



Half Year Narrative and Financial Report



For
Oak Foundation

Time Period Covered September 1, 2022, to February 28, 2023

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Introduction and Background

St Christopher's Children with Disability (SCCD) brings together caregivers of children with disability, the children themselves, government institutions, professional health workers, community-based workers, volunteers, community, and other stakeholders to provide much needed community-based rehabilitation services for children in Hatcliffe. These stakeholders work together to mobilize all resource available to improve access to quality community-based rehabilitation services.

Zimbabwe has experienced a deteriorating economic and social environment for the past decade. Since the outbreak of the COVID-19 in 2020 the situation has become exacerbated . As a result, social protection programmes such as, the National Action Plan (NAP) for orphans and Other Vulnerable Children (OVC) 1 and 2 were also greatly affected by limited fiscal space and liquidity crunch in the global economic recession.

Many children with disability in Hatcliffe faced serious challenges to access health and rehabilitation services from hospitals, hence the intervention by SCCD through the integrated community based rehabilitation services project which not only brings health and rehabilitation services to the children in Hatcliffe, but removes treatment adherence barriers such as travel distance, travel costs, inconvenience and stress experienced by caregivers.



Vision, Mission, Goal and Objectives

The project aims for the provision of early Intervention and rehabilitation services, nutritional support, education support, medical support and life skills training for children with disability among other support services. SCCD pursues a comprehensive approach to rehabilitation and care of children with disability through strengthening families in their child-care role while providing the intervention services.

Vision

- To be the leading Rehabilitation and Day Care Centre in the service of every child with disability and their families in Harare

Mission

- To provide holistic rehabilitation services for every child in Hatcliffe for them to be able to participate in social, creative, and recreational activities

Goal

- Empowering children with disability to become self-reliant and to develop to their full potential

Objectives

- To provide early intervention, rehabilitation and psychosocial services
- To enable children with disability to participate in social, creative and recreational activities
- To capacitate children with disability and their families to cope with associated stigma and discrimination.

This narrative report covers the period between September 2022 and February 2023 of the Oak Foundation funded St Christopher's Children with Disability integrated community-based rehabilitation services project for children with disability in Hatcliffe. It is structured according to the areas of intervention outlined in the project. It consists of three parts. The first part includes the introduction and synthesis of principal results attained over the past six months. The second part presents in detail the project strategies and approaches, activities implemented, and results obtained. The third part presents key challenges, and key activities planned for the upcoming 6 months. See Performance Monitoring Plan (Annex i), and 2023 Work plan (Annex ii). Success Stories and Testimonials can be found on Annex iii and Annex iv represents the Financial Report

SUMMARY OF PRINCIPAL ACTIVITIES AND RESULTS

- **Project's start up**

- Oak Foundation Project visit and discussions in June/July
- Project proposal submitted to Oak Foundation in August
- Signed Memorandum of Agreement with Oak Foundation in September
- First deposit of funds made on 4 October

- **Project Management**

Key documents:

- Performance Monitoring Plan submitted to Oak Foundation (Annex i)
- Work Plan submitted to Oak Foundation (Annex ii)
- Financial Report

Result 1: Built institutional capacity of SCCD

- Built capacity of Director and Professional health workers to implement and manage rehabilitation services through provision of compensation and transport
- Instituted capacity to maintain proper accounts and administration through hired Administrator/Book keeper
- Instituted capacity to develop a Performance Monitoring Plan for data collection and analyses through hired Project Coordinator
- Built capacity of 2 community-based rehabilitation workers to conduct home visits and follow-up through additional financial support
- Trained 3 community-based workers in Early Intervention strategies

Result 2: Improved Access to Early Intervention and Rehabilitation Services

- 120 children with disability benefit from rehabilitation services provided by a team of professional health team comprises of 1 Paediatrician, 2 Physiotherapists, 2 Occupational Therapists and 2 Rehabilitation technicians and 1 Speech Therapist
- Community-based Rehabilitation workers made 15 home visits and 7 follow-up visits during this period

Result 3: Improved Access to Psychosocial Support and Participation

- Facilitated a Parental Support Group Meeting which was attended by 24 caregivers and their children. 8 professional resource persons were on hand to listen, encourage discussion, share and answer questions
- Organised recreational therapy for 4 caregivers and 1 community leader to attend a film premier show about self-agency and disability.
- Organised End of Year Celebration of Caregiver Resilience, which was attended by 24 caregivers and their children, 8 professional health workers, 3 community-based rehabilitation workers, 2 community leaders and 3 St Christopher's staff members
- Facilitated 3 Radio interviews on Radio 263 and Voice of America, 1 podcast and 2 videos where caregivers were interviewed and gave testimonies
- Promoted participation in the recent Polio Vaccination Campaign by raising awareness

threat posed by Polio in October and December

Result 4: Improved Access to other Support Services

- Served 24 nutritionally balanced meals to caregivers and their children after each weekly therapy session during this period.
- Placed 3 children aged 7, 9 and 15 in school for the first time.
- Opened an account with a local pharmacy where caregivers can access medicine for their children.
- Provided access to a paediatrician and other specialist referral services

Our Work in Pictures



PROJECT START UP

Project Launch

September 1, 2022 marked the beginning of the Rehabilitation Services project generously funded by Oak Foundation. This project is implemented by St Christopher's Children with Disability with strategic institutional partners, Ministry of Health and Child Care, Ministry of Primary and Secondary Education, Templer Foundation USA, Physionet UK and other stakeholders. This project is a collaborative effort to provide early intervention and rehabilitation services as well as psychosocial support for children with disability and their families in Hatcliffe.

As this project is an integral part of Oak Foundation plans to provide and strengthen access to health services to the most vulnerable segment of society, St Christopher's Children with Disability would like to appreciate the role of Oak Foundation in providing the resources and building our capacity to develop our role in the community-based health delivery system.

Institutional Support

Oak Foundation has been a critical enabler for St Christopher's Children with Disability project activities, especially with institutional support which covers staff salaries, consultancy and other contracted services, travel and conferences, vehicle hire and transport for key health professionals. Through the support of Oak Foundation, SCCD has hired and successfully onboarded Part time Project Coordinator and Administrator/ Book keeper as well as supported health professionals, the director and community based rehabilitation worker allowances. It should be noted that the positions of Part Time Coordinator was advertised through online forums. Reference checks were conducted in line with our Child Safeguarding Policy. The Administrator/Bookkeeper has volunteered her services for the past year. It was proper that we offer her the role of Administrator/Bookkeeper when the opportunity arose.

NAME	Position
Ruvimbo Tapera	Part Time Administrator/ Bookkeeper
Admire Munava	Part Time Project Coordinator

The table above presents the names of the personnel hired:

r

Rehabilitation Services

A total of 18 Therapy sessions were carried out during the reporting period with an average of 3 sessions every month. Cerebral Palsy is the most common condition that affects the children. SCCD strategic institutional partner, Ministry of Health and Child Care (MOHCC) provides the rehabilitation services, which include physiotherapy, occupational therapy, speech and language therapy and rehabilitation technicians. MOHCC avails a minimum of 6 health professionals every week with an average of 12 children not only receiving rehabilitation treatments but also referrals for medical,



orthotic and prosthetic services. A total of 135 children were assisted over the period under review.

It is important to note that the services of a speech and language therapist have not been consistently available from the start of the project, but this situation changed from January, this year, thanks to Ministry of Health and Child Care. This is a positive development for St Christopher's Children with Disability, since most of the children require speech and language therapy.

Early Intervention Services

Early Intervention aims to intervene in the early stages of a problem. During the last 6 months our community-based rehabilitation workers have made about 33 home visits to 10 children identified as most needy. Using the Simple Guide to Early Intervention, caregivers are supported to provide the best help and support in the home to their children, facilitating the learning of skills and enabling interaction with others and the environment. Early Intervention is intended to empower and motivate caregivers so that they can make a difference to their own lives as well as their child. We have successfully established a continuum of care and integration which is defined by high degree of collaboration and communication between community-based rehabilitation workers and health professionals. A total of 25 reports are written which describe the developmental goals to achieve a daily routine and the progress the child makes.

Medical Outreach

Medical outreach services are a key component of the comprehensive community-based rehabilitation and support services by SCCD. The Children's Rehabilitation Unit (CRU) at Sally Mugabe Hospital provides the pediatrician specialist. The doctor diagnoses, writes prescriptions and makes referrals for further examinations and tests. In October a child was referred and traveled to CURE Hospital in Bulawayo for possible bone corrective surgery. The child was assessed and was asked to return in September for further assessment. Another child who has been diagnosed with bowed legs is due to travel to CURE Hospital in March. A total of 18 medical outreaches were carried out during the reporting period with an average of 2 outreaches per month. However, there was no outreach carried out in January as the assigned pediatrician was unable to attend.



Parental Support Group Meetings

The first properly structured Parental Support Group Meeting was held on 22 November 2022 with a total attendance of 24 caregivers and their children. Resource persons such as therapist, nutritionist, counselor, 2 education psychologists as well as 2 community leaders were invited to speak around their key expert areas while addressing issues related to childcare and support needs to encourage and motivate caregivers who are caring for their special needs children. A trained facilitator led the

meeting by first of all explaining the benefits of support groups and concluding that there are resources available to support them at SCCD and other institutions.

It was at this meeting four children were assessed by the educational psychologists for possible school placement. Caregivers also requested assistance with establishing income generating activities which can be undertaken in the home or in the community. They expressed their wish for a sustainable source of income which would give them independence and ability to look after the health, education and nutrition needs of their children. The event also served as recreational therapy when after the meeting, caregivers and children experienced a relaxing environment sharing eats and drinks with others which strengthened their social connections, counteracting feelings of isolation, boosting their self-confidence and self-esteem. Research has shown that strong social bonds like these are associated with better health outcomes for the children and caregivers alike.

Another Support Group Meeting was held on 23 February which was attended by 10 caregivers (and their children) and 3 SCCD staff members. At this meeting, the caregivers tried to unpack further their needs and they listed the following income generating projects which included those mentioned in the first meeting:

- Community gardening
- Dishwashing
- Sale of secondhand clothes (Mabhero)
- Poultry farming

Income Generating Projects

Following the request for support in establishing income generating activities made at the Parental Support Group Meeting in November, 1 caregiver family received secondhand clothes from a Friend of St Christopher's to sell and generate income. SCCD was invited to make a presentation to the Spouses of Ministers' of Foreign Affairs in November where caregivers were given USD60 to purchase a starter pack for detergent manufacturing. 3 Caregivers expressed interest in this project.

City of Harare kindly gave SCCD permission to utilize vacant land at the Hall for a community gardening project. Subsequently a visit was made by 3 SCCD staff members to Foundation for Farming to learn about community gardening projects. (It is fortuitus that 2 staff members attended courses at Foundations for Farming in 2015 and 2020).



Nutritional Feeding Project and Food Distribution

Nutrition is an important component of our holistic approach to rehabilitation and support for children with disability. Healthy eating and a strong immune system help to combat malnutrition and other health related problems. A total of 20 nutritious meals were served to over 156 children and caregivers during the period under review.

Our intervention to address the problem of malnutrition in

children with disability has been enhanced by the Malnutrition Unit at Harare Children's Hospital who screen and assess the nutritional status of the children every 3 weeks.

In addition to screening the children for malnutrition, the team which comprises of 2 pediatricians, a nutritionist, a social worker and a counsellor provides education and demonstrations on healthy preparation of food as well as correct feeding of the children. We are very grateful for this high level of technical support which we lacked, and which makes a decisive difference in positive health outcomes of, not only the children, but the whole family. To date the Malnutrition Unit have conducted 4 screening sessions and provided nutrition education and demonstrations at each session. A total of 180 food hampers which were donated by our private sector partners were distributed to caregivers, during the period under review.



Education Support

Education costs for children with disability are very high. As a result, education

remains inaccessible for many of our children from disadvantaged family backgrounds. Four children were assessed by our education psychologist and 3 were found suitable for school placement at St Catherine's Special Needs School in Newlands.

However, our children had to be assessed again by a government psychologist after the school refused to accept the independently done assessment. Finally, the children were enrolled into school on the 14 February. School fees for term 1 were paid, school uniforms bought and transport which is the most expensive and exclusionary education component for children with disability, was also organized and paid for. The fourth child was diagnosed with a hearing and

speech impairment. He was referred to SCCD for speech and language therapy, and a mainstream creche, 'for socialization', the cost of which is beyond the means of the organisation.

Medical Support

Medical costs for a child with disability are very high. The immediate and long-term costs have severe implications on the well-being of the child and the family. Many of the families find health care inaccessible. The Medical Support Fund was set up to reduce the substantial economic and emotional strains on the caregiver resulting from the child's special health care needs. In February, an account was opened with a local Pharmacy (Trinity Pharmacy) where caregivers can access medicines for their children upon presentation of a prescription and Identification Card. To date, we have 15 children on the list, of which 7 have accessed medication.

Recreational Therapy

On 10 December 2022, 4 caregivers and 1 community leader (who is disabled) attended the film premier of "Even Our Dreams" at Sam Levy's Village. The film was about the lived experiences of people with disability in



Chiredzi District. Some of them showcased their skills and abilities to generate income using locally available resources. The message was disability is not inability. At the end of the film and during a cocktail, our caregivers and community leader got to meet and interact with the film characters who were present to attest to their lived experiences, the Swedish ambassador (who funded the film production and launch) and representatives of like-minded organizations.

A Recreational Therapy activity has been planned for the 3rd of April 2023 where caregivers and our children will visit IMIRE game park in Marondera for the day.



Distribution of Assistive Technology Devices (including adults with disability)

A pair of crutches was distributed to a male adult polio victim during the period under review. A wheelchair was also donated to an elderly Hatcliffe resident.

A wide range of assistive technology devices were received from our overseas partner in February. The assistive technology devices will be distributed to needy children and adults in March. (We have 5 children on the waiting list). Assistive technology devices help the children to enhance functioning and promote well-being and independence.

Our overseas partner included several rehabilitation training equipment (same as in August) in response to our therapists' request. Our ability to deliver quality rehabilitation services has been enhanced by availability of quality and appropriate rehabilitation equipment, which has led to the discharge of 6 clients during the period under review. Linked to this donation of equipment is training by our overseas partner on the safe and correct use of the equipment. Training will take place in July 2023.

Monitoring and Evaluation

Upon engagement of a part-time Project Coordinator on 9 January 2023, St Christopher's began to develop a project Performance Monitoring Plan (PMP) which will not only provide information for basic project management, but also provide learning and demonstrate accountability to our funding partner and other stakeholders. PMP describes how St Christopher's Children with Disability plans and manages data collection and analysis, oversee project performance, use, and dissemination of results. It presents the project management life cycle of planning, implementation, monitoring, evaluation and makes space for learning and sharing of lessons. Quarterly monitoring visits, mid-term project evaluation and end of project evaluation will be done. St Christopher's will engage an external evaluator for the project monitoring and evaluation exercise.

Conclusion

SCCD will implement activities and reporting according to the PMP. Data will be collected based on the set objectives and indicators developed by SCCD and measured against information gathered during this reporting period and the final phase of the project. The ongoing reporting will allow the organization to reflect on the progress of the community-based intervention and whether inputs and outputs are leading to the desired outcomes. The project has scored several positive and successful results. Six children have been discharged after they had shown improvement and functionality, thus therapy could be continued at home.

Challenges

- The project had difficulty attracting the right skills set of individuals to assume the role of part time Project Coordinator
- Coordination mechanism represents a challenge without a Project Officer
- Engagement of a Monitoring and Evaluation consultant has been delayed up to now because of the need to complete the Performance Monitoring Plan
- Lack of office space which, post COVID would facilitate more efficient workflow. The high cost of data and communication technology is prohibitive
- Lack of transport affects therapy attendance rate to the detriment of the children's health and wellbeing and that of their caregivers

RESEARCHING ON THE MARKET GARDENING PROJECT



Planned Activities for Next Half

Project Management:

- Engage Monitoring and Evaluation Consultant
- Budget review
- Organize an internal and external review of the projects implementation status and make recommendations for the upcoming second half
- Review 3 Year Strategic Plan in March
- M&E data collection tools training in March
- Conduct staff Training every 2 months
- Organise monthly staff meetings
- Finalize 2022 Annual Report by
- Mass media and community-based disability awareness campaigns

Rehabilitation:

- Pursue possibility of alternate hearing test service provider, as Harare Hospital has many challenges
- Recruit one more community-based rehabilitation worker, as demand for our services is increasing

Parental Support Group:

- Raise awareness of the importance of the group at weekly therapy sessions

Income Generating Projects:

- Raise awareness of the importance of income generating activities at weekly therapy sessions

Education Support

- Raise awareness of the continued responsibility of caregiver in the child's development after St Christopher's provided education support

Medical Support

- Encourage improved uptake of our medical facility at weekly therapy sessions

Recreational Therapy

- Organize 3 recreational therapy sessions in the second half year

TESTIMONIALS AND SUCCESS STORIES



Mai Gift:

I would like to express my gratitude to St Christopher's for making it possible for our children to go to school. It was not going to be possible without your intervention. I would like to thank you for the good quality uniforms you bought, which I would not have afforded on my own. Above all, you pay for the children's transport to and from school every day. Once again, thank you. I love St Christopher's because it has uplifted me.

Mai Aspire:

My son could not talk or walk but because of physiotherapy and speech therapy he received at St Christopher's, he can now walk and talk. I would like to thank St Christopher's. Please do not stop helping all those who come to St Christopher's. May God bless you.

Mai Riley:

St Christopher's is my support family. When Riley first came to St Christopher's he has no head control and he was very weak. I have Now 1 year later, Riley has improved head control, turn on his own and he has even gained weight. This is thanks to the therapy, counselling, and nutrition education that we receive at St Christopher's. My relatives cannot believe the change that has happened to Riley. That you St Christopher's.



Mai Perfect:

I came to St Christopher's with my child in March 2022. She was having delayed milestones. She could not sit. St Christopher's helped me with exercises and I was given a home plan. Within a short period of time she was crawling and I continued going for exercises as we were encouraged. They taught her to walk and now she is walking. I am filled with joy because of what St Christopher's did for me. May God bless Mrs Kambarami and her team. The exercises are free and above that we were given free food for nutrition.

Mai Perseverance:

Perseverance started coming to therapy when she was 2 years and 5 months. She was not able to sit alone. She had no head control and we had to feed her. Now she can feed herself and walk alone. I am so grateful for these great achievements that have happened. Now Perseverance is 4 years and 8 months.

