

Our Impact 2014-15



ACT  AFRICA

Foreword

This has been a very busy, productive and successful year for Act4Africa. Our teams in East and Southern Africa have never been busier and the impact of their work has been very encouraging and in some cases quite remarkable.

Act4Africa has become one of many stakeholders in the international drive to improve gender equality and empower girls and women. Women and gender issues are now central to our strategy. We recognise that many of the benefits of educating girls and women, whether in terms of employability, income, health, or their own children's development, depend on what they learn while in school. Addressing the multiple sources of disadvantage that many girls and women face through a systemic, evidence based approach is key to changing this.

The problem of HIV/AIDS has not gone away in sub-Saharan Africa and the statistics for the disease remain challenging:

1. 69% of HIV-positive people live in sub-Saharan Africa. There are roughly 24 million infected persons in all of Africa.
2. 91% of the world's HIV-positive children live in Africa.
3. The HIV/AIDS epidemic has drastically slowed economic growth and social development in Africa because hundreds of thousands of people are unable to work or receive an education.

Yet some progress has been made:

1. Antiretroviral drug treatments can tremendously decrease the number of HIV related deaths by delaying the progression of the virus and allowing people to live relatively healthy, normal lives.
2. Use of condoms has doubled in recent years because it is an inexpensive provision to offer to both the HIV-positive and negative.

Our field work has helped to engage with and to address some of these issues and as you will see, lives are being touched and changed for the better. This report shows just some of our achievements in 2014/15 all made possible thanks to the efforts of our dedicated supporters, volunteers, staff and trustees. We could not do any of this without their amazing support.

Martin Smedley, Chief Executive



CASE STUDIES



Name: Sharon
Age: 17
From: Maliba, Kasese, Uganda

Sharon is the youngest of five children, living with her widowed, HIV-positive mother. She is HIV-positive herself, having contracted the virus from her mother as a baby. Sharon became an Act4Africa Peer Educator when she was 14, and now speaks out on behalf of people living with HIV/ AIDS as a powerful champion and role model for living positively with the virus. Sharon is now sponsored as part of our Grow a Girl scheme to complete her secondary schooling.

She loves her studies and has ambitions to become a nurse or a lawyer. Along with her school fees, shoes and equipment, our Grow a Girl assistance gives her a valuable endorsement, helping her to remain in school, living and learning positively with HIV.



Name: Prossy
Age: 16
From: Kakira, Jinja, Uganda

Prossy is the orphaned eldest of five siblings, now cared for by her uncle's wife alongside her two other children. The family live in a very small house, with no electricity, poor sanitation, and water from unprotected wells. With a family income of less than \$6 per month they often have to survive on just one meal a day.

Through the Act4Africa drama club at her school, Prossy trained to become a Peer Educator, learning and then disseminating information about health, gender equality and enterprise. She loves her studies and hopes one day to become a nurse.

With a walk so long to school that it was causing pain in her knees, we stepped in to help Prossy via our Grow a Girl sponsorship

#Girl Effect

200

6

Peer Educators spread our message of hope to teenage girls, their families and their communities

Peer Educators are now sponsored by our supporters to complete their secondary education



CASE STUDIES



Name: Harriet
Age: 26
From: Kityerera Sub-County, Mayuge District, Uganda

Harriet is chair-person of Basoka Kwavula Women's Savings Group, established as part of our HEAL programme. At 27, she is a widowed mother of seven children, two of whom have died. She is determined to send her remaining children, two girls and three boys, to school, and as the sole parent, she struggles to make ends meet. She sells fried fish to earn a living, and also makes and sells bricks during the school holidays, with the help of her children.

Saving for the future is a new idea for Harriet, and with the training and encouragement of her Act4Africa mentor she is embracing it with enthusiasm. She says working with Act4Africa has *"made me gain hope, set priorities, set my own values as a woman. I want to encourage my fellow women and the entire community to save, since saving is investment for the future of our families and children."*



Name: Peruth
Age 27
From: Wairasa Sub County, Uganda

A single mother of 4, Peruth is a beneficiary of our HEAL programme in Uganda and now the chair of the Ntokolo Women's Savings Group. After her husband left her, Harriet was alone with her four children, having to assume full responsibility for their well-being.

Through participating in, and leading, her HEAL savings group, Peruth says that she has been enabled to secure her own future, the future of her children and to pursue her own business ideas.

She's now been able to raise 20 chickens "that I rear with a big vision" and feels she's now able to provide for her children as well as helping other women to do the same. *"I now appreciate the fact that I am a leader in my group of young women. I want to make a big difference: from my family to the lives of the women in my group and even to my whole community."*

Our **HEAL** projects in Uganda and Malawi have brought together training in health, enterprise, life skills and financial literacy to help women establish savings groups that can provide microfinance for small businesses. The group pictured here have invested in coffee seedlings, and land on which to grow them.



2400

women trained in health, enterprise and livelihoods

80

women's savings and enterprise groups established

Women's Enterprise

CASE STUDIES



Name: Zauja
Age: 40
From: Kieyra Sub County, Uganda

Zauja is a recently widowed mother of four, her husband having passed away due to HIV/AIDS. Since her marriage, Zauja has lived “in total fear” of having contracted HIV. During HIV testing and counselling outreach organised by Act4Africa, Zauja was tested and found to be HIV-negative. She had been tested once before but never believed the results since she was convinced she must have caught it from her husband.

“This time I was convinced to accept my results and going forward I aim to live an HIV/AIDS free life and to maintain my negative status. Since I have been empowered I am ready to share the knowledge that I have gained about HIV/AIDS especially my story because I believe there are very many people out there who are undergoing the same situations as mine. Since I have accepted my status and understood what it means to be negative I am looking forward to working hard and taking care of my family”.



Name: Shaditi
Age: 25
From: Wandegeya Village, Uganda

Shaditi has never been tested for HIV because his nearest health centre was too far away for him to visit. Due to Act4Africa’s HCT outreach in his village, Shaditi was able to get tested and find out that he was HIV-negative. He also received counselling on how to ensure he can avoid contracting HIV, information which he wants to take back into his community.

“I am happy that Act4Africa has organised an HCT activity in our community and given us a chance to test for HIV free of charge. Now I know my true HIV status and I will exercise what my counsellor has told me to do to ensure I don’t put myself at risk of getting HIV/AIDS. I want to encourage Act4Africa to introduce more HIV training and HCTs in our community as this will empower people with information and consequently be able to live life free of HIV/AIDS.”

HCT

HIV testing and counselling remains at the heart of our work. Using mobile testing facilities we travel to some of the more remote areas and provide interactive training sessions alongside testing and counselling services.

1.32 million
people trained in HIV prevention

58,000
people tested for HIV



Myths - and how we bust them...

You can get HIV by touching someone who has it

Only gay men get HIV

If you're receiving treatment you can't spread HIV

HIV is an automatic death sentence

There are many myths surrounding HIV. These myths play a large role both in its transmission and the stigma that surrounds those who are HIV-positive or living with AIDS. Many people still think that just by coming into contact with someone who is HIV-positive, by shaking their hand or using the same bathroom, they can contract the virus. Myths abound in how to protect oneself against contracting HIV such as good luck charms, or that oral sex carries no risk of spreading the disease.

These myths lead to increased rates of transmission as well as negative stigma surrounding those with HIV/AIDS. This in turn combines with gender inequality to mean that women and girls are often most at risk of contracting the virus and lack control over their own sexual and reproductive health.

Through Theatre for Development these issues are tackled with a participatory approach, engaging people in a dialogue about social, sexual health and reproductive issues. Interactive plays and performances are used to raise awareness of how HIV/AIDS can be prevented as well as challenging the stigma that those living with HIV/AIDS face, and promoting gender equality.

Theatre for Development is a powerful way for us to break down the still widespread myths about how HIV is transmitted, and the stigma associated with the virus. Our interactive, drama-based training not only busts the myths, but provides people with the knowledge that can keep them and their families safe.

Mythbusting



CASE STUDIES



Name: Dan Benon
Age: 35

A father of two, Dan Benon is a teacher at Kamaiba primary school in Uganda and works as a patron in Act4Africa's peer educator programme. As well as helping our peer educators, Dan Benon says that he is now in a better position to understand the needs of children and young people and has the skills and knowledge he needs to support them.

"I had a negative attitude towards the children who are HIV-positive but being a patron has made me respect those persons who are living with HIV/AIDS. As a teacher I know that learning is a continuous process."

Dan Benon now coordinates with a local health centre to provide voluntary HIV counselling and testing to students.



Name: Fiona
Age: 16

Fiona is another of our peer educators at Katawe Quarran school in Uganda. An orphan from an early age, Fiona has taken on her role as a peer educator with great enthusiasm.

Being a peer educator has helped Fiona stay in school and encourage other girls to do the same. *"As a peer educator I have been guiding girls, empowering them to continue in school despite the challenges. I encourage my community members to go for HIV/AIDS tests and I enjoy being listened to even by the elders in my community."*

When she finishes school Fiona wants to be a teacher or a nurse so she can continue to help others.

The next generation

A large, dense group of African school children, mostly boys, are smiling and looking towards the camera. They are wearing blue and green school uniforms. The children are of various ages, from young children to teenagers. The background is filled with more children, creating a sense of a large, happy group.

19,500

children have received gender equality and health education training

We work closely with schools to deliver our gender equality and health education training to children from the age of 10.

Medical Elective

Profiles



Name: Caitlyn
Studying at: University of Glasgow

Caitlyn spent 4 weeks in the Amana hospital in Tanzania as part of our medical elective programme at the beginning of 2015 with a specific focus on nursing and tropical diseases.

"To witness first hand the poverty which people face daily and to see how they are able to deal with this was a moving and emotional experience. I feel privileged to have been given this wonderful experience and was very welcome at the hospital.

I learned a lot about nursing, which will have such an impact on my future career as well as Tanzanian culture and myself: lessons which will stay with me forever."



Name: Chris
Studying at: University of Manchester

Chris spent eight weeks in Jinja, Uganda on his medical elective in 2014, dividing his time between Jinja Regional Referral hospital and the Nalufenya Children's Hospital. He also participated in a number of community visits to outlying villages with a variety of different health organisations.

"Before I came to Uganda, I tried to imagine what healthcare in Africa might be like. I was nowhere close. I've been forced to improve my most basic skills, and wean myself off investigations and treatment protocols. Ultimately I feel more confident and competent as a result."

Travel with a purpose

A young girl with dark skin and short hair, wearing a light green dress with a white lace collar, is sitting up in a hospital bed. She is smiling and waving her right hand towards the camera. The bed has white patterned sheets. In the background, another person in a blue shirt is visible in another bed, and a person in a white lab coat is standing to the right. The setting appears to be a hospital ward.

“I’ve been forced to improve my most basic skills...I feel more confident and competent as a result”

Chris, Medical Student, University of Manchester

As part of The Electives Network, we continue to create tailor-made medical elective trips for student doctors and nurses at hospitals in Uganda, Tanzania and Malawi. Additionally, with Soapbox Trips we provide opportunities for purposeful, practical aid trips around the world.

Fundraiser Profiles



Name: Meigan

Meigan has been supporting us since 2009 when she travelled to Uganda and Kenya with an Act4Africa group, visiting projects in Jinja and Kasese and helping take our interactive dramas into schools.

From her seaside home in Devon, Meigan now raises funds throughout the year through a variety of events. She hosts regular tombolas, sells second-hand books and bric-a-brac, collects her earnings as occasional organist in her church and does talks about Act4Africa to local schools and community organisations.

To date, Meigan has raised a whopping £13,387 for Act4Africa, for which we are enormously grateful!



Name: Anthony

Anthony is an IT consultant and a keen road and mountain cyclist. He supported us in 2014 by taking part in the Prudential Ride London Surrey 100, a gruelling 100 mile road cycling challenge based on the London Olympic route.

His fundraising efforts included running a karting event attended by 120 people in the weeks prior to the race. His final total was boosted further by his employer, who operates a match funding scheme to double the amount raised by any employee for charity.

In all, he managed to raise an astonishing £460 for our HEAL bike mechanics scheme. Huge thanks to Anthony!

This year our supporters have raised over £10,000 through a variety of events, challenges and efforts.



Fundraising

Team Profiles



Name: Patrick Kigongo
Position: Uganda General Manager

Patrick has been working for Act4Africa for 12 years and is responsible for the day to day delivery of our work in Uganda.

Act4Africa's mission is a personal one for Patrick as an AIDS orphan who lost both his parents to HIV/AIDS by the time he was 14, his sister in 2008 and a total of 12 family members.

"It's so important to me because I've been personally affected. I've lost my parents to HIV/AIDS so I feel the work that Act4Africa does is important to me."



Name: Martha Bonny
Position: Financial Controller Act4Africa Uganda

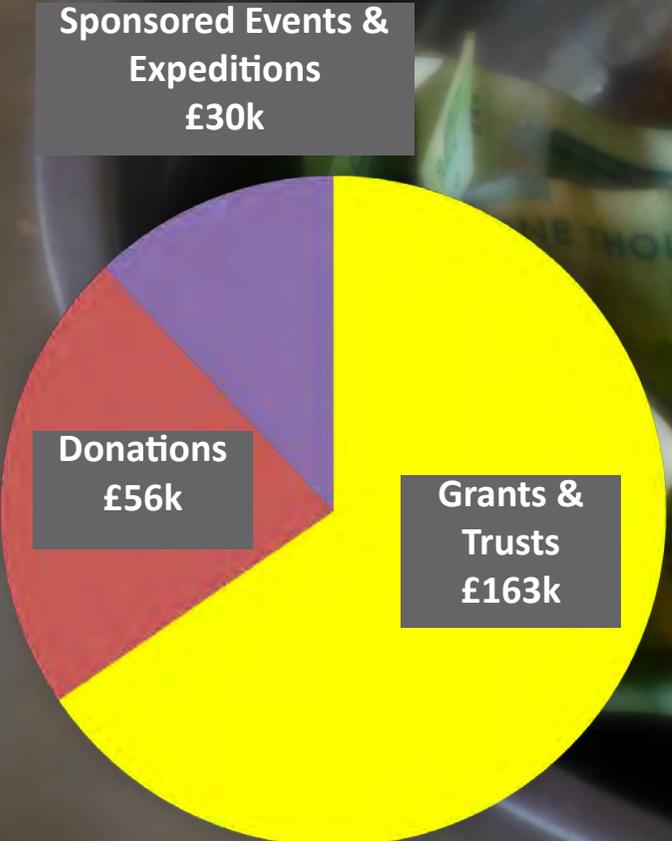
Martha has worked for Act4Africa for 13 years and is the Financial Controller for Act4Africa Uganda, making sure that our money is spent as effectively as possible.

Like most people in Uganda, HIV/AIDS is an issue close to home for Martha, having lost 6 family members to HIV.

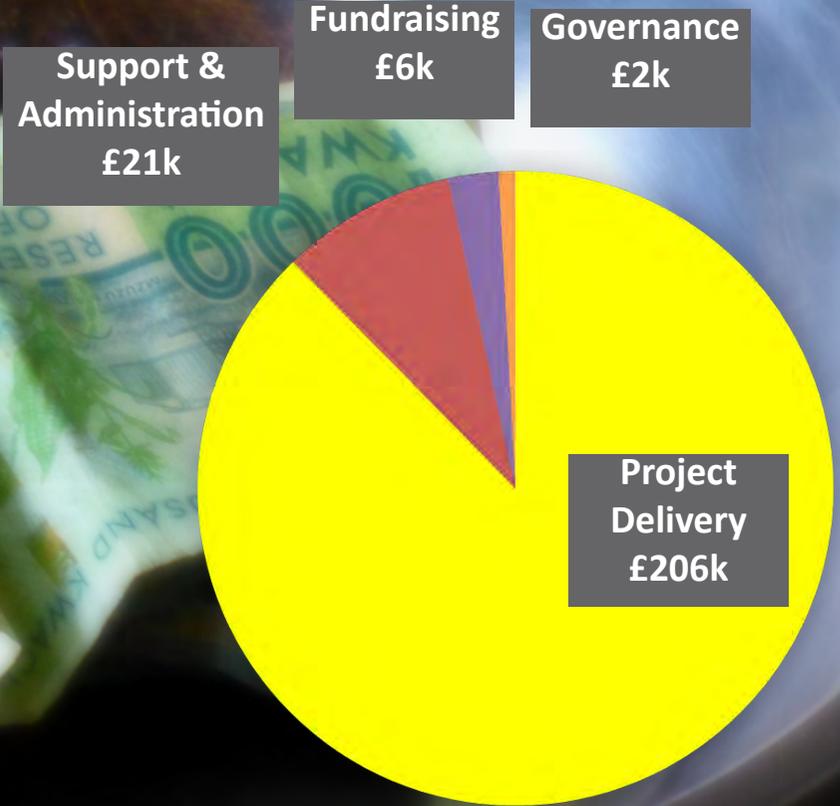
"The work that Act4Africa does is so important here because the youth are so vulnerable to the scourge of HIV so when we go to them we give hope to them. In doing so we see many people changing their lives."

83p of every £1 we spent this year went directly to delivering our projects.

We are proud of our record in squeezing the maximum impact out of every penny. Part of this comes down to our structure: we don't fund another NGO to do our work in Africa, we do it ourselves. And as we often say, our greatest asset is our team. Meet two of them opposite.



Income



Expenditure

Looking forward

During a recent visit to Malawi, I was struck by how much progress is still needed in some regions to achieve a just and fair society for many disadvantaged people in sub-Saharan Africa. So many of the women I met in rural communities had not even received primary education. The effect this has on gender equality was recently reported by the World Bank which found that:

- Girls who complete primary and secondary education are likely to earn income, have fewer unwanted pregnancies and break the cycle of poverty.
- Over the past three decades the ratio of girls to boys enrolled in school has risen at all levels.
- However, major gaps still remain between boys and girls. In Africa, boys remain 1.55 times more likely to complete secondary education than girls.

It is crucial to ensure that the nearly 4 billion girls and women around the world have the same chances to receive an education as boys and men. Why? First, education is a human right, enshrined in the Universal Declaration of Human Rights and the United Nations Convention on the Rights of the Child. Second, girls' education is a strategic development investment. Evidence shows that girls' education brings a wide range of benefits not only for the girls themselves but also for their children and their communities, as well as society at large in terms of economic growth.

The systematic exclusion of girls and women from school and the labour force translates into a less educated workforce, inefficient allocation of labour, lost productivity, and consequently diminished progress in economic development.

There is also a multiplier effect to educating girls and women. More educated women tend to be healthier, participate more in the formal labour market, earn more income, have fewer children and provide better health care and education to the children they do have, all of which eventually improves the well-being of all individuals and can lift households out of poverty. These benefits also transmit across generations, as well as to communities at large.

In 2015 these issues will be key to achieving better lives for the disadvantaged young people of Africa and with your help we can continue to make a difference to women and girls in need.

Martin Smedley, Chief Executive

The Future

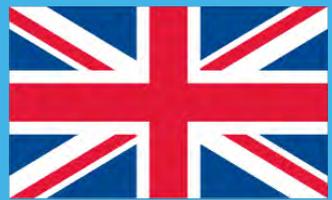




Thank you!

Without our friends, funders, supporters and advocates, our fight to create a brighter future for women and girls in some of Africa's poorest communities would be impossible. There isn't space to list every individual that has kindly supported us this year so we would like to take this as an opportunity to say a heartfelt thank you to all those who have contributed- you know who you are and we hope this report has given you some insight into the difference you have made.

That being said, we would like to mention some of our most prolific supporters: Andrew Rochford, Meigan Lyons, Jannette Harris and Clare Crowther as well as the organisations that have supported us this year which include



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from the British people



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