



# HOME OF HOPE JINJA UGANDA

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**MONTHLY PERFORMANCE REPORT FOR FEBRUARY 2023**  
**PERFORMANCE AGAINST THE PLANNED ACTIVITIES FOR THE MONTH OF FEBRUARY 2023**  
**5<sup>TH</sup> MARCH 2023**

PLANNED ACTIVITY	TARGET	ACHIEVEMENT	LESSONS LEARNT, COMMENT, CHALLENGES AND WAY FORWARD
Outreach clinics	2 outreach clinics	The outreach clinics have improved access to medical services for the epileptic and sickle cell patients especially those with disabilities since these services are hardly available in the surrounding government facilities and yet they are highly expensive in the open market. During the clinics, clients have also been able to receive services such as counselling, guidance and therapy for children in need of it. The community also gets sensitised and educated on the various issues affecting them in relation to children with disabilities and they have their concerns on Home Of Hope Jinja programme areas responded too.	Some of the outreach beneficiaries come from the neighbouring districts of Luuka, Kamuli, Mayuge, Iganga and Namutumba and request that such services be extended to their district to reduce on their transportation costs and also reach out to a larger part of the community but Home Of Hope Jinja is limited by funding to reach all districts. This therefore calls for more lobbying for additional funds.
Centre clinics	1 centre clinic	One centre clinic was conducted and 2 new clients were registered. During the centre	Changes in the weather conditions are most likely to affect the

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		<p>clinic, patients were able to share personal experience and how they manage the various conditions while at home. Through the clinic clients were also able to share development ideas and also share business plans based on the nature of their illness.</p>	<p>attendance which may affect the response of the children to the medication and also result into a relapse.</p>
Drop in clinics	4 clinics	<p>4 drop in clinics were conducted and a total of 58 children were attended to during the period under review and one of new case was registered based on the previous clinics, this was an indicator of increment in attendance by the old clients and all these shared positive experience and improvement in the abilities of the children resulting from regular attendance of the activity. This has also attracted clients from the neighbouring districts.</p> <p>As a result of good client relations, the care givers are now able to discuss various issues and challenges they come across and are also inquisitive on the conditions their children are suffering from.</p>	<p>There is need to document evidence of change and improvement among children who have been on the programme for a long time as a way of tracking progress.</p> <p>Those from distant areas may find it hard to commute on a weekly basis due to difficulties in transport costs hence affecting the children's capability to improve. This therefore calls for equipping the care givers with the necessary skills to perform the role while at home.</p>
Medical reviews	3 children	<p>All the four children were taken for review and these included one who underwent corrective surgery while lives positively and the other two are hydrocephalus cases. According to the reviews all children were advancing</p>	<p>All recommendations made by the specialists are to be adhered to and the next review dates are to be observed.</p>

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		positively based on the treatment they are undergoing and staff were reminded to observe the next review dates to avoid any shortcomings and also observe any changes that appear to be unusual in case there are any.	
Referrals	none	As a result of proper management by the medical team, care givers plus the entire line staff members, all conditions were handled appropriately and there was no child that was referred for further management. Currently all the children are stable health	Once detected and reported early, conditions can be managed with no need for referral services. All staff therefore need to be vigilant on any unfamiliar changes that occur to the children for appropriate management.
Education	20 children	As per the government schedules, all the 20 children resumed/reported for school in their various learning centres and these were supported with all the necessary scholastic materials . in the bid to keep them posted and enhance their skills, the children were engaged in other co-curricular activities ranging from hygiene, sanitation, games and other house work aimed at building their capacity for sustainability and self-reliance	Some of the activities done during holidays are team building and help prepare the children for independent living.  The set dates for visitation need to be observed to enable us interact with the teachers and learners for possible areas of improvement and also ascertain their performance.
In house therapy	42 children	With the new admissions registered, a total of 45 resident children received therapy services during the month under review and these have been displaying new capabilities such	The therapy team recommends that special sitting sits be provided for the young children as part of the therapy devises they require and

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		<p>as sitting independently self-feeding among others.</p> <p>The therapy team resolved that even the adult children be included in the therapy programme to minimise on the secondary disabilities they are most likely to develop.</p>	<p>these are to be procured. The care givers are also engaged in participatory therapy as a way of developing there therapy techniques.</p> <p>Some of the children demand for therapy services even</p>
Routine medication	39 children	<p>With the admission of new children one of whom (Gifford Betty) was enrolled on the daily medication programme bringing the number to 40 children receiving daily medication and these have not had any attack during the month under review neither have they developed any complications relating to their conditions. The conditions being controlled/managed include HIV/AIDS and Epilepsy among others.</p>	<p>Administrative staff conducts daily round checks on the children and all related documentation to ensure that the rightful procedures are followed to avoid any short comings.</p>
Therapy outreaches	4 outreaches	<p>One therapy outreach activity was conducted in Buwenge Town Council and the activity was put on a halt due to low participation of the beneficiaries and this is attributed to the existence of another organisation in the area providing similar services but with other incentives to the beneficiaries such as health insurance, transport allowance, and financial support among others.</p>	<p>The activity is to be shifted to another sub county to avoid duplication of duties on the same beneficiaries</p> <p>Mobilisation of the new community has already been done and those in Buwenge Town Council have been demobilised</p>
Admission of new	None	Two new children were referred	The organisation that

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children		from Sunrise children's home in Buikwe district through the Probation office. The children had been abandoned by their biological parents on the streets and these were Ajambo Franklin with Cerebral palsy 8 years of age and Gifford Betty with autism also 8 years. Currently the children have been assessed and put on the various rehabilitation programmes of the home. However, little information about the background of the children was provided by the referring organisation to allow Home Of Hope Jinja make social inquiries for possible reunification with their families.	had taken care of them does not run any disability related programme and therefore had no expertise in managing them hence referring the two to home of hope for further management.  Once all background checks on the origin of the children have been done the social team shall go ahead to do social inquiries on their families.
Routine activities	Assorted	During the period under review the children were also engaged in daily living and team building activities such as community walks, playing games both indoor and outdoor activities. They were also engaged in activities that enhance their daily living skills such as washing their own clothing, utensils compound clearing among others.	The activities did not only develop their capabilities but also helped in team building and unity among the children.  With the support of the volunteers, many children were involved in the community walks which brings the children closer to the community members.

### **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.*
- *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*

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- *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**

*Home Of Hope Jinja Uganda through the dedicated staff strives hard to provide a good and healthy environment to children with multiple disabilities who happen to be the most vulnerable species of mankind and grate thanks and gratitude be given to the team. However, this would not be made possible without the support and love of all those who sacrifice their funds and time to solicit for the wellbeing of these children. **MAY GOD BLESS YOU ALL.***

### **Pictorial**



*Figure 1: During the outreach programmes, both clients and care givers have the chance to interact with fellow clients plus the home of hope team and have their concerns responded to.*

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*Figure 2: Counselling services are also part of the packages of the outreach programmes. Sharifa a student intern offers counselling to one of the beneficiaries of the outreach programme in Buwenge town council*



*Figure 3: A cross section of the beneficiaries of the outreach clinic in Buwenge Town Council. Explaining to the medical team how one responds to the medication helps inform of any possible adjustments to the treatment schedule for better health.*

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*Figure 4: During the Drop in Clinics, care givers are equipped with skills that they apply while at home with the children. Above, Hafusa the Therapist monitors the progress of the care givers as they participate in therapy techniques during the drop in clinic. Care givers spend more time with the children and therefore need to be equipped with such techniques for the good of the children*



*Figure 5: The school administration checks through the bags to ensure that all requirements are provided to the children on the reporting day to school. Teddy and Lydia reporting to school this month.*

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*Figure 6: Having a community walk helps refresh the minds of the children and also reduce the gap between the children with disabilities and other normal children and community members. With the support of volunteers the children are taken for a walk in the community where they interact with other community members.*



*Figure 7: Ajambo Franklin (sited on a wheel chair) and Gifford Betty were the new children registered this month at Home of Hope.*

**Submitted by:**

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EXECUTIVE DIRECTOR

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