

**ORANT CHARITIES AFRICA
MONTHLY REPORT**



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Healthcare Program

Executive Summary

Kasese Health Center is in Traditional Authority Chakhaza, Dowa District along M1 road (Kasungu – Lilongwe) in Malawi, Africa. The Health Center is operated by Orant Charities Africa in coordination with the Ministry of Health (MOH). Orant Charities Africa healthcare program assists patients through Kasese Health Center (static clinic) and Mobile Outreach Clinics (MOC) which reaches parts of Kasungu District. The Healthcare program provides curative and preventive health care services to impoverish rural communities. Kasese Health Center operate a busy Outpatients Department (OPD), **10** bed capacity **24** hours children observation ward, and a **7** bed capacity maternity ward, twice a week Antenatal Program, weekly Cervical Cancer Screening and monthly Eye Clinic, Under-Five Clinics (immunization and child growth monitoring) e.t.c. MOC takes the services to hard to reach areas thereby making healthcare accessible. Tropical infectious diseases are common health problems which includes: malaria, respiratory disease like pneumonia and bronchitis. However, non-communicable diseases are at the rise for example diabetes and hypertension.

For the month of September 2022, Kasese Health Center (KHC) saw **1653** patients at (OPD). Children Ward had zero admission. Twenty Eight patients were seen during weekends and nights. Total patients seen in the month of September is **1681**. MOC in Kasese catchments area saw **635**. Kasungu (Bowe) Outreach clinic saw **3312** patients. MOC total patients seen is **3947**. Total patients seen in the month of September 2022 is **5628** (KHC: **1681 (30%)** & MOC **3947 (70%)**).

The Laboratory department tested **591** for Malaria, out of which **34** were positive, representing **6%** positivity rate.

The Maternity department admitted **41** mothers and referred **9**. A total of **41** babies were born and **3** had complications (**1** Still Birth Macerated **1** Asphyxia and **1** Weight < 2500g).

The Public Health department with the help of Health Surveillance Assistants (HSAs) administered **164** doses of Pfizer-Booster, **163** Doses of Pfizer and **38** doses of J & J. Cumulatively, **2631** vaccines were administered (Astra-Zeneca **895**, Pfizer: **1380** & J&J: **356**).

The HIV Testing Services (HTS) department tested **213** clients out of which **5** were positive, representing **2.3%**. Total patients seen at the eye clinic by an outsourced clinician is **84** and **11** patients were booked for surgery. **16** women were screened for Cervical Cancer and **1** was positive after Visual Inspection with Acetic Acid (VIA).

Monthly Attendance for both KHC and MOC

Table 1 Below shows monthly patients seen in both KHC and MOC.

Months (2021)	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Total
OPD Static Clinic	2138	2484	3178	1892	1921	1675	1295	605	1653	16841
Bowe Outreach	2174	4242	4661	4091	2773	2444	2617	3822	3312	30136
Kasese Outreach	618	589	686	550	495	492	711	618	635	5394
Children Ward	16	85	79	70	35	35	25	0	0	345
Nights/Holidays	30	44	46	49	41	21	30	37	28	326
Total	4976	7444	8650	6652	5265	4667	4678	5082	5628	53042

Figure 1 below shows total patient attendance for both KHC and MOC in 2022

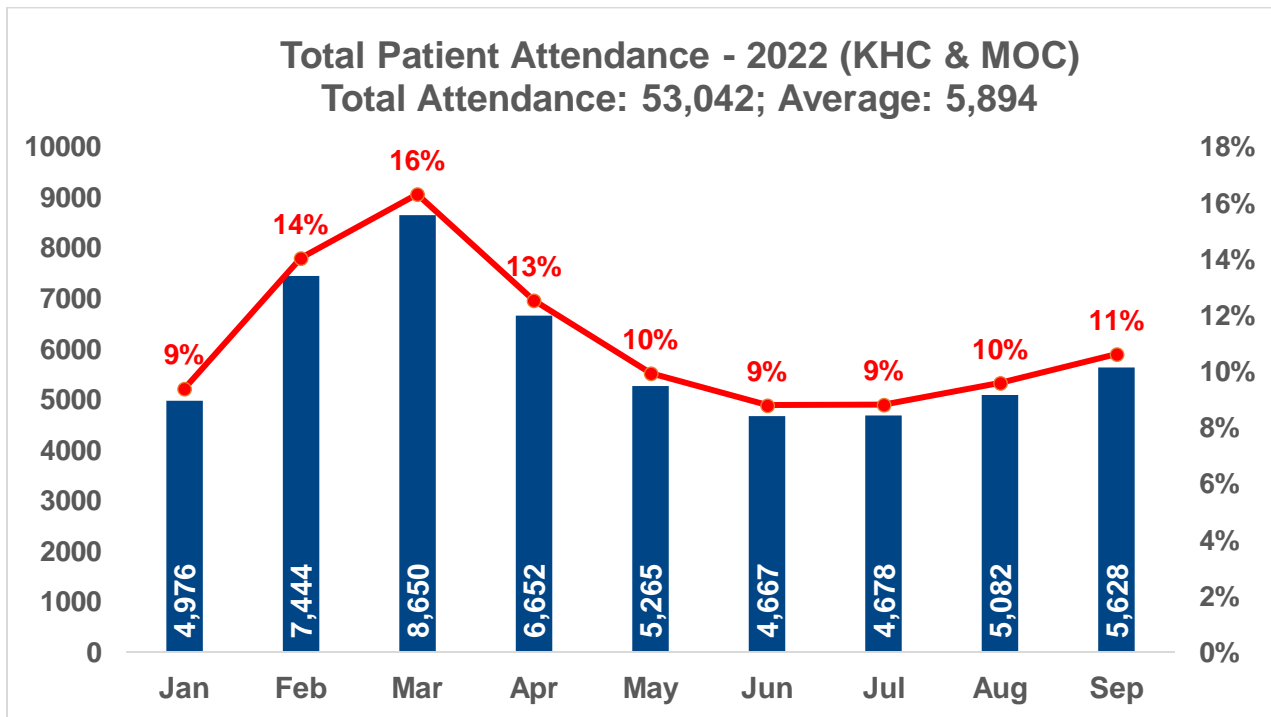


Figure 1 : Total monthly patient attendance – KHC & MOC (2022).

Figure 2 below shows total number of patients seen at KHC (OPD Static and Kasese Outreach) and Bowe Outreach.

Total Attendance KHC (OPD Static and Kasese Outreach) and Bowe Outreach - 2022

Total KHC (OPD Static & Kasese Outreach) : 22235; Total Bowe Outreach: 30136;

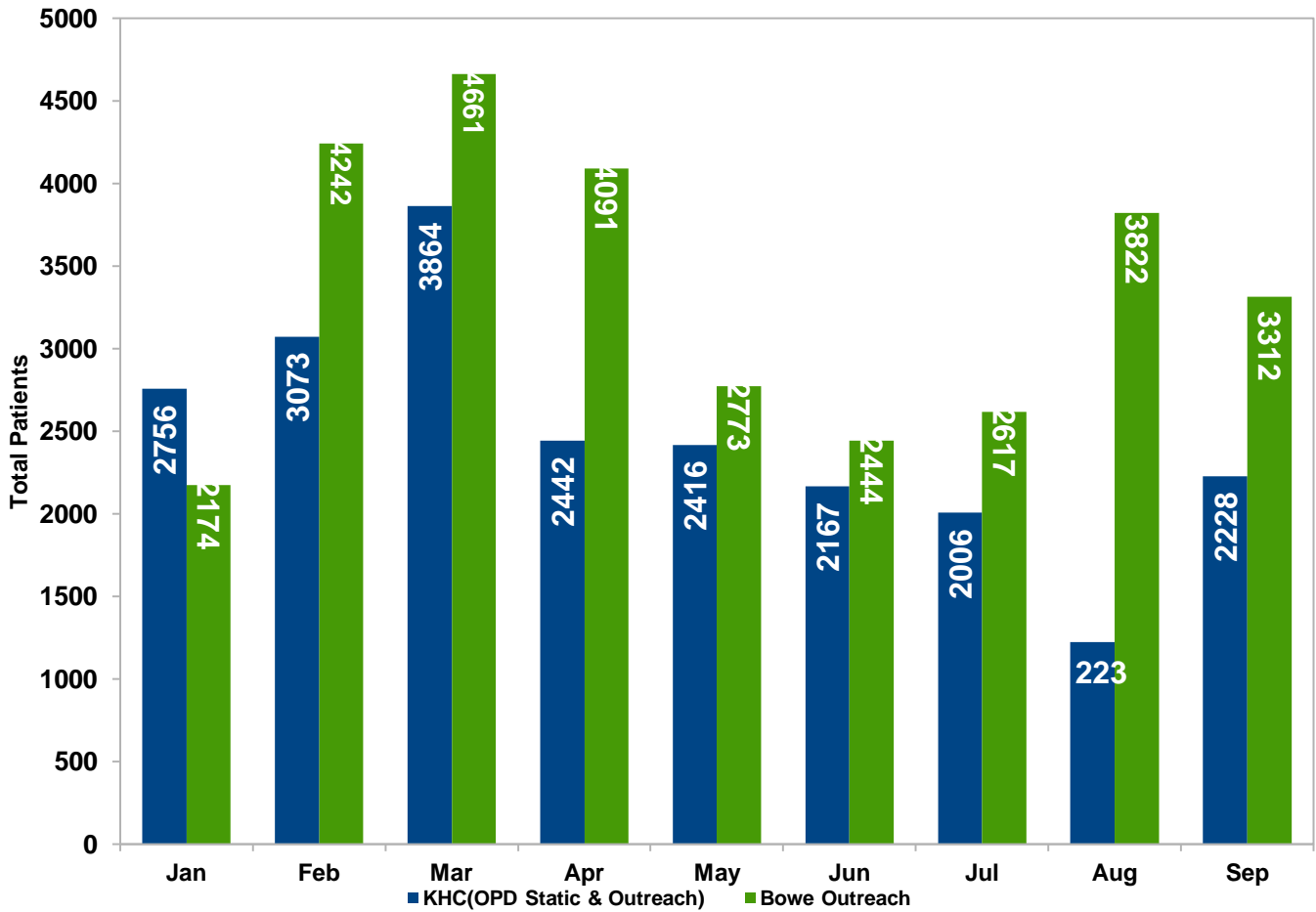


Figure 2: Total patients seen at KHC (OPD Static & Kasese Outreach) and Bowe Outreach – 2022.

Figure 3 below shows total number of patients seen at KHC (OPD Static) and Kasese Outreach.

Total Attendance KHC(OPD Static) VS Kasese Outreach - 2022
Total Attendance :19947 ; KHC OPD Static: 16841 ; Kasese Outreach: 5394;

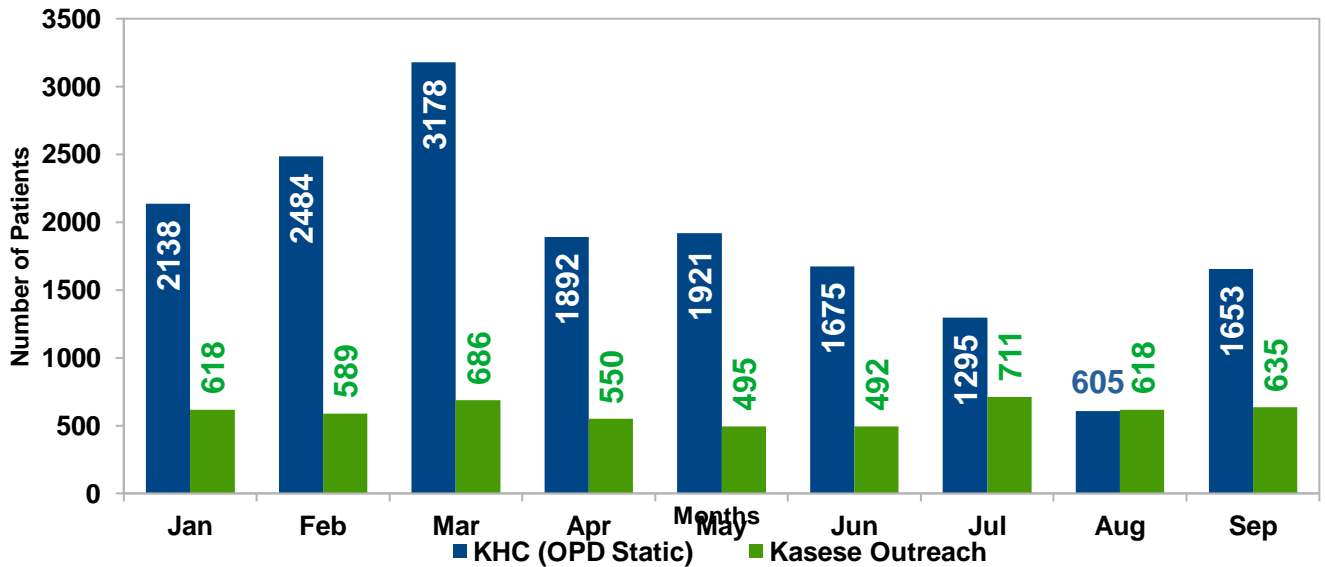


Figure 3: Total Attendance KHC (OPD Static) and Kasese Outreach – 2022.

Figure 3: shows the total number of patients seen at KHC (OPD Static) and MOC (Bowe & Kasese Outreaches). Despite the decline in patient’s attendance in both clinics, mobile outreach clinic continues to see more patients in comparison with static clinic, partly is due to its accessibility to community.

Figure 4 below shows the total number of patients seen at KHC (OPD Static) and MOC(Bowe & Kasese Outreaches).

KHC OPD Static VS MOC (Kasese & Bowe) - 2022

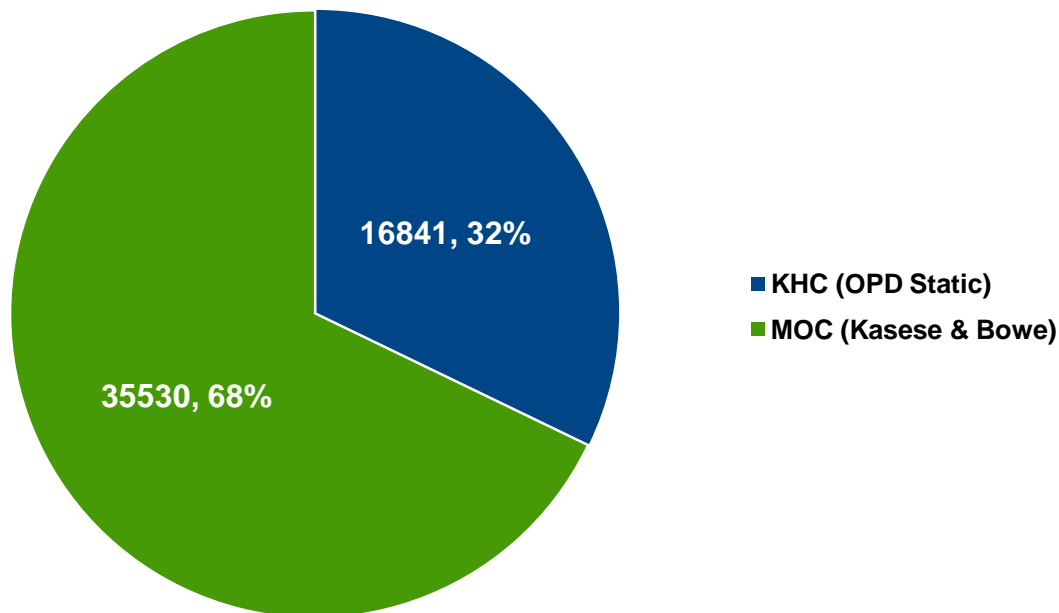


Figure 4: Cumulative patients seen at KHC (OPD Static) and MOC (Kasese & Bowe).

COVID 19 Situation Updates

The COVID 19 situation in the country remains low and in September 2022 no test was conducted. The Health Center continues to provide vaccines at the facility and in our communities and also the clinic continues to observe the preventive measures (face masks, social distancing and hand washing/sanitizing) where necessary.

3.1 Cumulative COVID 19 Data – KHC Static.

Table 2 below shows Cumulative COVID 19 Data.

	Staff(OCA/HSA)	Others	Total
Cumulative Tests	4	35	39
Cumulative Positives	0	12	12
Cumulative Deaths	0	0	0
September Tests	0	0	0
September Positives	0	0	0

Table 2: COVID 19 Cumulative Data.

3.2 COVID 19 Vaccine (Pfizer) – KHC Static.

Table 3 below shows Vaccine Doses Administered in 2022

Dose	Male	Female	Total
1st Dose	18	38	56
2nd Dose	56	51	107
Booster	61	103	164
Balance Brought Forward	539	514	1053
Cumulative	674	706	1380

Table 3: Pfizer Administered at KHC Static (2022)

3.3 COVID 19 Vaccine (Johnson & Johnson – J&J) – KHC Static

Table 4 below shows Vaccine Doses Administered in 2022

Vaccine Type	Male	Female	Total
Johnson & Johnson (J & J)	15	23	38
Balance Brought Forward	155	163	318
Cumulative	170	186	356

Table 4: J & J Administered at KHC Static (2022)

3.4 COVID 19 Vaccine (Astra-Zeneca) – KHC Static.

Table 5 below shows Vaccine Doses Administered in 2022

Dose	Male	Female	Total
1st Dose	0	0	0
2nd Dose	0	0	0
Balance Brought Forward	364	531	895
Cumulative	364	531	895

Table 5: J & J Administered at KHC Static (2022)

3.4 COVID 19 Vaccine Status – KHC Static.

Table 6 below shows Vaccine Status in the month of September 2022

Vaccine Type	Beginning Balance	End Balance
Astra-Zeneca	0	0
J & J	40	0
Pfizer	150	0

Table 6: Astra-Zeneca Status at KHC Static (September 2022)

Figure 5 below show cumulative vaccines administered at KHC in the year 2022.

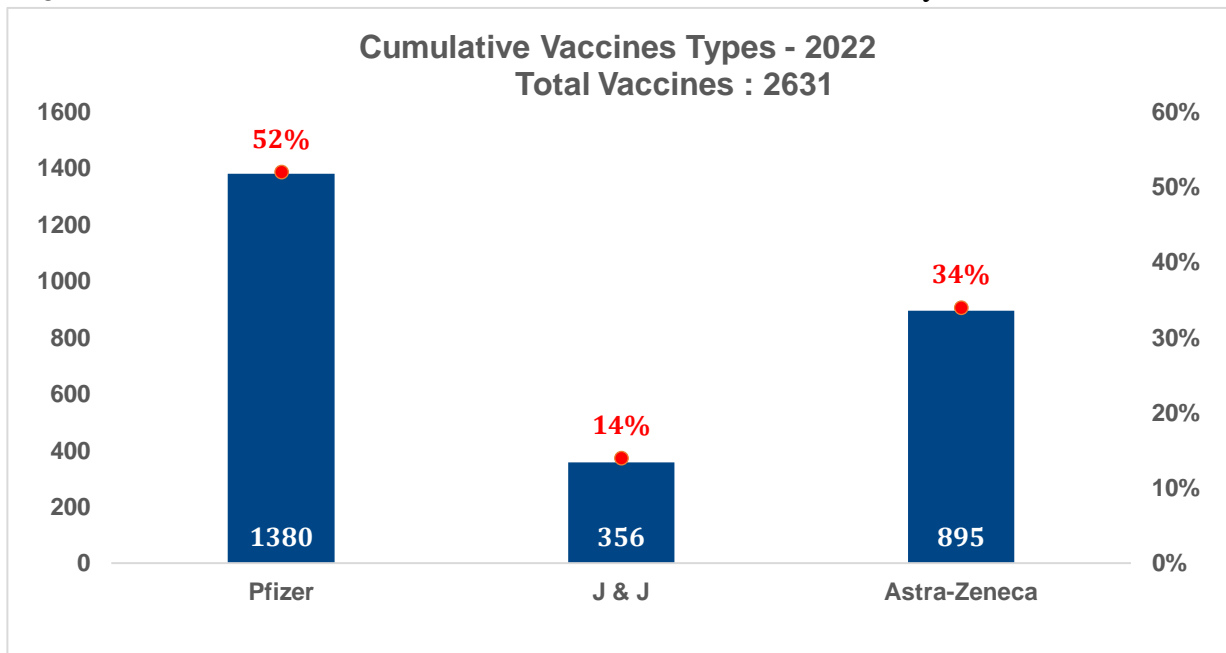


Figure 5: Cumulative Vaccine Doses Administered at KHC (2022)

Figure 6 below shows cumulative COVID 19 tests done in the year 2022.

Cummulative COVID 19 Tests - 2022
Cumulative Tests: 39

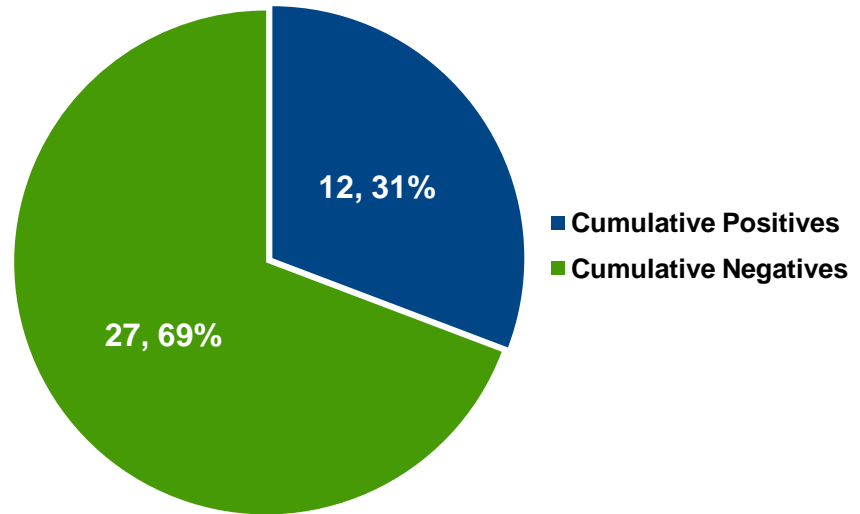


Figure 7: cumulative COVID 19 Tests (2022).

Reproductive and Family Planning Health

4.1 Maternal and New-born Health Care

Months (2022)	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Total
Admissions	21	26	29	29	24	27	38	37	41	245
Referrals	2	5	2	14	13	9	10	5	9	60
New Babies	22	26	29	29	24	27	40	32	41	243
Alive Babies	22	26	27	29	24	27	38	32	40	238

Table 6: Maternity Data - 2022

Table 7 below shows Maternity Data of new babies with complications for the year 2022.

Months (2022)	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Total
Weight <2500 grams	1	1	1	0	1	0	3	2	1	10
Prematurity	2	1	2	0	0	0	0	1	0	6
Asphyxia	1	0	5	0	0	1	0	2	1	10
Sepsis	0	0	0	0	0	0	0	0	0	0
Still Birth Fresh	0	0	1	0	0	0	1	0	0	2
Still Birth Macerated	0	0	0	0	0	0	1	0	0	1
Neonatal Death	0	0	1	0	0	0	0	0	1	2
Total	4	2	10	0	1	1	5	5	3	31

Table 7: Newborns with complications - 2022

Figure 8 below shows total Cumulative Maternity Complications for the year 2022.

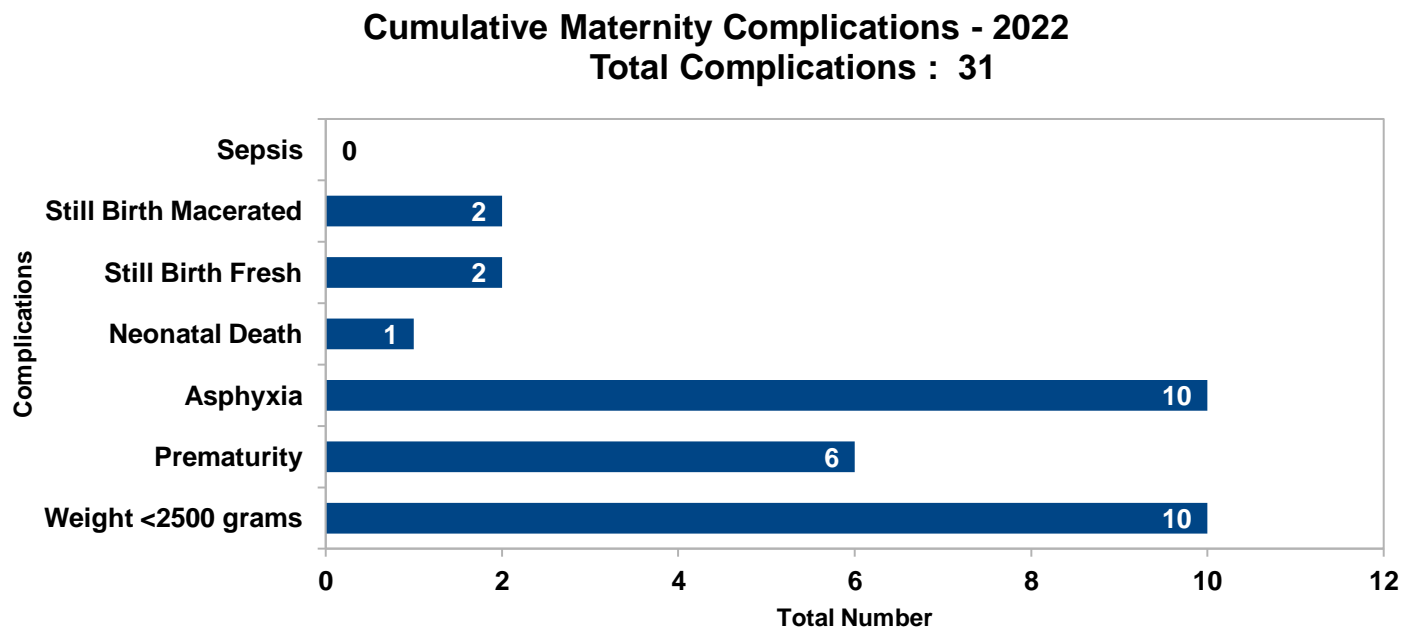


Figure 8: Cumulative Maternity Complications – 2022

Figure 9 below shows total monthly Maternity attendance.

Maternity Attendance - September 2022
Total Attendance: 50

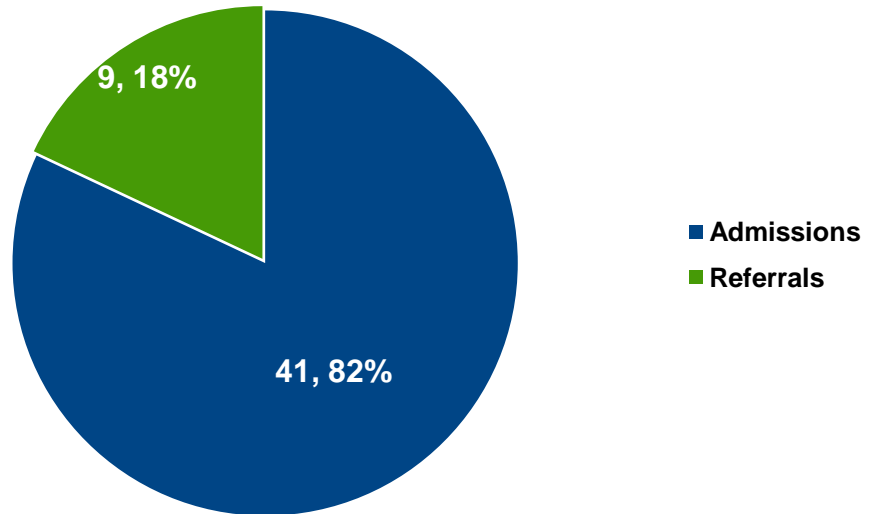


Figure 9: number of Admissions and Referrals (September 2022)

Table 8 below shows the reason for the referrals

Referral Reason	Number of Clients
Cephalopelvic Disproportion (CPD)	1
Short Prim	1
Obstructed Prolonged Labour (OPL)	5
Fetal Distress (FD)	2

Table 8: Referral Reasons - September 2022

Figure 10 below shows ANC New attendances.

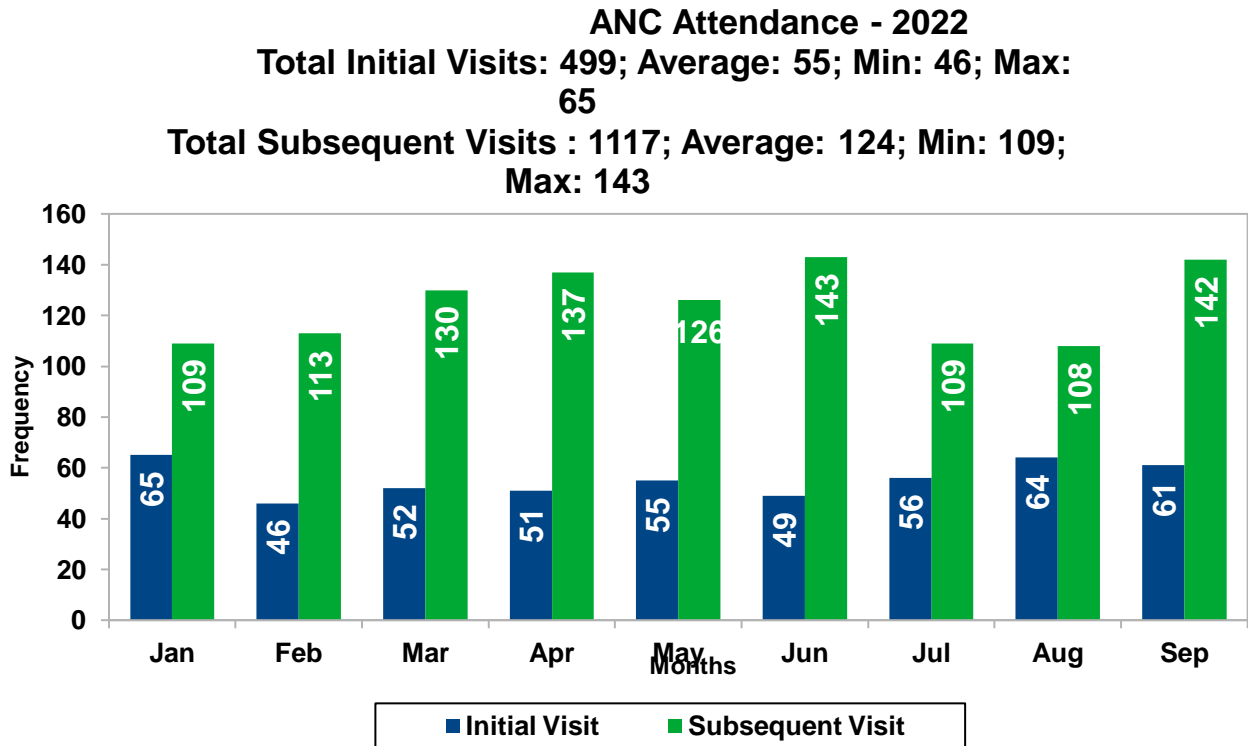


Figure 10: ANC New Attendances (2022).

Cervical Cancer Control Clinic Report

Table 9 below shows 2022 Monthly Cervical Cancer Screening.

Month (2022)	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
Total	15	22	22	15	5	10	13	15	16
VIA Positive	1	2	1	0	0	1	0	0	1

Table 9: Monthly Cervical Cancer Screening 2022 Table.

The monthly Cervical Cancer screening remains to be low, there is a need for more community sensitization.

Eye Clinic

The outsourced eye specialist continue to provide services in Kasese Health Center and operation is done at Kasungu District Hospital.

Table 10 below shows total number of clients treated for eye infections and those booked for surgery.

Month (2022)	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
Eye Infections (Treated)	12	22	18	31	31	41	44	78	73
Eye Surgery (Booked)	0	6	11	8	6	7	11	10	11
Total Seen	12	28	29	39	37	48	55	88	84

Table 10: Monthly Eye Clinic Table - 2022.

Figure 11 below shows Monthly Eye Clinic in the year 2022.

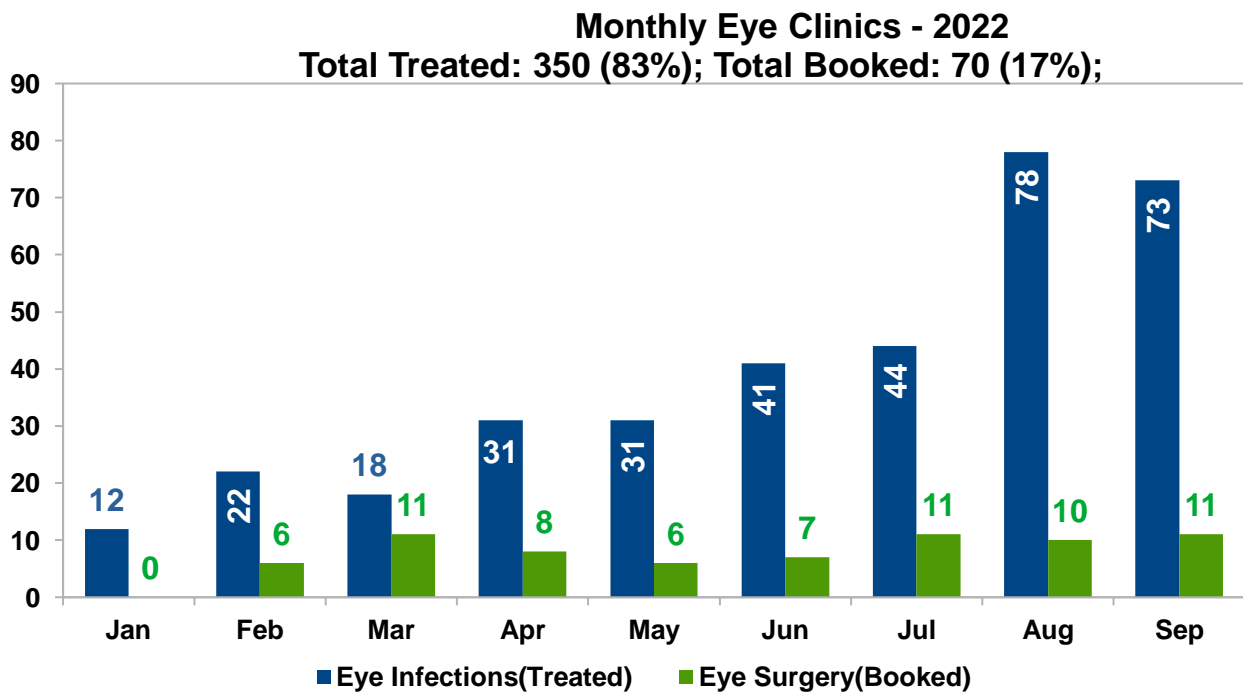


Figure 11 : Monthly Eye Clinic – 2022.

Malaria Report

Table 11 below shows Malaria tests for September 2022

	Total Tested	Positives	Negatives	Positivity Rate
Under 5	338	19	319	5.6%
5 Years and Over	254	15	239	5.5%
Total	592	34	558	6%

Table 11: Total Malaria Tests (September 2022).

Table 12 below shows total Malaria Cases (MRDT's Positive), LA Issued and Dispensed(Kasese Outreach Included)

2022	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
Suspected Malaria Cases	1535	1722	1707	988	1023	754	684	625	585
Suspected Cases Tested MRDT	1528	1714	1698	988	1023	745	681	625	584
Confirmed Malaria Cases	250	322	162	168	237	129	47	31	34
New Malaria Cases Registered	257	330	171	168	237	138	50	30	35
LA Dispensed	257	330	171	168	237	138	50	30	35
LA Issued	690	300	600	270	2470	645	0	30	120

Table 12: Total Malaria Cases, LA Issued and Dispensed Table.

Figure 12 shows Suspected Malaria Cases Tested against Confirmed Malaria Cases in the year 2022

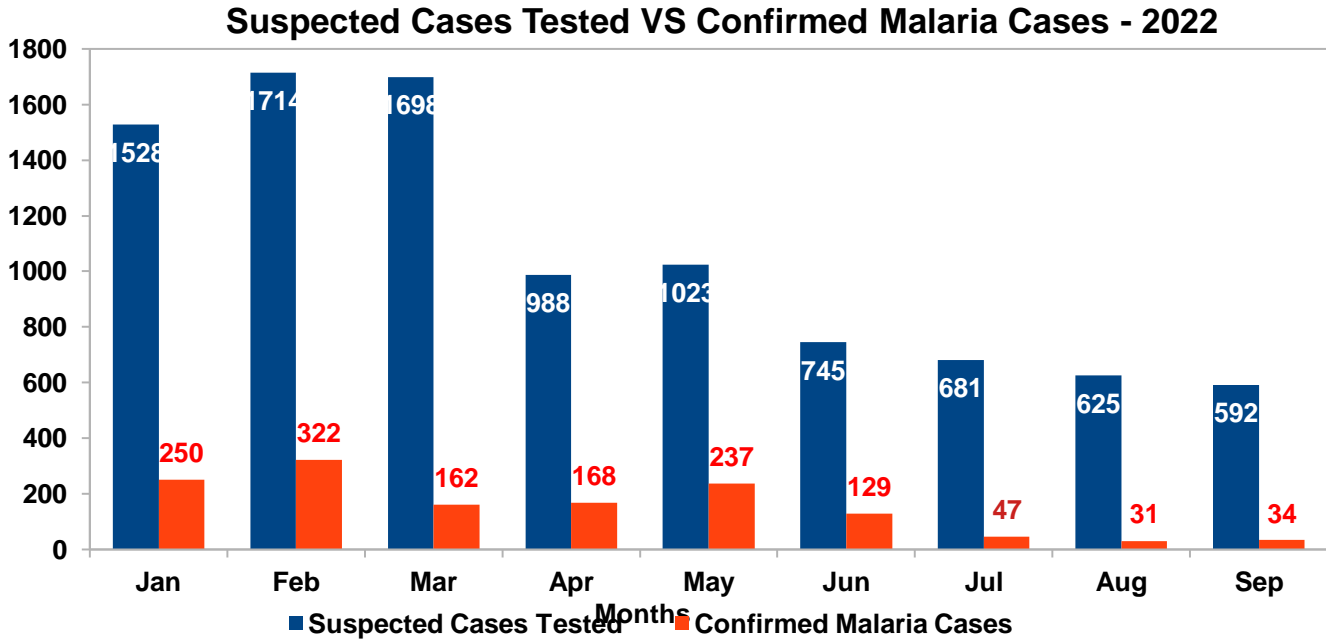


Figure 12: Malaria Suspected Cases Against Confirmed Cases - 2022

The Health Center continues to observe a drastic decline in malaria cases this year following timely interventions which include distribution of insect treated nets and its usage education in the community.

Figure 13 shows total KHC (Static and Kasese Outreach) Malaria tests (September 2022)

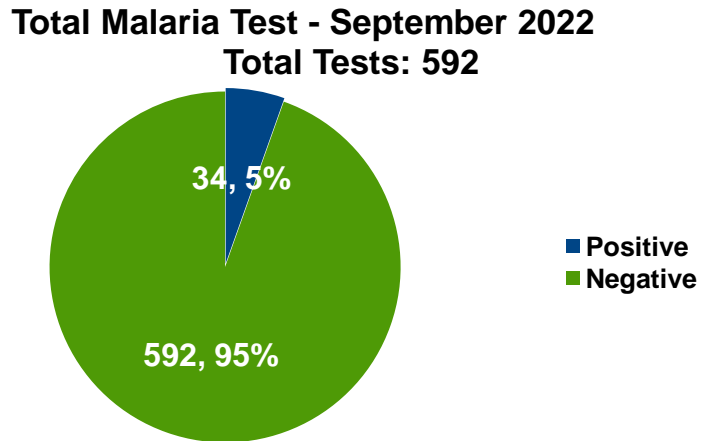


Figure 13: Total KHC (Static and Kasese Outreach) Malaria tests

Figure 14 shows total KHC (Static and Kasese Outreach) Under 5 Years Malaria tests

Under 5 Malaria Tests - KHC (Static & Kasese Outreach - September 2022)

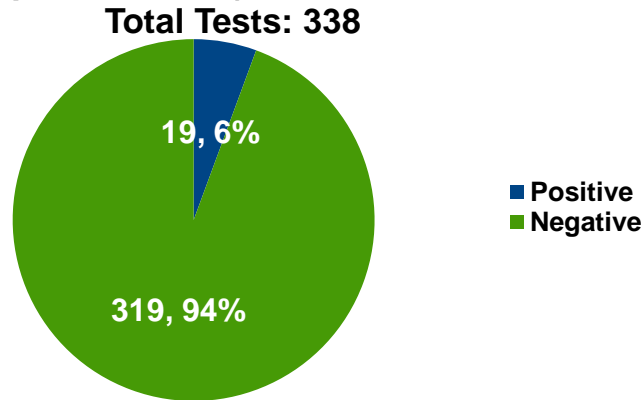


Figure 14: Static and Kasese Outreach, Under 5 Years Malaria tests (September, 2022).

Figure 15 shows total KHC (Static and Kasese Outreach) 5 Years and Over Malaria tests

5+ Years Malaria Tests - KHC (Static & Kasese Outreach - September 2022)

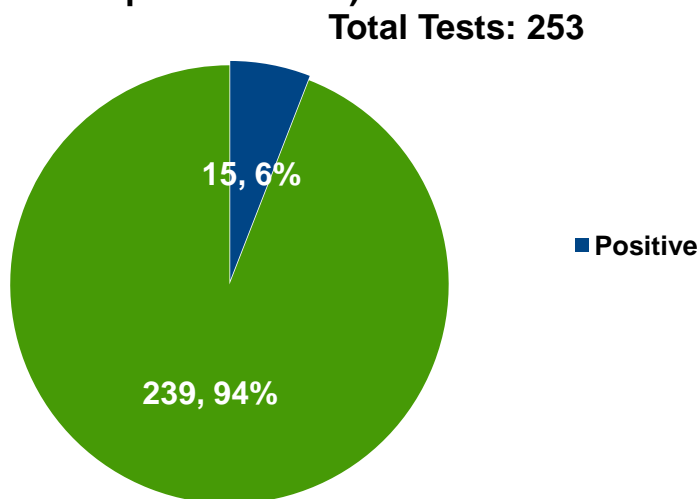


Figure 15 : Static and Kasese Outreach, 5+ Malaria tests (September, 2022).

HIV Testing Services (HTS)

Figure 16 below shows HTC Monthly Data (2022).

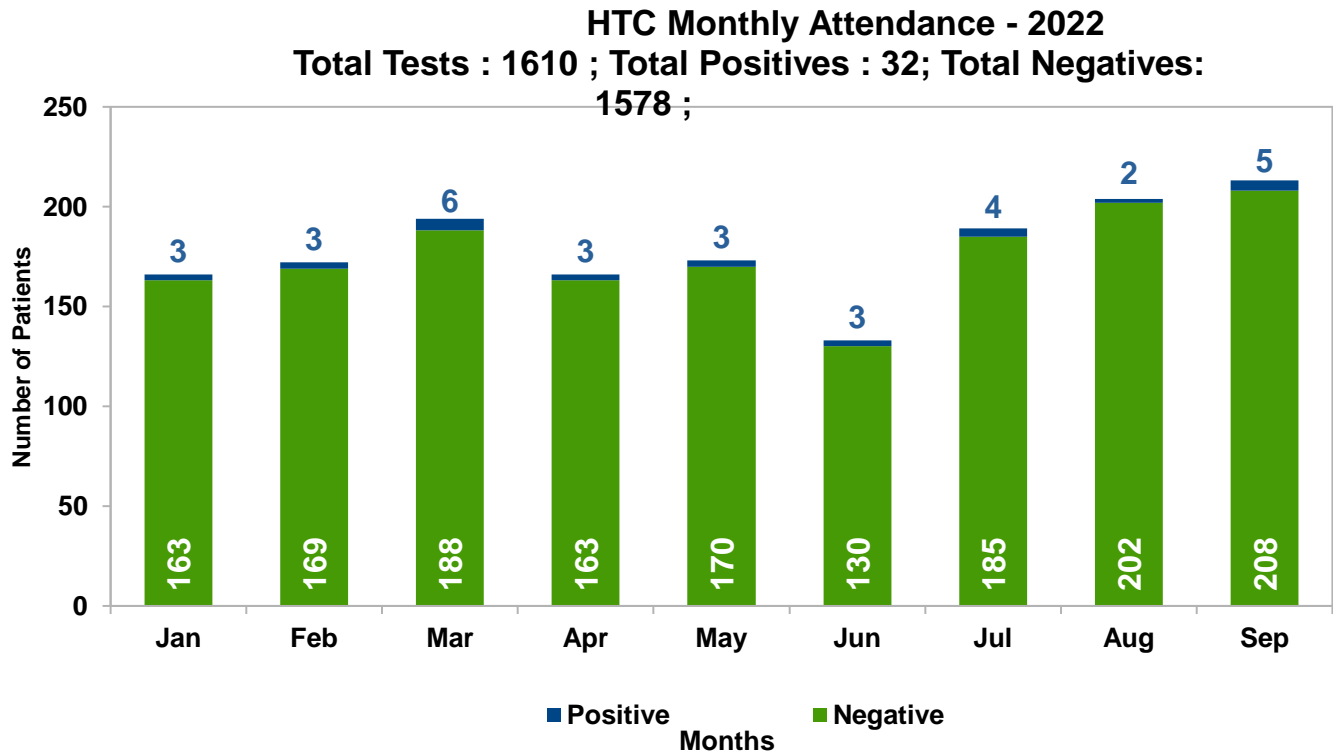


Figure 16: HTC Monthly Data 2022

Kasese catchment area positivity rate remains to be low, this could indicate that, people adhere to HIV/AIDS preventive measures.

Laboratory Services

Table 13 Below shows qualitative Laboratory tests conducted in the year 2022 (KHC Static and Kasese Outreach).

	H. Pyloris		Salmonella		Hep B		HCG		COVID 19	
	Total	Pos	Total	Pos	Total	Pos	Total	Pos	Total	Pos
Jan	69	26	6	2	2	2	30	8	30	12
Feb	88	24	16	0	1	0	41	17	3	0
Mar	79	21	17	0	2	0	43	15	2	0
Apr	80	25	7	0	4	1	19	0	1	0

May	85	25	5	0	1	0	41	17	1	0
Jun	82	34	1	0	4	0	42	18	2	0
Jul	92	25	8	0	2	1	43	16	0	0
Aug	84	17	17	3	6	0	39	13	0	0
Sep	65	13	8	2	1	0	44	19	0	0
Total	724	210	85	7	23	4	300	123	39	12

Table 13: Qualitative Lab Tests Data Table for KHC Static - 2022.

Figure 17 below shows qualitative lab tests 2022

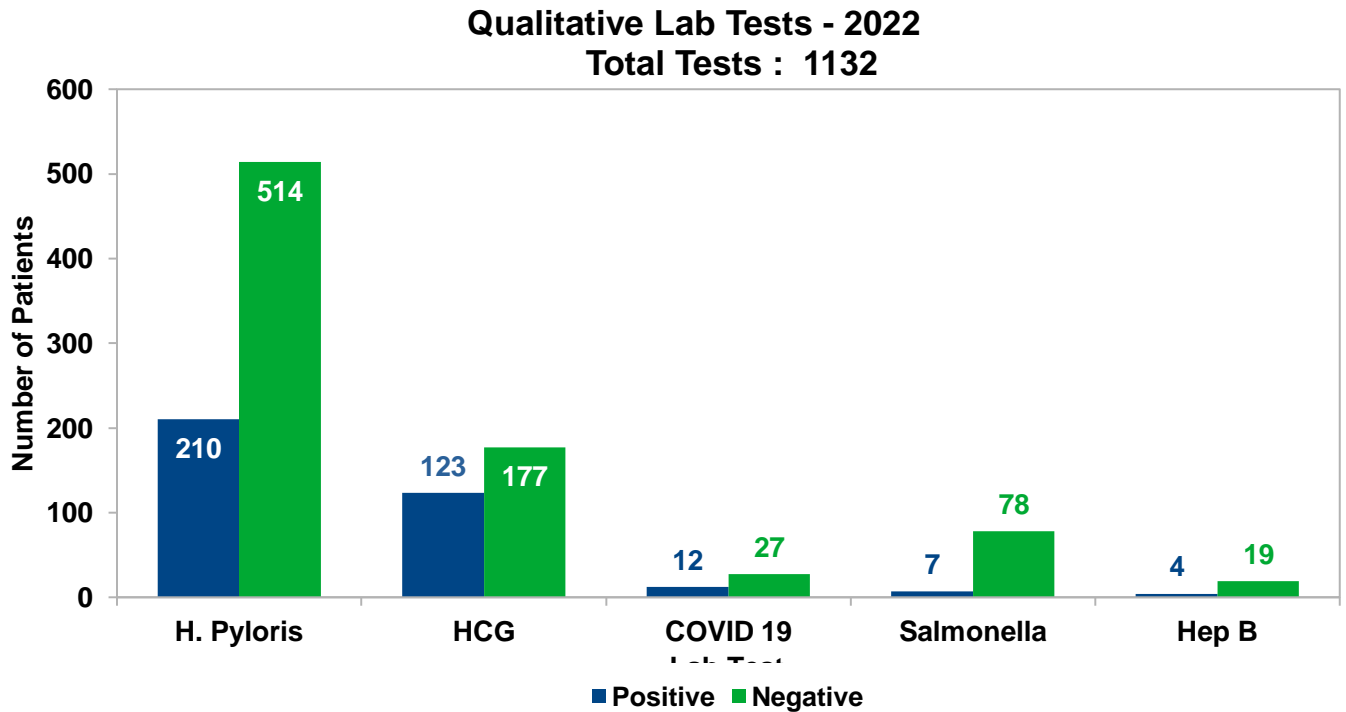


Figure 17: Qualitative Lab Tests – 2022.

Table 14 Below shows quantitative Laboratory tests conducted in the year 2022 (KHC Static and Kasese Outreach).

	Glucose	HB	Urinalysis	FBC
Jan	47	93	4	102
Feb	30	84	2	98
Mar	36	82	4	109
Apr	33	81	1	84
May	30	48	11	113
Jun	107	74	8	130
Jul	82	76	21	130
Aug	95	86	23	100
Sep	49	72	18	101
Total	509	696	89	967

Table 14: Quantitative Lab Tests Data Table for KHC Static.

Figure 18 shows quantitative lab tests for the year 2022

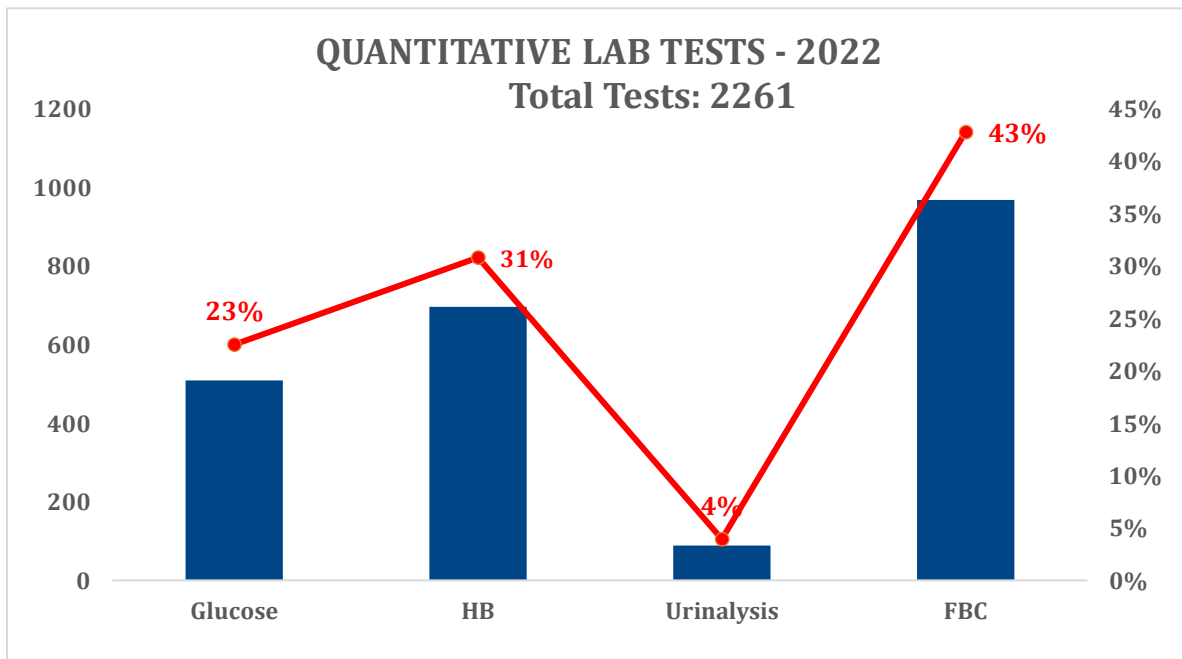


Figure 18: Quantitative Lab Tests – 2022

Disease Group Trends

Figure 19 below shows diseases occurrences for September 2022

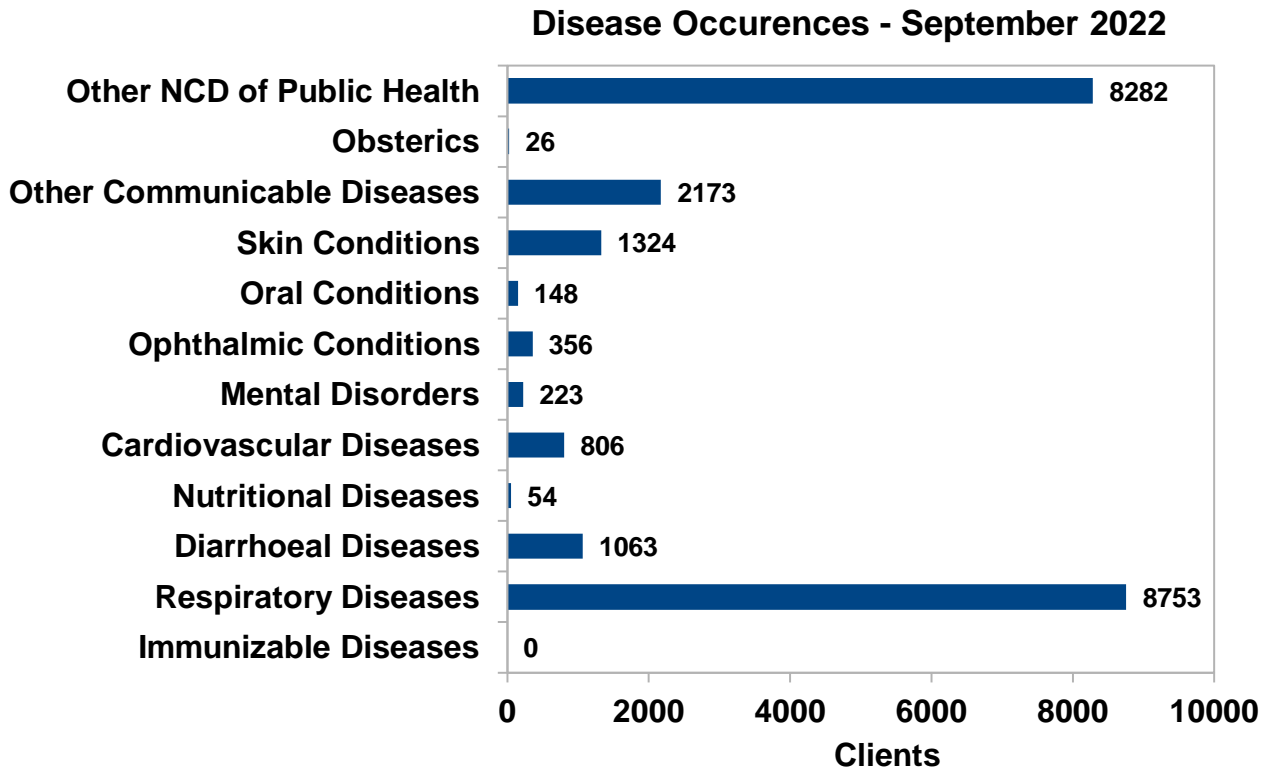


Figure 19: Disease Occurrences (September, 2022).

Healthcare Finance and Administration

Table 15 shows clinic finance table for 2022.

2022	Amount Collected	Amount Spent
January	MK 2,008,000	MK 388,170
February	MK 2,509,100	MK 506,506
March	MK 2,821,910	MK 503,235
April	MK 2,141,250	MK 467,235
May	MK 2,600,250	MK 554,705
June	MK 2,415,300	MK 613,115
July	MK 2,681,250	MK 419,800
August	MK 3,282,000	MK 383,850

Table 15: Clinic Finances – 2022.

Figure 20 below shows Expenses and Amount Collected (2022).

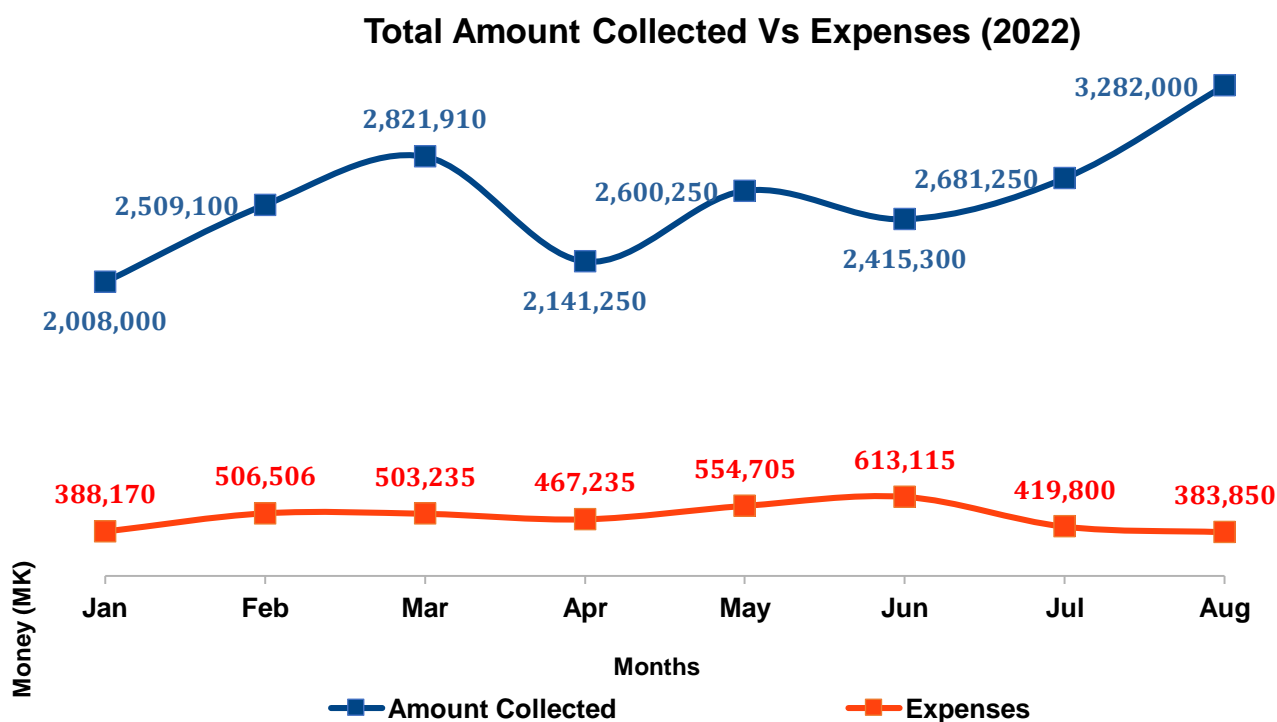


Figure 20: Expenses and Amount Collected (2022).

Achievements and Challenges

Success Highlights

1. **Audiology clinic** - In conjunction with the Ministry of Health (MoH), Dowa District Office (DHO) and African Bible College Clinic (ABC), 20 patients from Kasese catchment area benefited from audiology clinic which was held in Mponela Rural Hospital. Some of the patients managed to receive hearing aid devices.
2. **ART Clinic** - The Health Center received supportive supervision from the Ministry of Health (MoH) – department of HIV and AIDS, after thorough checking on medical records, pharmacy stock, and all other record registers, they were satisfied that Kasese Health Center continues to provide excellent care, therefore awarded Certificate of Excellency for outstanding good performance.
3. **Chicken Pox Outbreak** - The Health Center continues to receive cases of an outbreak of chicken pox which started few months ago, majority of the cases are children.
4. **Cholera Outbreak** - There is an outbreak of cholera in the country, with over 4,800 confirmed cases and 139 deaths in Malawi. Luckily, Dowa district has only

registered one case and that's in TA Msakambewa area. Kasese Health Center is monitoring the situation closely and committee has been formed to oversee the cholera preparedness. So far as part of preparedness, medicine and medical supplies have been procured and placed separate in the main pharmacy stores. Health Surveillance Assistants provides health promotion in their respective communities and marketplaces.

5. **Under Five Review Clinic** - Clinician started reviewing children in under five clinic. So far, the commonest problems are upper respiratory infections and malnutrition.

Key Challenge highlights.

1. **Dental Clinic**- There is great need for a dental clinic in Kasese Health Center.

Water and Sanitation Program

Introduction

The WASH program continues making strides towards improving access to WASH services in the Kasese catchment in line with Sustainable Development Goal (SDG) number 6. The month of September was another milestone towards achieving annual targets for the WASH program. This report provides a summary of WASH interventions conducted in September 2022.



The following key interventions were achieved in September;

- Supported 49 water point repairs
- Drilled 2 boreholes (Timoti & Kasinja village)
- Trained 2 Water Point Committees (WPC) from Fumbi and Amos villages

- Started construction of latrines at Kapini primary school

Detailed Narration of Monthly Activities

Below are detailed narrations of the key interventions conducted by the WASH program in the just-ended month of September 2022.

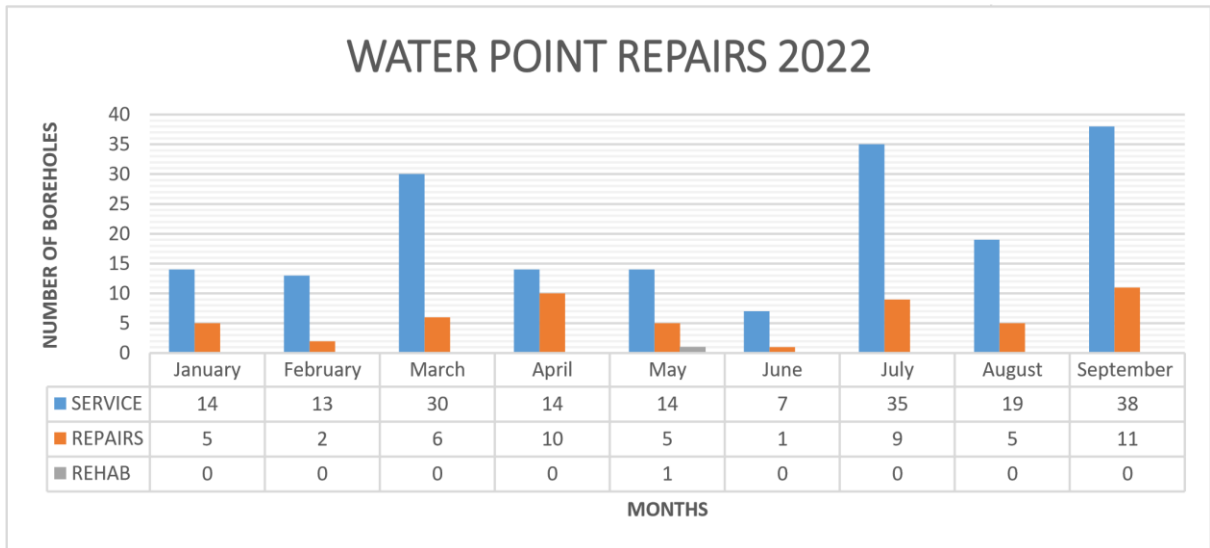
Water point repairs and rehabilitations



Pump repair session at Kamongo primary school during the month

To promote the sustainability of water points the WASH program supports rural communities in major water point repairs. In 2022, the WASH program through hand pump area mechanics continues to promote service or preventive maintenance of water points and to reduce major breakdowns of water points. In recent months the number of preventive maintenance is always higher than reactive/ major repairs which were common in the past. This trend is positive since it entails sustainability of water points in the catchment thereby putting less pressure on OCA to conduct costly major repairs. It should also be noted that hand pump spare parts used during services are purchased by communities on their own since relatively cheaper spares are required for this kind of maintenance. The service or preventive maintenance is conducted routinely every 3 months. In September the WASH program repaired a total of **49** water points (Service/preventive: **38**; Repairs: **11**). The graph below shows the trend of

major/reactive repairs and preventive/service repairs by the WASH program in 2022 so far;



A graph showing the number of repairs conducted between January to September 2022

Borehole drilling and construction



Left – Women drawing water from unprotected shallow well before OCA drilled a borehole in Amos village, right – Borehole drilling process in Amos village

To promote access to improved water services the WASH program drills new water points in Kasese. In September, the WASH program drilled 2 water points in Timoti and Miliyasi villages. The two newly drilled water points are not yet in operation pending the installation of Afridev pumps. The water point in Timoti village is expected to benefit approximately 200 people while the one in Miliyasi village is expected to benefit a total of

225 people. The two new water points take the total of newly drilled water points to 10 out of the annual target of 15.

Water Point Committee (WPC) training



*Left -A classroom session during water point committee training for Amos borehole,
Right – Practical session during water point committee training for Amos borehole*

To ensure active participation in water points management the WASH program trains rural communities in Community Based Management (CBM) of water points. In this initiative a total of 10 volunteers (forming a water point committee) from each community benefiting from a new water point are trained in minor water point repairs, water point maintenance funds management, community mobilization, water handling and water point sanitation. In September, the WASH program trained **2** WPC from **Fumbi** and **Amos** villages. The water point in Fumbi village was drilled in July 2022 while the water point in Amos village was drilled in August 2022. The two training sessions were conducted in the two respective villages for 5 days. In each village, the chief was also invited to attend the training. So far in 2022, the WASH program has trained a total of 7 WPCs.

Construction of latrines at Kapini Primary School

In September the WASH program started the construction of latrines at Kapini primary school. Kapini is the second school to benefit from the school latrine initiative in 2022. Two latrine blocks will be constructed at Kapini school; one for boys and the other for girls. Each block of latrine will have 4 latrine cubicles. These latrines are expected to benefit a total of 352 learners (Boys: 171; Girls: 181). Currently, the substructure for the

first pit latrine at Kapini is in progress. The latrines at Kapini primary school are expected to be completed in November 2022.



A pit for the first latrine at Kapini primary school

Conclusion

As we end the month of September the WASH program is excited with the progress made in 2022 so far towards attaining the annual targets. Among the major outputs, the WASH program has drilled a total of 10 boreholes, trained 6 WPCs, constructed 2 pit latrines in schools and, repaired and serviced a total of 239 water points.

Agriculture and Business

Agriculture

Introduction



During the month of September 2022, the agriculture program performed several activities in supporting smallholder farmers in the communities around Kasese. The activities were aimed at empowering the local farmers to live independent lives by having enough food and being empowered economically through irrigation farming. Below are activities which were carried out

during the reporting period.

Fertiliser and manure application

Timvane and mvunguti irrigation clubs are cultivating tomatoes and transplanting of seedlings was done. This was followed by application of Manure and fertilisers. These crops require high application of organic and inorganic fertiliser. Organic fertilisers were applied during the time of land preparation which will show much of their results during the second year of production. This results in addition of fertilisers to the plants in low levels twice (basal and top dressing) in the production cycle. Both clubs were involved in basal dressing fertiliser application where D-Compound was applied. With the power of manure which was applied, the rate of the fertiliser was reduced which has reduced the cost of the production. These applied fertilisers are of high importance to the plants as it adds a lot of nitrogen to the soils which facilitates vegetative growth and fruiting of the plants. Total of 68 smallholder farmers from clubs of Timvane and Mvunguti participated in the activity of adding nutrients to the crops for bumper harvest.



Well fertilised plants, gives more fruits per plant

Transplanting of Tomatoes

It has been observed that, in tomato production good results are obtained in transplanted tomato seedlings which promotes uniform and healthy plants on the field. Farmers start with sowing of seeds to be transplanted after 3 to 6 weeks from the day of sowing . The advantages of transplanting the seedlings include good and healthy plant seedlings that can be selected to be planted in the main field and the planting distance is more even than sowing directly in the field. A week before transplanting, seedlings should be hardened off. Hardening off is done by reducing application of water by 12 to 14 hours before transplanting the seedlings. The seedlings should be thoroughly applied with water during the time of transplanting to avoid excessive damage to the roots. Mvunguti and Timvane club members were encouraged to conduct transplanting activity during afternoon hours or cloudy days to reduce the transplanting shock. Mvunguti irrigation club was monitored during transplanting of tomato seedlings. Mvunguti club is one of the irrigation clubs which benefited from OCA solar pump distribution this year and the club has increased land for cultivation from 2 acres to 4 acres.

Harvesting and Marketing of Produce

Kasangadzi irrigation club is cultivating tomatoes and harvesting has commenced. This is followed by market identification since tomatoes are perishable crops hence ready markets are important. The club receives support from OCA in form of farm inputs to

carry out its activities of irrigation farming. Marketing exercise of the produce was done and better prices have been discovered. As such club members are expected to get better profits which will bring a lot of smiles. Club members were also encouraged to grade the tomatoes which will help in attracting customers and getting better prices for the produce. Potential buyers were identified from markets of Lilongwe, Kasungu, Madisi and Mponela. Other clubs such as Tchale are harvesting Maize.



Good quality Maize plants ready for marketing

Pests and disease control

To produce good quality crops which will easily attract customers, there is a need to control pests and disease which mostly affect the quality of the produce. Control has to start from the nursery as it is highly susceptible to pests and disease which easily disturb the quality of the nursery. Kasangadzi club is cultivating tomatoes where plants were affected with pests and diseases. The problem was observed early and control measures were conducted. The club was supported with synthetic chemicals and some expertise on proper dosage rate, the right time of application and right way of spraying the chemicals. The club members were also reminded that the best time for the control of pests and diseases is early in morning or evening hours as stomata are open for chemical penetration.



Tomato plants growing vigorously after controlling pests and disease

Planting

Timvane is cultivating three acres' land where it has planted Maize and tomatoes. During the reporting period, the club planted good maize seed. The farmers were trained on improved ways of producing maize using the Sasakawa method of production. Maize was planted at spacing of 25cm by 25cm from planting station to other planting station and 75cm between lines. Farmers were able to understand and adopt the system and were encouraged to be practising it on their fields. Club members were also encouraged to plant early maturity maize seeds which will help in reducing some production costs e.g. watering. SC403 maize variety was selected, and it matures within 75 days from the day of planting while other varieties go up to 115days.



Planted Maize with good germination percentage.

Business and Financial Empowerment Microloans

Introduction

The Financially Empowering Microloan (FEM) program was initially introduced in 2018 to support women entrepreneurs so that they become financially self-reliant. The program continues to serve the Kasese community through its mandate of providing interest-free loans and strengthening the capacity of women so that they are vigilant and successful in their businesses hence achieving OCA's overall goal thus improving livelihoods. In the month of September, the FEM program had initiated a number of activities as narrated below.

Monitoring of businesses

The national inflation rate continues to grow at an alarming rate hitting 25.5 percent, this continues to affect small and medium enterprises especially those operating locally. Despite the FEM members' efforts to keep their businesses afloat, business has not been the same as compared to the same period last year.



Successes Recorded for the month

1. Most businesses are still operational despite the economic hardships
2. Empowering others with skills
 - Goodwell Chimwaza who is one of our newest members is training a young man with disabilities to become a tinsmith



Challenges recorded for the month

1. Closure of businesses

One member by the name of Dorothy who sells doughnuts, had completely shut down her business as she had encountered losses which resulted in the collapse of the business. This has also affected the loan repayment pattern for the past two months as she had no source of income. After re-evaluation of the market situation, she has now started a tomato business to help her get back on her feet.

2. No stable businesses for some members

As a way of ensuring day to day survival, the women keep switching from one business to another on a short interval hence no stable business to show at the moment. Ireen who sells boiled Maize is an example of such women. One day, you would find her selling maize, the next day groundnuts then another day she will switch to potatoes. In doing so, the members may have a low rate of return on investment or even result in losses.



Verification of FEM Members

Field visits were carried out to the households of the women applicants to authenticate the information they had given on the application forms. From the visits, it was established that two women had given false information pertaining to their businesses and one had relocated hence they were disqualified. The remaining eleven women, the information they had provided had checked out hence they have been confirmed as new FEM members. Below is a table of new verified FEM members who will form the third cohort of the program.

Applicant's Name	Age	Primary Activity	Activity Type
1. Florence Sanudi	23	French Fries	Food Production
2. Selina Kambani	50	Selling Shoes	Product trade
3. Mary Mtonga	42	Irish potatoes and vegetables	Food trade
4. Eliza Nkhoma	52	Maize Bran	Food Trade
5. Margret Mofati	40	Powdered soap	Product trade
6. Veronica Nkhuni	42	Sells self-home grown vegetables	Food trade
7. Idah Banda	31	Sells Maize and maize bran	Food trade

8. Alefa Devisoni	50	Clothes	Product Trade
9. Efrida Lolent		Selling Scones (Bulk)	Food Production
10. Jennifer Malomo	40	Mobile Money agent	Service Provision
11. Ireen mtundumula	43	Groceries	Shop/Restaurant

Loan Settlement

The FEM members continue to contribute towards their loan settlement. In the month of September, [Tikondane FEM group](#) contributed MWK 766,500 whereas [Tiyanjane FEM group](#) contributed MWK 361, 000 towards loan recovery for the 2022 first loan period. The total outstanding balance for the month is MWK 398,100.00. The amount represents 17.80% and 37.38% default rate for Tikondane and Tiyanjane respectively. Below is a table showing names of members who did not manage to settle their loan for the month and the reasons behind.

Loan No.	Name	Loan Amount	Monthly Instalment	Reason for Defaulting
P-02	Alinet Machisawo	480,000	120,000	funds got stolen through mobile money fraud
P-24	Gladys Chiodzalo	100,000	25,000	encountered losses in her business
P-26	Dorothy Makuta	100,000	25,000	business closure due to losses
P-22	Editta Mtsitsa	300,000	75,000	unsteady business cash flow

Spring Impact Scale Accelerator Program Workshop

In the reporting month, OCA through the FEM program was invited to participate in a workshop which was organised by Spring Impact. Spring Impact is an international organisation which is implementing a scale accelerator program to help scale up impact for organisations that are implementing solutions to address issues around women's economic empowerment. The workshop has contributed to enhancing formation of strategic partnership for the FEM program.

Conclusion

The activities carried out in the month have in a way contributed in ensuring smooth running of the FEM program hence achieving the goals. Although there have been challenges in achieving the program's intended goals arising from inflation and fuel shortages, the program continued to serve communities and find ways of cushioning the members from such shocks.

Education Support Program

OCA's education program strategy is to work with vulnerable children especially girls (80% plus) so that they can learn, lead, decide and develop. Within the strategy we have an ambition to transform the lives of girls through education. Education sponsorship and ordinary community work are central to our strategy and achieving this ambition.

In the month of September 2022, students wrote end of academic year exams and they went for a one-month holiday. During this period, the education program had some meetings to attend.

Meeting with the District Education Manager (DEM)

The education program visited Dowa district Council for a meeting with the DEM. The aim of the meeting was to deepen partnership, build upon existing partnerships and seek out new opportunities for collaboration in order to expand our reach and grow the girl's education program.

The meeting was very fruitful because the OCA education program will be able to collaborate through local, regional, and national partnerships. We continue to work more with the government, private sector and other organisations who share our goals.

Orant Ulemu Scholarship committee meeting

During the same reporting period, the education program had a review meeting with the committee which is responsible for the Orant Ulemu Scholarship. Successes, challenges and future plans were looked into during the meeting.

Successes

This year so far the Ulemu scholarship has proven to be an impactful program. The scholarship has managed to support needy students who could not afford tertiary education without this initiative. So far seven students have been given the scholarship and are doing well in school.

Challenges

It has been noted that the students we are sponsoring are looking for other sponsors or means of being supported in their education. This is the case, because the students are afraid that Orant may not continue supporting them until they finish their studies since in the Ulemu scholarship application forms it was indicated that the students are to be supported for one academic year. Furthermore, under the scholarship students are supposed to apply again each year in order to be supported for the other academic years.

Another challenge was the change in academic Calendar in most schools. This is affecting the time of releasing the scholarship application forms since other students are starting school before the normal time.

Recommendations

After noticing the challenges, the committee proposed that the condition of students reapplying every year should be removed and be given the scholarship for the rest of their school years. It was further recommended that the scholarship should be forfeited when the student fails exams to encourage hardworking behaviour among students.

It was also recommended that Orant Ulemu scholarship applications should be opened soon after the names of students selected into different Universities have been released.

Future Plans

Orant Ulemu Scholarship is planning on opening applications for the 2023/2024 academic year in October until 30 November, 2022.

The plan is for Orant Ulemu Scholarship to provide scholarship to more students. It is also planned that the scholarship should continue to support and select the best students based on merit and other factors such as need and vulnerability.

Meeting on assessment of students' performance

Earlier this year, an assessment was done in schools on the factors that affect the performance of students. It was then noticed that shortage of books in some subjects like Humanities, languages and Agriculture is one of the factors that is affecting the performance of students. This problem of shortage of books is affecting the performance of students because students rely on books for reference and also books simplify the contents which are learnt in class.

During this meeting it was agreed that OCA education program should buy books to the four schools which are having shortages of some books. Following this meeting, an agreement was made to start with supporting one school with books as a pilot and then assess the impact of this initiative on the students before buying books for the other schools. It was also agreed that the school (s) will be provided with some storage containers and locks for safe keeping of the books.

At the end of the meeting, it was discussed that an MOU should be designed as an agreement between both parties to ensure sustainability of the donated books.