

# Kyanninga Child Development Centre

## Annual Report 2016

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Clinical Director**

## **Background**

In Uganda, approximately 12% of children (2.5 million) are living with disabilities and access to healthcare is limited. The majority of disabilities are due to birth-related injuries, illness and congenital defects, resulting in severe disability. Many of these children are living in extreme poverty, meaning that most children have not seen a medical professional regarding their disability and as there are very few therapists working in Uganda, it is estimated that only 18% of children have access to specialized rehabilitation services.

Widespread local beliefs that disabilities are an untreatable curse cause disabled children and their families to be excluded from their communities, often cause increased family stress, financial burdens and a reluctance to seek help, in particular from educational institutions. The poor local understanding of disability is a huge barrier to the progress, learning, and independence of many children.

Kyanninga Child Development Centre is a Ugandan registered NGO (S5914/11444), founded in 2014 by entrepreneur Steve Williams and his wife Asha and physiotherapist Fiona Beckerlegge to create equal opportunities for children living with disabilities in Uganda. The extent of the problem faced by families was initially highlighted during Steve and Asha's own personal search for help with their son, Sidney.

## **Vision, Mission and Objectives**

**Vision:** Equality for children with disabilities

**Mission:** Create equal opportunities for children with disabilities in Uganda

### **Objectives:**

- Provision of specialist therapy services
- Promote awareness and education of disability amongst community members
- Give technical training to caregivers
- Integrate suitable social enterprises into the fabric of KCDC to economically empower participating families

## **Core Values**

**Development through Play** – We are all on the same playing field

**Child Focused** – It's all about the kids

**Transparent** – We do what we said we would do

**Empathy** – We have understanding of family challenges

**Inclusive** – We respect everyone and do not discriminate

**Efficiency** – Things get done by doing them

**Positivity** – Always look on the bright side of life

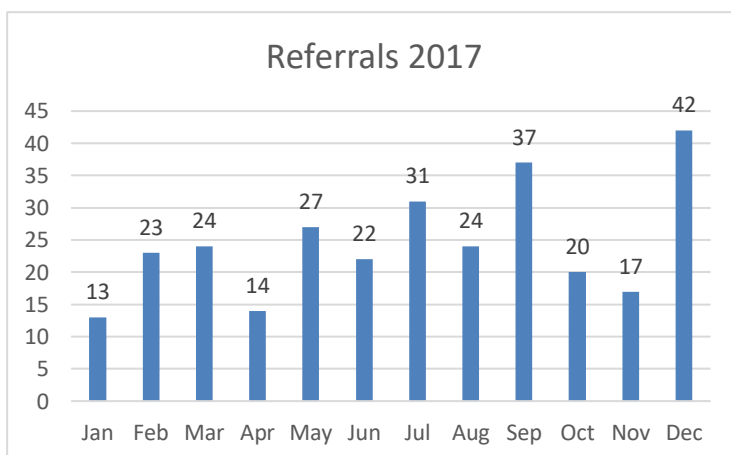
## **Achievements**

Since October 2014 we have:

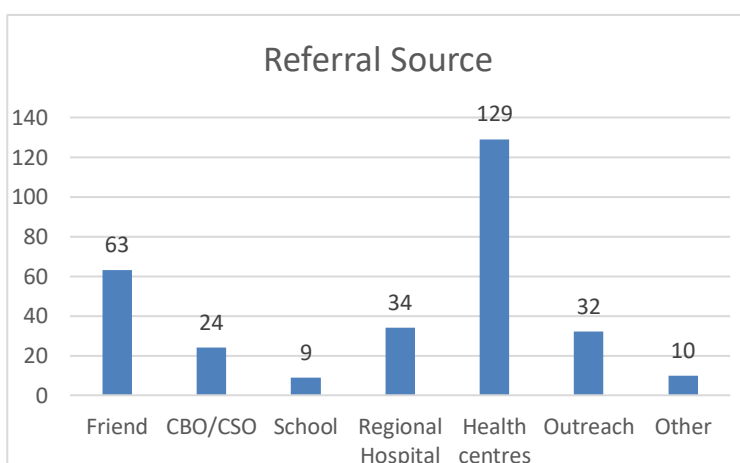
- Treated 483 children with a wide range of disabilities
- Run 13 community outreach days in different parishes across Kabarole District, seeing more than 492 children and adults

- Worked regularly in 5 schools with 75 children with disabilities, promoting access to education and supporting both the teachers and students with individual educational needs.
- Increased our team to include 3 physiotherapists, 2 occupational therapists, 1 speech therapy assistant/nurse, 1 orthopaedic officer, 1 community health worker and 1 driver/maintenance officer
- Provided monthly outreach clinics to 7 health centres across the district
- Provided more than 135 pieces of specialist adaptive equipment, including wheelchairs, CP chairs, walking frames and splints
- Provided training to 147 nursing and medical staff, 25 teachers and 40 community workers
- 70 children attended our first annual inclusive sports and family fun day, while 155 children attended our second annual end of year party.

### Data Analysis

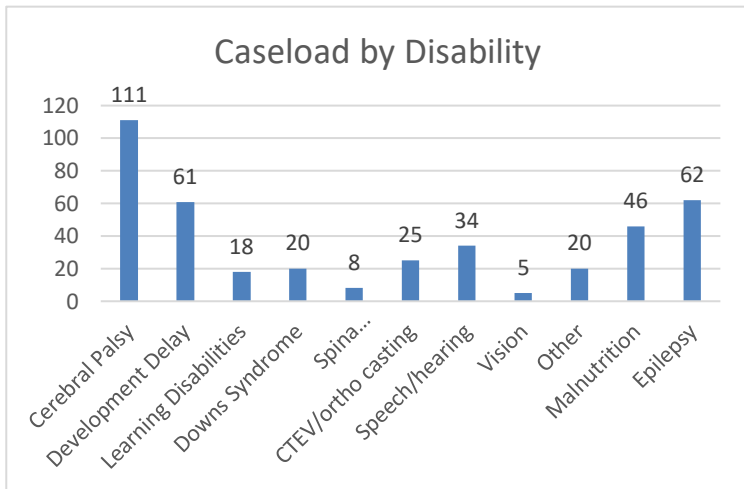


A total of 296 referrals were received in 2016, more than 100 from the previous year.

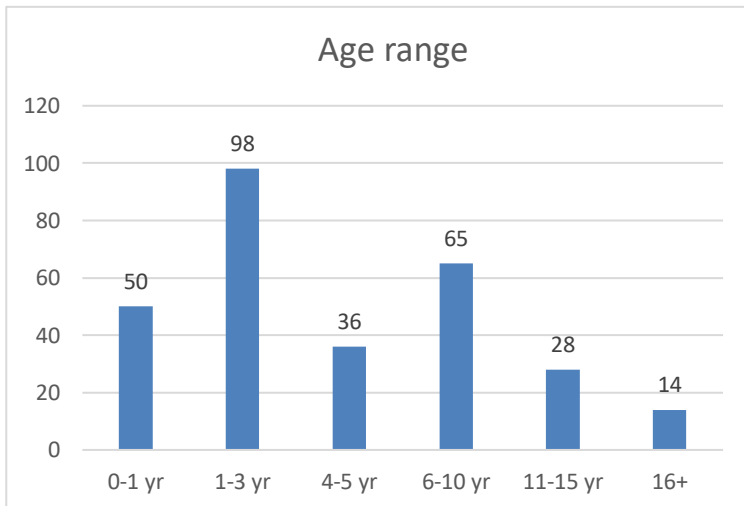


Most referrals were received from 13 health centres across the district, with Maranatha Childrens clinic and Karambi Heath Centre III being the most common.

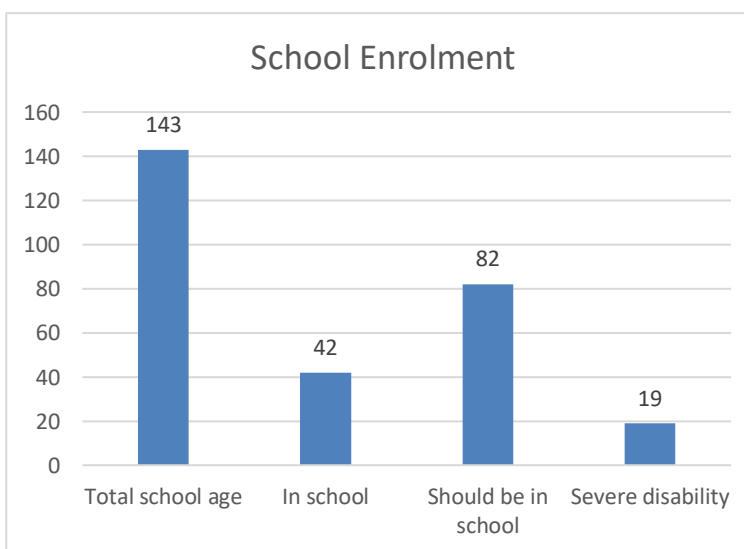
21% of referrals were made through recommendations and word of mouth, which is a great testament to the work we are doing.



Cerebral Palsy and Developmental Delay make up the largest percentage of the caseload. These are caused by non-progressive damage to the infant brain during pregnancy, delivery or first few months of life.



50% of the children that we see are under the age of 3 years. Earlier intervention for children with disabilities is essential for greater positive long-term outcomes for the child and their families.



Of the 143 children referred this year of school-going age, only 42 (29%) are attending school, while 82 (58%) are not in school but could be.

These children are excluded due to their disability, mobility limitations, family financial constraints or the schools unwillingness to accept a child with a disability.

In total, we have 111 children that we work with in school, but 141 not in school that should be.

## **Work Plan Objectives 2016**

*1 – Provide OT, PT, SLP assessment and rehabilitation to children with disabilities aged 0-16 to meet their developmental goals*

**Achieved.** 296 children with a wide range of disabilities have been assessed and received treatment in 2016, plus an additional 124 children were seeing during community outreach assessment days who required alternative medical intervention. Monthly visits to 7 local health centres, 5 local schools and individual homes are carried out and reach more than 60% of the children and their families. These families would not have access to rehabilitation without KCDC's community rehab programme.

*2 – Develop a family-centered environment that provides information, support, advocacy and networking*

**Achieved.** KCDC has created a family centered environment at the centre and provides information, education and support during all family interactions. We have also created a series of information posters on Cerebral Palsy, normal development and risk factors for early disability that are displayed in the local health centres. Parent support groups have been established in 3 additional health centres, and we have plans for 5 more in 2017.

We have also hosted the first annual inclusive sports and family fun day, with 70 children and their families attending, and our second end of year party with 155 children and their families attending. These events are a wonderful opportunity for families to support each other, and for community leaders and district officials to speak and network with families.

*3 – Foster social equity by providing an accessible and affordable programme available to all*

**Achieved.** KCDC does not charge for their services, however, due to rising operational costs, KCDC has introduced a subscription fee to families, at 5,000 UGX per month. We have also extended our community outreach programme to reach more families who are unable to travel to the centre due to their child's disability or financial constraints. KCDC does not charge for their community visits at this time.

*4 – Develop partnerships with local health centres and similar CBOs working with CWDs*

**Achieved.** KCDC has been working regularly with 7 local health centres, providing monthly/bi-monthly clinics, and has deepened partnerships with the regional referral hospital and other local organisations to continue to provide holistic care to children with disabilities and their families. Regular contact with community leaders, local allied health professionals and district officials has been maintained.

*5 – Provide relevant information that will empower the community to make informed choices about their health*

**Achieved.** KCDC has produced a series of information posters to be displayed in local health centres across the district. KCDC also runs parent education sessions within the health centres to increase knowledge and understanding of the causes and management of disabilities. Training workshops have also been offered to nursing and medical staff, teachers and community workers.

*6 – Lobby and advocate for fair policies and laws that affect the daily life of the community*

**Achieved.** KCDC maintains regular contact with relevant district officials, and keeps them updated on our caseload, including the councilor for persons with disabilities, the community development officer

and probation officer. KCDC has participated in local and regional meetings related to orphans and vulnerable children, including the USAID National Action Plan for Child Well-Being 2016-2021.

#### *7 – Maintain the ethical and financial integrity of the organisation*

**Achieved.** An accounts audit was conducted in February 2016. Daily record-keeping for all interventions is maintained confidentially. Financial reporting of all transactions is recorded daily. All staff are registered with the relevant professional bodies.

#### **Unreasonable East Africa**

KCDC has grown considerably over the past year, not only in staffing and impact, but behind the scenes as well. In April and in July, both Steve and Fiona were selected from more than 200 start-up companies in East Africa, to participate in the Unreasonable East Africa 1 week lab and 5-week institute. These residential courses are designed to accelerate the growth of early stage companies, through workshops, mentoring, networking and exposure to investors.

This was an incredible experience, from which the whole team has benefitted. We worked through financial and strategic plans, helping us to focus on what we want to achieve as an organisation and how we will get there, with passionate guidance from experienced and successful entrepreneurial mentors. We continue to receive regular guidance from the Unreasonable team and 6 mentors from across the world, who share our vision of equality for children with disabilities.

#### **Staffing**

Fiona Beckerlegge continues to run the day-to-day operations of the centre, supported by Steve Williams who also focuses on fundraising and networking for centre. Rachel Lassman works part-time as the senior occupational therapist, while Mumbere David, physiotherapist and Ariho Patrick occupational therapist continued to be supported by Accomplish Childrens Trust (UK).

In February 2016, Mutoni Vedastine Rehema was employed as a nurse and speech therapy assistant, while Asha Williams and Golden Chariot began working voluntarily as a community health worker and an orthopaedic officer respectively. Both are now employed, Asha part-time and Golden full-time. In July Kagame Sam joined the team as a driver and in September 2016, Ankwas Brenda joined the team as a newly qualified physiotherapist.

In January 2016, we welcomed Jo Latham, a speech therapist from UK for 4 months through MAITs. Jo worked closely with Rehema, training her in assessment and therapy intervention, and continues to provide mentorship.

In April 2016, we welcomed Karim Bereksi, an accountant from UK, through Accountancy for International Development (AfID). He worked with KCDC to improve financial reporting and accounting. KCDC also continued their partnership with Knowledge for change and welcomed 2 physiotherapy students in August 2016. We also extended our student internship programme to include Mbarara University of Science and Technology physiotherapy degree students, in April and October 2016.

### **Fundraising and community events**

**Kyanninga Triathlon** – Kyanninga Lodge hosted the 5<sup>th</sup> and 6<sup>th</sup> triathlons in April and December 2016, with all proceeds going to KCDC. In April, we had a record 140 competitors enter the race, which is a challenging course of 750m swim across the crater lake, 16.5km cycle around the local villages and then a 5km run around the crater rim. Both individual and team races are available, as well as a double distance for those who really want to challenge themselves. The 2<sup>nd</sup> event was held later than usual because of the marathon and yielded a smaller field of 55 entrants, though competition was still fierce. In total, over the 2 events, we raised 17 million shillings (£3800/\$4500) for KCDC. The next event will be held in April again.

**Running the Rift Marathon** – The inaugural running the rift marathon was held in November 2016, after more than a year of planning. This was also a fundraising event for KCDC, and welcomed 35 international runners competing in either the full or half marathon or a 10km run. A further 147 local runners from Uganda and East Africa also participated, making the event a huge success. The next running the rift marathon will be held in November 2017.

**Inclusive Sports and Family Fun day** – The day following the marathon was a wonderful day of fun for 70 of the KCDC kids, who participated in a fun sports day, in partnership with Uganda Special Olympics, Uganda Paralympics and local youth organisations. We had a brass band and drum circle, as well as coaches for football, tag rugby, tennis and young athletes skills training. This was a wonderful community day for many of our families, allowing them to share experiences, achievements and challenges together, and to watch international competitors join in the games together with their children. Our special guest for the day was Uganda's Rio 2016 Paralympic Silver medal winner, David Emong. David had taken 2<sup>nd</sup> place in the 10km race the previous day, and challenged the parents and visitors to a 100m dash!! He also spoke to the parents about supporting their children throughout their lives, no matter what their disability, as they will achieve nothing without it, but can go far with it. We are thrilled that David has also agreed to become an Ambassador for KCDC.

**So Kyanninga Can Dance** – Kyanninga Lodge hosted the first dance event of its kind in Western Uganda in November, as a fundraiser for KCDC. A dinner and dance in the newly constructed events hall overlooking the crater lake. The day started with dance classes in the morning, learning the Waltz, Swing, Cha-cha and Salsa, with more practice in the afternoon before a delicious dinner and dancing into the small hours of the night. This was a hugely successful event and has become another firm fixture on the annual event calendar.

**End of Year Party** – Our annual end of year party was another wonderful day of community spirit, celebration and support for children and their families. 155 children with disabilities attended the day, bringing a family member with them. The parents shared their children's achievements over the past year, this included learning to sit, to stand, to walk, to feed themselves, saying a few words, starting school, helping with the chores at home and so many more.

### **Kyanninga Dairy**

The demand for KCDC services has been overwhelming over the past 2 years, and we need to expand to meet increasing demand and provide care and services to more children with disabilities, but as we expand so do our operating costs. In order to meet these rising costs, we are looking to become more self-sustainable by adopting various income-generating initiatives.

Our first venture is Kyanninga dairy, a project to produce and sell delicious fresh goats cheese, made at our purpose-built production unit, using raw milk from Kyanninga's own herd of goats. With help from experts from Neal's Yard Creamery in the UK, who have been volunteering with us for the last few months of 2016, Kyanninga Dairy is now producing 4 different types of cheese. Further donations of a shipping container for the production unit, and start-up funds to buy the initial goats and equipment meant that we are making great progress.

Our Christmas Just Giving campaign to increase the size of the herd to produce more milk was extremely successful, and we now have a herd of 47 goats, and so will be able to increase cheese production over the next few months, in order to sell in select lodges and specialty stores in the western region and Kampala.

All proceeds from the sale of the cheese will go directly to supporting the child development centre, as well as generating employment and income for local communities and families that we work with and we believe that this will be an extremely successful project.

### **Financial considerations**

For a comprehensive review of the 2016 finances please see the KCDC financial report 2016.

Accomplish Children's Trust (UK) continues to support both Mumbere David and Ariho Patrick in their employment with KCDC, for which we are very grateful. It was wonderful to welcome some of the Accomplish trustees and supporters in March and show them the work that we are doing.

Much of the financial support for KCDC comes from individual donors and supporters, as well as fundraising events and crowdfunding – in particular for the running the rift marathon and our Christmas Just Giving campaign – Kids 4 Kids.

In summary:

<b>Income</b>	<b>UGX</b>	<b>USD (*3500)</b>	<b>GBP (*4400)</b>
Kyanninga Lodge	20,455,000	5,844	4,649
Kyanninga CDC Trust	58,267,700	16,648	13,243
Accomplish Children's Trust	24,559,000	7,017	5,582
Volunteer Contributions	7,000,000	2,000	1,591
Individual Donations	22,517,700	6,434	5,118
Fundraising Activities	18,534,000	5,295	4,212
Organisational Donations	3,037,300	868	690
Treatment Sessions	1,037,000	296	236
<b>Total</b>	<b>155,407,700</b>	<b>44,402</b>	<b>35,320</b>



<b>Expenditure</b>	<b>UGX</b>	<b>USD (*3500)</b>	<b>GBP (*4400)</b>
Salaries	64,603,500	18,458	14,683
Rent	22,260,000	6,360	5,059
Office running costs	29,702,100	8,486	6,750
Therapy equipment	3,510,200	1,003	798
Vehicle maintenance and fuel	13,463,300	3,847	3,060
Medical support	12,221,500	3,492	2,778
Community events	9,442,800	2,698	2,146
<b>Total</b>	<b>155,203,400</b>	<b>44,344</b>	<b>35,274</b>

### **Volunteer Contributions**

KCDC has benefitted greatly over the past year from generous donations of time, expert support, guidance and training from many individuals and companies. This includes time given for fundraising events, legal and financial consultations, professional volunteers providing on-site training in speech therapy, accountancy and physiotherapy. Discounted marketing and graphic design services and establishing the Kyanninga Dairy with generous support from Neals Yard Creamery. A summary table of in-kind donations is shown below:

<b>Volunteer/In-kind donations</b>	<b>UGX</b>	<b>USD (*3500)</b>	<b>GBP (*4400)</b>
Consultants (Legal/Financial)	60,520,000	17,291	13,755
Directors unpaid contributions	142,800,000	40,800	32,455
Neals Yard Creamery	6,800,000	1,943	1,545
Volunteers (Accountant/Speech therapist)	21,590,000	6,169	4,907
Marketing and Social Media	20,400,000	5,829	4,636
Work Permit	1,700,000	486	386
Vehicle Hire	600,000	171	136
Event Hall hire (Kyanninga Lodge)	38,497,500	10,999	8,749
Other	19,191,500	5,483	4,362
<b>Total</b>	<b>312,099,000</b>	<b>89,171</b>	<b>70,932</b>

### **Activities for 2017**

- Volunteers – In January we will welcome a UK accountant for 2 months to continue working on our financial and reporting systems. We will also welcome 2 physiotherapists, one for 3 weeks in January and 1 for 5 months from April. We will also welcome a paediatrician to work on the early intervention for cerebral palsy project. Further opportunities for a speech therapist and a special needs teacher will be advertised for further staff training and development.
- We will be increasing the number of outreaches to health centres across the district, including staff training and parent support groups.
- We will extend our community outreach programme into the neighbouring district of Kasese, working closely with Rwenzori Association of Parents of Children with Disabilities (RAP-CD). This organisation has a primary school for children with disabilities, and is opening a secondary school



this year. The school does not have any therapy input, though does do some community work with families. Our aim is to strengthen their community programme and support the community health worker at the school, and provide therapy assessment and intervention to students and the communities.

- We will host another 2 Kyanninga Triathlons, the 2<sup>nd</sup> Running the Rift Marathon and Inclusive Sports and Family Fun Day, and the 2<sup>nd</sup> So Kyanninga Can Dance events, with KCDC as the official benefitting charity at each event.
- Funding proposals will be submitted as opportunities arise, in particular for an additional mobile health unit and to scale up therapy services to reach more children and increase cheese production.