

Annual Report 2007– 2008

Bega kwa Bega is a non-government organization registered with the Government of Uganda, Registration No. 2869. Our mission is to work together with communities to improve the living conditions of orphans, vulnerable children (children who have mentally or physically disabled parents or who have special needs themselves) and those who care for them.

Out of a population of over 29 million, there are 7.5 million orphans and vulnerable children in Uganda. 46% of these were orphaned by AIDS. Most of these children usually live with a relative of the family. More than 4 million households have at least one

orphan to care for and the majority, 77% of orphans and their care givers, have to survive on their own with little or no assistance from outside the family. The Government does not have the structures in place to identify, plan and coordinate services for all the children who need help.

Bega kwa Bega celebrates the strong cultural practice of keeping and bringing up children in their communities whether they have parents or not. When invited by communities we work with families, local leaders, heads of schools and other NGOs, to identify and prioritize their strengths, resources and needs in order to support them

in bringing up the children. Our goal is to promote sustainable development by strengthening and supporting communities, especially relatives, enabling them to improve their living conditions. Currently BkB manages a number of programmes including Education, Health, Water and Income Generation in over 122 villages in six Districts: Hoima, Kibale, Lira, Masaka, Mityana and Wakiso. Beneficiaries are over 4,000 young orphans, thousands of school children, their families, caregivers and neighbours. Altogether we impact more than 100,120 in rural Uganda!

EDUCATION

In keeping with the international long term commitment, in particular the millennium goal of

education for all, Bega kwa Bega continues to emphasise the

significant role education plays in children's development.

During 2007-2008 BkB supported children's education by:

- Paying school fees for 115 orphans and vulnerable children
- Funding school improvement projects, including roofing schools
- Renovating 2 nursery schools
- Renovating one secondary school classroom
- Drilling 2 boreholes for 2 schools providing safe water for over 1,000 students and staff

BkB Education programmes:

- Help children develop positive attitudes to learning
- Promote poverty eradication
- Reduce inequalities between rural and urban young
- Reduce inequalities between the rich and the poor
- Reduce gender disparities
- Reduce incidences of early marriages
- Reduce incidence of child exploitation and child labour
- Support children to stay in school

We believe so much in the value of education that we have doubled our education budget in order to

allow more orphans and vulnerable children to attend primary, secondary and trade school.



Total number of orphans sponsored by BkB:

2000	2001	2002	2003	2004	2005	2006	2007- 2008
49	58	62	62	74	78	78	132

BkB education support 2007-08:

School	Nursery	Primary	Secondary	Total
Orphans	19	91	22	132
Schools given supplies	3	3		6
Schools renovated	1		1	2
Schools provided with boreholes		2	2	4

BKB activity	Impact on orphans and vulnerable children
1. Pay school fees for orphans & vulnerable children	<ul style="list-style-type: none"> • Access to quality early education • Children learn in a safe environment • School dinners result in improved nutrition • Previously excluded children with special needs attend school • More girls attend school • More girls stay at school and complete programmes • Children in our scholarship programme stay in school and perform better than their peers • Literacy levels of orphans and their providers continue to soar • Orphans receive more information and develop life skills resulting in healthy living
2. Installed boreholes	<ul style="list-style-type: none"> • Safe drinking water for over 1,000 children, staff and the local community • Healthier students • Fewer water born diseases • Less time wasted fetching water • Water for irrigating school gardens
3. Renovated school buildings	<ul style="list-style-type: none"> • School materials and furnishings protected from rain and winds • All season, year round classes • Improved staff morale • Community pride and support for children's education

HEALTH

BkB Community Health Programme continues to provide essential services to needy families in remote communities. Late last year, and with the help of a volunteer, Darci McClary, BkB

introduced a home visit programme to compliment and extend the work of the Mobile Clinic in Kakiri area. This programme has two major goals:

- Provide support to families trying to implement life skills learned during BkB Mobile Clinic workshops
- Identify serious family health issues, discuss possible solutions and alert BKB staff

BEGA kwa BEGA MOBILE CLINIC March 2007 - Feb 2008

Home visit programme:

To manage this programme we hired a Community Health Worker (CHW) to work closely with the three BkB nurse-midwives and the one community health worker who run the Mobile Clinic. Every week the nurses identify the most seriously ill families. The following week the home

- Number of dependent children
- Number of orphans and other vulnerable children in the home
- Child immunization
- Water and Sanitation
- Malaria prevention techniques and treatment
- Nutrition, especially for infants and pregnant women
- Availability of safe drinking water
- Pregnant women – antenatal care
- HIV/AIDS – prevention, awareness, treatment

If possible the CHW, together with the family, outline possible solutions and schedule future family visits to the clinic. In keeping with local customs, the CHW gives the family a small, health

visitor goes to the homes of these families, tours the house, compound and garden and works with the adults to identify family strengths, needs and problems. In addition to dealing with obvious family health issues, the community health worker discusses the following critical areas:



Blind g'mother waiting for a nurse to remove jiggers from her g'son's foot

related present, usually a piece of soap, a fruit tree seedling, a packet of vegetable seeds, ORT packets for a baby or, when available, mosquito nets for the little ones.

Problems which are most frequently identified by the CHW include:

- Incomplete or no child immunization
- No latrine
- No hand washing station near the latrine
- Malnutrition among children and pregnant women
- Worms among children
- Incidences of severe Malaria
- HIV/AIDS

Malaria:

One of the biggest health issues affecting all our families is malaria. Currently malaria is responsible for:

- 40% of outpatient visits to hospitals,
- 25% of hospital admissions.
- 14% of hospital deaths

The burden of Malaria is greatest among children under 5 and is one of the biggest threats to the health of pregnant women and their infants.

Towards the end of her visit to the family the Community Health Worker recommends some preventive practices such as removing stagnant water, clearing brush near the house and using mosquito nets. Unfortunately mosquito nets are too costly for most of our families, but thanks to

the donation from Scotland, we gave out 110 mosquito nets to 36 families. We are happy to report that the families that received and started using the mosquito nets have reported fewer or no new malaria attacks! Our goal is to give nets to all the families in our programme area.

On average the Community Health Worker visits 12 families a week.

Monthly reports summary:													
	MARCH	APRIL	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	TOTAL
Attendance	994	1009	811	819	620	714	691	812	801	611	620	689	9191
Children under 5	203	211	225	314	124	164	218	210	105	129	211	137	2251
10 - 25	190	209	137	103	148	182	78	110	198	202	78	88	1723
Immunised	84	219	335	136	135	164	174	284	156	205	154	137	2183
Malaria	491	601	501	318	311	311	218	513	344	450	311	425	4794
STI	84	91	61	97	22	84	108	101	311	31	39	34	1063
HIV/AIDS counselling	14	10	2	16	28	22	18	12	10	6	19	12	169

BkB Activity	Impact on orphans, vulnerable children and community
Mobile clinic: <ul style="list-style-type: none"> Examinations Diagnosis Treatment Health education during mobile clinic visits 	<ul style="list-style-type: none"> Free medical care Do not have to walk long distances to access medical care Free antenatal care. Awareness seminars on the basics of general health Information on key health issues including malaria, HIV/AIDS, STDs, child nutrition, personal hygiene etc. Young mothers can identify dehydrated babies, make/mix and administer life saving oral rehydration salts. Young mothers can prepare balanced diets for the family Over 45% of participating families use mosquito nets. Fewer malarial attacks

WATER

Less than 65% of Ugandans have access to a safe water supply. The rest of the population risk their lives collecting dirty water from ponds and polluted streams. We continue to receive numerous requests from communities who are desperate for safe, reliable water sources. But because of high cost of drilling boreholes and protecting streams we have to adjust our placement priorities in order to maximize our impact. Last year our 2 new boreholes were drilled in communities with a large concentration of institutions serving clusters of villages. Consequently these boreholes provide water to large populations of students, hospital patients,

support staff, market vendors and people from several neighbouring villages.

In our effort to promote sustainability, BkB works with head teachers, religious leaders, hospital superintendents and community leaders to identify two resident technicians to be trained to look after the boreholes and to

- Monitor water supply/pressure
- Monitor the quality of water
- Maintain and repair equipment
- Inform BKB staff of additional technical needs

Number of water projects:

Type	2000	2001	2002	2003	2004	2005	2006	2007-2008	Total Units
Water Tanks	17	5	3						25
Protected springs				9	7	12	12	9	49
Boreholes	1			1	1	2	3	2	10
Total units									84

- Each well/borehole serves 2-3 villages
- 59 public water sources
- Each village has an average of 120 families
- Each family has an average of 7 members
- BkB has constructed 59 public water sources
- Each well serves over 1680 people
- 59 public wells serve over 99,120 people

BkB Activity	Impact on orphans, vulnerable children and communities
Drill Boreholes and Protect Springs	<ul style="list-style-type: none"> • Over 99,120 people have access to a safe, reliable water supply • A dramatic reduction of water born disease among children in these communities • Women and children who are the traditional collectors of water are safe from predators and spend less time fetching water • People use the time saved to tend their farms and produce marketable goods • Water is available for animals and for small scale irrigation resulting in high farm yields • Most families report a noticeable increase in household income

INCOME GENERATION

KNITTING:

We have received numerous testimonies that knitting as a small scale industry generates vital income which supports hundreds of people living with AIDS, children with special needs and orphans. A landmark has been reached. Over the years Angelina Campbell from Scotland has been diligent in preparing group leaders to take on the responsibility of training other knitters. We are

happy to report that currently Ugandan trainers are responsible for training new members and introducing new advanced skills to less experienced knitters. Additionally, a BkB coordinator has been trained and certified to service knitting machines and train knitters to maintain their equipment.

BkB Activity	Impact on orphans / people living with AIDS
Knitting machines distributed Knitters trained	<ul style="list-style-type: none"> • New marketable skills acquired.
Small scale business support	<ul style="list-style-type: none"> • Increase in household income • Money available for school fees means more children attend school • Additional spin off businesses are started by 25% of the successful knitters • Employment opportunities • Hope for a better future for families • Improved mental health • Self sufficiency • Trained trainers.

Recently a knitter with advanced HIV/AIDS telephoned BkB programmer manager....."Thank you for the knitting machine. It's keeping me sane. When I have a little strength I take out my machine, make a sweater or two. I sell the sweaters. I buy medicine for me and a little food

for my family. I am productive. I am teaching my teenage daughter how to knit and sell sweaters to schools in our village. She'll take over when I am gone. She'll care for my little ones. This gives me hope. I am no longer fearful about the future...."

Milk Cow Project

Currently 20 families are direct beneficiaries of the revolving milk cow project. Last year BkB did not purchase new cows for the milk cow project. Instead we inseminated and distributed the pregnant heifers to new beneficiaries. Last year more orphan families were trained in producing

fodder, building animal sheds and caring for the cows.

Because cows are expensive to buy and because they take over two years to mature, only a limited number of orphan families directly benefit from this programme.

BkB Activity	Impact on orphans and vulnerable children/community
Donate milk cows to needy families with many orphans.	<ul style="list-style-type: none"> • Self employment • Sale of milk generates income • Animal waste used as a free natural pesticide and fertilizer • Higher crop yields resulting from use of manure • More food for orphans and families • Reduced malnutrition • Sale of food surplus increase family income • Additional income used to pay for education and health services for children • Mutual support among members of farm cooperatives • Protein rich diet

Goat Project

The goat programme is more affordable and easier to manage than the milk cow project. It is cheaper to buy and raise goats and because they mature faster and have multiple offspring we can build up

a sizable herd faster. Our goal is to give a pregnant goat to each and every orphan in our programme.

BkB Activity	Impact on orphans and vulnerable children/ community
Goats given to children	<ul style="list-style-type: none"> • Goats are easy to manage • Young orphans can easily care for their goats • Orphans and vulnerable children easily learn animal rearing skills • Orphans and vulnerable children learn construction of animal shelter • A protein rich diet for orphans and vulnerable children drinking goat milk • Source of income from sale of kids

CHRISTMAS 2007:

Thanks to our regular donors from the USA and the UK we were able to continue our Christmas tradition of distributing food parcels to families with orphans and People Living with AIDS. Last year we distributed food parcels to 85 families in 20 villages. Food packages included rice, cooking oil, salt, beef, bread, butter and sugar.

For the orphans and vulnerable children in our programme, once again we had a fantastic Christmas party at the beach at Nabinonya near

Entebbe. We had a catered feast with all the goodies children crave including, chicken, beef, rice, matoke, ground nut sauce, cake and sodas! We played music and children drummed and danced in the sand. To top it off each child was given a gift of new slippers. There were smiles everywhere.

Grandmother
and
grandchild



NEW PROJECTS

DEMONSTRATION FARM

Our demonstration farm at Simbamannyo, Kakiri-Wakiso district, is in full swing. Six of our eight acres have been cleared and some of it planted with eggplants, tomatila, french beans, maize, and sweet potatoes. This first crop of fast growing marketable produce is helping us recoup some of

the expenses of clearing and tilling the land. Once the crops are harvested some of the fields will revert to grassland for grazing. An experienced, full time farmer manages the demonstration farm. Programme participants are invited to visit the farm to observe and learn better farming methods.

Developments on the farm include

- 6 acres cleared.
- 4 acres planted with vegetables
- A two-room farm house for the manager constructed
- A goat shed built
- A flourishing parent stock of goats in kid

NB: Distribution of goats from the parent stock is expected to start in 2009. Our goal is to give a goat to each orphan and vulnerable child in our programme.

French beans



Cucumber



Sweet potato



BkB activity	Impact on orphans, vulnerable children and communities
Demonstration farm set up	<ul style="list-style-type: none"> • Employment opportunity for the construction crew, and farm workers • New and better farming techniques are demonstrated to local farmers • New crops introduced on the farm • Improved diet and food security of local community
Parent stock	<ul style="list-style-type: none"> • Income to support BkB programme • Lower programme costs • Every child will receive a goat

DEMONSTRATION SCHOOL AND EDUCATION CENTRE FOR NURSERY AND LOWER PRIMARY TEACHERS



BkB manages a strong education programme which, over the years, has trained and supported teachers of young children to set up and manage high quality income generating nursery and primary schools in rural Uganda. We believe that one of the most effective ways to improve the quality of education is to have trained,

professionally experienced, dedicated teachers in the classrooms. Since 1999 BkB sponsored nursery school teachers to visit, observe and study how nursery schools in England and Scotland work. The air fare and the cost of related expenses were so prohibitive that we could only sponsor a handful of teachers to benefit from this rich experience. Meanwhile we have been searching for more affordable, more culturally relevant alternatives with a capacity to impact more teachers in Uganda.

We are proud of our partnership with Jengo Early Education Centre in Rubaga, Kampala, which opened with a Demonstration Nursery School and a Professional

Twenty-two teachers from BkB partner schools have registered to participate in our

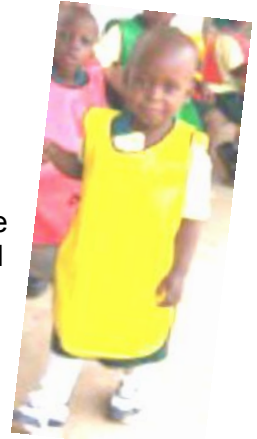
Teachers will learn the theory of early education, observe experienced teachers demonstrate, and visit model learning environments both in the classrooms and outdoors. Teachers will make teaching aids to take home to their schools. Later in the year experienced teachers will make field visits to individual teachers who request one-to-one coaching. Our goal is to offer a broad range of relevant workshops to many more teachers in Uganda. Additionally we plan to set up a

Development facility for pre-school and lower primary teachers. The three classrooms have simple, appropriate, culturally relevant learning aids. Teachers are

first development workshops at Jengo Early Education Centre in June 2008

professionally trained and children learn through play experiences designed to enhance comprehension and develop basic skills needed for effective, lifelong learning.

teachers' resource centre complete with a professional lending library at the model school. Funds permitting, a resident teacher trainer will be available to assist teachers with their ongoing professional development needs.



CONCLUSION

We are encouraged by the realization that our work dramatically improves the life of so many orphans, vulnerable children and their providers. But we continue to receive numerous requests to extend our services to new communities. Our urgent wish list includes additional resources to

enable us to improve our services and to help more needy children in new villages. Additionally our two 18 year old vehicles have so many mechanical problems that they are becoming less reliable and too expensive to maintain.

**Thank you for your support.
Your gifts make thousands of children smile!**

SSAGALA DAVID
Manager Bega kwa Bega



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