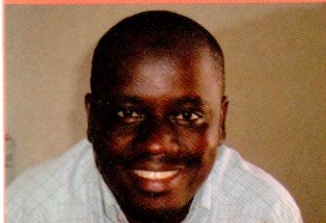


LET'S GET STARTED

KaTutandike

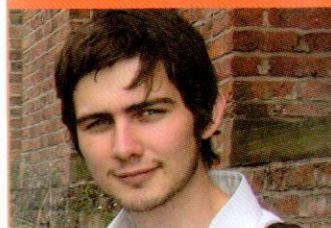




Nasser Ssenyondo

Deaf volunteer at Ka
Tutandike (Uganda)

He has just completed a
Bachelors Degree in
Social Work



Dan Hodgkinson

Masters Student in
African Studies
Oxford University



Christine Semambo
Sempebwa

Chief Executive Officer
Ka Tutandike (Uganda)



Madeleine Collier

Project and Partnership
Manager
Ka Tutandike Trust UK



Miles2Smiles Day Care Centre

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Welcome



Kasubi Primary School

Dear Friends,

In 2007, Ka Tutandike Uganda joined players in the development arena, addressing the needs of children and people with disabilities. At Ka Tutandike, we work as closely as we can to the people whose lives we are collectively changing. We are aware that the beneficiaries and the communities among whom we work have a lot to offer. They may be less conspicuous, quieter, even marginalized, but they are significant to human development, fulfilment and well being. Through this publication we hope to bring you closer to the work that we do and the lives that we are changing.

Simply organising people is not sufficient. Our goal is to work with people from the bottom up to ensure sustainable development for the communities. There is need for further investment in tried and tested interventions to demonstrate that working with the communities can result in sustainability, justice and inclusiveness. These interventions must also display the potential of small-scale community action on a replicable scale. Ownership at the community level must be visible.

When we told the individuals featured in this publication that we would change their names to protect their identities they requested that we use their real names, and photographs, because they are proud to be participating in our projects and our magazine.

At Ka Tutandike, we thrive from the people around us - so please don't be a stranger. Become part of us.

Christine

Christine Semambo-Sempebwa

Chief Executive Officer, Ka Tutandike (Uganda)

FACTfile

THE TEAM KA TUTANDIKE (UGANDA)

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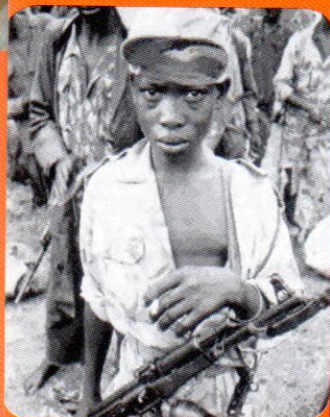
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Northern Uganda: Africa's Longest Conflict



Until this year, the Acholi people that live in the northern regions of Uganda, had endured more than twenty years of suffering at the hands of one of the world's most brutal and feared rebel groups, the Lord's Resistance Army (LRA). Led by Joseph Kony, a charismatic leader who claims to fight for God's commandments, the rebels modus operandi was to abduct children, psychologically force them into committing atrocities against civilians, and then force them to fight as child soldiers. An estimated 20,000 children were captured during the whole conflict. The conflict took hundreds of lives, and forced nearly the entire region, an estimated 400,000 people into badly equipped Internally Displaced Peoples' (IDP) camps. Over the last five years, the LRA were forced into the rainforests of the Democratic Republic of Congo and Sudan where they are said to be moving to the Central African Republic.

Sources: Borzello(2007)

Uganda



47 Years of Hope and Despair

Made famous by the bloody and absurd rule of Idi Amin, Uganda has risen up from the bloodshed and civil war of the 70s and 80s that made it one of the world's poorest countries, to become one of the success stories of East Africa. Endemic corruption, however, persists to undermine the country's development and infuriate a fed-up people writes Nasser Ssenyondo and Dan Hodgkinson.

On 9th October 2009, Ugandans celebrated 47 years of self rule. Previously a British protectorate, Uganda is a landlocked country almost the size of Britain with a population of 33 million people. The earliest human inhabitants of the region were hunter-gathers, whose remnants are found among the pygmies in the country's western forests. During the fifteenth-century, kingdoms such as Buganda and Bunyoro and independent chiefdoms arose, which were unified into the single political entity of Uganda by the imperially-minded British in the late 19th century. Ugandan nationalism began to dawn in the 1940s with the rise of educated citizens who agitated for self-rule. Their messages carried great hope and excitement which were realised in 1962, when the Union Jack was lowered down and the red, yellow and black Ugandan flag was raised to dancing and the rhythm of drum beats.

Uganda was a lesser-known African country, until the reign of Idi Amin, the self proclaimed 'Conqueror of the British Empire'. His reign of terror and charismatic stunts fascinated global media; one memorable example being when, in 1976, he allowed Palestinian terrorists to land a hijacked Air France plane at Entebbe Airport, which led to the dramatic rescue six days later by Israeli Special Forces. Amin's rule cost Ugandans over 300,000 lives, and it took a combined effort of both Ugandan exiles and the Tanzanian army to dislodge him from power in 1979. The bastard son of this bloodstained period was a six year guerrilla war between Milton Obote and Yoweri Museveni, resulting in hundreds of thousands more dead, wide-spread human rights abuses, and the massive destruction of civic infrastructure. When the current government came to power it inherited a collapsed economy and a government with no structure.

Peace and Progress

Since 1986 and the accession of President Yoweri Museveni, there has been relative stability and peace in most of Uganda. The absence of conflict and market-oriented government policies have given twenty three years of sustained economic growth at an average GDP of 3.1 percent. With the help of international aid agencies, the country has expanded healthcare, rebuilt crucial infrastructure – particularly roads – as well as, in 1996, launching the policy of Universal Primary Education, to provide free education for every Ugandan child. These two decades of political and economic recovery, however, have not been shared by all Ugandans. Oil has recently been discovered in western parts of the country with a possibility of producing 10,000 barrels a day. However, government critics view oil discovery as a curse rather than a blessing. In their view, it is going to escalate corruption levels and environmental degradation.



FACTfile

Size: 241,000km²
(slightly smaller
than the UK)

Population: 33
million, 87 per cent
of which live in rural
villages

UN Global
Development
Ranking: 154
of the world's 177
countries.

Terrain: Largely fertile,
well watered by the
many lakes and rivers
in the country.

Culture



But despite their problems, Ugandans are cheerful people, no matter how tough the going gets. Although many farmers are unable to meet even their most basic needs, rural folks nearly always find a way to laugh, in fits of giggles and back-slaps, about their situation. The country's culture comes from a diverse range of ethnic groups. Its remarkable heritage lives in the hearts of the people, and their traditional dress, languages and practices. Ugandans value the extended family system because it provides social capital and ensures that community resources are equally redistributed. Although this social cohesion has not saved many rural communities from biting poverty, it has, during the hard times, ensured the equal spread of basics like food.

The role of Non-Governmental Organisations

Given the government's deficit annual budgets, it requires the involvement of Non-Governmental Organisations (NGOs) to provide an estimated 40% of services. At the end of 2007, Uganda had 7,000 registered NGOs. Powerful local NGOs have become a well recognised element of local development, where they speak with authority on issues affecting the marginalised and are able to influence the highest level of policy making. NGO's have lobbied profusely for the rights of disabled people and children.



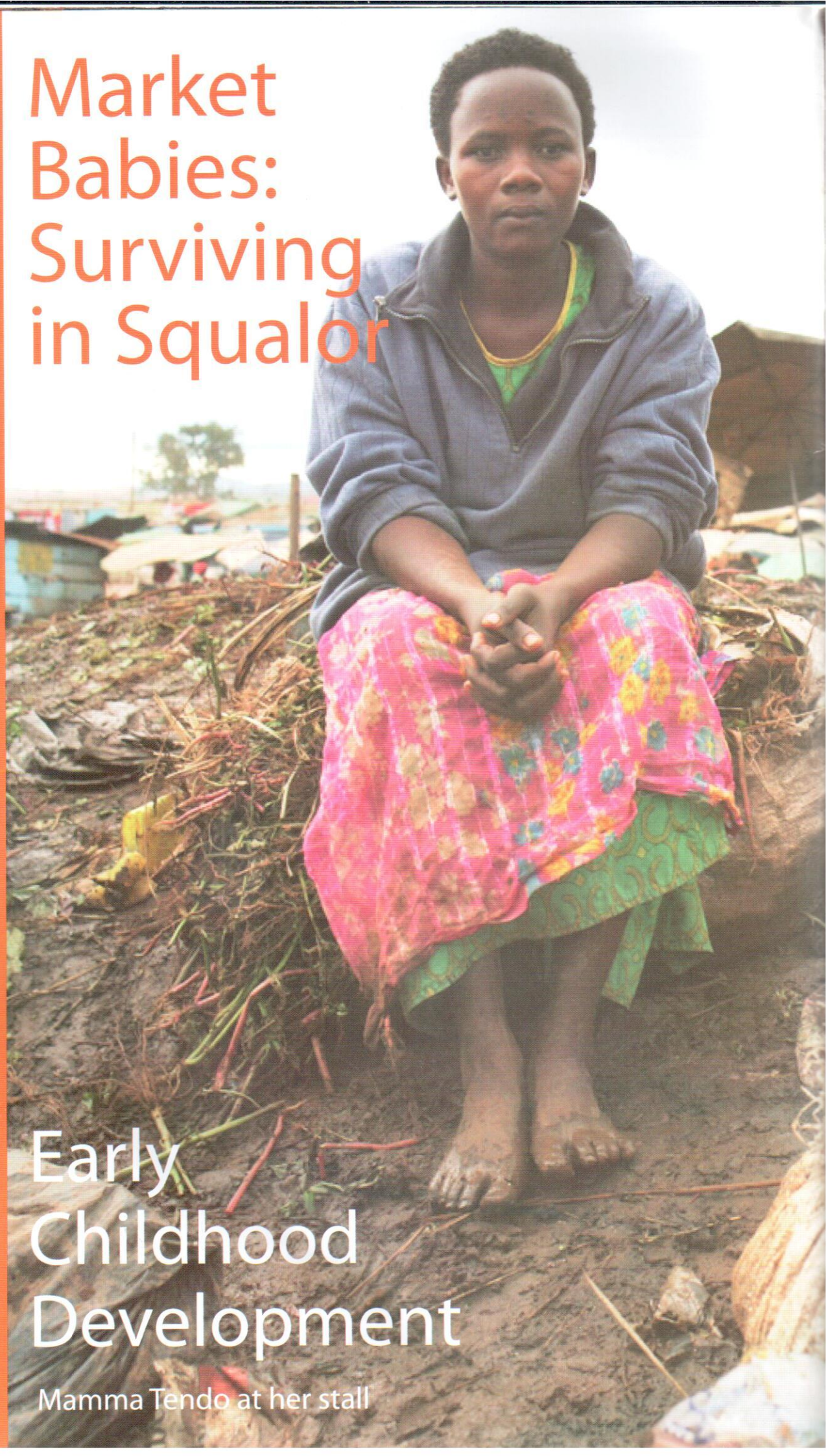
Food Security

Agriculture contributes to 42% of the country's GDP and accounts for over 80% of rural employment. Many of these people are peasants using rudimentary tools on a subsistence scale and receive hardly any government support (only 4.4% of this year's budget). Annual harvests are not always enough for the whole population and so famine is a persistent problem: 3 million people still rely on food handouts each year, mostly the people of Eastern and Northern Uganda. On 21st July 2009, the government consolidated an appeal for Uganda, seeking US\$ 246,773,189 to meet the most urgent humanitarian needs of some 1.6 million vulnerable individuals across famine stricken regions.

Market Babies: Surviving in Squalor

Early
Childhood
Development

Mamma Tendo at her stall



EARLY CHILDHOOD DEVELOPMENT (ECD)

Children under the age of five make up a staggering 20% of Uganda's population.

According to the World Bank, the early childhood years provide the foundation for all later learning and the development of life skills.

World Bank economists conclude that, "well targeted ECD programmes cost less and produce more dramatic and lasting results than education investments at any other level".

(Source: Early Childhood Counts, World Bank 1999)

"Every child must be ensured the best start in life - their future, and indeed the future of their communities, nations and the whole world depends on it" - UNICEF

54% of children aged 20-23 months are still breastfeeding

20% of under-fives are underweight

52 % of the population earn below poverty line of US\$1.20 per day

Source: www.unicef.org/infobycountry/uganda/statistics.html#55 and <http://www.unicef.org/earlychildhood/idea.html>

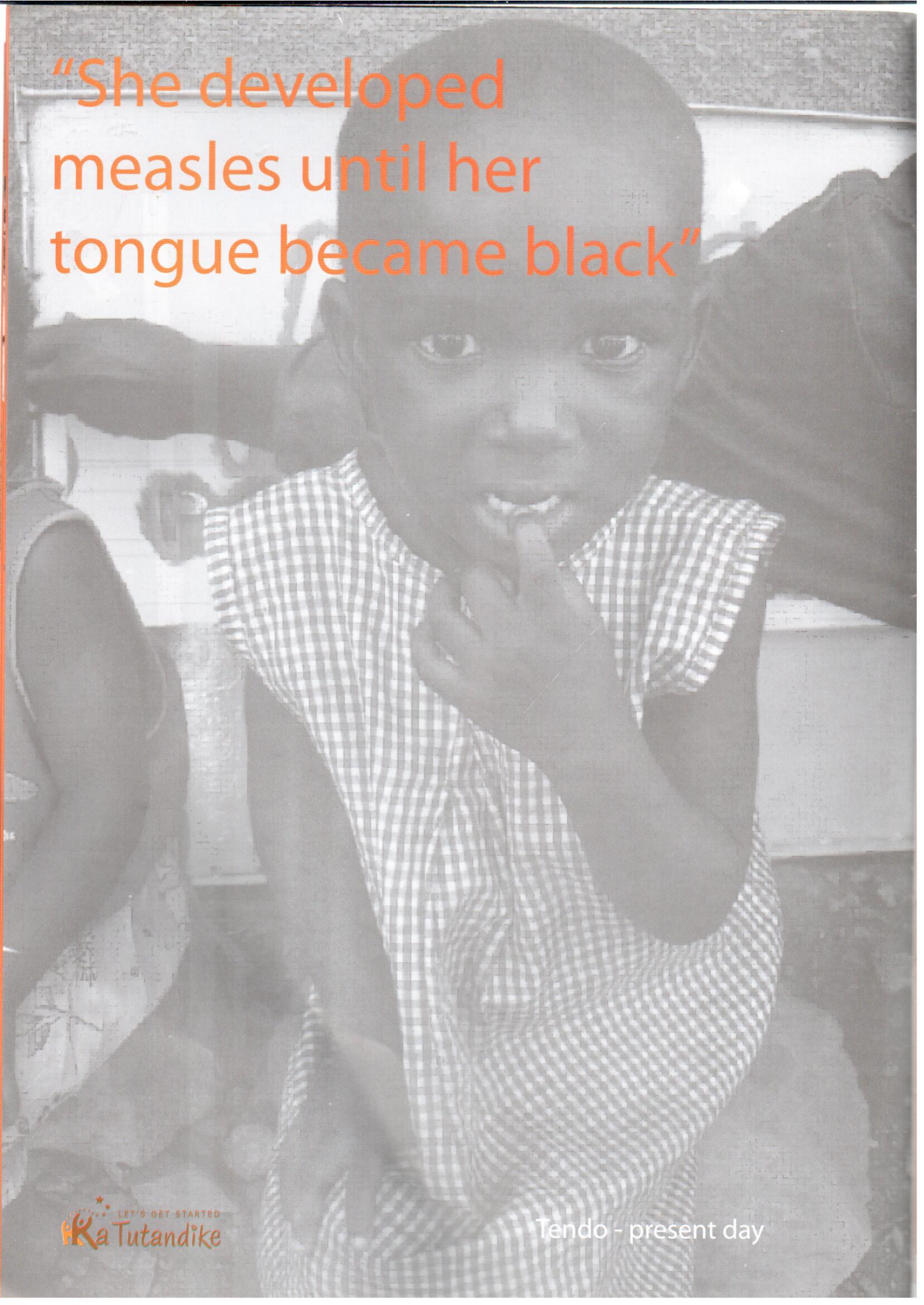


Stalls at Kalerwe Market, Kampala

For hundreds of mothers that scrape a living in Kampala's markets, bringing their babies and children to work is an everyday fact of life. These crowded and lively places are centres of crime and disease, such as cholera and typhoid, which present life-threatening challenges for the infants forced to grow up there. Market children lack the very basics: being able to crawl around, play, eat a nutritious meal and enjoy being a child. Baby Tendo's story is like many children in the market. At 8 months Tendo was near death from illness and malnutrition, but survived thanks to the determination of her mother, Maama Tendo, to get her out of the market and into a day care centre.

Like hundreds of children living in Kampala, Tendo's life began in a bustling and dirty market. Her mother, Maama Tendo, came to Kalerwe market after she was forced out of her boyfriend's house, aged 17, along with her first born child, Mary. They settled in Kalerwe, a massive sprawling slum of flimsy shacks, open sewerage, and open cooking fires, home to around 40,000 people. With no parents to turn to - Maama Tendo's mother died of AIDS when she was a young girl - it was her brother that encouraged her to set up as a market seller as a way of scraping by. She did, and began working long days to take home an average of 2000 shillings every evening, enough only to buy breakfast for herself and her child. On such a meagre income, it should come as no surprise that 30% of market vendors' children are malnourished.

After 5½ years working on the market, Maama Tendo gave birth to her second child, Tendo. The new baby girl was born sick and underweight so instead of returning to the market as soon as possible, like most market mothers (the youngest recorded child at a stall was two weeks old), Maama Tendo nursed the child at home for four months. Tendo's father disappeared, as is common to 72% of market mothers, leaving Maama Tendo alone to provide an income and look after her two children. So Tendo returned to long hours at Kalerwe, getting a job selling charcoal with sickly little Tendo strapped to her back. By the end of the day Tendo was black with charcoal dust. No affordable welfare for children exists in the markets, so mothers like Maama Tendo have no choice but to bring their infants to the stalls.



"She developed
measles until her
tongue became black"

To keep them out of danger and to stop them trampling on other sellers' produce, mums make children sit near them, either in a merchandise box or amongst their produce. This confinement causes all sorts of problems for parent and child. Unable to play or make friends, children are instead surrounded by often aggressive and vulgar behaviour, which can seriously damage the child's emotional and mental development. Mothers too find it difficult to cope with child care at work, particularly as they lose trade because customers see children as dirty and unhealthy. These problems were particularly bad for the five-month-old Tendo, as she would sit for hours amongst heaps of charcoal with dust slowly caking her face. At 8 months the situation was dire: Tendo was severely malnourished weighing only 3½kg and deathly ill.

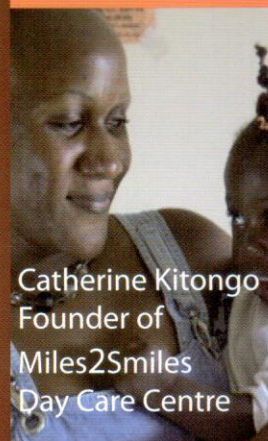
As Maama Tendo recollected "she developed measles until her tongue became black." But little could be done. Medical treatment is often too expensive and requires spending hours and sometime days away from the market queuing to be seen, so most mothers turn to cheaper alternatives, susceptible to inappropriate, counterfeit medicines. Maama Tendo, however, had heard of a small day care centre called Miles2Smiles which had just opened up outside the market and was offering secure and affordable care. She decided to take Tendo.

'She was malnourished,' remembers Catherine Kitongo, the founder and director of Miles2Smiles, '...she never laughed or played. Her private parts were terribly burnt like a child who had been in nappies for a very long time – they were so red and painful'.

Seeing that death was certain if nothing was done, Catherine agreed to take Tendo on and began feeding her a daily meal of mukene – a silvery fish that's rich in protein – and soya flour. Tendo's condition improved but the centre, established on Catherine's own small income as a cake maker, was running seriously short of money. After exhausting her own funds, Catherine began to ask friends, and then anyone who would listen. Desperation eventually took her to one of Kampala's largest supermarkets, where she told them that babies would die without their help. "Thank God they responded and gave me a few supplies." Miles2Smiles survived and were able to continue their service of early years education classes, playtime, and a substantial daily meal. As a result Tendo began a U turn, and is, today, a healthy confident child of 3½ that enjoys telling stories and has many friends to play with. Maama Tendo, freed from the simultaneous challenges of child care and work, is one of the most active mothers in the day care centre and comes in regularly. Despite this, Catherine still feels for Maama Tendo.

'Such hardworking women who do not have a bargaining power at anything. They work so hard but they seem to be going nowhere.'

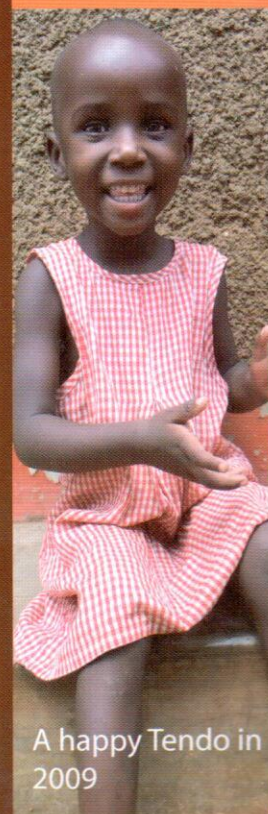
Because of the complex set of problems for parent and child in the market, Ka Tutandike commissioned a study in 2008 into the situation in 3 markets around Kampala. The study mapped out what welfare provision already existed and identified ways in which Ka Tutandike could help to improve the lives of market children. This study resulted in Ka Tutandike establishing the RISE Project : Reaching, Improving and Supporting the Early Years), which now works with 100 babies, toddlers and children and 50 parents to increase the quality of early childhood care in the markets.



Catherine Kitongo
Founder of
Miles2Smiles
Day Care Centre



Mother and baby
Kalerwe Market



A happy Tendo in
2009

RISE brings together

several partners, including Miles2Smiles and, because child care does not simply equate to day care, the project works heavily with parents to develop their parenting techniques as well as their professional skills. This includes home visits, classes in basic health, hygiene and dietary awareness, as well as training in business and marketing skills and how to grow basic foodstuffs in confined spaces. Through this project the hope is that the lives of around fifty parents and a hundred children will be significantly improved, in a meaningful, long-lasting way.

OUR WORK: The RISE Project

Reaching, Improving and Supporting the Early years

Investing in Good Nutrition

Training 50 parents in how to grow, harvest and cook nutritious foods for their children within confined urban spaces.

Growing foods at the day care centre for demonstration purposes and to feed the children.

Training 50 parents in good nutritional practices, such as breast feeding, and weaning.

Linking Miles2Smiles with the local health officer who visits once a week to observe the children's health, monitor their weight, and make referrals where necessary to local clinics and hospitals.

Impact: Improved health of 100 children

Building Skills of Day Care Staff

Mentoring 5 day care staff in basic child care practices such as keeping records on each child.

Training 5 day care staff in how to stimulate the development of the child through active play, introducing structure into the day, making and using appropriate play resources out of local materials.

Impact: Increased positive learning dispositions of 100 children enhancing initiative, responsibility, curiosity, creativity, trust, problem solving, independence and confidence



Parents learn how to grow vegetables and fruits in jerry cans and sugar sacks– at the new demonstration garden which has been established at Miles2Smiles. Parents are harvesting cucumber, carrots and much more and have recently learnt to make fresh juice.

Project Partner:
Kulika Uganda www.kulika.org



Interactive games which teach children the alphabet and word identification may assist them on the path to reading. Here children at Miles2Smiles are playing a memory matching game.

Project Partner:
Mango Tree
www.mangotreeuganda.org



Investing in Micro-Finance, Small Loan and Saving Cooperatives

Parents working in the market are supported to set up group saving schemes, from which the groups can then administer small loans for business development.

Parents are trained in bookkeeping, business and marketing skills. Parents are supported to create a vision for their families to enable them to save and to begin to plan for the future.

**Impact: Increased
incomes of market
vendors to improve the
lives of 100 children**

Investing in the Environment of the Day Care Centre, Making it Safe and Hygienic

Simple improvement were made to the day care centre. Latrines were tiled, and a potty area and washroom created, where parents now wash their children at the end of the day.

The whole area was levelled over, to create a smooth safe space for child play and a clean and homely atmosphere.

**Impact: A safe, hygienic
environment for the
healthy development of
100 children**

Early years are known as **FORMATIVE** years where the child develops all basic brain and psychological structures.

The most rapid period of brain development takes place in the first two years of life, laying the pathway for significant intellectual, emotional, physical and social functions.

Early stimulation will promote brain development. So children should be provided with the kind of experiences that support their growth and development.

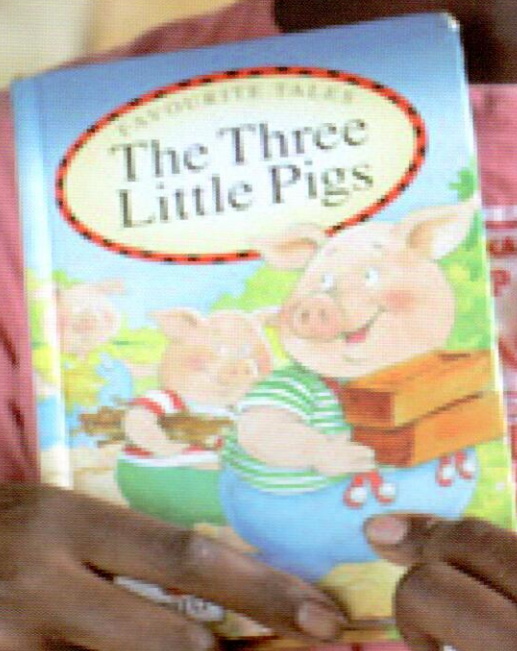
Source:
Mango Tree



Maama Doreen hopes to acquire skills in enterprise, learn to save and be able to send her children to school. Asked whether she will use the savings to style up like the other Kampala women, she said she has had many challenges in bringing up her children and cannot risk using her savings for misguided priorities.



Reading for Fun



Primary school children who do not learn to read properly struggle to develop their critical understanding, and often do not succeed in formal education. Because of under-investment and limited teacher training opportunities, Ugandan primary school students are much more likely to suffer from this problem. But through a scheme of simple, local changes developed by Ka Tutandike which encourages reading stories for pleasure, real changes are taking place in children's lives.

Nearly everyone has a favourite story book when they are little. For the US President, Barak Obama, it was Maurice Sendak's 'Where the Wild Things Are', and for Rio Ferdinand, the Manchester United defender, it was 'The BFG'. As well as opening up exciting stories about imaginary places and other worldly adventures, reading is also vital for the development of writing, vocabulary, spelling, and grammar.



Many Ugandan children, however, do not have this crucial aspect of learning. The Ugandan education system has become desperately overstretched since the introduction of Universal Primary Education (Education for All) in 1997, with less than a quarter of all children finishing. One typical UPE school is Ttula Primary which has 368 students and an annual budget of £4,133 – only £11 per child for a whole year (the UK average is £5000 per child). While in terms of numbers Ttula seems reasonably populated, many young pupils in Uganda, are stuck in huge classes, some as large as 200 students, with few teaching materials, perhaps one book to share between five. Teachers, who are on very little pay, struggle with factors that range from lack of training to a strict education curriculum that is single-mindedly focused on examination success, leaving out crucial informal educational opportunities, such as reading for pleasure. It is all too common for classes to be taught by a teacher dictating from the front of the classroom while the pupils sit listening, not participating.

But it is not just at school that children are turned-off reading, as Juliet Nalukwago, a primary 5 teacher at Kasubi Church of Uganda Primary School mentions, 'more reading should happen outside the classroom, with children reading from home with encouragement from their parents'.

But with over 30 percent of the population illiterate and where the majority of houses do not have electrical lighting when the sun sets at 7pm, reading at home is often not possible.

These problems are compounded by a pervasive view that reading is purely an academic activity. On books, teacher Juliet tells us 'they are expensive; we cannot manage to buy them, we just use these books which are here at the school'.

BENEFITS OF READING FOR PLEASURE:

Provides greater self confidence

Leads to voluntary reading in later life

Increases general knowledge

Provides greater understanding of other cultures

Provides insight in to human nature and decision-making

Has a powerful effect on second language learners

Source: (Clark & Rumbold 2006)

Improves reading comprehension, writing styles, vocabulary, spelling and grammar

Source: (Marson 1997)

Provides emotional pleasure and satisfaction, recreation, diversion, excitement, amusement, an opportunity to escape/forget reality

Source: (Tellegan and Catsburg 1987)

adults clothes. She has three girls and three boys currently at primary school. Giving two reasons why reading is important for her children, she says that she wants her children to get to university level and obtain better jobs, as well as enabling them to read books like the Bible which will give them hope. This emphasis on utility often detracts from the child's enjoyment, making them less likely to read, and, therefore, reduces their creative and educational development.

Fortunately, the challenges in encouraging children to read for fun are not all massive socio-economic issues. Small changes can be made which can have significant impact. It is here that Ka Tutandike is making a difference.

Schools, for example, often own good books but, because they are deemed too precious to use, are regularly kept under lock and key in the Head Teacher's office. This is particularly common in cases of new books which have an official school stamp in them – as is the case with most new donor-funded reading materials. A simple training scheme in cataloguing and good practice to allow children to access library books is all that is needed to overcome this problem. This solution was arrived at after Ka Tutandike became aware of the issue and commissioned a research report into reading for pleasure in Ugandan primary schools. Through interviews with 3 head teachers, 9 school teachers, 22 parents, and 54 pupils, the governmental department responsible for literacy, and various other organisations involved in promoting reading, a report was compiled from which the Read, Enjoy, and Discover! (READ) project was established. The aim of the project is to make reading fun and accessible for primary school children, and also to contribute towards pleasurable and life-long literacy in the country.

Working with three Kampala schools - St. Paul Banda Primary, Ttula Primary, and Kasubi Church of Uganda Primary – Ka Tutandike is helping schools to develop guidelines for reading for pleasure, ensuring that appropriate reading materials and visual aids are available, increasing parental involvement, and through teacher training and reading-related activities Ka Tutandike is working to ensure that materials are being used. The benefits of more enlightened approaches to reading can be seen in Brian Mweisigye, a handsome p.7 pupil at the beginning of his growth-spurt, who walks into Kasubi's school library with a laid-back confidence.

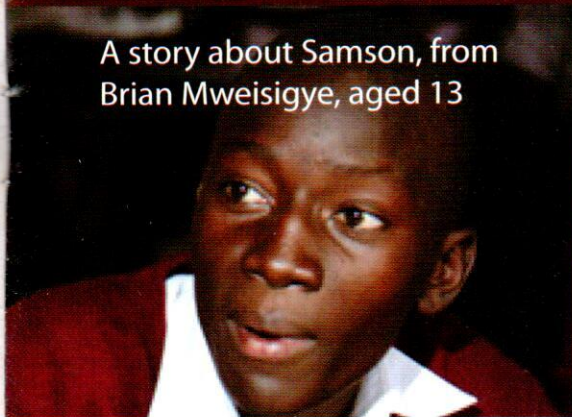
As a result of the new easy access of his school's library and its' simplified loan policy, he has become a frequent reader who stops by to pick up colourful storybooks, usually taking them to read under the school's outdoor reading shelter. His favourite read, *Sleeping Beauty*, appeals to Brian because of the 'fairies and a prince who helped sleeping beauty', but also because it's a big colourful book, right for his age-range, that captures the imagination.

Through the small-scale changes enacted by the READ project, many more like Brian will have the opportunity to escape into stories that fire up imaginations, subtly nourish their linguistic expression, and solidify mental comprehension. When these issues are seen in a comprehensive light through careful research, small important solutions can be found, and with a little expert involvement, they do produce constructive change.

Ka Tutandike is working with parents to encourage storytelling in Ugandan primary schools

Ka Tutandike is working with teachers to encourage children in Ugandan Primary Schools to write their own stories, either ones that they have learnt from their parents or ones they have created themselves. The best stories can then be hand published by the children and displayed in the library for other children to read.

A story about Samson, from Brian Mweisigye, aged 13

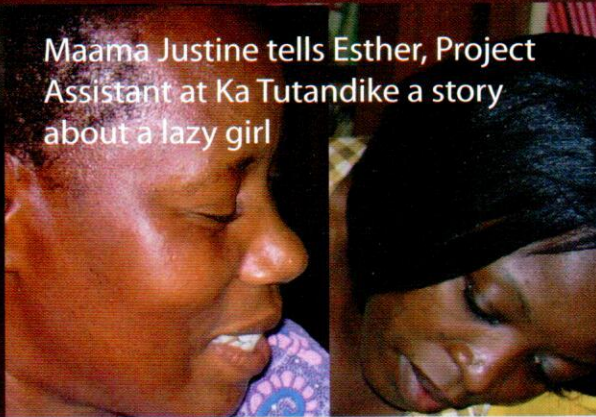


"Before we go to bed we first go in the sitting room, we have a short prayer and after having a short prayer my parents start telling us stories, at times they tell us Bible stories. Here at Kasubi Primary School there are 8 children [from my family]. Last night my parents told us a story about a strong man called Samson.

Samson married a king's daughter and he loved his wife so much. But there were people around who wanted to take his life away. And most people went to his wife and asked the wife. "Can you please do us a favour and ask your husband where he gets that power from, how come he's so much stronger than these other men?" So, the lady went to her husband and asked. Samson told her that ever since he was born they have never cut his hair short so that's why he's strong. So when the wife told those people, the people told the wife to cut off Samson's hair, so that maybe he will feel weak, so that they can arrest him and imprison him".

"My parents like telling us stories so that we can grow up as god fearing children".

Maama Justine tells Esther, Project Assistant at Ka Tutandike a story about a lazy girl



"My parents, used to tell me some stories. I also tell my children some stories so they become wise enough. My children love the one about the lazy girl, who went to the garden and started to sing "Njabala Njabala". The lazy girl does no work, her mother does everything for her.

When she got married, the lazy girl didn't know how to do any work. Her husband's family sent her to go to the gardens, but she couldn't dig, she started to cry, "Where's my mum? My mum come and do this work, my mum come and do this work", she started to sing, "Njabala, Njabala".

So, at the end of the day the husband's family found that the ghost of the girl's dead mother was helping the lazy girl to do the digging and the other work in the house. It was bad for her, they chased the girl back to her parents' home, because she wanted the ghost to do all her work. Her husband's family called her a witch."

That story encourages my children to know housework, to know how to dig and not to be like that girl calling "Njabala!"

The assessment culture of Ugandan education significantly inhibits any concept of reading for fun. There is wide acknowledgement that if there is no measure or nominal outcome to the activity then there can be no educational gain.

OUR WORK: The READ Project, Read, Enjoy and Discover! reaches 1720 children and has four key elements:

READ supplies schools with books and encourages varied and fun child-centred activities

We provide schools with child-friendly bookshelves and reading books for each year group in English and the local language.

We train schools to audit and catalogue the books in their libraries, in how to display books and promote book-borrowing.

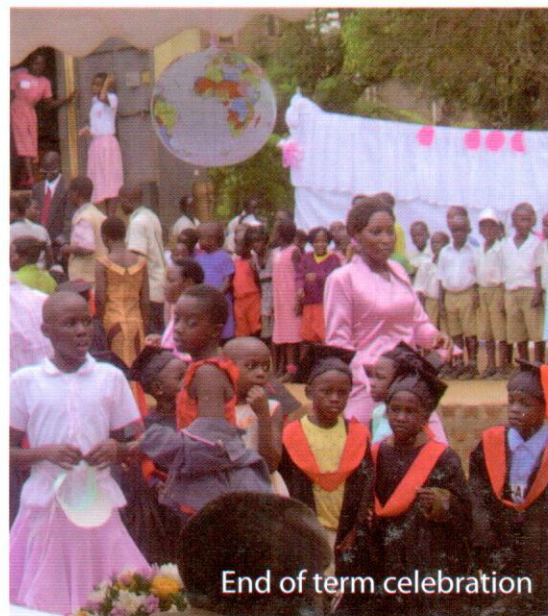
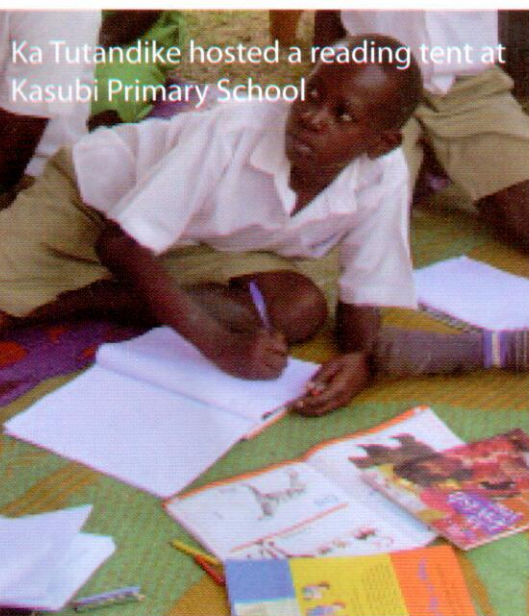
We support schools to set up varied and interesting reading activities such as: reading clubs, school reading competitions, buddy reading systems between older and younger children, storytelling and drama, story writing and story publishing (making books out of sugar sacks and local materials).

READ increases parental and community Involvement

We encourage parents to participate in storytelling, both at home and during school time.

We target corporations to 'sponsor' their staff by allowing them to contribute one lunchtime a week to read with a child in a local school.

We include local religious leaders in the promotion of reading.



The READ Project works in partnership with Kasubi, Banda and Tula Primary Schools

READ motivates the school community and demystifies the value of books

We support each READ school through the formation and maintenance of a Reading for Pleasure Committee (RPC) - responsible for overseeing the READ project and reading for pleasure in the school. The committees are made up of teachers, children and parents.

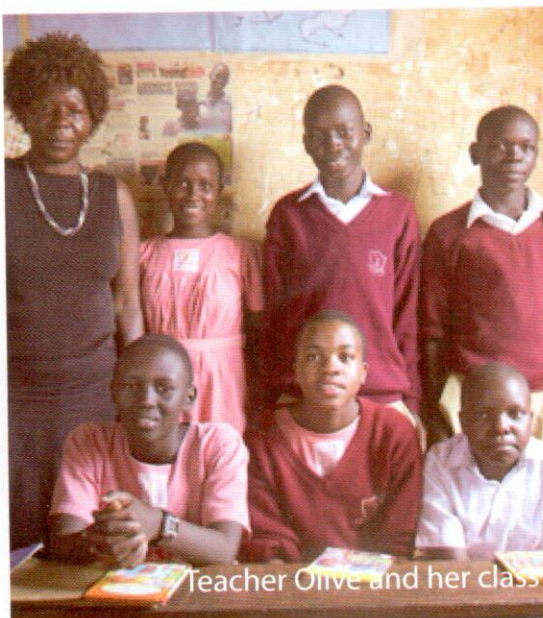
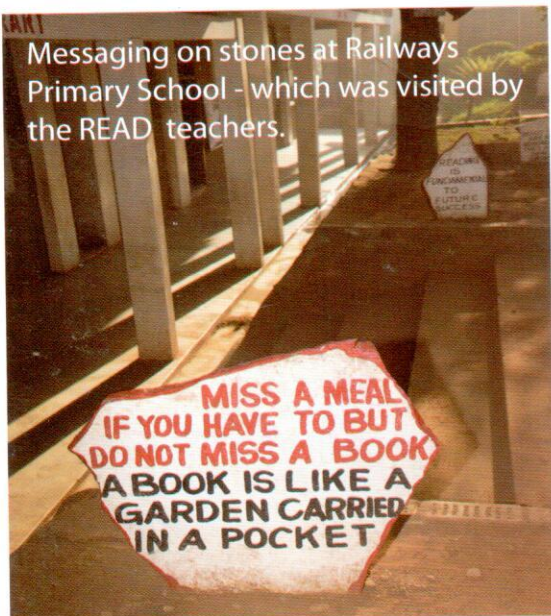
We expose teachers to good reading practices in other primary schools through READ caravans (one-day educational visits).

READ mentors teachers and provides teachers with a resource pack and training

In partnership with Red Earth Education, Ka Tutandike will provide primary school teachers with a resource pack and complementary training to hand over active learning strategies and tools to help teachers facilitate reading for pleasure activities in and out of the classroom.

There is a widely accepted view that local folk stories from the oral tradition are under threat from the influence of new technology such as televisions which interrupt family life as it once was. These stories are disappearing in Uganda by the day.

Messaging on stones at Railways Primary School - which was visited by the READ teachers.



Teacher Olive and her class

A group of children, mostly girls, are dancing in a classroom. They are wearing pink headbands and pink tank tops. Some are wearing purple shorts, while others are wearing purple skirts. They are all smiling and appear to be enjoying the activity. The classroom has yellow walls, a large window with multiple panes, and some posters on the wall. A teacher or adult is visible in the background, also smiling.

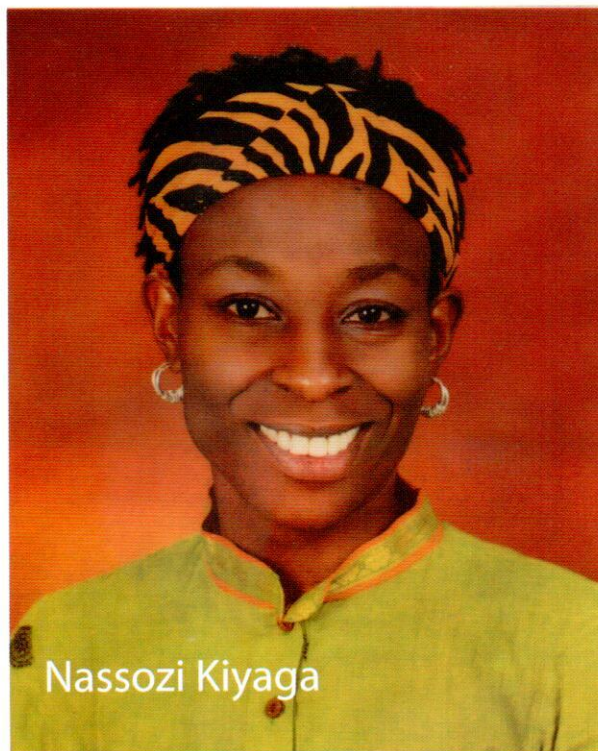
Reproductive Health Education for Deaf Youth

"When hair developed in my armpits,
I thought it only happens to deaf like me"
(deaf child, CARD research 2009)

Children dancing at Masaka School for Children with Special Needs

Nassozi Kiyaga

One Woman's Crusade Against the Sexual Abuse of Deaf Children



Born with severe hearing problems, Nassozi Kiyaga's life was fundamentally shaped by understanding and dealing with her hearing impairment. Thanks to the committed support of her parents, an operation which saved the hearing in her right ear, and her undoubted passion for disabilities, she has gone on to become an international voice on deaf issues, working with deaf communities across the world, particularly on the Indian subcontinent and Africa. In 2007 she established her own charity, Deaf Link Uganda, which now, like Ka Tutandike is working to overcome one of Uganda's most hidden problems: the sexual abuse of deaf children. At Ka Tutandike we rely on inspirational individuals like Nassozi to guide our work.

Nassozi's friends will tell you that she has sacrificed herself for the common good, that she is compassionate, self-motivated, focused and stays the course no matter the challenge. With a fundamental realisation that disabled people are among the most deprived and neglected minorities in Uganda, Nassozi is committed to working with the communities that are deeply entrenched in prejudice, negative attitudes and superstition. On her hearing impairment, Nassozi tells us "I had childhood severe Otitis Media (OM). It is chronic and up till now I still have the problem, but I do not consider myself disabled; it is a hearing impairment, which I have adjusted to well over the years.

Ka Tutandike
leading by
example:

Our staff members are
being trained in
Ugandan Sign
Language

We have recruited a
deaf volunteer to join
the team.

We are encouraging
our friends and
partners to employ
deaf people in paid
positions and to
establish volunteering
opportunities for deaf
people wishing to gain
work experience.

We have agreed on
and adhere to an equal
opportunities and
disability equality
policy



Ka Tutandike holds a meeting with parents of deaf children to sensitise them to the rights of deaf children and to teach them Ugandan Sign Language

OM is a common childhood ailment which, if treated early can be prevented from causing damage to the hearing organ. Untreated, it can lead to severe hearing loss and this is a big problem among young children in many developing nations. In my case, I was extremely fortunate because my mother was a nurse. She worked in Mulago Hospital, and we were constantly in and out of the hospitals ENT (Ear, Nose and Throat) ward. However, due to poverty, especially in the rural areas, where there are no medical facilities, many parents are unable to access treatment if their child gets OM. We must support parental involvement in our work with disabled children”.

Nassozi’s passion shines out as she remembers her early work with deaf people: “When I met and worked with deaf people for the first time I could not imagine how it was to be deaf! I struggled a lot with my hearing especially as a child, but I felt that my experience was no where in comparison with the deaf: how did they manage if they couldn’t hear? I was so curious, intrigued and deeply fascinated: yearning to find out more - to learn, discover and understand the lives of deaf people.”
When we begin to discuss the issue of Reproductive Health, Nassozi looks us in the eye and tells us:

“Uganda leads Africa in its Anti Retroviral Therapy programmes for HIV/AIDS and receives considerable donor assistance in the form of pharmaceuticals, medical equipment, voluntary counselling and testing services. However deaf citizens continue to remain marginalised by society and are commonly treated as sub-human. Deaf people are frequently subjected to neglect, ridicule, emotional and physical violence. Their exclusion from funding and policy making is a morally questionable human rights issue that urgently needs addressing. Sexual violence towards deaf females exposes them to high risks of infection”.

Without pausing, Nassozi uncovers the root cause – lack of information. “Deaf people in Uganda are excluded from all kinds of information and are not valued as human beings. From birth, the family becomes an immediate aggressor by rejecting the child and treating him/her as a burden and misfortune. Due to lack of communication deaf children miss out on the socialisation process. Being deprived of acquiring a full language, deaf people are isolated, cut off from ordinary sources of information readily available to the hearing populations, such as radio, TV, public announcements, print materials and so on. They have little or no access to education as preference and priority is given to hearing children. Knowledge of Reproductive Health amongst deaf youth is abysmal – almost non-existent. If it is present, it is always misinformed and shrouded in myths – which they obtain from other deaf people. There is belief that deaf people do not need Reproductive Health information, that they are asexual and do not have sexual emotions. Due to the communication barrier their needs are not understood.”

Services for Deaf Children in Uganda

Nasser Ssenyondo, volunteer at Ka Tutandike fills us in on the situation "Uganda has put in place a good number of laws and policies to protect people with disabilities, including deaf people, and we are the only country in East Africa who can stand proud and say we having five members of Parliament who are disabled. Our challenge however lies not with creating the policies, but with their implementation. National data on the number of deaf people in Uganda is not available, and you will hear the ministers admitting that although they recognise the need; the policies require a lot of money, which is not readily available". Nasser who works closely with The Uganda National Association of the Deaf (UNAD) tells us: "UNAD and its' partners work fiercely to turn the Ugandan disability laws into everyday practices. UNAD estimate there to be around 700,000 deaf people in Uganda, and believe that only 0.5% of teachers are trained in Sign Language; leaving children born in 40 out of the 80 Ugandan districts with no primary school provision. UNAD are lobbying for all Special Needs Teachers in mainstream schools to be Sign Language trained. We also know that there are no Sign Language interpreters in medical professions and communication difficulties have been rendering health as a major concern especially for deaf mothers. UNAD and other organisations are training a handful of nurses in Sign Language, but their resources are limited".



Teacher of the Deaf

Quotes from deaf children at primary school:

"When I grew small breasts, I thought it was for boys to touch"

"When starting menstruation, I thought I had acquired HIV".

"After condom use, you wash and dry in the sun, then use again"

"If you do not have AIDS and you share a sponge with a friend who is infected you get AIDS".

Hearing the Deaf, Action on Research

It was in December 2008, that CARD* researchers asked Ka Tutandike to collaborate with the deaf community to give deaf children their right to Reproductive Health education. The CARD researchers had just returned from interviews with 40 deaf children who attend schools for the deaf. They told us:

"We spoke to 20 deaf girls of primary age. Eight of them told us that they have had sexual encounters. Six of them told us that they had their first sex encounter through rape. They reported that this was done at home by their neighbours or strangers, when left at home alone, or sometimes by someone sent by their parents or guardians".

The researchers told us that when they asked the children how they felt when they first experienced signs of puberty one child responded: "When hair developed in my armpits, I thought it only happens to deaf like me"; another child responded with "When I grew small breasts, I thought it was for boys to touch" a third child admitted "When starting menstruation, I thought I had acquired HIV". When we asked the CARD researchers why the situation was so bad, they told us that out of 18 interviews with teachers of the deaf, 70% of teachers felt that their communication skills in Ugandan Sign Language were inadequate to transfer Reproductive Health messages to their students. 50% felt that they had inadequate teaching aids to deliver the subject.

*CARD, short for the Community Action Research on Disability Project is an international research engine based at Kyambogo University, Uganda, which produces four action research studies each year – all in the field of disability. Uniquely, teams of researchers bring together academics, personnel of disabled peoples organisations and disabled people themselves. Teams are supervised by research professionals, who volunteer their time from Uganda, the Netherlands, the UK and Pakistan.

OUR WORK: Reproductive Health Education for Deaf Youth (RHEDY)



The Ka Tutandike representative in Masaka District talking about Reproductive Health with Teachers

It is clear that the majority of deaf children of primary school age are marginalised, victimised or abused or ignored altogether within their communities. This cuts across all aspects of their life including the crucial area of Reproductive Health, where they receive inaccurate or no information at all. As Nassozi puts it "If not equipped with appropriate information and knowledge on Reproductive Health—a 'weapon' they need to protect themselves, youth become easy prey. Information is power and it gives one the ability for self defence at a time when STDs/HIV/AIDS infection continues to be on the rise".

In consultation with 120 people, Ka Tutandike built the RHEDY project; which aims to improve access to Reproductive information for 500 children. We interviewed deaf children, their parents and community leaders, teachers of the deaf as well as nurses and health advisors to test the feasibility of different project ideas. With financial and technical support from Deaf Child Worldwide, we are working in partnership with the Ugandan National Association for the Deaf (UNAD), run by deaf people for deaf people and Naguru Teenage Information and Health Centre, who are experts in Reproductive Health. Together we will be delivering a Reproductive Health Education programme for 500 deaf children in Masaka District.

Nassozi tells us that "Reproductive Health Education has to be well adapted to suit the needs of the deaf – so that it will be fully accessible to them". She tells us "We don't have many experts in this field in Uganda– but for now, we can begin with teachers of the deaf – invest in them and work on changing attitudes. We need to provide deaf friendly working environments and deaf -friendly materials/resources, but most importantly we need to train deaf teachers and peer educators".

Ka Tutandike, in collaboration with the deaf community will seek the best methodology for teachers to deliver Reproductive Health messages to deaf children, giving deaf children the right to Reproductive Health information. By training health workers in Sign Language, Ka Tutandike aims to give deaf children equal access to local Reproductive Health services. By giving parents and community members lessons in Sign Language, Ka Tutandike hopes to change negative attitudes towards deaf children and increase channels of communication between deaf children and their communities

Over three years, the RHEDY project will improve the Reproductive Health of 500 deaf children in 3 schools for the deaf, protecting them from sexual exploitation and abuse

Building the capacity of school teachers

30 teachers will be trained to deliver Reproductive Health lessons and to establish Reproductive Health clubs

Training health workers in Ugandan Sign Language

Local health workers and nurses will receive training in Ugandan Sign Language and will be linked to schools giving 500 deaf children access to Reproductive Health services, safeguarding their right to privacy, confidentiality and informed consent

Training parents in Ugandan Sign Language

Parents of deaf children and community members will be trained in Ugandan Sign Language, and on the rights of a deaf child

Lobbying Government on behalf of deaf children

Working closely with the Ugandan Government, the project will lobby for the Reproductive Health rights of deaf children to be met through mainstream services

Demonstrating Learning

With ongoing monitoring and evaluation we will learn how the project is working. Are deaf children more informed? Are they experiencing a better quality of life? How best can the project findings be shared and replicated elsewhere?

THE PROJECT PARTNERS



Deaf Child
Worldwide



Ugandan National
Association of the
Deaf



Naguru Teenage
Information and
Health Centre

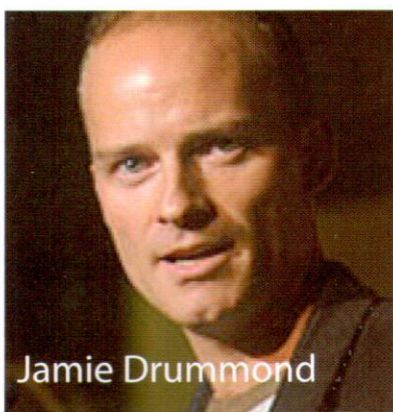
A small cog in a big wheel? Is there a role for charities in Africa's development

Some people are asking: Is there a role for charities in Africa's development? In this article we hear from Maama Tendo, Market Vendor, Richard Graham, International Grant Manager at Comic Relief, Frank Ssekajwara, an Education and Development Specialist in Uganda and Jamie Drummond, Executive Director at ONE. We thank them for their contribution.



A market vendor in Kalerwe market.
Parent of Miles2Smiles Day Care Centre.

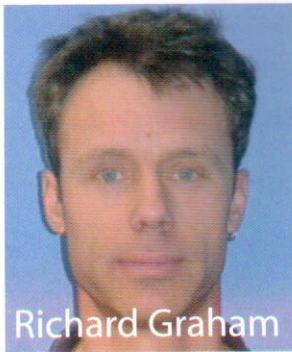
"Miles2Smiles is very useful. I am even encouraging other parents to bring their children here because of the treatment that their children can get here and the change that they can observe whenever they bring the children here. I am telling my friends who have similar problems and they are responding. There is a very big difference, my baby used to be kept in a place where charcoal is kept and by the end of the day she was be so dark and black and eating dirty charcoal. So Miles2Smiles and Ka Tutandike are making a big difference in my life and to be honest, it is obvious and many people are wondering where my child is kept when they see her so clean and happy at the end of the day". Although Maama Tendo is positive, not everybody takes the same view.



Co-Founder and Executive Director of ONE
ONE is a campaign and advocacy organisation with more than 2 million members committed to the fight against extreme poverty and preventable disease, particularly in Africa. Co-founded by Bono.

"NGOs and charities in Africa work a whole spectrum from humanitarian to social service delivery to advocacy. Ideally, NGOs would focus on advocacy and creating demand-pull pressures on government to improve services and better provide for citizens, including the poorest and most vulnerable. In truth all governments everywhere, in developed as well as developing countries, struggle to do this so there will always be a role for charity to plug gaps. It is however essential that they don't become too big or permanent and instead of intending to temporarily plug gaps, set out to permanently fill a space which could better be filled by the public sector or by the pure profit motivated private sector.

Some innovations it would be wonderful to see would be: a wholly African humanitarian organisation; an African civil society advocacy and think tank fund, dedicated to building the capacity of African civil society to be watchdogs and hold governments accountable, while meeting professional governance standards themselves. Organisations like Twaweza in East Africa and African Monitor based out of South Africa promise to be the kinds of citizen-based accountability campaigns which can really make a difference, and more such groups must grow across the continent. Overseas well wishers should back these African groups, then back out of the way."



Richard Graham

Since 1992 Richard has worked with Comic Relief, a UK based grant maker.

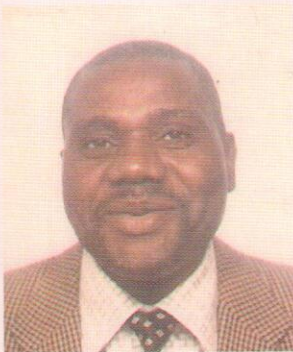
He is responsible for managing the international grants programme with an annual budget of around £25 million.

"Aid is an instrument. Nothing more, nothing less. And like any other instrument, it is most likely to work if it's properly maintained and put to the correct use. Let me give some examples of aid working. In the middle of the last decade Tanzania had very high rates of adult and child mortality caused by systemic failings in the health care system. For example, district health budgets were not aligned to the burden of disease in that district. The hierarchical management structure made decision making and communications very inefficient and led to de-motivated staff. Front line health workers weren't adequately trained to correctly diagnose common childhood illnesses. Action on all these fronts, through good quality development work has contributed to 40% reduction in child mortality and a 20% reduction in adult mortality in those districts. Why has this worked? There are lots of factors. First of all, there was the motivation and political will in Tanzania to reduce unnecessary deaths. High quality research was critical to correctly diagnose the problem. There was a learning culture that was open to change and free from ideological baggage. Key players from top to bottom were actively engaged in all phases of the work. And an understanding that long term investment in people, institutions and systems bring about change, not bean counting.

A few years back I was filming for Red Nose Day with Billy Connolly in a shanty town on the outskirts of Hargeisa, Somaliland. He was talking to a woman called Fatima, who presented Haroon, her three year old to Billy, who didn't look in the best of health. Billy asked whether Haroon had any brothers and sisters. Fatima mumbled something to the translator, and then looked down at the ground. The translator said: 'He might have had ten. But they've all died.'

Cut to the Monday morning meeting of the Morogoro district health team in Tanzania, when figures just in tell them child mortality has been reduced by 40%. Or the Monday morning meeting of Sikhule Sonke, a women's trade union in South Africa who have just secured a minimum wage and better terms and conditions for women workers on another 40 wine farms in Stellenbosch. Or the Monday morning meeting of Kuapa Kokoo, a cocoa cooperative in Ghana when they heard Cadbury's Dairy Milk was going totally Fairtrade with cocoa from their cooperative.

There are Monday morning meetings happening like these across the continent of Africa and beyond every week.



Frank Ssekajwara
Education
Consultant, Kampala

"Indeed NGOs/charities have a significant role to play in the development of Africa. I will narrow my discussion to development Education where I have had 22 experience; with government and NGOs/charities at local, national and international levels. Schools and health facilities have been set up where they never existed before and dilapidated structures renovated with support from NGOs and charities, increasing access to basic services. Educational materials have been provided: textbooks, pencils, chalk; benches, chairs, tables and computers. Hygiene and sanitation equipment has been provided, as well as health equipment and supplies, especially drugs for HIV and Malaria. The list is endless. **Capacity Building:** Many NGOs and charitable organisations do facilitate development by providing opportunities for organisations to improve their technical competencies in delivering services, in administration and management, monitoring and evaluation, quality control.

Institutional development: For an institution or system to function efficiently there must be good management. NGOs have supported the establishment of functional management structures. A case in point, the establishment and support to Senior Management Committees and Parent Teacher Associations in schools. In other fields, extensive support has been given to enhance democracy and good governance so to create a conducive environment for sustainable social-economic development. There has been heavy investment in developing peace initiatives in support of non violent conflict resolutions for sustainable and long lasting peace. **Resource mobilisation:** All NGOs/charities solicit funding on behalf of communities and governments to support community and national programmes in key areas. **Advocacy and lobbying:** A lot of advocacy has been done by NGOs in partnership with government and local communities to increase awareness and promote human rights especially the rights of vulnerable and marginalized groups such as orphans and vulnerable children and women. Significant achievements have been registered in the area of children's rights particularly with regard to girl child education, child protection, child participation and development. **Disaster response and management:** NGOs, charities and international bodies have always been governments' major partners in providing emergency relief including resettlement of displaced persons in times of calamities ... floods, internal strife, famine, drought. They have been able to provide food, shelter clothing, water, medicine, and ensuring continuity of education through provision of temporary learning centers.

Ugandan Researchers find a beacon of hope in CARD

Statistics on Disability in Uganda

The most frequently observed types of disability are the loss or limited use of limbs (35%), followed by serious spine problems (22%) and hearing impairments (15%)

7.2 % (2.5 million) of the population have a disability

More than 40 % of the elderly in Uganda have a disability

People with Disabilities are four times more likely to be out of School

60 % of People with Disabilities in Uganda do not receive any kind of rehabilitation

Source: Uganda National Household Survey 2005/2006 and Uganda Population and Housing Census 2002);



A discussion with a disabled group of women in Kamuli District during a data collection session aimed at improving the economic status of women with disabilities

The absence of quality research in many higher institutions of learning and universities in Africa has been a major setback that has greatly affected their international rankings. Research projects like CARD and a few others are long overdue. Continued delay to invest in research on crucial issues like disability, HIV/AIDS and Education in many developing countries - Uganda inclusive, will inadvertently increase social and economic burden as governments will be wasting resources trying to solve problems of special groups, applying strategies that may not meet their needs. It is also imperative to note that due to absence of quality research in disability issues, People with Disabilities (PWDS) do not appear in the Millennium Development Goals (MDGs), yet disability poses a major threat to national development.

"The CARD research has given me extra confidence when teaching my students. I feel more knowledgeable and authoritative" asserted George Kotosi, a Special Needs Lecturer at Kyambogo University in Kampala. Community Action on Research on Disability (CARD) is the brain child of Dr. Sally Hartley, Professor of Communication and Health at the University of East Anglia (UK) together with staff members of the Special Needs Education department at Kyambogo University, local disabled activists and people involved in providing support for people with disabilities and their families.

The project's aim is to bring together researchers from various fields – academics, staff of organisations for people with disabilities, service providers and people with disabilities to generate their own research so that others will benefit and build further on what has been discovered. The project has invested heavily in both local and international mentors who train, guide and coach researchers to carry out good quality, ethical and accurate research. Perhaps the most important aspect of this project is that it always includes a person with a disability on the research team.

Community Action Research on Disability (CARD)

The project has been extremely fruitful. Lecturers like George are now more confident when teaching their students. They have had the opportunity to collect data from people with disabilities all over Uganda. They can now quote directly from the CARD research that they have undertaken when delivering lectures. The research is helping service providers and policy makers understand what may and what may not work for disabled people and their families. It has brought to light disability issues that need relentless research to generate new knowledge. For example, in 2008 CARD researchers explored the issue of sexual abuse of deaf children in Uganda and highlighted the need for this problem to be addressed. The findings were an eye opener to both service providers and other stakeholders – it showed that deaf children were exclusively being left out of Reproductive Health issues. As a direct result of this research a Reproductive Health Education project for Deaf Youth (RHEDY) was launched. According to Winfred, CARD is "action based research that helps researchers build on their experiences to go further; not only in doing research, but also by thinking of the practical ways they can be helpful to themselves and their communities".

CARD has encouraged information sharing in communities; networking; better service delivery for the people with disabilities and improved research techniques. All CARD researchers like Harriet Ntege, are full of praise for CARD.

Harriet describes it as a project "of paramount importance to disabled people in Uganda".

A single mother and her child with multiple impairments tells researchers that the father of the child is not interested in them any more



CARD mentors since 2005:

The international Mentors are:

Dr. Aisha Yousfzai
Aga Khan University
Pakistan

Dr. Harry Finkelflugel
ERASMUS University

Dr. Malu Drachler
University of East
Anglia UK

Dr. Sally Hartley
University of East
Anglia UK

Dr. Angie Wade
Institute of Child
Health, London

The local Mentors are:

Dr. Mary Garrett
Kaahwa
Kyambogo University

Dr. Cyprian Adupa
Kyambogo University

Dr. Eric Mucunguzi
Kyambogo University

Dr. George Bazirake
Kyambogo University

Employers lack of knowledge of what to do about the needs of a disabled worker and they lack awareness on the abilities of people with disabilities in the workplace

Oral modes of information sharing were considered most appropriate for sharing information on disability due to low literacy levels

Parents do not to send their disabled children to school because: they do not have enough money, because schools are inaccessible and classes are large. Some feel that too much emphasis is put on academic achievement and prejudices are held by teachers and parents

21 CARD RESEARCH PROJECTS HAVE BEEN FUNDED BETWEEN 2006 AND 2009

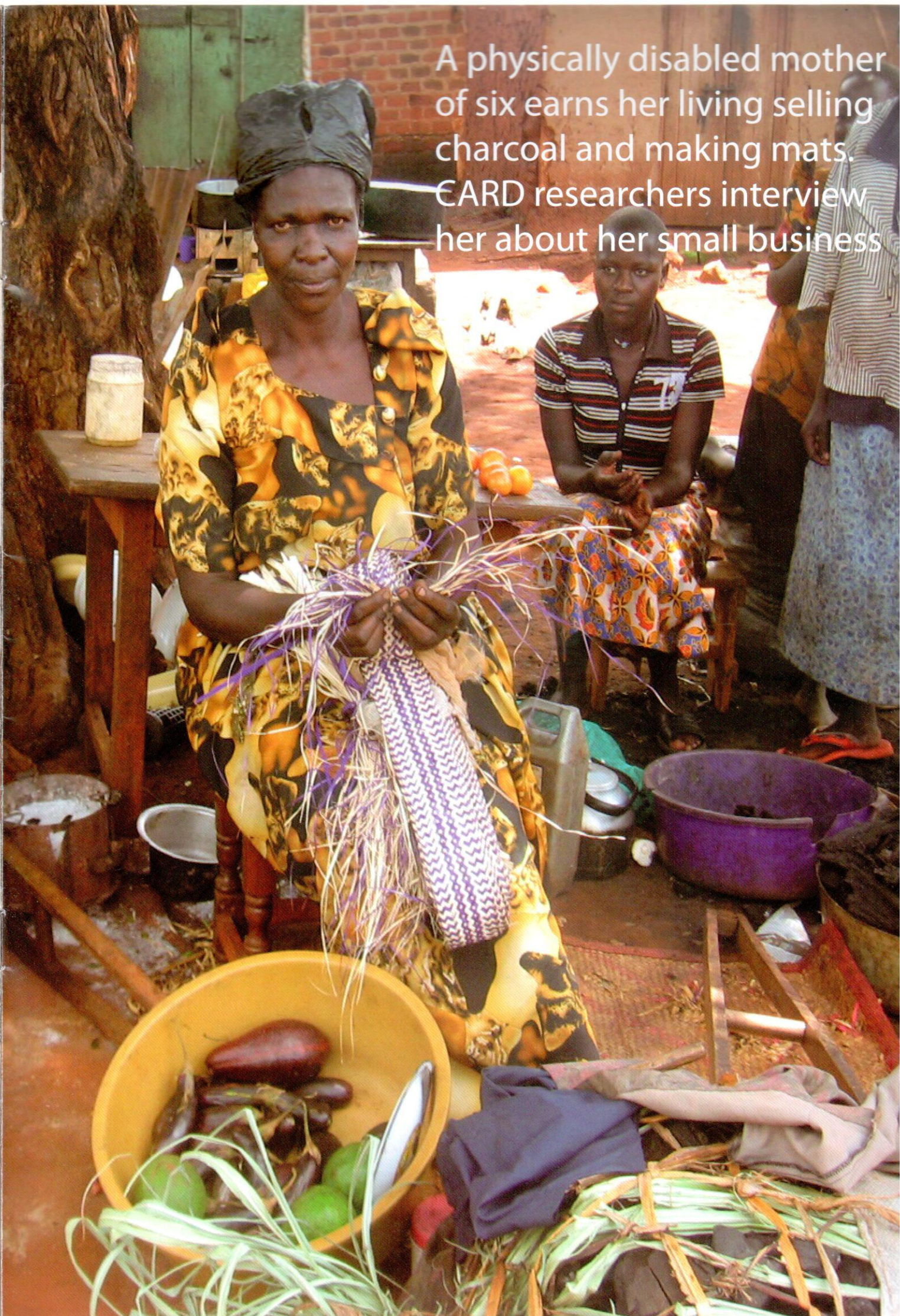
Analysis Of Perceptions On Accessibility To Micro-Finance Services By People With Disabilities In Bushenyi District **Employer Perspectives On Employment Of Persons With Disability In Uganda-** How Can Information About Disability Be Effectively Disseminated Among Stakeholders **Disability And Injury Research Among Children In Uganda** The Views Of Persons With Visual Impairment On The Mobility And Rehabilitation Programme In Iganga District **Parents' Perception Of Education For Their Disabled Children** Participation Of Youth With Disabilities In Sports Activities In Their Communities **Sexuality Education In Primary Schools For The Deaf** An Assessment Of The Accessibility Of Persons With Disabilities To Health Services In Uganda **Economic Development Activities For Disabled Women** The Challenges Effectiveness And Efficiency Of Persons With Disabilities In Ugandan Universities **Availability And Accessibility Of Health Services To Mothers With Disabilities In Determining Child Survival In Uganda** Experiences And Perspectives Of Blind People In Commercial Farming In Soroti, Kamuli And Mukono Districts **Vocational Rehabilitation Programmes And Employment Of Persons With Disability In Uganda: The Experiences Of Disabled Beneficiaries** Enhancing Persons With Disabilities Participation In Governance: A Cost Benefit Analysis Of Persons With Disabilities Participation In Selected District And Sub-County Councils **Perspectives Of Families, Extension Workers And Local Leaders On Participation Of Persons With Disabilities In Agriculture In Uganda** Practices And Experiences Of Blind Farmers In Uganda **Sexual Maturation And Development – Experiences Of Adolescents With Mental Retardation And Their Parents In Tororo And Iganga District – In Uganda** A Randomised Control Trial Of Workshop Intervention To Improve The Economic Status Of Women With Disabilities In Kamuli And Jinja Districts **Vocational Education And Deaf People In Uganda** The Contribution Of CBRT To The Improvement Of The Quality Of Life Of Persons With Disabilities.

THE FOLLOWING 58 INDIVIDUALS HAVE PARTICIPATED IN CARD RESEARCH SINCE 2006 THOSE IN ORANGE HAVE A DISABILITY

Rose Kakai - BUWEDA, Joan Okune - CBR Africa Network (CAN), Josephine Nalego - COMBRA, Africana Habyomugisha - Dept. of Comm. Based Services, Michael Matovu - Federation of Employers, Catherine Nansaba - Injury and Control Center, Alice Nganwa - Injury Control Centre Uganda, **Christine Nsungu - Jinja District Council**, Grace Kibirige - Kitante Secondary School, Edward Obura - Makerere University, **Michael Miiro - Masaka District**, Vanny Kyobuzaire - Mbarara District, Frederick Sebadduka - Ministry Of Health, Mutabwire Patrick - Ministry of Local Government, Maggie Katisi - Mpoma Secondary School, **Rehema Namarome - National Union of Disabled Persons of Uganda**, Edison Ngirabakunzi - National Union of People with Disabilities, Lovis Kabuula - National Association of Women Organisations in Uganda, **Mariam Nambooze - National Union of Women with Disabilities in Uganda**, Imelda Tumukunde - **National Union of Disabled Persons of Uganda**, Beatrice Guzu - **National Union of Women with Disabilities in Uganda**, Joseph Walugembe - Sense International Uganda, Athnasius Mubiru Fr - Soroti Catholic Diocese Development Organisation, Nandelenga Recheal Wadada - Soronko Local Government, **Francis Kasozi - Special Needs Children's Sports Organiser**, Mille Nakabugo - Uganda Adult Education Network.

Kyambogo University: **Ali Baguwemu**, Agnes Kitakule, Andrew Bwogi, Angela Nadongo, Asher Bayo, Beatrice Kyamazima, Mbabaali Joseph, Betty Kasavubu, Carolyne Maholo, Charlestine Elwange Bob, Christine Kazairwe, Ephraim Nuwagaba, Eria Paul Njuki, George William Kutosi, Grace Candiru, Harriet Nsereko, Harriet Ntage, Juliet Nakalule Wamala, Mary Nabbosa Kyagaba, Mathias Sserwadda, Moses Ddamulira, Odette Nyisimbwa Tumwesigye, Paul Alexander Isiko, Regina Nakayenga, Sarah Bunoti, Shepherd Kyagaba, **Asaf Adebua, Bonnie Busingye, Imalingat Michael, Lucia, Maurice Senyonga, Victor Ocoro.**

A physically disabled mother of six earns her living selling charcoal and making mats. CARD researchers interview her about her small business



Our Values

Equal Opportunity

We ensure that everyone, irrespective of age, sex, disability, race, colour, HIV sero-status, religion, political affiliation or any other possible excluding factor, has equal opportunity, under good governance

Quality Service

We execute our services in a timely manner, as change agents with empathy and a learning attitude

Accountability and Transparency

We stress honesty, integrity and trust in all our undertakings

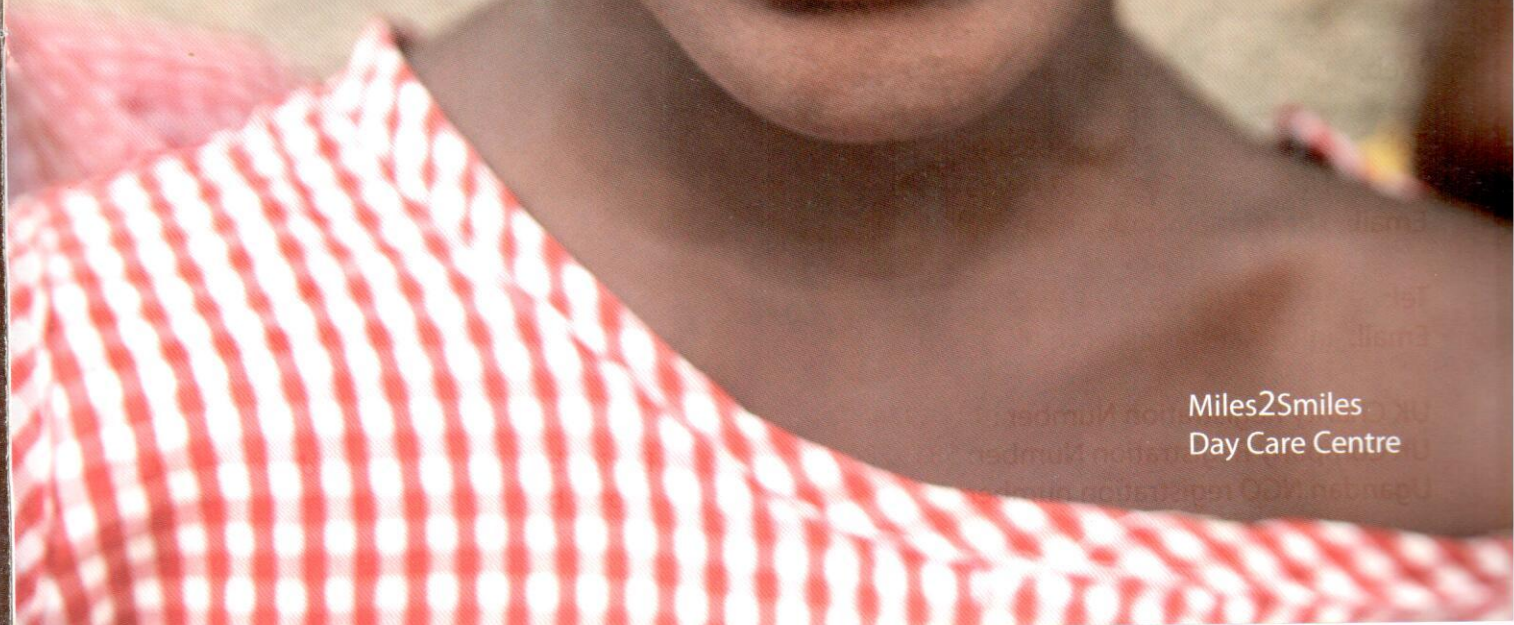
Commitment

We strive to be self-less and result-oriented in all we do

Harmony

We recognize that we are part of a global resource and work through partnerships and concerted efforts

Together we can!



Miles2Smiles
Day Care Centre



If you would like to support our work in Uganda, helping us to buy reading books, train teachers of the deaf, or support local entrepreneurs to grow their small businesses we would love to hear from you.

Whether you are interested in donating your time or money, please do contact us.

Cheques can be sent to: Ka Tutandike Trust
UK, Fourth Floor, Eagle House, 108-110
Jermyn Street, London, SW1Y 6EE or
Ka Tutandike Uganda, P.O.Box 12699,
Kampala, Uganda

You can also donate online at:
www.katutandike.org



The Reproductive Health
Education Project for 300
Deaf Children and Youth

The Early Childhood Care and
Development Project for 100
Babies, Toddlers and Children

The Read, Enjoy and
Discover Project for 1720
Primary School Children

Trains health professionals in
Ugandan Sign Language

Trains parents of deaf children in
Ugandan Sign Language

Trains teachers of the deaf on how to
teach deaf children about puberty,
relationships, moral behaviour and
sexually transmitted diseases

Trains parents in maternal health and
good nutrition

Trains day care staff in how to
stimulate the development of a child
through play

Mentors parents in marketing and
business skills, group savings and
loans

Provides schools with reading books,
and shelves

Motivates parents to read with their
children

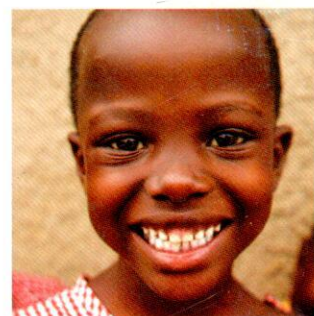
Motivates and trains teachers to
ensure reading is varied and fun in
and out of school

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