

**KYOSIGA COMMUNITY CHRISTIAN
ASSOCIATION FOR DEVELOPMENT
(KACCAD)**

ANNUAL REPORT 2014

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ACRONYMS

ABV	: A Broader View
AIDS	: Acquired Immune Deficiency Syndrome
FCF	: Faith Children Foundation
FCFS	: Faith Children Foundation School
HIV	: Human Immune-deficient Virus
IGAs	: Income Generating Activities
KACCAD	: Kyosiga Community Christian Association for Development
NGO	: Non Governmental Organization
OVC	: Orphaned and Vulnerable Children
PHA	: People Living With HIV/AIDS
WGLO	: With God Little Ones

ACKNOWLEDGEMENTS

Kyosiga Community Christian Association for Development wishes to acknowledge individuals, groups, organizations and persons that provided moral, intellectual, material and financial support to our organization during the year 2014.

Our sincere thanks go to the donor fraternity for the various grant support which enabled the organization to accomplish a number of undertakings. Without those grants we would not have made the achievements cited in the report. We are particularly grateful to ABV volunteers Joseph and Jordan Whalen for the soccer balls donated to our affiliated orphanages and other schools in the program area; Chris Tabakin, Mike Bullick, Jennifer Danby and Debra Jablonski, Elizabeth Labrie, Brynna Broettcher for scholastic materials to the orphanages; WGLOs for food relief and solar equipment donation and Chris Kuhn and his family for feeding vulnerable households; students from Falkenbergs – Montessoriskola for LLI mosquito nets to orphanages and schools; Cameron and Jane Baird Foundation through Sarah and Bridget Baird for the grant which financed the Family planning project; Atlantic Philanthropies for various grants which financed solar light purchase and distribution, baseline survey on lighting needs and scaling up the chicken project; and the ABV volunteers Camil Ben Omar and Christopher Kuhn for facilitating the business skills trainings which were conducted in Bbira, Bulenga and Kirimamboga villages.

We wish to thank Alan Bradley for payment of the money for hosting KACCAD's website every year.

The organization wishes to extend its profound appreciation to all its clients because these form part of KACCAD's core constituency and are actually the main reason why our organization exists in the first place. We thank them for entrusting us with their concerns as well as the patience they exhibit as we do the work from which they benefit as our program beneficiaries.

We wish to extend our sincere appreciation to all those professionals, academicians, consultants and intellectuals for their continued technical and intellectual support throughout the year, without which we would not have been able to accomplish what we did in our service delivery. We count much on your useful advice, views and opinions.

We wish on a special note to extend our sincere thanks to all the local leadership of the program area for its moral, material and technical support which facilitated our service delivery among the communities in the area. This leadership includes the Wakiso District Administration, all Sub Counties, Municipal Councils and Town Councils in the district, all Local Councils in the district, all Heads of civil service in the district, opinion leaders and other persons and entities in their various leadership capacities.

MESSAGE FROM THE EXECUTIVE DIRECTOR

On behalf of Management and staff of Kyosiga Community Christian Association for Development I take this opportunity to present to you KACCAD's Annual Report for the year 2014. The report contains a summary of work done KACCAD in 2014 in all programmatic areas. It also contains challenges encountered and mitigation measures adopted, and planned undertakings for the year 2015.

Still, our strategic priorities remained focused on the scope of our programmatic areas. These are health services delivery support, water hygiene and sanitation, education sponsorship, vocational skills development, organizational development and income generation.

The health services delivery support program remained focused on ensuring target peoples' access to quality health services through a number of strategies. These included engaging stakeholders in health service delivery to consider all people inclusive of vulnerable ones in accessing the services, making home visits and offer necessary counseling and guidance in a diversity of concerns, and making referrals where applicable. The water and sanitation program was focused on increasing peoples' access to safe water. This was achieved to a certain extent through sensitization meetings and constructing wells for the target communities. As for the education support program this focused on ensuring that vulnerable children can access quality education just like any other privileged child in the country. In this regard a number of children received sponsorship and attended school throughout the three terms of the year. In the case of the income generation program emphasis was put on ensuring that households of vulnerable children and adults (especially PHAs) are enabled to establish and profitably operate income generating ventures as these are meant for increasing their capacity to sustain life.

In running our organization programs we encountered some challenges but we managed to overcome them to a certain extent by adopting appropriate mitigation measures. This experience gave us a lesson which will actually help us to manage future challenges. Some of the challenges we encountered included an overwhelming number of vulnerable children who needed assistance especially in terms of education sponsorship yet our financial resources were very much limited and so we could not practically satisfy each and everyone's sponsorship need. We were constrained by lack of organization's transport means in which case we were always dependent on public transport to go and execute field work. This often caused unnecessary delays in work execution.

At this juncture I take this opportunity to thank all our donors, sponsors, partners, friends, networks, and other categories of entities who in one way or another provided moral, material, technical and financial support that helped our organization to implement its programs. Without your support we would not have been able to accomplish what we did. Thank you so much and we look forward to continued networking and partnership in development.

I pray to The Almighty God to reward you all.

Derrick Luwaga

Executive Director

1.0 INTRODUCTION

1.1 Background

This annual report is about the organization's experiences in implementing its programs during the year 2014. It focuses on program priorities inclusive of quality service delivery, advocacy, information sharing, capacity building, resource mobilization, partnership building and sustainability. These have been achieved to a great extent by employing key strategic approaches including networking, local communities' empowerment, stake holder participation in program implementation process, and comprehensive monitoring and evaluation of projects that are under the organization's programs. The report covers a brief about the organization, the undertakings which had been planned for the year 2014, the achievements that were made under the different program areas, challenges which were encountered and the various mitigation measures that were adopted, and then the planned activities for the year 2015.

Our organization is operating in Wakiso and Gomba districts and focuses on five programmatic areas namely health service delivery support, water hygiene and sanitation, education support, organizational development and income generation.

The strategic goal of the health services delivery program is to realize a situation whereby vulnerable groups of people are enabled to readily access health services from public health facilities without any form of marginalization and discrimination. The objectives were to promote access to health services especially by the vulnerable people in communities in the areas where we operate; to provide health infrastructure development support; to cause well coordinated outreaches; to provide free HIV counseling and testing and make referrals accordingly. The program therefore focuses on community empowerment for increased demand for health services especially the PHAs, OVCs, the Elderly and those whose sexual orientation pre-exposes them to homophobic environment including denial of equal opportunity to access health services in public facilities. Under the program KACCAD makes advocacies for quality health services including the vulnerable and marginalized groups; conducts outreaches to provide necessary counseling, care, material support and make referrals where applicable; mobilizes financial resources for improvement of infrastructure of health facilities like that of Bbira Health Center; provides facilities where public health activities like mass immunization of children and women of reproductive age are carried and operates a pharmacy where the public can access quality medicine at very affordable prices.

The strategic goal of the water, hygiene and sanitation program is to ensure that target communities have easy access to safe water, observe quality hygiene and live in decent sanitation environment. The objectives are to increase peoples' awareness of the need for safe water, quality hygiene and sanitation; improve vulnerable peoples' access to safe water; promote quality hygiene among target communities and promote decent sanitation within the target communities. Under the program KACCAD conducts advocacies for quality hygiene and sanitation, promotes community access to safe water, trains the target communities in making

hygiene and sanitation equipment including but not limited to latrine covers, tippy taps, utensils drying racks, and train them in safe storage of drinking water and preventative measures for common worms. The organization constructs spring and hand dug wells for eligible communities in the operation area.

The strategic goal of the education support program is to enable vulnerable children access quality education just like any other children. The objectives include promoting sponsorship of the vulnerable children; provision of a decent learning environment and provision of scholastic materials to needy children. The program undertakings include sourcing sponsors for the needy children under our care, provision of scholastic materials to the eligible children, providing food to them and other relevant items as we deem necessary depending on the specific needs of the recipient. Under this program some children receive education support while studying at Faith Children Foundation School yet other are sponsored while studying in other schools.

The strategic goal of the organizational development program is to build the capacity of the organization to be able to do its work effectively and efficiently. Its objectives are to institute policy and strategic documents for the organization; to promote membership development; promote partnership building and improvement of fundraising strategies. The program is focused on building the capacity of the organization to undertake its work effectively and efficiently. It focuses on staff capacity building, staff welfare and staff retention, organizational strategic documents and policies, fundraising, alliance building and membership development.

The strategic goal of the income generation program is to empower target communities with necessary resources, knowledge and skills so as to enable them operate profitable income generating activities for their socio-economic advancement. The objectives of the program are: to empower target communities with knowledge and skills of profitable operation of IGAs; to guide beneficiaries in identifying and selecting viable IGAs; to provide startup capital to target beneficiaries and to facilitate the target beneficiaries build strong linkages with other service providers, input suppliers and market outlets. Under this program KACCAD trains the target communities in various vocational skills, helps them to identify their feasible and viable projects, provides startup capital and regularly monitors them to ensure proper running of the income generating projects. In addition, KACCAD itself runs its own income generating projects like chicken rearing and a pharmacy. This is done for sustainability purposes.

Under each of these programs we run certain projects as we deem necessary according to our client needs, and we engage in various tailored activities depending on the nature of each project. Activities accomplished during 2014 will be reported under respective programmatic areas.

Also, our organization runs a Volunteers scheme whereby individuals with various skills, competencies and expertise are enrolled to enhance our staff's service delivery efforts. Each volunteer contributes some amount of money towards his/her sustenance during his/her stay with us. We have been – and hope to continue – receiving international volunteers through the A Broader View volunteers' organization, which is a volunteer sourcing agency.

1.2 Vision

The organization's vision is a situation whereby vulnerable communities in Wakiso and Gomba districts are empowered and self sufficient with their health, education and income generation needs met.

1.3 Mission

KACCAD's mission is to raise the standards of living of underprivileged people in Wakiso and Gomba districts through the provision of health improvement interventions, education support, vocational skills development and startup capital for income generation.

1.4 Objectives

The following are the objectives of the organization:

1. To provide HIV/AIDS sensitization to in-school and out-of-school youth, at risk community members and teen mothers in Wakiso and Gomba districts. As a result, participants in sensitization will be better able to avoid HIV infection, thereby reducing the prevalence of HIV in our population.
2. To facilitate access to voluntary HIV counseling and testing for at risk community members in Wakiso and the surrounding areas in collaboration with partner agencies.
3. To provide tailoring training and sewing machines to low income youth in Wakiso Sub County as part of KACCAD's revolving scheme. As a result at least 25% of the participating youth will start profitable tailoring businesses or continue using tailoring for their home use.
4. To facilitate access to school sponsorship and educational support for orphans and vulnerable children OVC's in Wakiso sub county. As a result more vulnerable youth will go back to school or will have opportunity to attend school for the first time increasing their potential to acquire profitable employment and life skills.
5. To support the sustainability of income generating activities and projects through provision of financial assistance, piggery and poultry farming and management skills to vulnerable groups.
6. To provide HIV/AIDS training and support in HIV/AIDS curriculum development to a male and female teacher in each secondary school in Wakiso sub county, as a result secondary schools will be equipped with needed information and skills to start HIV/AIDS prevention programmes in their schools.
7. To offer technical services in the fields of environmental protection, agricultural development and other sciences.
8. To carry out and promote research on socio- economic issues, programs and activities being implemented by the government, development agencies and civil society organizations to enhance civic competence and influence policy formulation and implementation.
9. To provide consultancy services to communities, groups and individuals in their effort to attain socio- economic development oriented goals through utilization of identified resources among the membership of KACCAD.

1.5 Core values

The organization adheres to a diversity of core values in its service delivery. These include *transparency, team work, affirmative action, respect for human dignity, confidentiality, gender sensitivity, professionalism, participation, accountability, reliability and justice.*

2.0 ACTIVITIES WHICH HAD BEEN PLANNED

The undertakings which had been planned for the year 2014 were as described below.

2.1 Chicken project expansion

We realized that operating a small population chicken project could only enable us to demonstrate a few technologies to our target communities. However we realized that we needed to go an extra mile and increase on our chicken population so as to be able to first of all benefit from better economies of scale, and also attain capacity to provide startup capital to a greater number of beneficiaries since we would be getting more income. We even planned to run a revolving poultry scheme whereby target beneficiaries would be getting startup breeding stock after which they would be required to return a specific amount of money to be used to procure startup chicken stocks for subsequent beneficiaries in the program area. Our targeted expansion was aiming at having a total of 4000 layers, in which case we projected to attain a daily production level of about 3800 eggs basing on a 95% chicken survival rate. This would be expected to generate a daily gross income of about UGX 760,000. The increase in number of laying stock would require constructing another chicken house and procurement of other feeders, drinkers, brooder pots, coffee husks, chicks, disinfectant and chicken vaccines.

2.2 Child sponsorship

This was an ongoing initiative and we hoped that it would continue as we also continue to build more partnerships and sourcing more willing donors to provide assistance to vulnerable children so that they are able to obtain the necessary education. We also felt that by engaging in big income generating projects like that of chicken rearing we would be able to have reasonable amount of money to finance much of the organization's program activities inclusive of child sponsorship. During the year 2014 we anticipated to secure education sponsorship for at least an additional 150 children if financial resources became available. Some of those beneficiaries would be receiving their education at Faith Children Foundation School while others would be sponsored at various schools where they were receiving their education. Given the then prevailing economic situation in the country and cost of living we estimated that each target beneficiary would require sponsorship of about UGX 800,000 per term for three terms a year.

2.3 Completion of Resource Center construction

There was need to complete the Resource Center construction so as to realize increased facility space that would be used for facilitating volunteer services, conducting trainings, holding Board meetings, holding workshops, carrying out mass immunization exercises and renting out rooms which would be income generating initiatives thereby contributing to program and finance sustainability for the organization. Also, by having all this space usable to implement organization programs the money that would have been spent on hiring the facilities elsewhere would instead be saved and used for other relevant program activities.

2.4 Holding a strategic planning meeting

It was the organization's intention to develop a three-year strategic plan covering the period beginning from January 2014 to the end of 2016. This strategic plan would redefine the organization's focus, and streamline the organization's priorities which are advocacy, information sharing, resource mobilization, partnership building and capacity building. These priorities would be achieved through adopting strategic approaches inclusive of but not limited to networking, advocacy building and empowerment of local communities/groups.

The strategic plan was expected to give the organization a new sense of direction as well as dimension of experience. In addition to the strategic framework the strategic plan would provide a ground for the development of resource mobilization strategy, marketing strategy, operational and personnel policies, and a strong sense of responsibility and ownership. We planned to have a highly participatory planning process involving the organization's membership, key opinion partners and other stakeholders as Management might deem necessary. The strategic plan was intended to be the key resource/tool for coordination of the organization's activities for the next three years.

2.5 Classroom construction at FCFS

In order to be able to accommodate the ever growing number of needy children that benefit from the educational sponsorship program there was need to increase on the number of classrooms. In the year 2014 if relevant resources became available we intended to construct at least four (4) additional classrooms at Faith Children Foundation School. We therefore called on our current partners in development to assist us first by making contributions to this noble cause as they had been doing so in the previous years, but also enhance our initiatives in engaging other development partners to join the support group in order to enable us realize our program strategic goal. We would welcome contributions/assistance in various forms – kind or cash or otherwise.

2.6 HIV/AIDS service delivery

Realizing that HIV/AIDS is still a serious threat to human kind and more so to the local communities where we operate, there was need to continue with HIV/AIDS prevention and care support initiatives so as to be able to save the situation. In this regard we planned to reach out to at least 2000 households of PHAs by the end of the year. We intended to organize VCT sessions, make home visits to check on PHAs and provide necessary counseling and other forms of assistance, make referrals where applicable, partner with relevant development donors to source condoms for provision to the sexually active youths, intensify abstinence advocacies and safe behavioral habits and provide material assistance as resources become available.

2.7 Solar lantern procurement

Having done some piloting as regards the solar lantern initiative and used some questionnaires to capture relevant data, we planned to refine our questionnaires and continue with solar lantern distribution to target beneficiaries. We also intended to intensify sensitization of the target

beneficiaries to the effect that proper custody and maintenance of these solar lanterns was crucial in view of their comparative advantage over what the beneficiaries have been using as lighting means. To that effect we planned to conduct a series of sensitization meetings organized at village level to ensure effective coverage for greater impact. During the year 2014 if relevant resources became available, we planned to procure at least one hundred (100) solar lanterns and then issue them out to objectively identified and selected target beneficiaries.

2.8 Solar energy installation

Having realized the challenges which the two institutions – Bbira Health Center and Faith Children Foundation School – face in the course of running their operations, we planned to install solar systems at each of those facilities so that they could obtain electric power supply all the time. For the children this would help them to attend their preps without lighting problems, conduct academic practicals that require electric power supply and other related concerns. For the health facility this would help the health staff to be able to attend to patients even during night time without simply using torches or other crude means of lighting.

2.9 Vocational skills development

We appreciate the potential of vocational skills in socio-economic development of the communities and to that effect we planned to subject our programs target beneficiaries to a series of diversified vocational skills training so as to enable them become self reliant in the long run. We felt that empowering the target beneficiaries with relevant skills coupled with provision of startup capital would greatly help them to become self sustaining in their lives. During 2014 we planned to train our program beneficiaries in liquid soap making, business establishment, profitable chicken rearing, fruit juice making, tomato sauce making, jam making, crisps making, candle making, brick making, charcoal making, soya milk making, herbal pesticide making, compost manure making, crafting, weaving, solid waste recycling and mushroom growing.

2.9a Construction of spring wells

We appreciate the importance of a community having easy access to safe water for a variety of uses. Whereas we had constructed some wells in some locations in Wakiso district we felt that the coverage was still inadequate. To that effect we planned to construct more wells so that more communities could have access to safe water for their household use. We anticipated constructing at least 10 wells during 2014.

2.9b Hygiene and Sanitation advocacy

We planned to conduct advocacies in respect of good hygiene and sanitation practices in the program area. We decided to do this because some households still had poor hygiene and sanitation facilities. So we hoped that conducting those advocacies in the area would bring about tangible results in that regard.

3.0 ACHIEVEMENTS MADE IN 2014

3.1 Scholastic materials, shoes and soccer balls to orphanages and fundraising for the construction of storeyed classroom building

In January 2014 KACCAD received a donation of shoes and scholastic materials donated by Chris Tabakin, Mike Bullick, Jennifer Danby and Debra Jablonski. The shoes were given to the two KACCAD partner orphanages namely Faith Children's Foundation and Good Hope Children's Foundation. Also, the group donated soccer balls to Good Hope Children Foundation; 4 wheel chairs to two children and 2 adults with disabilities. There were also donations of scholastic materials to Faith Children's Foundation by Elizabeth Labrie, Brynna Boettcher, Frankie Lewis, Laurel Aberie, Jordan and Joseph Whalen.



Hollie Lorentz and Chris Tabakin fundraised money which enabled us to construct the foundation of a storeyed classroom building at Good Hope orphanage.

3.2 Relief aid to vulnerable communities

In May 2014 KACCAD received food relief aid from With God's Little Ones (WGLO), a nonprofit organization based in Missouri, USA. The donation consisted of 78 cartons of casserole. This donation helped in meeting the dietary needs of 125 households of elderly persons and their dependants, 221 households of HIV/AIDS patients and 98 female-headed



households. The items were issued out to eligible recipients during home visits. Part of the food aid was also provided to the two orphanages affiliated to KACCAD. In addition to the food relief, 4 institutional rocket stoves were donated to the two orphanages as well as All Saints Primary School. Also, 15 high energy efficient household rocket stoves were donated to 7 households of elderly persons, 3 families with disabled children, and 5 female-headed households. Furthermore, blankets, clothes, solid soap and cooking pots were distributed to disadvantaged families during outreaches. In August 2014, Chris Kuhn and his family fed 2 families of needy persons. The families included a female-headed household with a disabled child living in Bulenga, and a household of a HIV/AIDS widow with 5 children. One of the sons in the second family is also

HIV positive and the daughter is mute. Students from Falkenbergs – Montessriskola in Onyxen, Sweden donated 200 Long Lasting Insecticidal Nets (LLINs) to Faith Children's Foundation, Good Hope Children's Foundation and All Saints Primary School.

3.3 Organizational development

In 2014 KACCAD acquired a new website. It features every aspect concerning the organization, including the on-going projects, the phased out projects, the planned projects as well as any other essential information concerning the organization. The website further features the impacts of the programs and projects which KACCAD has implemented and those still under implementation. The site also guides well wishers on the form of assistance needed to address the concerns of vulnerable communities, and how to convey your donation in that regard. One now can visit the organization at www.volunteerkaccad.org.

3.4 Health services delivery support program

In May 2014 KACCAD received a grant from the Cameron and Jane Baird Foundation. The grant was allocated evenly between Bbira Health Center and KACCAD Medical Center. The grant was used to provide free family planning and reproductive health services to women as well as to increase access to free or low cost contraception by women and adolescent girls of child bearing age. The support bridged the family planning knowledge gap for a considerable number of women and teenage girls. As a result, 1,541 expectant mothers, 950 young mothers and 1,951 adolescents attended four training sessions at Bbira Health Center. Also, 2,100 women of child bearing age attended four family planning and reproductive health training sessions at KACCAD Medical Center. After receiving these free trainings the women later came back and received free contraception services.

Another undertaking completed under the health program was the baseline survey on the level of reproductive health knowledge and access to family planning services among women of child bearing age in Mumyuka, Wakiso Sub County, Wakiso district. Also, in June 2014 KACCAD received a grant from the Atlantic Philanthropies through Ben Kerman. This grant was used to complete solar electrification at Bbira Health Center as well as to purchase medical equipment, including a solar refrigerator with batteries, a solar panel, one microscope and one ultra-sound scan. The acquisition of those equipments has enabled Bbira Health Center to improve service provision to expectant mothers, nursing mothers and other vulnerable persons who seek medical services from the health facility. Nursing mothers receiving post natal care from Bbira Health Center were given clothes for their babies. The clothes had been brought by ABV volunteer Elizabeth Labrie.



In order to cause increased access to health services from public health facilities we conducted a number of sensitization meetings among the communities in which we run the health services delivery support program. These sensitization meetings were meant to empower the vulnerable people to be able to demand for unconditional access to quality health services just like the other members in their settings. In this regard we sensitized vulnerable people on the available health services by health facility and the proper approach in demanding for such services. We explained to them that it was their right to access non conditional medication of any form just like other persons in their communities. Advocacy interactions were also held with the local authorities and health service provider leadership to influence them to ensure that health services in their respective locations are provided to clients or patients with a non discriminative approach. In this way, the health service delivery sub sector would become adequately accommodative of the health concerns of the vulnerable people.

Another activity we did was to conduct outreaches in the communities which we serve. In regard to this we made a total of 218 home visits. The purpose of conducting these visits was to make follow ups regarding the health status of vulnerable persons under our program service delivery, provide tailored health education (including reproductive health, hygiene, sanitation and avoidance of various communicable diseases), and provide various forms of assistance as was deemed necessary. During the home visits we also encouraged people to go for HIV testing to enable them to know their sero-status. At the partner health facilities we further carried out free

HIV counseling and testing. In this respect 1234 people were provided free HIV counseling and testing and they got to know their sero-status.

Furthermore we held health education sessions at local schools in our area of operation. These sessions were tailored to the health aspects of children and adolescents. In this regard a total of 895 pupils and students received the health education. We encouraged the Senior Women and Senior Men teachers in the schools to increase their efforts in imparting health knowledge (especially reproductive health) to their pupils and students. For the schools which were lacking these special teachers we encouraged their administration to institute them (a male and a female for each school).

A positive impact of these education sessions conducted at health facilities was realized, as evidenced by the increase in the number of antenatal care seeking women on the days that we were offering health education. The increase in the turn up implied that the recipients attached great value and or benefit to the health education being offered to them.

3.5 Solar light distribution program

In 2014, the funds from Atlantic Philanthropies were in part used to purchase 50 small solar lanterns and 50 large solar lanterns with cell phone charging capacities. The lanterns were distributed to objectively identified needy persons to cater for their lighting and income generation needs. The funds from Atlantic Philanthropies were further used to finance a baseline survey through which KACCAD in partnership with Let There Be Light International sought to establish the lighting needs of vulnerable people in the remote district of Gomba. The funds also facilitated the purchase of 16 portable solar lanterns for demonstration purposes as the researchers and field officers were gathering data from Gomba district. After demonstration the solar lights were donated to the health centers in the district. The same grant from the Atlantic Philanthropies enabled kids and teachers at Faith Children's Foundation and Good Hope Children's Foundation to acquire 200 solar lanterns to meet their lighting needs. These lights were distributed evenly to students and families at the two orphanages. In addition to that KACCAD was privileged to receive a donation of a complete set of solar equipment from With God's Little Ones (WGLO's) which was donated to electrify the chicken farm.



3.6 Scaling up the chicken project

In June 2014 KACCAD received a grant from the Atlantic Philanthropies for scaling up the chicken project, an income generating and jobs availability promotion project in Bulenga. The purpose of scaling up the chicken project was twofold. Being an income generating activity it serves to sustain the various on-going projects that KACCAD runs, and meeting the administrative costs of the organization. Secondly, once the chicken project attained full scale operation level, KACCAD would have the capacity to provide adequate startup resources to meet the income



generation needs of widows, youths, people living with HIV/AIDS, families caring for OVCs and other at-risk groups. KACCAD's goal in this regard was to increase the chicken population to a minimum of 4000 layers.

The grant money was allocated to procurement of 400 mature layers which increased the laying stock to 900 birds. The increased income level from the project enabled KACCAD to train people in chicken rearing business and to support vulnerable households in various ways as per their specific needs. KACCAD also received donations from WGLO and Amanda Mulholland and Gabe Van Lelyveld in December 2014, which were used to procure chicken feeds as well as paying the salary of the farm attendant.

3.7 Business skills training

In August 2014, ABV volunteers Camir Ben Omar from Morocco and Christopher Kuhn from Eugene Oregon, USA conducted business skills trainings in Bbira, Bulenga and Kirimamboga villages with the assistance of KACCAD Administrator George Mike and coordinators Nabwami Barbra, Najjuka Peruth and Nakalega Sylvia. The purpose of the trainings was to improve business operation skills of the participants who were already running their small businesses, and to attract others not yet business owners to start off businesses that require little startup capital.

Participants of these trainings were women (most of them widows) and youths from the mentioned villages. Some of them already owned and were running small businesses including petty trading, mushroom growing, crafting, and making liquid soap, briquettes, sale of local brew and cattle rearing.

The participants were trained in the skills of locating the business strategically, cost effective sourcing of raw materials, labour rationing in terms of time allocation and manpower numbers, specialization vis-à-vis diversification, marketing aspects and record keeping. They were also encouraged to adopt the culture of saving once they start to earn some income. During the trainings the participants were able to share their business experiences with colleagues. The major challenges they cited were the limited accessibility to startup capital and the difficulty in obtaining market for the products.



4.0 CHALLENGES ENCOUNTERED

We managed to accomplish the undertakings described above as achievements. However, in implementing the programs we encountered some challenges as explained here below.

4.1 Ever increasing number of applicants seeking assistance

The number of needy people who came to our office and those whom we identified in the field (during outreaches) for benefitting from our projects were overwhelmingly high. However, our

financial resources were limited and it became practically difficult to cover each and every needy person. The option we had was to continue to look for more resources so as to try to address the concerns of the needy people in our program area. So we managed this challenge by focusing on the neediest persons and building more partnerships with several donors in order to obtain funds needed to meet financial expenditures of the programs of our organization.

4.2 Lacking transport means

We have not yet acquired any motorcycle to facilitate staff transport to carry out field work. Using public means pose challenges of delayed execution of tasks and related issues. To overcome this we are trying to seek financial assistance from willing donors to enable us procure at two motorcycles to facilitate our service delivery.

4.3 Inadequate training equipment

We lack modern training equipment which would improve our efficiency in conducting the trainings. Since we are involved in training as one of our major organization activities we need to have an overhead projector. Thus training content would be better prepared as slides for presentation during training sessions. Then the practicals would get longer period of time to enable the trainees attain high levels of competency in the skills which we train them.

4.4 Financial limitations

We wish to implement a number of projects in order to reasonably address the concerns of vulnerable persons yet we lack the required funds. In this regard we find ourselves in a situation whereby we cannot go in for a project because the funds needed for its implementation are lacking. To mitigate this challenge we continue to lobby for funding from a diversity of funding agencies. We are hopeful that our lobbying efforts will meet favourable consideration

5.0 PLANS FOR THE YEAR 2015

We have a number of undertakings planned for the year 2015 as described below.

a. Family planning project

Under this project we realize that bridging the knowledge gap regarding family planning and reproductive health; and accessing the various family planning services still need considerable attention. In view of this we plan to restock KACCAD's pharmacy at Lusaze and then use the income from pharmaceutical sales to finance the provision of free family planning services including free contraception to underprivileged women and adolescents of child bearing age in our program implementation area. We also plan to identify persons willing to provide services to communities, train them in family planning aspects, awareness creation and counseling skills, after which assessment will be made to objectively select the most appropriate to serve as Village Health Teams (VHTs). So, these VHTs will undertake door to door sensitization of communities about family planning issues and counsel women and adolescents of child bearing age to enable them to make informed choices in adopting family planning methods.

b. Assistance to education institutions

KACCAD provides support to two orphanages. These ones contain OVCs who need various forms of assistance especially scholastic materials, food items, sports equipments and clothes among other necessities. In 2015 we plan to mobilize various forms of assistance from the donor

fraternity to be offered to the orphanages. We intend to lobby our current partners in resource mobilization to identify other entities from which we can obtain the needed assistance.

c. Solar installation at health centers

Health centers are integral partners in service delivery to project beneficiaries. In regard thereof, we plan to obtain grant money to be used in procurement and installation of solar equipments at Bbira Health Center in Wakiso district, and health centers in the remote district of Gomba. We believe that solar electrification of the health centers will enable them to improve their service delivery to communities since the health staff will be able to work all the time without light being a limitation.

d. Solar distribution to needy households

The intervention so far carried out in Wakiso district is not enough because all vulnerable households are not yet covered. Also, baseline information regarding Gomba district indicate an overwhelming need for solar intervention in that district. In view of that we plan to lobby for more funding to enable us procure more solar lanterns. These will be distributed to objectively identified beneficiaries in the two districts.

e. Follow up survey on impact of solar light program

The solar light program has undergone implementation for a considerable period of time and we would like to establish the extent to which it has benefitted the vulnerable communities. In this regard we intend to conduct a follow up survey in both districts of operation.

f. Scaling up the chicken project

The chicken stock was increased to 900 birds, yet KACCAD's goal was to attain a stock level of 4000 layers. This implies that we still need to acquire more chicken in order to realize that goal. Accordingly, we plan to lobby for grants to enable us procure chicks, chicken feeds and other equipments needed in the rearing of chicken.

g. Organization capacity building

We realize that a number of files become created as we continue to implement projects. This necessitates us to have a filing cabinet in place. Also, the increase in number of clients we handle and the staff which attends to the clients calls for more office furniture. We further need more operational equipment in our day to day implementation of projects. We need motorcycles to facilitate staff movement in the field. We therefore intend to lobby for funding to enable us acquire those items.

h. Health insurance program support

We plan to lobby for funding to enable us meet the medication expenses of our staff and that of teachers at our affiliated two orphanages. We believe this initiative will greatly cause expenditure relief to the beneficiaries thereby improving their well being.

i. Assistance to people with disabilities

If resources become available we plan to mobilize relief items and mobility equipment for people with disabilities in our program implementation area. Such items will include among other things wheel chairs, beddings, clothes and food donations.

j. Assistance to the tailoring project

The tailoring project trains vulnerable persons in tailoring skills which in turn help those people to become self reliant when they start and sustainably operate their own tailoring businesses. In this regard we intend to lobby for assistance in form of sewing machines and other materials and equipment necessary for improved training of the vulnerable people who attend the sewing sessions. We would also wish to provide the skilled trainees with startup capital in form of sewing machines plus other materials required in running the tailoring business.

k. Strategic planning

We attach great importance to strategic planning because this provides strategic direction in implementing the programs and projects of the organization. In this regard we plan to hold a strategic planning meeting during which we shall deliberate on strategic goals, strategic objectives, core values, strategic approaches in resource mobilization and programs implementation, strengths and weaknesses, monitoring and evaluation strategies, and sustainability strategies among other things. Thereafter a three years strategic plan will be developed.

6.0 CONCLUSION

We have been able to accomplish the undertakings described in the report. We were unable to accomplish some of the previously planned undertakings simply because we lacked the necessary financial resources to do so. Nevertheless, we encountered some challenges which we tried to mitigate to a certain extent. During the year 2015 we need to intensify our lobbying process in order to succeed in mobilizing resources needed to accomplish the undertakings which we have planned to fulfill in that year. We believe that our partners in development will continue to be cooperative and helpful as ever, to enable us continue to provide beneficial services to vulnerable communities in our programs implementation areas.