



JANUARY, 2024

ORANT CHARITIES AFRICA MONTHLY REPORT



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Healthcare Program

Executive Summary

Kasese Health Center (KHC) 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 impoverished 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 include: malaria, respiratory disease like pneumonia and bronchitis. However, non-communicable diseases are on the rise for example diabetes and hypertension.

For January 2024, Kasese Health Center (KHC) saw **2719** clients at (OPD). Only **77** patients were seen during weekends and nights. The total number of patients seen in January is **2796** (KHC OPD). MOC in Kasese catchment areas saw **705**. Kasungu (Bowe) Outreach clinic saw **2853** clients. MOC's total number of patients seen is **3558**. The total number of patients seen in January 2024 is **6354** (Dowa: **3501 (55%)** & Kasungu **2853 (45%)**).

The Laboratory department tested **3366** for Malaria, out of which **1707** were positive, representing a **51%** positivity rate. In Dowa, **1899** patients were tested and **932(49%)** were positive cases; in Kasungu, **1467** patients were tested and **775(52%)** were positive.

The Maternity department admitted **32** mothers and referred **13**. A total of **30** babies were born at the facility and **2** in transit (BBA). Out of **32** babies, **9** had complications (**7** Weight < 2.5 Kgs, **1** Asphyxia, and **1** Prematurity). The total Maternity attendance was **45** (**32** admissions and **13** referrals).

The HTS department tested **252** clients, **1** was found positive.

The total number of patients seen at the eye clinic by an outsourced clinician is **59** and **2** were booked for surgery.

The public health department administered **452** doses of Johnson and Johnson (J & J) COVID-19 vaccine.

Cervical Cancer providers screened a total of **24** women and **1** was VIA positive.

The MOC team managed to conduct all **20** scheduled visits in the month representing **100%**.

Monthly Patients Data

Table 1 below shows monthly patients seen in both Dowa and Kasungu.

2024	OPD Static	Bowe MOC	Kasese MOC	Nights/Holi day	Total
Jan	2719	2853	705	77	6354

Table 1: Monthly OPD And Outreach Clinic Attendance

Figure 1 below shows the total OCA patient attendance for January 2024

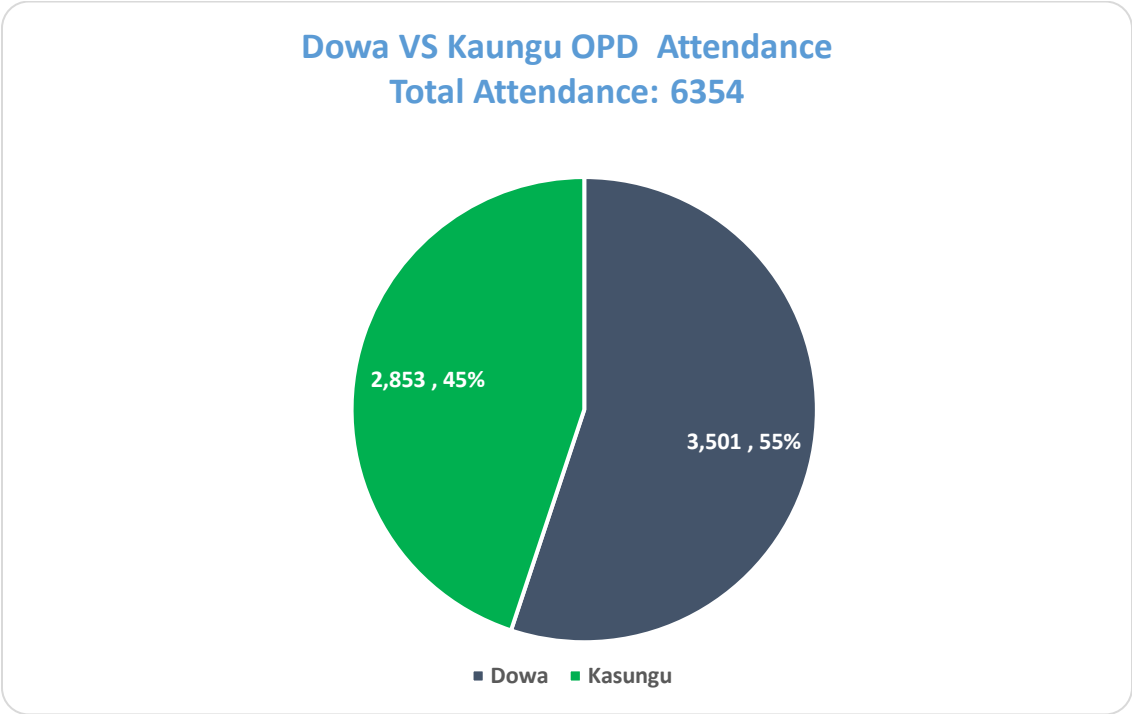


Figure 1: OCA Patient Attendance – January 2024.

OCA MOC Updates

Figure 2 below shows the Kasungu patient attendance for January 2024

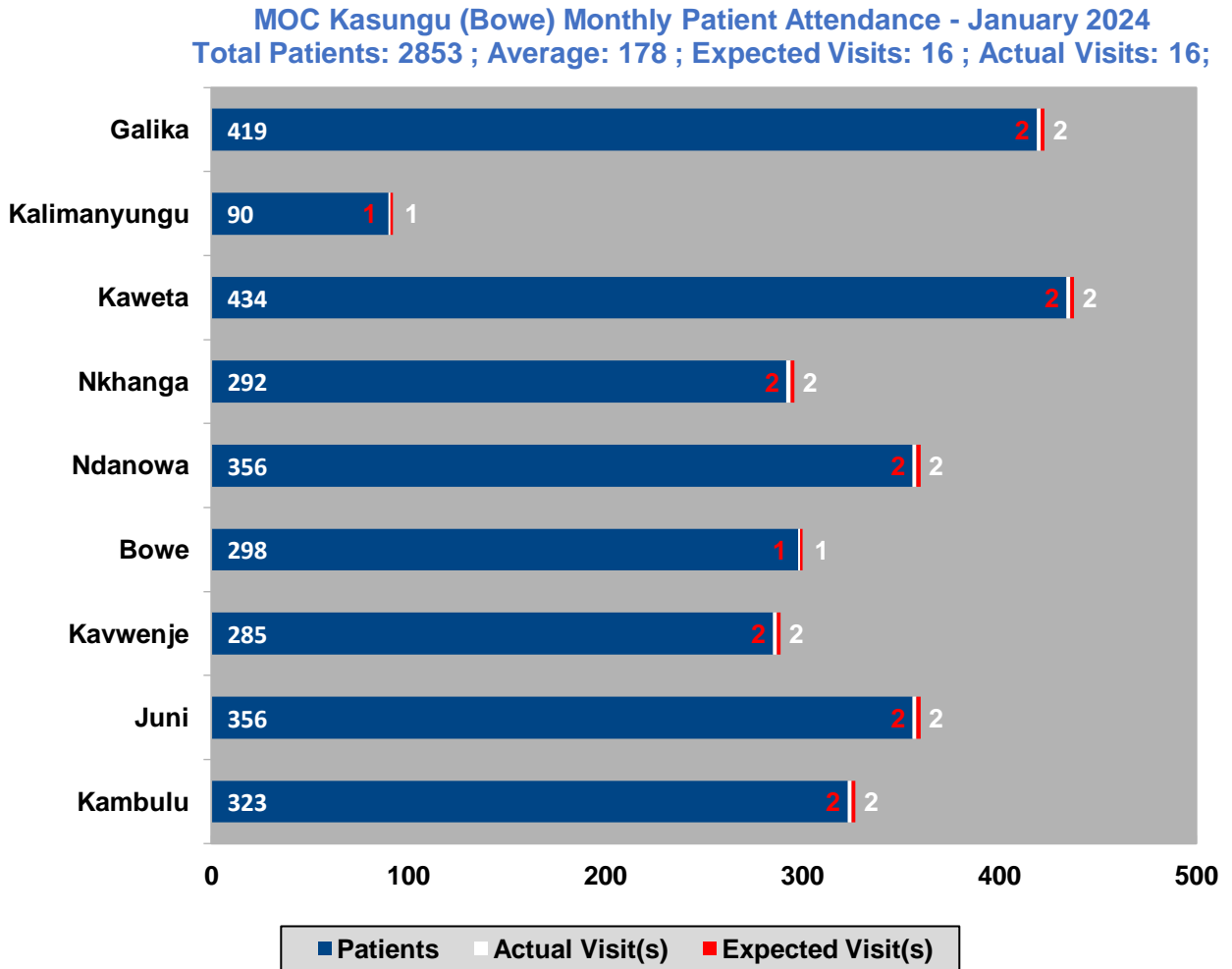


Figure 2: Kasungu Patient Attendance – January 2024.

Figure 3 below shows the Dowa patient attendance for January 2024

Dowa (Kasese Outreach) Monthly Attendance - January 2024
Total Patients: 705 ; Average: 176 ; Expected Visits: 4; Actual Visits: 4;

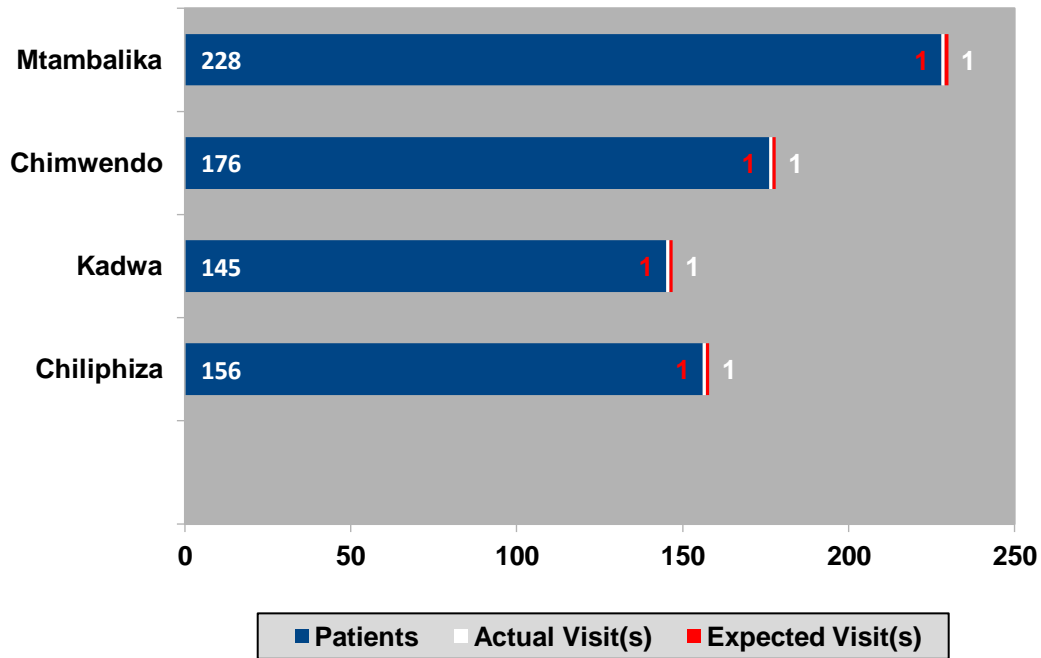


Figure 3: Dowa Patient Attendance – January 2024.

COVID -19 Situation Updates

The COVID-19 situation in the country remains low and in January 2024, **no** test was conducted. The Health Center continues to provide vaccines at the facility.

4.1 Cumulative COVID-19 Data – KHC Static.

Table 2 below shows COVID-19 Data.

	Staff (OCA/HSA)	Others	Total
January Tests	0	0	0
January Positives	0	0	0

Table 2: COVID-19 Cumulative Data

4.2 COVID 19 Vaccine (Pfizer) – KHC Static.

Table 3 below shows Vaccine Doses Administered in 2024

Dose	Male	Female	Total
1st Dose	0	0	0
2nd Dose	0	0	0
Booster	0	0	0
Total	0	0	0

Table 3: Pfizer Administered at KHC Static (January 2024)

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

Table 4 below shows Vaccine Doses Administered in 2024

Vaccine Type	Male	Female	Total
Dose 1	28	46	74
Dose 2	88	110	198
Booster	63	117	180
Total	179	273	452

Table 4: J & J Administered at KHC Static (January 2024)

4.4 COVID-19 Vaccine (Astra-Zeneca) – KHC Static

Table 5 below shows Vaccine Doses Administered in 2024

Dose	Male	Female	Total
1st Dose	0	0	0
2nd Dose	0	0	0
Total	0	0	0

Table 5: Astra-Zeneca Administered at KHC Static (January 2024)

4.5 COVID 19 Vaccine Status – KHC Static.

Table 6 below shows Vaccine Status in January 2024

Vaccine Type	Beginning Balance	End Balance
J & J	460	0

Table 6: Vaccine Status at KHC Static (January 2024)

Reproductive and Family Planning Health

5.1 Maternal and New-born Health Care

2024	Admissions	Referrals	Attendance	New Babies	Alive Babies	Facility Deliveries
January	32	13	45	32	32	30

Table 7: Maternity Data – January 2024

Table 8 below shows the Maternity Data of new babies with complications.

Months (2024)	Jan
Weight <2500g	7
Prematurity	1
Asphyxia	1
Sepsis	0
Stillbirth Fresh	0
Stillbirth Macerated	0
Neonatal Death	0
Total	9

Table 8; Newborns with complications – January 2024

Figure 4 below shows the total newborns complications for January 2024.

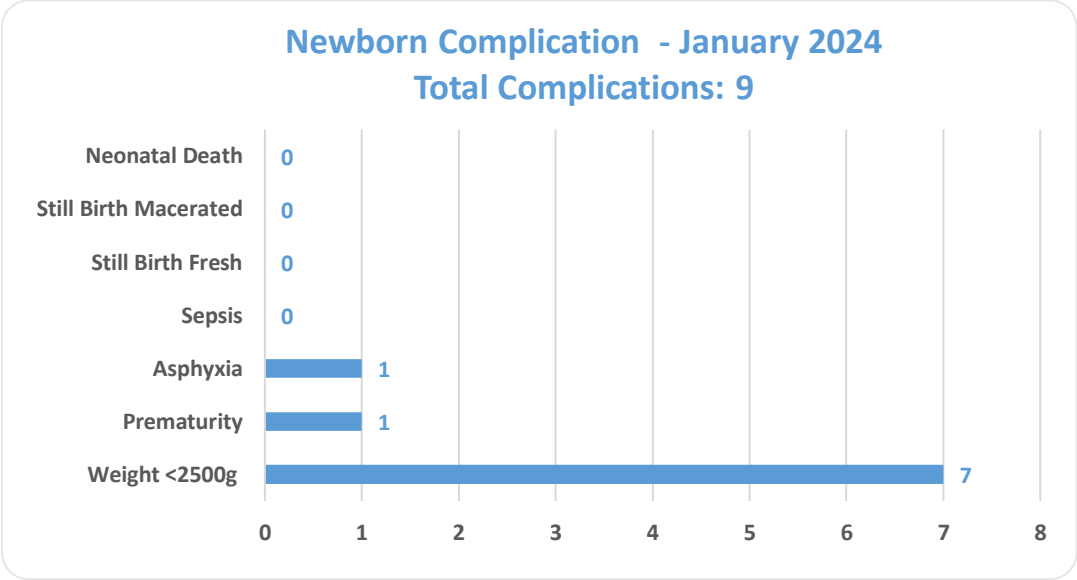


Figure 4: Newborns Complications – January 2024

Figure 5 below shows the total monthly Maternity attendance.

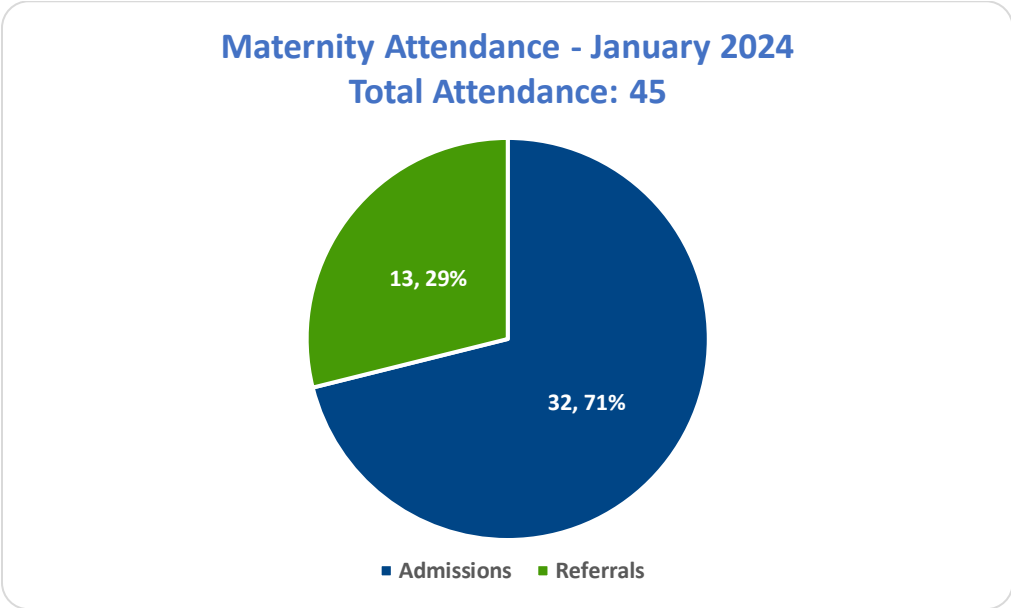


Figure 5: Admissions and Referrals (January 2024)

Table 9 below shows the reason for the referrals

Referral Reason	Referred
Fetal Distress	1
Young Primigravida	1
Obstructed Prolonged Labour	6
Hypertonic Uterine Contractions	1
APH	2
Pre-Eclampsia	2
Total	13

Table 9: Referral Reasons - January 2024

Table 10 below shows ANC attendance.

2024	New ANC Visit	First Trimester	%First Trimester
January	82	33	40%

Table 10: ANC Attendance – January 2024

Cervical Cancer Control Clinic Report

Table 11 below shows the 2024 Monthly Cervical Cancer Screening.

2024	Total	VIA+	%VIA+
January	24	1	4.17%

Table 11: Monthly Cervical Cancer Screening – January 2024

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

5.3 Family Planning Clinic Report

Table 12 below shows the 2024 Monthly Family Planning Report.

2024	Condoms	COC	Depo	Implanon	Levoplants	Jadelle	Total
January	71	14	642	20	2	3	752

Table 12: Monthly Family Planning – January 2024

Eye Clinic

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

Table 13 below shows the total number of clients treated for eye infections and those booked for surgery.

2024	Eye Infections (Treated)	Eye Surgery (Booked)	Total Seen
January	57	2	59

Table 13: Monthly Eye Clinic Table – January 2024

Malaria Report

Table 14 below shows Malaria tests for January 2024 (Dowa and Kasungu)

	Total Tested	Positives	Negatives	Positivity Rate
Under 5	1004	409	595	41%
5 Years and Over	2362	1298	1064	55%
Total	3366	1707	1659	51%

Table 14: Total Malaria Tests (January 2024).

Table 15 below shows the total Malaria Cases (MRDT's Positive), LA Issued and Dispensed (OCA Clinics)

2024	Jan
Suspected Malaria Cases	3366
Suspected Cases Tested MRDT	3366
Confirmed Malaria Cases	1707
New Malaria Cases Registered	1707

Table 15: Total Malaria Cases, LA Issued and Dispensed Table.

Figure 6: shows total OCA Malaria tests

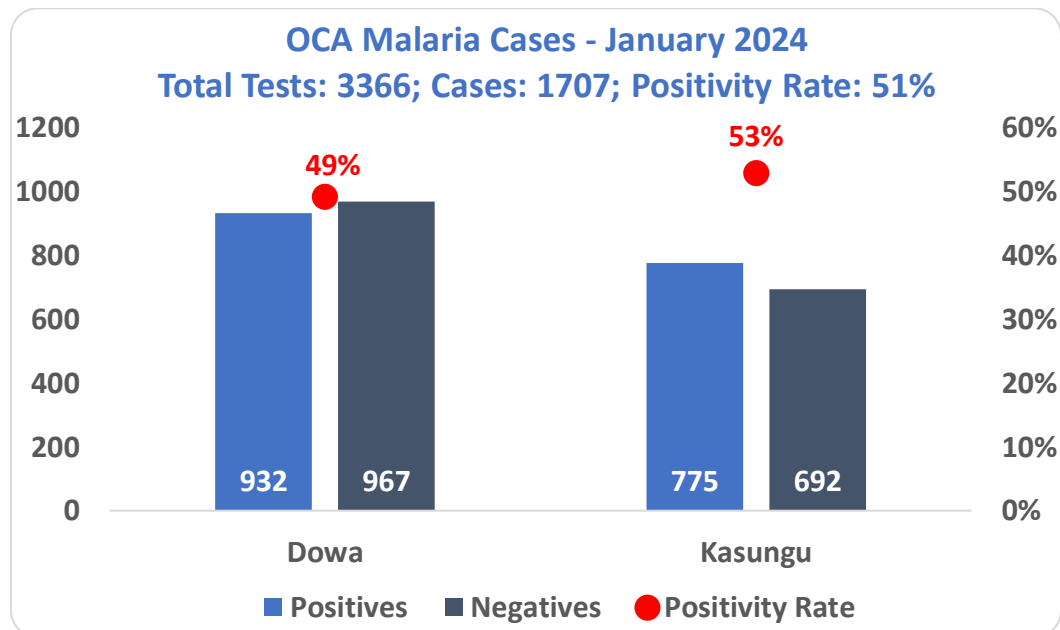


Figure 6: OCA Clinics Malaria tests (January 2024)

Figure 7 shows the total OCA Clinics under 5 Years of Malaria tests

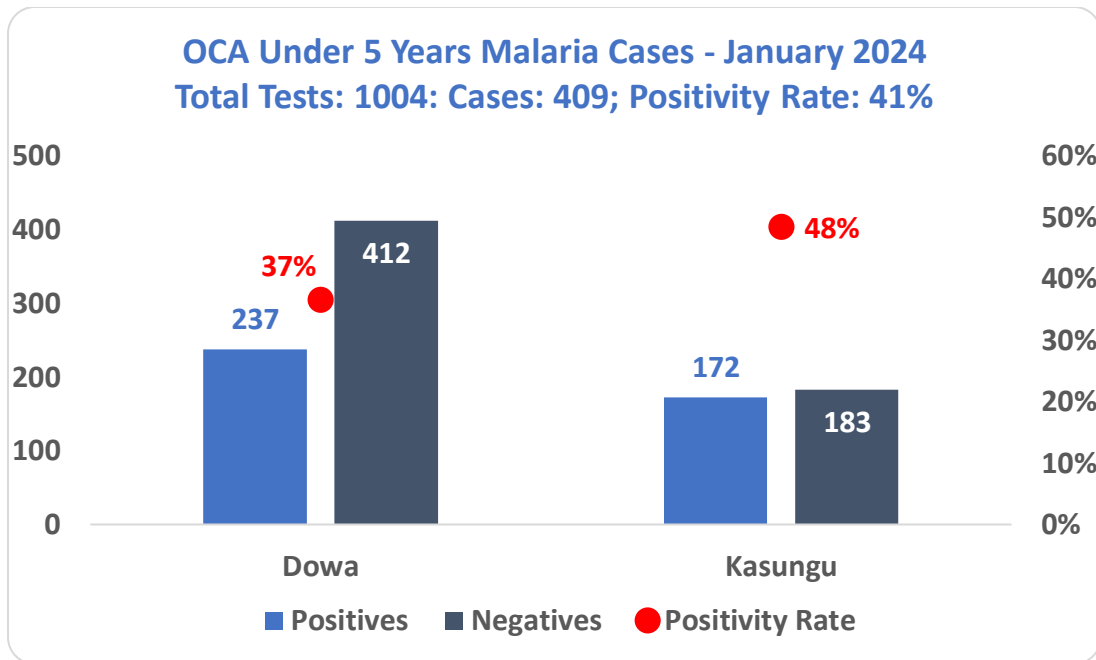


Figure 7: OCA Clinics, Under 5 Years Malaria tests (January 2024)

Figure 8 shows the total OCA Clinics 5 Years and Over Malaria tests

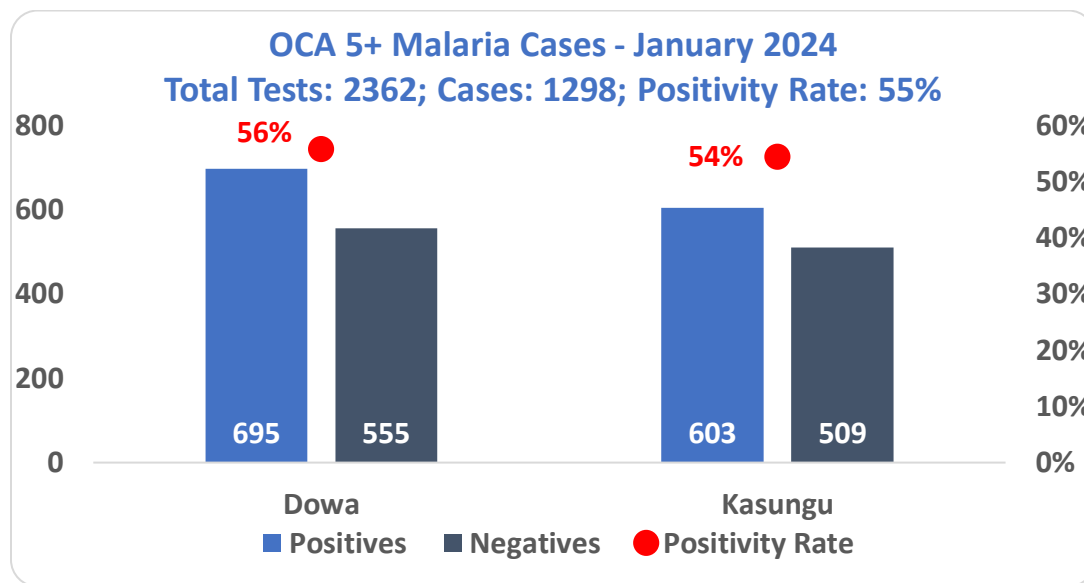


Figure 8: OCA Clinics, 5+ Malaria tests (January 2024).

HIV Testing Services (HTS)

Months	Total Tested	Positives	Positivity Rate
January	252	1	0.4%

Table 16; HTS Monthly Data – January 2024

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

9. Laboratory Services

Table 17 below shows qualitative Laboratory tests conducted in 2024.

	H. Pyloris		Salmonella		Hep B		HCG		COVID 19	
	Total	Pos	Total	Pos	Total	Pos	Total	Pos	Total	Pos
Jan	130	3	23	3	3	0	92	35	0	0
		3								

Table 17: Qualitative Lab Tests Data Table for OCA Clinics - January 2024.

Figure 9 below shows qualitative lab tests – January 2024

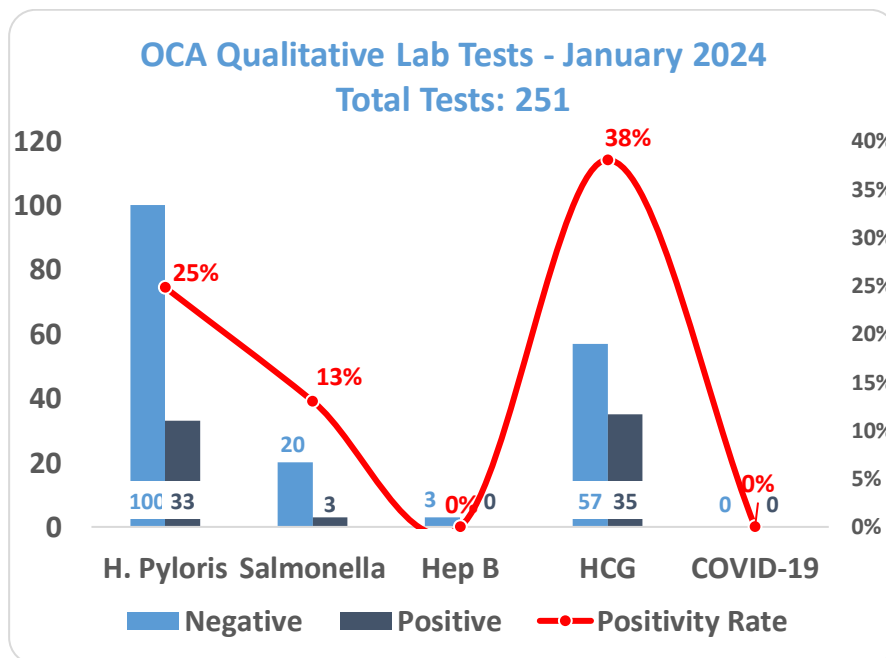


Figure 9: Qualitative Lab Tests – 2024.

Table 18 below shows OCA clinics quantitative Laboratory tests conducted in 2024.

	Glucose	HB	Urinalysis	FBC
Jan	77	76	12	168

Table 18; Quantitative Lab Tests Data Table for OCA Clinics – January 2024.

Figure 10 shows quantitative lab tests for January 2024

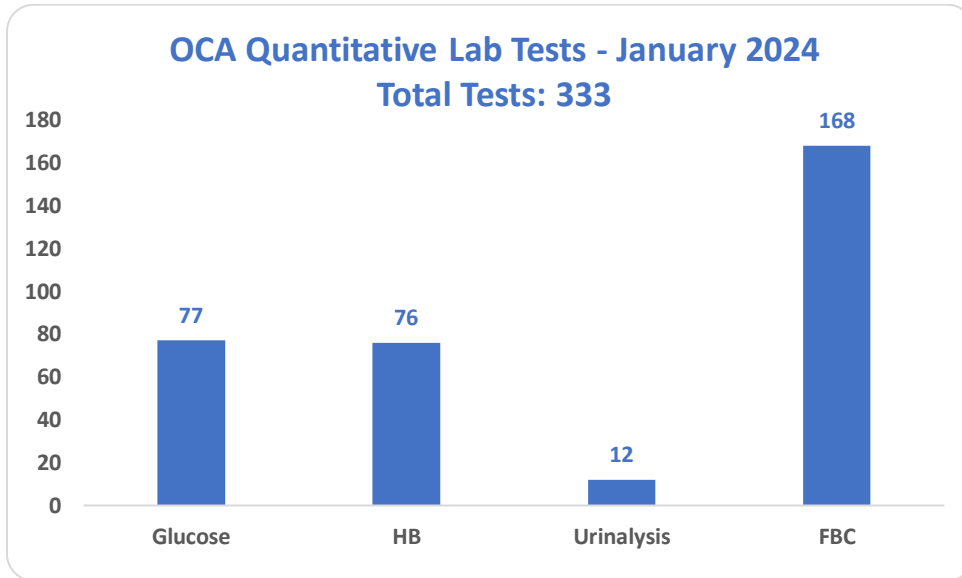


Figure 10: Quantitative Lab Tests – January 2024.

Disease Group Trends

Figure 11 below shows Dowa disease occurrences for January 2024

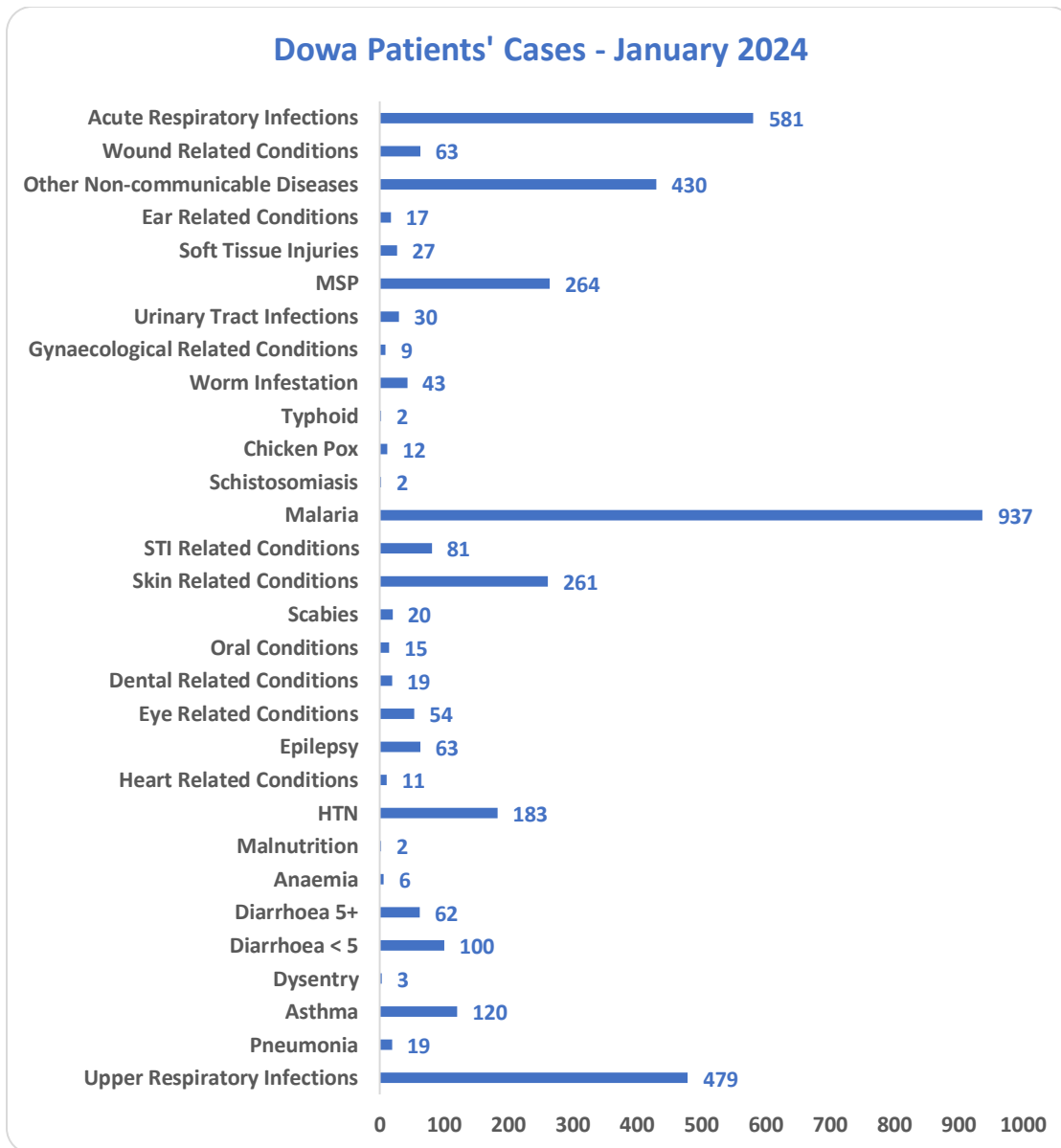


Figure 11: Dowa Disease Occurrences (January 2024).

Figure 12 below shows Kasungu disease occurrences for January 2024.

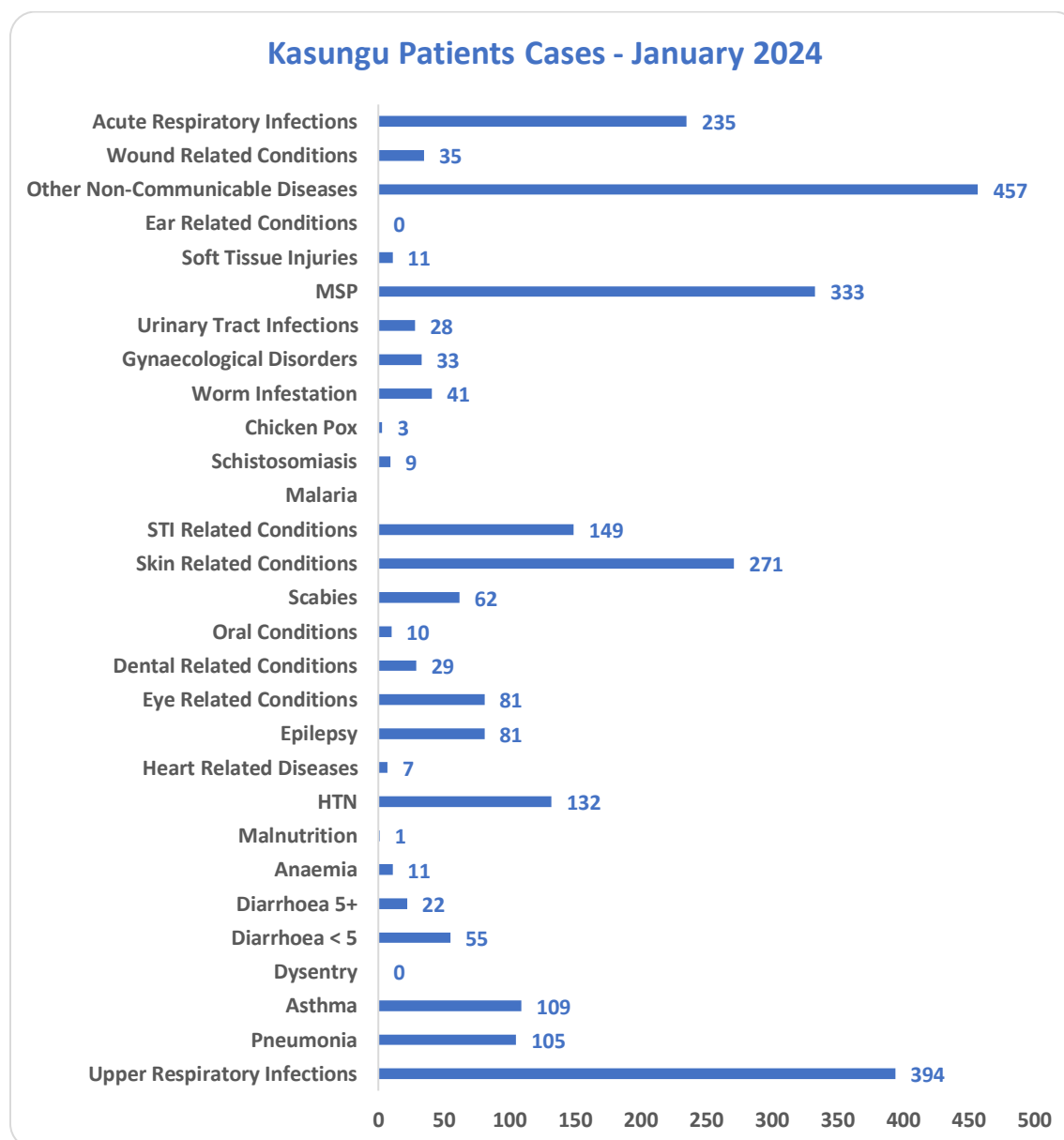


Figure 12: Kasungu Disease Occurrences (January 2024)

Healthcare Finance and Administration

Table 19 shows the clinic finance table for January 2024.

2024	Referrals	Clients	Average Cost
Collectio			
n			
January	MK 3,754,600	MK 506,115	13
			MK 38,932

Table 19: Clinic Finances – January 2024

Achievements and Challenges

1. Success Highlights

- The Health Center received supportive supervision from the Ministry of Health (TB program). In their feedback report, they noted that the Health Center has improved in terms of TB screening. The HIV ascertainment is done to all TB presumptive cases, HIV positive patients with presumptive TB are being tested with GeneXpert machine at Madisi hospital and Linkage to treatment is done to all tuberculosis diagnosed cases. Basic assessment to all presumptive and TB cases is done, for example, initial and subsequent weight is done, proper documentation on treatment is correct and the specimen containers are available in designated places.
- During the month of January 2024, the Health Center did not run short of major essential medicine and medical supplies.
- The Health Center has integrated the COVID-19 vaccine to other clinics available, for example, Non-Communicable Disease clinic (NCDs), ART Clinics and Mobile Outreach Clinics (MOC).

2. Challenges

- It is the Malaria epidemic season in Malawi and the Health Center is experiencing a huge influx of patients with high malaria positivity rate especially at Kasungu mobile outreach clinic.
- The major reasons for maternity referrals are due to CPD, followed by APH and pre-eclampsia.
- Low birth weight is the leading complication in newborns.

Way forward

- To continue educate patients at OPD on Malaria preventive measures
- To find out the causes of low birth weight amongst the newborns.

Appendices

Appendix A: January 2024 MOC Schedule

January 2024 MOC Schedule					
Date	Day	Station	District	Outreach Clinic	Time
1	Monday	New Year			
2	Tuesday	Galika	Kasungu	Outreach Clinic	09:00 AM – 3:00 PM
3	Wednesday	Chisuwe	Kasungu	Outreach Clinic	09:00 AM – 3:00 PM
4	Thursday	Nkhanga	Kasungu	Outreach Clinic	09:00 AM – 3:00 PM
5	Friday	Kadwa	Dowa	Outreach Clinic	09:00 AM – 3:00 PM
6	Saturday				
7	Sunday				
8	Monday	Kambulu	Kasungu	Outreach Clinic	09:00 AM – 3:00 PM
9	Tuesday	Kamtomphole	Kasungu	Outreach Clinic	09:00 AM – 3:00 PM
10	Wednesday	Kavwenje	Kasungu	Outreach Clinic	09:00 AM – 3:00 PM
11	Thursday	Juni	Kasungu	Outreach Clinic	09:00 AM – 3:00 PM
12	Friday	Mtambalika	Dowa	Outreach Clinic	09:00 AM – 3:00 PM
13	Saturday				
14	Sunday				
15	Monday	Chilembwe Day			
16	Tuesday	Miyowe	Kasungu	Outreach Clinic	09:00 AM – 3:00 PM
17	Wednesday	Lusito	Kasungu	Outreach Clinic	09:00 AM – 3:00 PM
18	Thursday	Kaweta	Kasungu	Outreach Clinic	09:00 AM – 3:00 PM
19	Friday	Chiliphiza	Dowa	Outreach Clinic	09:00 AM – 3:00 PM
20	Saturday				
21	Sunday				
22	Monday	Ndanowa	Kasungu	Outreach Clinic	09:00 AM – 3:00 PM
23	Tuesday	Kalimanyungu	Kasungu	Outreach Clinic	09:00 AM – 3:00 PM

24	Wednesday	Bowe	Kasungu	Outreach Clinic	09:00 AM – 3:00 PM
25	Thursday	Galika	Kasungu	Outreach Clinic	09:00 AM – 3:00 PM
26	Friday	Chimwendo	Dowa	Outreach Clinic	09:00 AM – 3:00 PM
27	Saturday				
28	Sunday				
29	Monday	Kaweta	Kasungu	Outreach Clinic	09:00 AM – 3:00 PM
30	Tuesday	Juni	Kasungu	Outreach Clinic	09:00 AM – 3:00 PM
31	Wednesday	Preparation Day			

Water and Sanitation Program

Executive Summary

The WASH program aims to reduce morbidity and mortality in rural communities. To



achieve this, the program constructs and repairs WASH infrastructure. Furthermore, the program also promotes good sanitation and hygiene practices in the communities and institutions such as schools and health facilities. These interventions are implemented every month. . Therefore, this report provides the progress of program implementation in January 2024. This report begins with a

summary of achievements, then a detailed narration of achievements, followed by proposed plans for the next month and finally ends with a conclusion.

SUMMARY OF MONTHLY ACHIEVEMENTS

In January the following milestones were achieved;

- Supported 20 water point repairs (Service/preventive: 14; major repairs: 6)
- Conducted Community-Based Management (CBM) training for Moses WPC

The WASH program carried out the following key activities in January 2024.

Water point/borehole repairs and rehabilitations



Borehole repair session during the month

Water point repairs are one of the focal activities for the WASH program. Under this initiative the WASH program services/preventive maintenance and major repairs water points to ensure sustainable access to potable water for the people of Kasese. In 2024, the WASH program continues to promote water point services or preventive maintenance which have the potential to reduce costly major water repairs. In January, the program supported repairs of **20** water points. Out of the 20 water points repaired, **14** were preventive maintenance and **6** were major repairs.

Community-Based Management (CBM) training for Water Point Committees (WPCs)

WPCs are a key component in ensuring the sustainability of water supply facilities. They are responsible for managing the water facilities on behalf of their community such as conducting minor maintenance and fundraising for borehole maintenance. A WPC is made up of 10 elected individuals, more often made up of 6 women and 4 men. To ensure the WPCs execute their responsibilities effectively, they are trained in Community Based Management (CBM) of water points.

During the month the WASH program conducted CBM training for Moses WPC. The training was conducted from the 29th of January to the 02nd of February, 2024 at Ndaona CCAP church. Moses borehole was drilled in December 2023. The training was facilitated by OCA WASH program staff in collaboration with the Dowa district Water office, Health Surveillance Assistant (HSA), and Area Mechanic. Currently, the water point in Moses Village is supplying potable water to approximately 250 people.



A classroom session during CBM training for Moses WPC

CONCLUSION

The month of January represents a new chapter in WASH program implementation. The WASH program is excited and optimistic about the new plans and goals for the new year.

Agriculture and Business

Agriculture

“By empowering lead farmers with knowledge and skills, the agroecology program has initiated a positive transformation towards more resilient and environmentally-friendly farming systems”- Gracious Msimuko, the OCA Agriculture Program Manager



Executive Summary

Farming is one of the important activities which builds the economy of Malawi. Smallholder farmers depend on farming to improve their economic status and feed their families. OCA supports smallholder farmers in equipping them with knowledge on commercial farming. The activities are done in both irrigation and rainfed farming through provision of farm inputs as microloans and agriculture expertise. Some of the activities conducted during the reporting month have been explained below.

Training in Agroecology

Lead farmers around catchment areas were trained in agroecology farming aimed at promoting sustainable agricultural practices. Agroecology farming emphasizes sustainable practices that are in harmony with nature. Lead farmers play crucial roles in disseminating knowledge and techniques within their communities. The objective on agroecology training to lead farmers was to equip lead farmers with knowledge and skills in agroecological principles, demonstrating practical techniques for sustainable farming practices, foster peer-to-peer learning and knowledge sharing among lead farmers and encourage the adoption of agroecological methods for improved yields and environmental sustainability. The training consisted of field demonstration and hands-on exercises

conducted on OCA agroecology farm. The training focused on soil health management, crop diversification, natural pest control, water conservation and composting. Lead farmers served as agents of change within their communities, promoting the adoption of sustainable practices among fellow farmers..



Training lead farmers on agroecology farming

Fertilizer Application

OCA has cultivated Maize, soya and groundnuts on OCA farms and during the reporting period, Maize crops were top dressed with Urea fertilizer. Maize production requires optimizing fertilizer application techniques to ensure efficient uptake and maximize yield. Maize crops treated with top dressing fertilizers exhibit greater growth parameters and higher yield. Application of top-dressing fertilizers has positive impacts as it supplies nutrients during the critical growth stage, farmers optimize plant growth, improve nutrient uptake, and enhance yield. For the commercial farmers it is necessary to top dress their maize crops to contribute to food security and economic prosperity.



A member of Mwayiwathu farm club applying top dressing fertilizer on maize field

Weeding

Weeding is a critical component for crop management aimed at minimizing weed interference and optimizing crop yield and quality. Second weeding on OCA farm was done to reduce weeds competition with crop for essential resources such as nutrients, water and sunlight hence reducing yields and impacting crop quality. Manual weeding method was used in controlling weeds which involved the use of hand tools such as hoes. Manual weeding is labor intensive which leads to increased cost of production. Effective weed management is essential for sustaining agricultural productivity, ensuring food security and promoting environmental sustainability.



Maize field being Weeded on OCA farm

Dry spell

OCA farm and its catchment area was affected by the dry spell for over 3 weeks. A dry spell is a period of prolonged drought or below average rainfall which can have significant impacts on agricultural production, water resources and food security. Due to the dry spells, the crops on OCA farm started wilting due to water stress, soil moisture depletion and heat stress on crops. Despite the area having started receiving the rains, it is a worrisome condition as it can result into lower harvests and income losses for farmers which will result into food shortages and price hikes.



Dry spells affecting maize field

Pest and disease control

Pests and diseases pose significant threats to agricultural productivity, food security and livelihoods worldwide. Effective pest and disease control strategies are essential for mitigating crop losses, minimizing pesticide use, and promoting sustainable agriculture. There is a need to coordinate the use of tactics to manage pests while minimizing risks to human health and the environment. On an agroecology farm, pest repellent (such as neem) trees were used to control the fall army of worms and beetles which attacked the field. The system is good as it is environmentally friendly and less cost hence more suitable for smallholder farmers.



Treating maize field from fall armyworms

Conclusion

Effective pest and disease control strategies are imperative for safeguarding agricultural productivity, food security and livelihoods. OCA practices are focusing on sustainable agriculture hence by adopting environmentally friendly and cost-effective methods, farmers can mitigate crop losses and promote the long-term viability of smallholder farming.

Business and Financial Empowerment Microloans (FEM)

Executive Summary

Women entrepreneurs in the Kasese catchment area continue to get financial and literacy support from the Financial Empowerment Microloan program. The program's objective is to guarantee local women's economic empowerment. Women who are financially empowered are seen to be better equipped to make wise financial decisions that could improve both their own and the community's overall well-being. The report describes the various activities that the Fem program planned and carried out in the month of January;

Monitoring Visits

Follow-up monitoring visits to individual businesses were carried out during the reporting month with the goal of evaluating loan investments, recording last year's (2023) accomplishments, and assessing the businesses' current performance. It was encouraging

to note that the majority of start-ups had a strong start and appeared to have promising enterprises. It was also fascinating to observe that the women in the graduated groups are able to make viable business decisions and this has had minimal adverse effects on their business capital.

However, it was also worth noting that the business environment is not that good. Lately, business has been slow as consumers have little or no income to spend on goods or services. The current drought has also contributed to the current market crises. This is so because, in our localities most of the people depend on piece works to earn an income. With no farm jobs as there is currently nothing to be done in the farms, people are finding it difficult to get piecework.

With the persistent hunger issues in the communities, it was noted that some of the women entrepreneurs, especially the new members had spent a great deal of the loan amount on food to sustain their homes. However, there is hope that the business will bloom once the harvesting season begins.



Deborah (left) and Stella (Right) on their business posts



Angellina (L) from Tamandani & Rozalia (R) from Tithandizane FEM groups in Mtambalika

Tiyanjane Village savings and loan group graduation

In the reporting month of January, the FEM program also witnessed the VS&L graduation of Tiyanjane FEM group. The group's overall savings came to MWK 1,773,800.00, representing a 97% increase in savings as compared to 2023 savings. The member with highest savings walked away with MWK 189,400 and the lowest MWK 83000. With the savings, the women entrepreneurs have managed to complete most of the farm investments, boost their existing business capital, pay school fees for their children and buy food for themselves and their families. Tiyanjane FEM group resumed another round of savings for the year 2024 on the very same day they shared their savings. By now, the women are used to the savings culture as the women have been reaping the fruits of the savings.

Weekly VS& L meetings

As we began the year, the new FEM groups were also encouraged to join in on the trend of formulating VS&L groups so that they two can be saving some money to be used to accomplish their dreams. Initially, Tithadizane members had agreed to be meeting on Tuesdays whereas Tamandani members settled to be meeting on Saturdays. As of end January, all the groups had reached a consensus to be meeting on the same day and settled for Tuesday hence the VS&L meetings for Mtambalika group take place on Tuesdays. These meetings have really contributed to the strengthening of relationships among the members. Every meeting is an opportunity for the members to interact and get to know

each other. In the beginning, the Tamandani FEM group was not as vibrant as Tithandizane as the members were not familiar with each other. This was witnessed by the turn up register which indicated that some of the members were missing sessions. With time, there has been a great improvement on the turn up which implies that group relationships have also greatly improved.



Tikondane FEM Members in one of the VSL meetings

Education Support Program

Executive Summary

Education for any child can open the doors to a brighter future that would otherwise be locked tight. But it isn't just about the future, children who stay in school are better protected from exploitation in the present. When children have access to education, they develop the knowledge, confidence and life skills necessary to navigate and adapt to an ever-changing world. This is why Orant invests in the education of vulnerable students.



The following were the activities which were accomplished by the Education program in the month of January, 2024.

School needs assessment Survey

In the month of January, 2024 the education program started a school assessment survey. The assessment will be conducted in 24 schools (20 primary schools and 4 secondary schools) around the Kasese catchment area. The aim of the survey is to know how best we can work with the surrounding schools in order to promote education.

Since the program started in 2017, the OCA education program has been able to support vulnerable students with school fees and other basic needs only. However, not every student was benefiting but only the ones under the sponsorship program. After looking at several factors, we thought it would be best for the OCA education program to find other ways on how each and every student can excel in their academic life. This is why we are doing the needs assessment exercise, so that the findings can help us on the best ways to help the students around the Kasese catchment area. The survey questions are focusing on the whole school in general and three people are targeted at each school; The Head Teacher, Teacher and Student.



OCA conducting need assessment survey

We conducted the assessment in 3 primary schools in January; Katalima, Chinguwi and Chiwira. Everything went well at these schools and it was noted that the schools are aware of the importance of conducting this survey because it is for the benefit of everyone within the Kasese catchment area.

Preparing students for school

The reporting month was the beginning of a new term (second term) for our sponsored students. The education program had to prepare students for school, especially those who go to the furthest schools. These students are supposed to get their supplies before they go to school because it is hard for OCA education program personnel to visit them due to limited resources. Basic needs like Hardcover, pens, pencils, washing & bathing soap, sugar e,t,c were given to the students and they went to school. Other students are usually visited in their respective schools.

Library visit

In the previous month (December), we collected the book Pamphlets which OCA donated to Ngala CDSS for lamination. The lamination was done during the holiday and the school library was visited in January to hand in the books. Progress on the Library attendance during and after the holiday was also checked. From the register, it showed that not many students visited the library during the holiday, maybe because it was during festive season and a lot of students go for holidays in other areas.



Ngala CDSS Library visit

Conclusion

OCA will continue to support disadvantaged students through their education in Malawi, providing support to children and their families, and working with the schools and the wider community to ensure each beneficiary receives full support to pursue their education and flourish.