



HOME OF HOPE JINJA UGANDA

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MONTHLY PERFORMANCE REPORT FOR MARCH 2024
PERFORMANCE AGAINST THE PLANNED ACTIVITIES FOR THE MONTH OF MARCH 2024
5TH APRIL 2024

PLANNED ACTIVITY	TARGET	ACHIEVEMENT	LESSONS LEARNT, COMMENT, CHALLENGES AND WAY FORWARD
In house Therapy	All resident children	Resident children at young ages and those in middle age have been taken through various therapy skills to avoid development of secondary disabilities resulting from the nature of disability that they suffer from and this has helped improve their capabilities and mobility techniques. Having received a recommendation from the therapy department, we were also able to do maintenance of some therapy equipment to support in the activity such as the standing frames which have been lacking.	As the children get older chances of losing their capabilities are high once not subjected to daily therapy hence needing for more support due to lack of ability to live independently however, much as we have put effort on therapy some of the children are admitted when they are beyond therapy stages hence little effort is done to change their conditions.
Drop in clinics	8 clinics	All the 8 drop in clinics were conducted as planned and during the month under review 4 new clients were registered which has scaled the number of children benefiting from the number throughout the district and other neighbouring districts. Having separated the clients into two and setting up two different days for the drop-in	Due to the up coming rains, the numbers/attendance is most likely to be affected as a result of commitment in garden work hence none consistence in the programme by the beneficiaries. Due to

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		clinics, the children are now able to get ample time for therapy and other services than before since an average of 20 children are attended to on per day compared to 35 and above before.	inconsistence in attendance, there has been a fall back in the adoptive skills and capabilities of the children
Outreach Clinics	2 clinics	As a result of high impact in the lives of those in need of the outreach services, there is always an increase in the number of new cases registered during the clinics. During the outreaches in Busede and Buwenge, a total of 16 new cases were registered and these were able to receive services such as Therapy, medication for Epilepsy and sickle cells, counselling and guidance, psychosocial support, referral and many others. During the therapy clinic in Busede, 7 children received therapy services out of whom 2 were receiving it for their very first time. Those that have stayed for long and have been consistent in uptake of the medication have reported positive response to the services they receive and urge that the activities be scaled to other areas of the region(Busoga).	<p>Care givers blame the none consistency in the programme to the increasing cost of living which and increasing rains which have affected the transport system due to the bad terrain and as a result, there has been slow progress in the healing process of the children/beneficiaries.</p> <p>Clients from the neighbouring districts request that the services be extended closer to them but due to lack of adequate resources, the organisation is incapacitated to do this.</p> <p>Due to price fluctuations, the cost of medicines has risen hence calling for high budget allocations for the programme yet there are increasing numbers per visit</p>
Home visits	10 households	During the month under review, 15 households of children with multiple disabilities were visited most of whom are those under the drop-in programme and the purpose of the visits were to extend psychosocial support to the families and neighbouring community members and also introduce new social and therapeutic	Regular visits to the families especially to those families that take long to turn up for the various programmes helps to create a sense of belonging among both the children and care givers and

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		<p>concepts to the households such as the use of locally available resources to set up therapy items within their environment.</p> <p>The visits are also a follow up on the action plans agreed upon with the care givers and these helps to facilitate the implementation process of the set action plans.</p>	<p>builds their confidence in the community.</p> <p>The visits have help both parties develop better strategies for the improvement of service delivery to the children.</p>
Routine medication	40 children	<p>Following an up date of the medical records on the number of children on daily medication, 40 children were able to receive the medication during the month of March 2024 and all of these are in stable condition following continued and constant uptake of the medication. Some of the children had their daily dosage enhanced to meet their condition.</p> <p>For those children whose dosage has been enhanced due to growth and constant seizures, no such cases have been reported again by the care givers due to prompt and appropriate uptake of the medication as advised by the medical team.</p>	<p>There has been an increase in the prices/costs of the medication needed on the daily basis yet the uptake is rising and this has had a big impact/implication on the budget allocations.</p> <p>Care givers are to closely monitor the progress of the children and report any unusual conditions for quick management.</p>
General medication	25 children	<p>As a result of continued rains in the area, there has been an increase in the number of malaria, flue and cough cases registered among the children and during the month under review 40 children were treated of the said infections and all were managed well. The children are now in better conditions. The medical staff together with the social and therapy departments were also able to develop strategies of minimising the occurrence of such cases and as a result, learning sessions have been set for care givers every Wednesday of the week where they are taken through causes and control measures of different</p>	<p>Early identification of the infected children and isolating them from the un infected ones helps control the spread of infections resulting from contact hence all care givers have to be keen in identifying such cases for isolation</p>

		conditions which has helped reduce on the level of infection among the children.	
Medical review	2 children	<p>One child with skin infections and is currently undergoing treatment and monitoring close monitoring by a specialised skin Doctor was taken for review in Buluuba Hospital and as per the findings, her skin was not responding to the medication and changes to the treatment were therefore made. The condition is to be studied till the next review.</p> <p>One child also living positively with HIV/AIDS was taken for review in Nalufenya Children’s Hospital for review as a routine and as per the medical findings Kafuko is positively responding to the medication he she is receiving and her health is stable.</p>	<p>The child was put on new medication following no responsiveness to the previous medication and a new review date was set and should therefore be observed.</p> <p>Responsible care givers need to keep observing the medication schedule and other set precautions to avoid set back</p>
Referral	None	<p>One child (Juliana) who was newly admitted into the home the previous month had no medical information on her condition and was therefore referred to Cure Children’s Hospital for further assessment and check up to ascertain her condition. It was confirmed that Juliana developed a neurological complication that led to her disability/ paralysis of the lower limbs. The tests conducted are to provide a basis for the medical team to address other medical complications she develops and also understand how to manage the condition.</p>	<p>It was recommended that Juliana be taken for an MRI test and also hire a Neuro-Spinal consultant to manage her condition better however, this involves financial implications which have to be solicited for with time and there are few such specialists within Jinja hence the cost of maintaining such a specialist may be high.</p>
Centre clinic	One clinic	<p>As a result of the impact of the centre clinic on the lives of the beneficiaries, the number has kept on growing with new</p>	<p>Increasing cost of the medication and the increasing number of</p>

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		clients being registered at every clinic. During the month of March, 6 new clients were registered and enrolled on the programme. The clinics have given hope to many community members since they are able to have access to their medication which is hardly found in government facilities yet they are sold expensively in the open market	beneficiaries in the programme has affected the budget allocations in the bid to bid to meet the demand.
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Prayer points

- *Good health of all the children and staff at the home.*
- *Establishment of a maternity wing at the health facility*
- *Procurement of more therapy equipment*
- *Renovation of the old Home of Hope building*
- *Transition of the young adults to supported homes*
- *Procurement of CCTV cameras for security purposes*
- *Expansion of the therapy section to meet the increasing number of beneficiaries*
- *Procurement of office equipment such as cameras, computers and projectors.*

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 March. 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: With continued therapy, care givers are relieved seeing their children improve in their capabilities. Above is one of the care givers amazed with the role of the drop-in clinics in the lives of their children



Figure 2: Alex the therapist explaining to a care giver how to position a child during the outreach clinic in Busede in the month of March 2024.

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Figure 3: During the outreach clinics, community members share their experience and how they have benefited from the programme. Above is Social Worker Sharifah sensitising beneficiaries during the outreach in Busede



Figure 4: Students on internship get the opportunity to interact with community members during the home visits. Home of Hope offers the best learning opportunity to students which enables them build their profession with hands on training.

Submitted by:

EDITH LUKABWE
EXECUTIVE DIRECTOR

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