an independent life in.





Figure 6: Music is one of the therapy activities conducted during the in house therapy session at home of hope. above is Shannon dancing to the tunes of his best music at home of hope



Figure 7: Getting to master walking without any support for Yeeko took time, dedication and commitment. Going through daily therapy drills enabled him to work just like any other child something he now enjoys doing every day.

**OUR VISION:** A socially accepted, included, well cared for and involved community of children with multiple disabilities with self-help skills in order to live an independent life in.



Figure 8: Hydro therapy is one of the packages home of hope children have been missing. Above is a swimming pool for the children under construction at home of hope.



Figure 9: During the school visitation days home of hope staff are able to discuss the performance of the children and also develop strategies for their better performance. Above is Milly sharing with the teacher during the visitation day in the month of October 2023.

OUR VISION: A socially accepted, included, well cared for and involved community of children with multiple disabilities with self-help skills in order to live an independent life in.



Figure 10: With continued sensitisation and engagements with the various schools, home of hope children are now enjoy the fruits of inclusive education by making new friends at their schools. Above, Daniel (in a wheelchair) shows off some of the friends he has made at school



Figure 11: The home of hope blood bank is now fully stocked with blood for transfusion. This has been one of the major reasons for referral to other health facilities.

**Submitted by:**

**EDITH LUKABWE**  
EXECUTIVE DIRECTOR

OUR VISION: A socially accepted, included, well cared for and involved community of children with multiple disabilities with self-help skills in order to live an independent life in.