



# HOME OF HOPE JINJA UGANDA

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## END OF YEAR ANNUAL PERFORMANCE REPORT FOR 2022 PERFORMANCE AGAINST THE PLANNED ACTIVITIES FOR THE YEAR 2022

30<sup>TH</sup> DECEMBER 2022

PLANNED ACTIVITY	TARGET	ACHIEVEMENT	LESSONS LEARNT, COMMENT, CHALLENGES AND WAY FORWARD
Education	20 children attaining formal education	During the period under review, all the 20 children were able to receive quality education in their respective places of study and these were engaged in different fields of study ranging from primary education to institutional learning. All the 20 children were promoted to the next levels of study having satisfactorily excelled in the end of year examinations. During the year round, the study time also involved visitation days to the different study centres by the parents and this enabled us share with the teachers on the strength and weaknesses of the children and also make response based on the needs of the children as recommended by the teachers.	<p>Due to un avoidable circumstances one of the study centres informed us that they were closing down and therefore advised us to find other study centres to relocated the children and this would affect the performance of the children and since it will require them to adjust to the new environment and culture.</p> <p>We were also able to avail all the necessary equipment recommended by the schools such as holiday packages to enable the children keep on truck with the already leaned skills.</p>

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Outreach clinics	24 clinics	24 outreach clinics were conducted and these were aimed at covering 6 sub counties in the district and during the outreach clinics a total of 111 new cases were registered and these were from different areas of operation including the neighbouring districts of Kamuli, Mayuge and Luuka. All patients attended to give testimony to the positive changes they have received in life as a result of continued uptake of the medication and how Home Of Hope Jinja services have improved access to proper and timely medication which has helped them and their children become more productive in the community and also reduced on the risks of secondary challenges resulting from lack of such services.	<p>There is need to engage government at all levels of administration to ensure that these services are availed and access by all beneficiaries to improve on their health and wellbeing.</p> <p>As the numbers grow, the demand for the services increases which has a financial implication to the organisation's budgets and there is therefore need for management to lobby for extra support to supplement of the budget to meet the increasing demand.</p>
Drop in clinics	52 drop in clinics	43 drop in clinics were conducted and a total of 51 new clients were registered from various parts of the district and the neighbouring places. All these were handled based on the needs of the children. 14 of the children were referred to other partner service providers to receive specialised treatment such as assistive/supportive devices and other corrective surgeries. During the drop in clinics care takers/ parents were also equipped with skills to	<p>Three of the children under this programme passed on after prolonged illness attributed to chronic diseases and other related organ failure related to their nature of disability.</p> <p>As a preventive measure to the Ebola outbreak, all drop in activities were halted from the month of November since some cases had been reported in Jinja district. This was</p>

		<p>conduct therapy while at home with the children.</p> <p>Children under the programme also registered positive improvement in their daily living skills ranging from mobility and other capabilities</p>	<p>meant to safe guard the children living in house and the entire staff given precautions and SOPs set to avoid any possible infections.</p> <p>The ban shall be lifted once the district is declared Ebola free</p>
Centre clinics	12 clinics	<p>Twelve centre clinics were conducted during the period under review. 25 new cases were registered except for the newly registered clients, all the old clients give testimony of grate improvement in their health which has also improved on their levels of productivity and reduced on the social gap that has been attributed to their medical conditions in the society.</p> <p>The clinics acted as a platform for sensitisation, advocacy and mobilisation aimed at promoting Home Of Hope Jinja Uganda objectives.</p>	<p>Some of the clients are now engaged in small scale income generating activities which have helped improve on the house hold income for sustainability and productivity</p> <p>Some of the clients lacked self-esteem due to their health condition and need continuous counselling and guidance.</p> <p>There has been a deficiency in adequate service delivery due to the increasing number of beneficiaries.</p>
Home based/in house therapy	37 children daily	<p>During the period under review all the resident children received therapy on a daily basis and this helped them improve on their mobility and daily living skills. This was done by the therapy team with support from the care takers. Having the care mothers participate during the therapy services has helped the</p>	<p>There is need to improve on the therapy equipment to make them sufficient for use given the increasing number of children in need of therapy.</p> <p>There is need to employ more therapists given the</p>

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		children get ample time in the day and also reduced on the work load of the therapy team	deteriorating health condition of the current therapist.
Radio talk shows	4 talk shows	With support from partners, we were able to conduct 9 radio talk shows throughout the year. Through the talk shows communities were sensitised on the key concerns of children with disabilities ranging from the cause, control measures, management of various conditions, and above all care givers were also given an opportunity to share their personal experiences on the impacts of having a child with disability as an individual and as a family in community and also advocate for equal opportunities and social inclusion of persons with disabilities and sensitise listeners on the various myths surrounding disability.	<p>Some listeners who called in during the talk shows were able to confess on how the talk shows have been key in community education and sensitisation on disability related issues and also act as platform for advocacy and promotion of social inclusion.</p> <p>There is need to follow up on the various issues raised by the callers such as request to expand Home Of Hope Jinja Uganda areas of operation and other programme areas.</p>
Sustainability	Various income generating activities	<p>Government supported the organisation to implement a poultry project aimed at improving the nutrition of the children and also raise income for the organisation through the sale of the excess eggs once the chicks start laying.</p> <p>The dairy project has also supported the organisation in the provision of milk throughout the year under review and some income has been generated from the sale of the other dairy</p>	<p>Funds received could not sustain the chicks to the time of laying eggs hence the organisation had to supplement on the funding till that time.</p> <p>There was an outbreak of a rear dairy disease that affected all the newly born calves and they ended up dying since their immune system was still low. This even resulted to one of the</p>

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		products which has supplemented on the organisations expenditure	mother cows get a miscarriage
General Medication	All children in need of health services	The major conditions that manifested during the period under review included malaria, cough, fever and flue. Some of the infections could easily be passed on from one child to the other upon contact and all these conditions were managed without further short comings and the children were kept in good condition. A total of 176 cases were registered and well managed by the medical team.	<p>The rout causes of the infections need to be managed to avoid further infections and care givers need to be equipped with the necessary knowledge on how to manage the illnesses.</p> <p>The medical team always makes a roundup of all the children to assess their conditions on a daily basis</p>
Medical reviews	9 children per month	A total of 67 review cases were registered and these were done on children with Spine bifida, Hydrocephalus, HIV/AIDS and other illnesses such as the corrective surgeries made on the children and all these are in stable condition while others are greatly responding to the treatment given with the support of the medical team to the care givers all precautions are being observed	<p>The reviews are done continuously based on the recommendations from the medical staff and all review dates are to be observed.</p> <p>Having followed the rightful recommendations from the medical staff, the children are responding positively to the treatment they receive</p>
Referrals	None	13 cases that were could not be handled by Derrick and Emily due to their complex conditions were referred for further management and these included children who required specialised treatment such as surgeries and blood transfusion among others. 11 of the referred	2 of the children never made it to recovery due to the complexity of their conditions and these included Charles Musasizi and Patrick. For long there conditions kept on worsening and had reached a point of no

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		<p>children were able to recover successfully and are now living healthy lives and some of them are continuously going for review as recommended by the medical personnel</p> <p>There have also been referrals made on the cases registered in the community during the various community programmes case and these are always cases beyond the management of Home Of Hope Jinja.</p>	<p>return as per the doctors due to severe effects of their disabilities.</p> <p>Home Of Hope Jinja always makes a follow up with the cases referred to ensure that they have been served.</p>
Equipping the health facility	All the necessary health equipment	During the time under review we were able to procure one ultra sound machine and we were also able to hire staff to operate the machine and this has increased the number of patients registered on a daily basis and the quality of services provided at the facility	More equipment required to elevate the medical facilities capacity to handle complex illnesses that may require referrals hence reducing on the costs incurred on medical bills and also extending services nearer to the community.
Procurement of Assistive devices	One out purchased	Children received a consignment of assorted assistive devices that supported them to develop their mobility and daily living skills hence enhancing their potential for self-reliance. The devises included wheelchairs, walkers, toilet seats and other therapy equipment.	Some of the assistive devises need repairs to increase on access to the devises given the number of children in need of them and also increase on the time spent by each child while benefiting from the device.
Stake holders meetings	4 stake holders meetings (one per sub county)	During the period under review, two stake holders meetings were conducted and these involved representatives of disability friendly movements	Clustering of sub counties helped save time and meet above the intended targets hence increasing coverage.

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		such as sub county/government officials and representatives of community based organisations of persons with disability. There were three sub counties involved in each meeting hence covering six sub counties contrary to the planned four sub counties.	The meetings helped create a link between the key stake holders in promoting disability friendly service delivery in the community.
Participating in national celebrations	Day of the African Child & the International Day for the Disabled Persons	<p>We actively participated in the planning process of the Day of the African child and also got involved in the District celebrations to mark this day within Jinja district.</p> <p>Organisations working with child related matters came together to celebrate the day in collaboration with the local government and Home Of Hope Jinja was recognised as the most outstanding organisation meeting the needs of children with multiple disabilities given the fact that other stake holders pay less attention to these children.</p>	<p>Participation in celebrations and meetings has helped strengthen the referral system and partnership with other service providers in the region.</p> <p>Knowledge and experience has also been shared during these celebrations.</p> <p>More funds need to be allocated for participation at national level.</p>
Admission of new children	None	Seven children were referred for alternative care to Home Of Hope Jinja having been abandoned in various parts of the country and these were referred by Police, Probation Office and the Ministry of Gender. Some of the children were in need of immediate medication due to malnutrition and other infections and these were handled by the medical	This year round there has been no case reported within Jinja district and this is attributed to the sensitisation campaigns done by Home Of Hope Jinja which has created awareness and reduced on the stigma among care givers and parents of children with multiple disabilities.

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		<p>team and are currently in good and healthy condition.</p> <p>The children admitted and their conditions were Jayson (C.P and autism), Shadrach (C.P leading to severe contractures) Jovita (C.P and slight mental disorder) Emma (C.P), Miracle (C.P), Teo Daniel (C.P) and Kabaseke Haruna (Hydrocephalus)</p> <p><b>Please note that C.P stands for Cerebral Palsy</b></p>	<p>After conducting social inquiries, we were able to tress for Miracle's biological parents and having taken them through sessions of counselling and guidance they were able to overcome the stigma and psychological tremor and they now happily live together with miracle with her siblings.</p>
Compliance with government policies	Submission of all necessary reports and documentation	<p>As a requirement by law we were able to submit all the necessary reports and information to the respective line departments and ministries and these range from quarterly, bi-annual and annual reports to meet the standard operating procedures and expectations.</p>	<p>Staff have been assigned different responsibilities to ensure that all the necessary information is submitted timely.</p>
Community dialogues	6 sub counties	<p>Having got lessons from the stake holder's meeting we managed to conduct three community dialogues and each of them consisted of three sub county representatives and these comprised of members of the local councils, opinion leaders, representatives of persons with disabilities, care givers of persons with disabilities and technical staff at sub county level and these were engaged to assess the impact of the existing policies protecting persons with disabilities, the role of all stake holders in</p>	<p>There has been little effort put in by government in promoting and protecting the disability friendly policies in the areas visited and there is therefore need to sensitise the masses to this effect.</p> <p>There is high expectation of the community especially persons with disabilities and their care givers from the service providers which has affected the level of participation especially if</p>

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		promoting the interest of persons with disabilities and the way forward/how the situation can be improved. knowledge local council	there is no remuneration for their efforts and there is therefore need to urge people to embrace voluntarism.
Home visits	156 home visits	Care givers and children with multiple disabilities were supported socially, morally and psychologically through home visits and a total of 125 home visits were conducted. House hold and community members are able to transform the knowledge given into practical which has helped transform the lives and wellbeing of the children with multiple disabilities. As a result there has also been evident changes in the lives of the children under their care ranging from the health standards to the social wellbeing.	<p>Towards the end of the year there was an outbreak of Ebola in the district hence forcing us to halt all activities that would predispose the children and entire staff to infection.</p> <p>Follow up is to be made on phone in case the outbreak persists and there is need to establish coordinators at all levels of administration for easy follow up.</p>
Distribution of assistive devices	None	One beneficiary of the drop in clinic by the names of Kabugo Rahesh was issued with a wheel chair to support him while at home and this simplified the his transportation to the drop in clinic hence increasing his attendance/participation during the clinic days. According to the care giver the wheel chair helped improve on Rahesh's capabilities ranging from the sitting position to access to other services since he could now be able to reach out to other children with ease.	<p>There are more children in the community in need of various assistive devices but have no access to them hence limiting their performance and participation in other areas of interest there is therefore need to lobby for provision of assistive devices to suit their needs.</p> <p>Even the resident children require more assistive devises since some of them have outgrown the available ones.</p>

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Counselling and guidance	At all programmes	During the various programmes such as outreaches, drop in clinics, centre clinics and home visits beneficiaries express various issues that require counselling and guidance and these may be the children themselves or the care givers and the social team has always ensured that they are attended to and harmonised and these range from social, economic, moral or psychological. The service is also given to the resident children and the care givers in the home.	<p>This has helped reduced on the after effects of the psychological tremor that the beneficiaries are most likely to face if not given the service.</p> <p>It has also helped shape the wellbeing of the beneficiaries in the society.</p> <p>Counselling has helped in team building within the organisation and improved service delivery among the employees.</p>
Daily/routine medication	37 children	Two more resident children where recommended to start daily medication bringing the number to 39 children and all these have been able to receive daily medication which has kept them in good health condition and also surpassed the attacks they undergo resulting from lack of medication. As a result of continued and proper uptake of medication the number of serious attacks reported was minimised.	The medical team ensures that there a routine daily check s on the care givers and the children to avoid any short comings such as under/over dosage and non-compliance to the medical guidelines and also assess the children's response to the medication.
Home tracing/social inquiries	2 children	Having got scanty information regarding the children under our care and those referred to the organisation from other partners we were able to trace and conduct social inquiries on the family back grounds of the children and we reached out to Seven families of the following children; Teo Daniel, Jovita,	In all households visited except from that of Miracle, we were un able to find the traces of the biological parents since most of the children had either been abandoned on the streets, hospital, other facilities or helpless relatives or some of the

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		Namataka Charity, Wagabaza, Shadrack, Muwanguzi Emma and Senunji Miracle. As a result we were able to reunify Miracle with the parents who had for long separated but decided to get back together having visited Home Of Hope Jinja and accepted raise their child together.	information about the biological parents had been confined for fear of facing the long arm of the law. The administration is to strengthen the link between the children with the identified relatives in preparation for reunification in the future.
Capacity building	Staff training	Both administrative and support staff including care givers were trained in various capacities that ranged from Management and leadership, Organisation management and safe guiding. Staff were also trained in positioning which helped highlight them on how best to handle the children in various conditions and also made them realise the common mistakes they do while handling children	As a result of the trainings some of the programmes have been adjusted in the bid to implement some of the skills attained in the trainings for the good of the children.
Security	Safety of all children, staff and property.	In the bid to improve on safety and also protect the interests/investments of the organisation a Perimeter wall was set around the organisation hence deterring any foreign interference and possible threats.	The wall has helped reduce risks to the children and also trespassing into the organisation property. This has also helped make clear the boundaries of the organisation premises
Exchange visit	Two exchange visits	Administrative staff members were taken for an exchange visit to Mukisa Foundation an organisation that supports children with multiple disabilities in Kampala and staff were able to share experiences ranging from administration,	There were key good practices that have not been on going in Home Of Hope Jinja that were recommended for integration into our programmes.

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		way of work, programming, challenges faced among others and this helped Home of Hope Jinja Uganda utilise the lessons learnt and integrate them in programming.	Such visits also help build the capacity of staff and improve programme designs.
Installation of alternative power source	Solar system	For the desire to have constant power supply to avoid misfortunes during any health operations and to cut costs incurred on the high electricity bills, a solar power system was installed at Derrick and Emily memorial medical centre	This has reduced the risk of failures in service delivery due to power shortages and also costs incurred on electric bills. Constant power supply has helped build confidence in the medical facility among clients
Medical camp	1 camp	Having established new services in the health facility and expansion in the staffing to meet the needs and demands of the community there was need to publicise the available services to the community and this was done through a health camp for the community members in and around the sub county Mafubira sub county. All patients with different complications were attended to and those whose conditions were not manageable were referred to other places for further management	Some of the medication required by the patients was not readily available hence they were advised to buy it from other services providers.  The camp increased on the visibility of the health facility and its services hence increasing the demand for services by the community.

### Other challenges

Challenges	Recommendations
10 clients who were part of the various community programmes were reported dead throughout the year and these included 8 children and 2 adults. However, these died from other complications that had not been detected and therefore were not managed appropriately by their care takers.	Care takers always advised to seek immediate medical attention once they realise unfamiliar situations among persons under their care.  Routine medical check-up is also key rather than waiting for conditions to worsen

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Inadequate funds to implement all the planned activities	Need to lobby for more funders and increment in funding by the available funders
High inflation rates that are affecting the budgets due to fluctuating prices	Prioritising the needs of the organisation as we lobby for increment in funding to suit the inflation rate today

### **Prayer points**

- ✓ *Pray for perfect health for all the children and staff at the home.*
- ✓ *Pray for expansion of the medical facility*
- ✓ *Pray for the establishment of learning institute for Physio therapists and Occupational therapists*
- ✓ *Pray for establishment of a special needs school*
- ✓ *Pray for the construction of a bore hole as an alternative for the high water bills*
- ✓ *Pray for the renovation of the main building*
- ✓ *Pray for acquisition of land for farming*
- ✓ *Pray for acquisition of specialised therapy equipment*
- ✓ *Pray for the furnishing of the guest wing*
- ✓ *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**

*To our dear donors, friends and partners, thank you so much for supporting HOME OF HOPE JINJA UGANDA both financially and spiritually, through your support we were able to reach out to the most vulnerable and neglected children and we hope that we reach out to more than what has been attained 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. At Home of Hope we believe that serving these children is a calling from God and all our efforts towards this shall be abundantly rewarded by God. May you continue with this spirit and attitude in the fourth coming years of service and God Bless you.*

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**Pictorial**



*Figure 1: At Home of Hope we believe that every child deserves to attain a bright future through education regardless of their ability. Lydia and Teddy were elevated to the next level of their learning just like the rest of the school going children at home of hope.*



*Figure 2: Home of hope van drops and picks the school going children when time for school comes.*

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*Figure 3: During the Outreach clinics, care givers have the opportunity to discuss pertinent issues affecting the programme beneficiaries and also share experiences. Such sessions are a source of knowledge to the community.*



*Figure 4: The outreach clinics help extend services nearer to the community especially the hard to reach areas and also the neighbouring districts.*

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*Figure 5: Therapy services are also provided during the outreach clinics and care givers are equipped with skills to apply therapy without the support of the therapists.*



*Figure 6: Home of hope is ground for learning for institutional students pursuing disability related professions. Above: Students from Jinja School of Nursing (neurological department) on a study tour at home of hope during the drop in clinic day where they were able to interact with the care givers of children with disabilities.*

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*Figure 7: During the drop in clinics care givers have the opportunity to share personal experience and also pave way forward for the challenges they face out in the community to each other.*



*Figure 8: Centre clinics target communities that are able to access home of hope premises. A Lecturer from Jinja School of Nursing (Neurological department) responds to some of the concerns raised by the clients' during the centre clinic*

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*Figure 9: Loving what they do is what has created much affection to the children and devotion to work keeps us moving. The care givers feeding the children during lunch time at Home of Hope*



*Figure 10: The dairy project has not only supported in improving the nutrition of the children but also generated income to the organisation from the sale of the excess dairy products*

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*Figure 11: By the end of January 2023, we expect to rip from the poultry project granted to the organisation by the government under the disability fund. These (eggs) shall also mainly support the nutrition of the children and the surplus shall be sold off to generate income for the organisation hence to a lower extent creating financial stability*



*Figure 12: Having the children attend their set review dates has helped them stay in a steady and stable condition coupled with the care givers following the right instructions. Bahati James and Beatrice Nabaigwa reporting for review at St. James Orthopaedic centre*

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*Figure 13: Home visits help Home of hope staff educate the care givers on how to utilise their surrounding environment to suit the needs of the children. Rahesh benefited from the wheelchair to improve on his mobility while at home.*



*Figure 14: Through the drop in clinics Echakara Pavin was able to develop his capabilities and was enrolled to a special needs school where he performed excellently. The Social worker Stephen going through his report during a home visit as his siblings and his mother look on.*

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*Figure 15: Having gone through a series of counselling from Home Of Hope Jinja Uganda team, Miracle's parents were able to accept back miracle and they picked her from home of hope. The family now stays happily together with her siblings.*



*Figure 16: The health camp acts as a mobilisation tool for the health facility and also Home of Hope Jinja Uganda services. During the year under review one health camp was conducted.*

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*Figure 17: Across section of some of the newly admitted children into Home of Hope Jinja Uganda during the year 2022. Left to right is Jovita, Jayson, Shadrack, Daniel and Emma. These were all referred from various parts of the country for alternative care.*

***Compiled and Submitted by:***

***EDITH LUKABWE***

***EXECUTIVE DIRECTOR***

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