



# 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)

## END OF YEAR ANNUAL PERFORMANCE REPORT FOR 2021 PERFORMANCE AGAINST THE PLANNED ACTIVITIES FOR THE YEAR 2021

29<sup>TH</sup> DECEMBER 2021

PLANNED ACTIVITY	TARGET	ACHIEVEMENT	LESSONS LEARNT, COMMENT, CHALLENGES AND WAY FORWARD
Centre clinics	12 centre clinics	One Centre clinic was conducted per month totalling to 12 clinics held throughout the year. During the course of the year new cases were registered and there was increased uptake of medication as per advised by the medical personnel which highly improved on the patients' life style and health status. The centre clinics also increased access to medical services to the community and enhanced their productivity and welfare.	Reduction in seizures among patients reduced stigmatisation in the community which return reduced on psychological torture they undergo as a result of their illness.  The increased numbers of beneficiaries is attributed to continued home visits and community sensitisation and awareness creation strategies put in place
Drop in clinics	52 clinics to be conducted	44 drop in clinics were conducted during the period under review and 34 new cases were registered. During this activity, parents were equipped with skills of applying therapy to the children while at home to enable them develop daily living techniques and live independently.	As a result of the lock down under the COVID-19 guidelines the intended target was not achieved since outsiders were restricted from accessing the home.  Some of the parents don't attend regularly and yet

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		It has been acknowledged that there has been great improvement in the mobility skills of the children under this programme by the care givers. The care givers also appreciate the new skills they have gained on how to manage the children while at home.	they also hardly implement the skills so often while at home due to other commitments hence causing a delay in the children's' development and adaptation.
Outreach clinics	12 clinics	15 outreach clinics were conducted and this includes 12 in Buwenge sub county and 3 in Busede. The activity targets at reaching out to patients who cannot access services at the home. The Buwenge outreach is accessed by communities of Buwenge Town Council, Buwenge rural, Butagaya sub county and the neighbouring districts of Kamuli and Luuka while Busede aims at reaching communities of Busede, Kakira Town Council and Buyengo sub Counties.	Most of these communities are hard to reach areas and have no access to proper medical care for the epileptic and the sicklers yet the medication is sold at a high price which they can't afford given their low income levels. Even with the extension of the services closer to them, some of the clients find it hard to easily commute to service points hence the call for a follow up through home visits.
Medical reviews, surgeries and referrals	11 children	<p>9 resident children with hydrocephalus and spina bifida plus 3 children with similar cases from the community were supported to have medical reviews 3 times each throughout the year during the period under review while two children living with HIV/AIDS were also taken for review 6 times each i.e. once every two months and currently all the said children are in stable condition with no ailments registered to date.</p> <p>1 resident child from the home was also referred to cure children's hospital for further</p>	<p>One of the partner organisations took over the responsibility of the child who required a major intestinal surgery but there is need to follow up on the progress so far.</p> <p>Due to close monitoring by the medical team, all cases that would have caused alarm were managed at early stages hence the reduced cases reported.</p> <p>High expectations by the community members making them demand that</p>

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		management while 4 children from the community were also referred to partner organisations for management and 3 of whom required major surgeries while the other required assistive devices.	the organisation takes over full responsibility of their children.
Routine medical care	None	This is done on children whenever they get illness such as malaria and other infections and throughout the year mild cases have been reported and managed by the medical team within the organisation. There has been prompt response to these illnesses as reported by the care givers.	Some of the cases may tend to be serious and require referrals if not detected early but thank God that the mothers and the medical team are able to notice it with ease
Therapy for resident children	All resident children	The activity is done on a daily basis by both the therapist and his assistants and through this the children have been able to gain skills such as walking, moving from one place to another, feeding and playing independently compared to the situation they were while being admitted to the home. The therapy given is both Occupational and physiotherapy.	Some of the children's condition has become permanent especially the adult children and these can only be given occupational therapy.  More therapy materials and staff are required to meet the growing number of children
Medical camp	1 camp	With the accomplishment of the construction of Derrick and Emily Memorial Medical Centre, there was a need for disseminating the information to the community of the start of operations and a medical camp was therefore organised for this cause. 139 patients from the community participated in the camp and 70 of whom tested for	The camp paved way for the community members to know all services available at the health facility and since then there has been a good turn up for medication from the community.  As a result of the opening of the facility more

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		HIV while 27 participants donated blood. Patients manifested with various complaints ranging from Hypertension, ulcers, respiratory infections, UTIs etc and these were all handled by the medical team at the facility. Treatment was also given at a subsidised cost to attract more patients.	<p>partnerships have been created to extend services to the community.</p> <p>There is need to construct more sections required and also procure the necessary equipment for service delivery such as the Dental, radiography, Maternity, theatre etc.</p>
Board meetings	4 meetings (1 per quarter )	4 Board meetings were conducted and all developments within the organisation were shared. The Board members were also able to develop action plans and also make follow ups on the key issues raised for the good of the organisation. With the close monitoring and reporting of all activities in the organisation the intended projects/objectives of the year were met.	<p>The meetings are conducted on a quarterly basis.</p> <p>Retired members of the Board especially those under the local government were replaced by their successors.</p>
Staff meetings	6 meetings (1 every 2 months)	5 staff meetings were conducted during the period under review and all issues affecting staff performance were handled as per the various needs of each department. During the end of year General staff meeting, staff were also able to vote for the best performing staff in every department and these were awarded with certificates of excellence	<p>The meetings are held after every two months and this has helped harmonise all programme areas and enhance proper planning within the organisation</p> <p>The awards act as a motivating factor for continued good performance among staff</p>
Home visits	208 field visits	172 home visits were conducted during the period under review and a total of 1,376 households were reached out to and these received services such as	The intended target was not achieved due to lockdown by government. Some of the households were also contacted

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		psychosocial support, counselling and guidance, physiotherapy, health education among others	through phone calls to ascertain the progress of the children especially those under medication and with complex conditions. More visits are yet to be planned for.
Education programme	20 children enrolled in different schools and disciplines	One of the children (Jessica) was able to sit her higher level exams and passed overwhelmingly with 12 points hence awaits admission at University for a course of her preference while one student at a tertiary institute level was also able to attend school. This was as a result of the Government guidelines on COVID-19 control measures.	There is need to solicit for funds to facilitate Jessica's education at University level since she did not make it on Government merit. There is speculation that schools will open in January and all school going children will report to their respective levels of education in 2022.
Admission of new children	Nil	During the period under review, 8 new children were admitted into the home bringing the total number of resident children to 86 resident children. Some of the children were referred from the Ministry of Gender while others were from the Probation office.	There has been no case of abandonment at the home registered during this period though some of the children were abandoned with their helpless grandparents and therefore needed alternative care.
Income generating activities	Dairy and poultry	Home of hope managed to construct and stock the dairy project with 3 exotic expectant cows and these are expected to start producing milk for both organisation consumption and sale by close of the coming year while the poultry project acted as a source of income and nutrition to the home till mid this year when it was disposed of due to low yields and is yet to be restocked with improved breeds.	There is need to procure more two cows to reach the target of five and the process of identification of better breeds is on-going though the funds are meagre  The cows are in good shape and all recommended precautions by qualified personnel in the field are being adhered to.

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Celebrating International days	3 days (Day of the African child, Down syndrome day and International Day of the PWDs)	Due to the COVID-19 restrictions, Home of Hope commemorated the Day of the African child with a prayer within the organisation's premises since all staff were locked within the organisation since there was no district or national celebrations. The other days were also celebrated with limited numbers nationally hence no representation from home of hope.	There is need to always allocate funds for a delegation to represent the organisation at the national level during these celebrations.  Prior communication by the organisers of the celebrations should also be communicated to stake holders for proper planning and effective representation.
Construction	Health facility	Construction and partial equipping of the health facility has been done and currently the children and the community are able to receive medical services within Home of hope and this has reduced on the costs incurred on health care and also the risk of losing a life during emergencies while trying to reach medical services. The Hospital will also act as a source of income for the organisation.	More facilities/medical equipment is needed to meet the health demands of the patients such as X-ray, scan, a fully equipped maternity section, dental services etc.  With the expansion of the medical team, the children are now closely monitored on a daily basis to avoid any unnecessary short comings.
	Guest house	100% of the construction works have also been completed at the guest house and it only awaits furnishing with the necessary lodging facilities to kick start use and this is also a strategy put in place to raise funds for sustainability of the organisation	The guest wing is expected to accommodate all volunteers and well-wishers of the organisation once fully furnished.
Human resource	5 staff	With the establishment of the Medical Centre, six new staff were recruited to serve the health facility and there is also a total of 3 volunteer staff supporting at the health facility.	All volunteer staff need to be absorbed in the employee structures of the home though there are no funds to meet their salary needs hence more funds to meet staff salaries

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		<p>Three other support staff were also recruited to work at home of hope farming section and these help in ensuring that the dairy project is well managed and also the gardens are in good and productive state. The gardens have helped supplement on the homes' feeding needs with food staff such as egg plants, tomatoes, green paper and other green vegetables vital in the children's nutrition are no longer procured got from the gardens.</p>	<p>required.</p> <p>Once other facilities of the medical centre are put in place more staff shall be needed to meet the demands of the patients.</p> <p>More out puts from the gardens are expected with the implementation of modern techniques such as irrigation and use of natural organic manure from the dairy project</p>
Distribution of wheel chairs	10 wheel chairs	<p>7 wheel chairs were distributed to children in the most need of the supportive device and all these were identified in Busede Sub County. These acted as a relief to the wellbeing of the children and also supported their mobility and comfort, however, the distribution was based on the availability.</p>	<p>More children both in the community and the Home still need chairs and there is therefore need for lobbying for additional wheel chairs and other supportive devises from well-wishers.</p> <p>The identification and needs assessment is done by the field team.</p>
Community dialogues and Sensitisation meetings	9 dialogues	<p>Due to the COVID-19 restrictions by Government, only two community dialogues and sensitisation meetings were conducted and these were in Busede Sub County. During the dialogues, the participants were able to realise key issues affecting the disability fraternity and also developed possible areas of interventions. The dialogues were attended by key identified stakeholders in the community such as Government officials, opinion leaders, religious leaders, politicians, representatives of persons with</p>	<p>Due to insufficient funds other dialogues were not kick started in the various target communities.</p> <p>Community members especially persons with disabilities and the caregivers always have high expectations from key players in disability related issues.</p> <p>There has been a gap in the planning and implementation process hence major concerns of</p>

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		<p>disabilities, care takers of children with disabilities and persons with disabilities living within the target communities.</p>	<p>persons with disability are not included. There is need for follow-up on the key action points agreed upon during the dialogues.</p>
Radio talk shows	4 talk shows	<p>2 radio talk shows were conducted during the period under review and the major focus was on the cause of various forms of disability, how to manage and what should be done by the key stake holders to stop discrimination and its effects on the persons affected. The talk shows created awareness among masses and this was reflected by the nature of questions raised and the confessions made by the listeners through phone calls</p>	<p>Home of Hope was appreciated for the initiative and listeners call upon all stake holders to follow suit and always advocate for persons with disabilities and also continue sensitising communities on the unknown facts about disability among community members.</p> <p>More radio talk shows need to be arranged during the coming year.</p>
Inspections and monitoring visits	Line Ministry and department	<p>During the period under review, home of hope was blessed with hosting three Ministers from the Ministry of Gender, Labour and Social Development who were conducting country wide monitoring of approved homes in different intervals and these were Ministers for Children’s affairs (two) and the Minister for Disability and Elderly affairs. During the Visits, the ministers commended the organisation for the services rendered and pledged to advocate for Government interventions and support towards the organisations’ activities and programmes.</p> <p>There were also routine</p>	<p>All the agreed action points should be followed up for proper implementation.</p> <p>During the visits by the ministers, it was acknowledged that Home of Hope’s point of intervention as far as children and disability affairs are concerned were unique and therefore needed a hand from the line ministry.</p> <p>The continued visits by the line supervisors helps keep the organisation on track while implementing</p>

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		quarterly monitoring visits from the District supervisors that is the Principal Community Development Officer and the Senior Probation officer who always guided the organisation in the implementation of the set programmes to suit with the government standards.	programme areas and also helps HoH meet the required minimum standards set by the line ministry.
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### **Prayer points**

- ✓ *Pray for perfect health for all the children and staff at the home.*
- ✓ *Pray for establishment of other relevant/required sections at the health facility*
- ✓ *Pray for more provision in abundance at the home to be able to meet all home needs*
- ✓ *Pray for our country Uganda for perfect peace, stability and successful elections.*
- ✓ *Pray for the establishment of more income generating activities within the home for sustainability*

### **Conclusion**

*To our dear donors, friends and partners, thank you so much for supporting HOME OF HOPE JINJA UGANDA both financially and spiritually, we can't do much without your support, may the almighty God bless you all.*

*To Home of hope implementing staff, all the achievements reached upon are as a result of your effort, dedication and commitment to serve the innocent souls (children under the care of Home of Hope) and thank you for all that you do. For its only God who knows how to reward you best. May you continue with the same spirit in the fourth coming years of your service to Home of Hope Jinja Uganda and May God Bless you abundantly.*

### **Pictorial**

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Figure 1: Community members/patients during a Centre clinic exercise at Home of Hope premises. the activity is held once every month



Figure 2: During the Drop in clinic, parents/care givers get the opportunity to share with other caregivers on the progress and care of the children. They are also able to learn how to conduct therapy without the support of the therapy team while at home.

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Figure 3: Milly the Assistant therapist conducts therapy exercise as other care givers look on during at outreach clinic in Busede, Parents/care givers were overwhelmed by the fact that therapy was necessary to their childrem



Figure 4: During the Outreach clinics patients suffering from Epilepsy and sickle cells.

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Figure 5: Resident children at the home are also given therapy on a daily basis to improve on their capabilities



Figure 6: The medical camp attracted community members from both in and around Jinja DDistrict.

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*Figure 7: During the medical camp, community members were also able to donate blood. the activity was spear headed by Red Cross Uganda*



*Figure 8: Staff members participate in decision making during the End of Year General staff meeting.*

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*Figure 9: Best performing staff members were also recognised during the End of year General Staff meeting. Above, Ms. Namutosi Mariam being recognised as the best performing Care Giver of the year*



*Figure 10: Therapist Darius Giving therapy to Elijah in Butagaya Sub County during a Home visit. Looking on (in Red T-shirt) is Elijah's maternal Grandfather who care takes him at home.*

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One of our own, Mukisa Jessica sat for her “A” levels final examinations and got 12 points which enable her to join University level for a course of her choice. Mukisa is most interested in becoming a lawyer so that she advocates and fights for the rights of People with Disabilities. She suffers from muscular dystrophy



Figure 11: Part of the newly admitted children to the home during the period under review



Figure 12: Home of Hope now produces some of the food staff required in the home hence cutting on the expenses.

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*Figure 13: The dairy project is expected to reduce on the expenditure of the home, improve on the nutrition of the children through up take of milk and also act as a source of income to the home once milk production starts.*



*Figure 14: With the accomplishment of the Health facility and the Guest house, Home of Hope has now gained a new look*

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*Figure 15: Some of the beneficiaries of the wheel chairs distributed in Busede Sub County this year.*



*Figure 16: The Executive Director spear heading the community dialogue held in Busede Sub County.*

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*Home of Hope was blessed to host three ministers from the Ministry of Gender together with the line District and Ministry Officials who all commended the Organisation for the great work done.*



***Compiled and Submitted by:***

***EDITH LUKABWE***

***EXECUTIVE DIRECTOR***

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