



Ingwavuma Orphan Care

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QUARTERLY REPORT JANUARY 2006- MARCH 2006

1 Changes in the last quarter.

School Support Programme: has been reviewed and one coordinator appointed to concentrate in 5 of the 20 schools where the programme has been running before. The idea has been to provide comprehensive support to orphans in schools. The programme runs for six months and moves to other five schools. Educators from the other 15 schools have been trained on the life skills curriculum previously continue to run with their respective schools and that we provide technical support they may need.

Miss B. Walters from our sister organization, Zisize, has been assisting with the training as she is well qualified as an educator trainer. Within the five schools the programme will be extended to the orphan's households and other vulnerable children within the school.

- Workshops for SGB to sensitize them will be conducted.
- Parenting workshops on carers and youth mothers will be also conducted.
- Food gardens within the schools to be established.

Outreach Work: A paralegal officer has been appointed (Mr C. Sikhosana). Relationship with other organizations and govt. departments has been strengthened through a forum set among these bodies where meetings will be held every six weeks. These involve Departments of Welfare, Home Affairs, Police, Health and Education and other NGO's such as Zisize Trust, Epilepsy SA.

Food parcels duration has been increased from four to six months as it takes longer for them get grants.

Building of a **Home Based Care training centre** to train home based care for other organizations that run home based care in the area. A comprehensive data base system has been developed by our treasurer (Mr. Paul Dean). This has improved our filing system and our statistics as carers and volunteers were becoming used to filling forms and submitting them.

Food Gardens has been promoted and establish relationship with local spar supermarket that provide food parcels and are willing to buy vegetables from our food gardens. Water supply has been hampered by stealing of water pump from one food garden from the water system.

1.2 Challenges

The SA Department of Health is starting to implement the new regulations regarding dispensing and prescribing of drugs. These could have serious detrimental consequences for our patients. We are trying to negotiate and to meet regulations if possible to ensure we are able to keep dispensing drugs.

EU is paying 5 smaller NGOs in our area to provide Home Based Care. None of caregivers have received any formal training but receive stipends and are not evenly spread over the district, with very high concentrations in some areas. This is causing discontent for some of our volunteers who have had 56 days training and have been working for 3 years without pay. We also have to sort the coverage of areas to avoid duplication of work.

2. Progress

School Support

Educators have been trained to run life skills in their respective schools and provide support to children.

- Coordinator runs weekly meetings in five schools with orphans and other vulnerable children and provides counseling and establishes their needs.
- Distributed school uniform and nutritional drink to 20 schools that are in the programme.
- Provide fruits per visit per day to 20 children in each of the 5 schools.
- Identified three schools with reasonable good water supply to start food gardens within the schools.
- Two trainers recruited through Zisize to assist in schools to set up food gardens together with learners.
- 3 workshops with educators and schools governing body members in three schools.

Paralegal and Social Security

- Three families have been removed from usual food parcel since they are receiving monthly sponsor for foods and other basic needs.
- 8 families' households have been removed from getting food parcel and other 8 added

Children self esteem is being restored.

Absenteeism reduced and children take keen interest in their studies.

400 children have school uniform to wear at school.

100 children receive nutritional food once a week.

Eight households receive food and grants to reduce malnutrition.

<p>because they receive foster care grants.</p> <ul style="list-style-type: none"> • Twenty applications for birth certificates, five ID's and one death have been processed. • 14 applications for foster care processed. • 64 children were assisted for school exemption in various schools in the area. • 4 awareness workshops have been conducted with families receiving food parcels and caregiver to orphans. • Three support groups for PWA's are running on a monthly basis in three different areas. 	
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Home Based Care

The arrival of a retired nurse from the UK, has led to further improvements in our work. Teams in the field are visited more frequently, the dispensary is also better organized and we developing policies and procedures in preparation for our assessment by hospice. We also deployed 2 new carers who are being trained and funded by AIDS Foundation. However their training is different from the training others received and thus lacking standardization of the level of care provided.

Statistics:

	January	February	March
Number of patients visited	789	895	1045
% HIV positive	84	80	76
% on TB treatment	14	13	11
% Bed ridden	10	09	08
Cost per patient	R87	R96	R94

In February, numbers of Level 2 patients (needing some medical/nursing care in addition to psychosocial support) were 214. 23 of those patients were receiving level 2 care (at least one visit per week and seen once a month by a nurse or a doctor).
 Number of level 3 patients (bed bound needing significant care) were 79.

2.2 What helped the Project to make good progress?

- The project has a full time social worker employed.
- Good working relationship with other organizations and government offices.
- Limit our focus to a limited number of households and schools per coordinator in schools.
- Having more human resource in terms of new staff and volunteers from abroad(UK)
- Workshops with concerned households and their co operation in terms of requirement for them to access services for the children.
- More staff have got drivers licenses.
- 2 new vehicles donated.

2.3 Problems holding the Project back from achieving the results

- The social worker is currently on maternity leave and therefore no further foster grants are processed.
- Lack of water supply for food gardens in some schools.
- Orphans and vulnerable children falling pregnant and dropping out of school.
- Child headed households not meeting requirement to access documents.
- Lack of reliable information to assist orphans during assessment.
- Accessibility of households (lack of transport and road access)

2.4 Planned activities not fully completed in this report

- Water supply system not completed for food gardens to supply vegetables yet.
- Training centre not completed yet and trainer still undergoing assessment for accreditation.
- Fittings for water piping for community food garden.

3. Project Beneficiaries

- Workshops have been run with school governing bodies, educators and parents in schools who have benefited in terms of acquiring skills in dealing with orphans.
- Orphans are also empowered through counseling and life skills development during meetings with the coordinator. Nutrition is also improved.
- School attendance is improved and school benefiting in terms of improving the culture of learning.
- Partners are benefiting in terms of sharing the resources that are scarce.
- Guardians to orphans are also benefiting through strengthening of households.
- 400 children are part of the school support and others that are siblings to these.
- 64 children were assisted with registration and school fees exemption at schools.
- 43 applications for certificates and ID have been processed.
- PWA's have benefited from the support group that is run once a month.

4. Overall assessment of the project

The project needs to improve management of cases and referrals which is being challenged by availability of access to our scattered location of our clients and follow up on referrals. Case managed families are showing continuity in number of households benefiting in terms of documentation and grants. Nevertheless there is still a need to improve in terms of education on business start up, preparing wills and death benefits.

5. Priorities for the next quarter

Outreach and social security

- Work with the Dept. of Social Welfare in setting up foster parenting within the communities that will be monitored by social workers.
- Increase the no. of foster and documents processed and received by households.
- Set up food gardens at schools to be run by orphans and vulnerable children at schools.
- Workshops with carers on use of grants and financial management.
- Parenting workshops to youth and young parents of OVC households.
- Further run workshops with school governing bodies.

Home Based Care

- New training centre to finish by June to train more care givers and employ them as funds allow, reaching underserved areas.
- Another volunteer nurse is arriving in May.
- Recruit volunteers from the community to support orphans in their vicinity and work closely with home based carers.
- Nursing sister to train in palliative care and write dispensing course exam.
- Continue to improve relationship with hospital and clinics and develop better referral pathways in both directions.
- Employ a data quality officer and start collecting qualitative information on care by the project.