

Annual Report Malamulele Onward

1 April 2019 – 31 March 2020



Vision and Mission

VISION: Our vision is to improve the quality of life of children with disabilities living in resource constrained settings through innovative and sustainable solutions.

MISSION: We exist to enable each child with a disability, in particular, Cerebral Palsy to reach their best potential within a supportive environment.



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Board Chairman's Report – Pulane Baloyi

Dear Valued Stakeholders, Friends and Colleagues,

It is such an honour and great privilege to have been recently appointed as new Board Chair for Malamulele Onward.

Having spent the last financial year with so many transitions as well having to rebuild the organisation, we can now safely say that this financial year has been one where we are proud that we are out of the woods and the organisation is in a much stronger financial position than it has been for a long while.

Our Executive Director, Matseliso Ntsoelikane, took over the reigns from Dr. Gillian Saloojee over a year ago is now settled and has done amazing work to ensure that the organisation is financially sustainable.

In this financial year, we also welcomed new Board members and bid farewell to Dr. Wiedaad Slemming, our previous Board Chairperson and our Founder Dr. Gillian Saloojee. We would like to wish them well with their future endeavors.

In 2019, the World Health Organisation (WHO) reported a cluster of pneumonia cases. "Severe Acute Respiratory Syndrome Coronavirus 2' (SARS-CoV-2) was confirmed as a causative agent of what we now know as "COVID-19". Since then, the virus has spread to more than 100 countries including South Africa. This saw President Ramaphosa announce the national state of disaster and the country going on a national lockdown alert level 5 on the 26 March 2020.

With the country being on total shutdown, this meant that we had to put many of our activities on hold.

Despite the COVID-19 challenges, Malamulele Onward continued to make a positive impact to the lives of the children and families it serves.

I would like to thank all our donors, supporters and volunteers who have partnered with us and supported us over the years and continue to do so. It is through your support and commitment to our course that we will continue to strive as an organisation.

I would like to thank our team (staff), our volunteers for their commitment and dedication even during trying times.

Lastly, I would like to thank the Board members, who have selflessly given their time and expertise to the organisation.



Executive Director comments – Matseliso Ntsoelikane

This year has been a very challenging year not only for the organisation but for the whole world due to COVID19. Our organisations' main activities depend on physical contact (provision of therapy to the children disabled by Cerebral Palsy), therefore because of Coronavirus our Parent Facilitators who are based in the field were unable to conduct home visits to the families of children living with Cerebral Palsy, Cerebral Palsy clinics and Cerebral Palsy workshops. Thus, we were forced by the prevailing environment to mostly rely on providing therapy through WhatsApp calls. This method was not the best way to provide the much needed support to the affected families, however, it was the only way to still continue with assisting our main beneficiaries. There were several challenges as some areas are not easily accessible due to network problems. Furthermore, our beneficiaries are from extremely needy families and some of them do not even have cell phones let alone the financial means to buy data for their cell phones. The organisation, therefore, it is still very concerned with the negative consequences regarding non-physical contact with the affected children in order to provide them with therapy. Consequently, this might have contributed to further impact on the children thereby preventing the children living with Cerebral Palsy to reach their potential.

Nevertheless, we plan to intensify our efforts next year (2021) to improve the quality of life of these children and their families as in most cases we are the only hope they have in providing them with all the necessary information in effectively and efficiently managing Cerebral Palsy and for the parents to accept this incurable condition as a way of life. The concerned parents need a lot of support and taking care of these children is not an easy job - it is a 24-hour job and therefore the mothers' life is totally affected. These mothers often don't get much help from their partners or from male relatives. In some cases, mothers, partners or relatives blame themselves for their disability of their children, some think that they have been cursed or bewitched.

Malamulele Onward has managed to continue receiving funding to respond to the challenges imposed by Covid19. Our focus was on how Malamulele Onward could support quality of life improvements by ensuring that our beneficiaries are aware of Covid19, how to prevent it, manage it and at the same time not allowing the children

and their families to starve or for the children to spend cold winter without proper clothing as Coronavirus did and is still continuing to negatively affect the livelihood of families. Therefore, Malamulele Onward realized that its holistic vision cannot limit itself to relying on therapy alone to improve the quality of life of the children. The pandemic and lockdown exacerbated food security concerns with families we provide care to, resulting in greater difficulties for children with Cerebral Palsy. Consequently, it was mandatory to recognize the changing landscapes and adapt to them. We were fortunate enough that several donors supported the organisation by taking the nutritional welfare of children with Cerebral Palsy into consideration by providing them with food, winter clothes and Personal Protective Equipment (PPE). We are excited that to date neither our beneficiaries nor none of our staff members have been infected with Covid19.

Despite these very trying times, the financial situation of the organisation has improved, it has moved from being a few months before hitting a major crisis, to having sufficient financial resources for Parent Led Services, salaries and other operating costs for the entire year of 2021. All the sites which stopped operating due to financial crisis were reactivated and are now providing the much-needed support and therapy to the children affected by Cerebral Palsy and their families.

We would like to thank our partners, Board members, beneficiaries and dedicated staff and volunteers for the resilience and commitment they have shown throughout the whole year. Indeed, without their outstanding support Malamulele Onward would not be where it is now. Their continuous support is highly appreciated and let us continue working hard together to improve the quality of life of the children from resource constraint areas living with Cerebral Palsy by guaranteeing them good health and improved well-being as some of the fundamental human rights all human beings are entitled to.



Highlights of the year

Though 2020 was a challenging year with Covid19 and lockdowns, nonetheless Malamulele Onward still managed to achieve some major milestones and continue to support the community of vulnerable children and their families that are our core beneficiaries. Some of our key achievements this year include:

We welcomed a new Chair, Pulane Baloyi, and several other new Board members.

We undertook a significant Emergency Response to help people affected by Covid19 and the lockdowns, including distributing food, clothing, and PPE, which you can read more about in this Annual Report.

We also undertook training to make ourselves and our PFs and their families aware of the risks of Covid19 and how they can better protect themselves.

We went to Uganda and ran training there, more on this in the Training section.

We received some new funding from various donors for our programs, including from the Discovery Foundation, Onnyx, the Paige Project, ELMA, AVI, Australian High Commission, a Secret donor, Rand Bank, Allan Gray Trust, ApexHi and RB Hagart Trust.

We also received significant donations of PPE and materials from Axis House, and donations for food, equipment and other necessities from AVI.

We ran Therapist training in March (more in the Training section).

We also ran training in Manguzi (more in Training).

We undertook a field trip to Nquthu in KZN early in the year and to Oliver Tambo hospital in Gauteng (report later in the document).

We distributed equipment that we received funding for, to children and families in need.

We reactivated all dormant sites as part of our strategy this year.

Australian AVI volunteer Andrew Milnes continued to work for us remotely as a volunteer, helping with social media, grant writing, marketing and training.

In December 2020 we ran training for the Eastern Cape Government Health Department as part of a three-year tender.



Our impact

19 Sites where we work at
(Lesotho and South Africa)



35 Active Parent Facilitators

1493 hours worked by the PFs



5 Site visits undertaken

Number of workshops held - 70



Number of CP clinics held - 111

290 home visits undertaken



RTTP numbers held - 3

Our parent facilitator program, the hallmark of our organisation, is responsible for 3 major activities of the organisation. Our parent facilitators conduct these activities at their respective sites with the assistance of the local rehabilitation teams. These activities are very much site dependent in that each site differs in the demand for each activity. We focus on providing services in:

CP clinics where children with CP are seen and treated with the rehabilitation team at the local hospitals.

Workshops on CP for parents and caregivers are conducted by the parent facilitators. The workshop series consists of 5 to 7 workshops that teach and train parents on CP and how to care for and improve the quality of the lives of their children with CP. The workshops are practical and practiced based and they are taught in one or more of the preferred local languages.

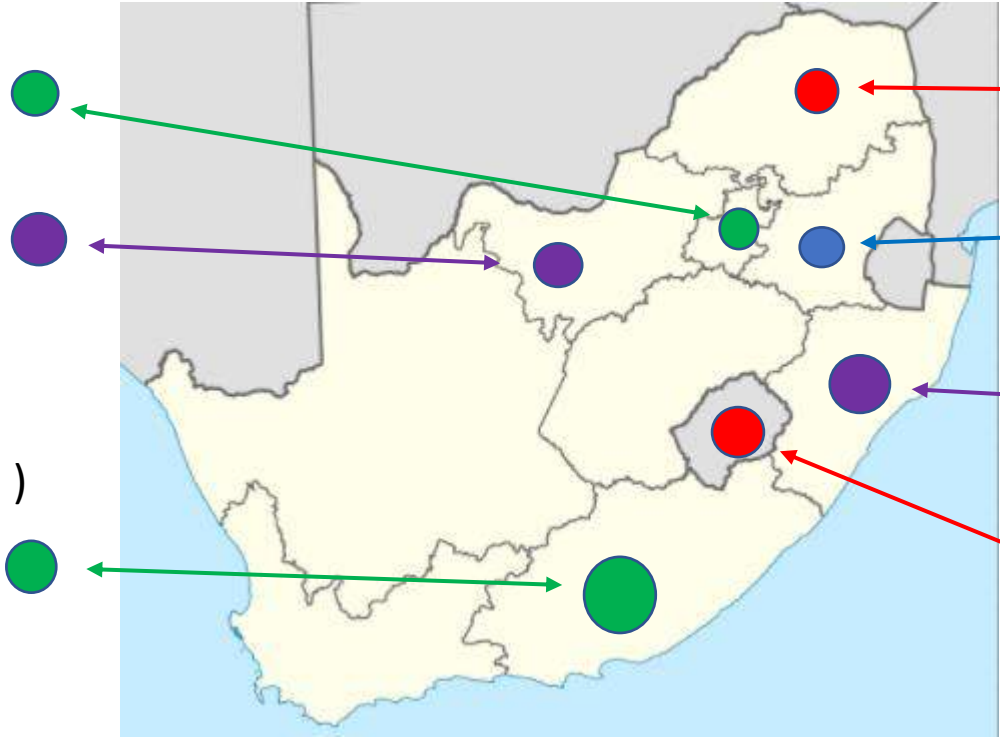
Home visits are conducted independently by the parent facilitators. The children seen on home visits are case sensitive and are identified by either the rehabilitation team at the hospitals or by the parent facilitators themselves during CP clinics or workshops. The home visits are key in aiming to provide a holistic and integrated approach to each child. It gives the parent facilitator an all-round idea of the context in which the child is being raised, how this affects their potential and how their context and environment can be maximized to achieve their goals. It is a much more realistic setting for the child and parents or caregivers as opposed to the hospital. Here, the parent facilitator is able to connect with the child and family in a way that is seldom achieved at the hospital. It also gives insight to the rehabilitation team on the issues that may come up on home visits that are integral in the long-term treatment plan.

Where we work

Gauteng – 1 site (Oliver Tambo Hospital)

North West Province – 1 site (Mahikeng)

Eastern Cape – 4 sites (Umthatha, Butterworth, Zithulele, Madwaleni)



Limpopo – 2 sites (Donald Fraser, Dilokong)

Mpumalanga – 4 sites (Matikwana, Matapidi, Acornhoek, Tonga Hospital)

KwaZulu Natal – 3 sites (Nquthu, Msleni, Manguzi)

Lesotho – 4 sites (Butha Buthe, Mokhotlong, Motebang, Mohaleshoek)



Thank you Europcar for your complimentary vehicles that got us to our site visits this year

Our Cerebral Palsy clinics

The rehabilitation staff at the local hospitals are particularly thankful for the inclusion of our parent facilitators who are expertly trained in the parent-led services on their team. Not only are they incredible helping hands, but they are most often an asset of knowledge, skills and problem solving to the therapists. Our parent facilitators attend the weekly cerebral palsy clinics at their local hospitals and clinics, where they assist the therapists in treating children with cerebral palsy, teaching them valuable skills on how to care for their child in everyday life, and give the parents and caregivers support and a positive outlook on their children's future. It is known that parents often feel emotionally isolated from their children and don't feel the connection that they have with their other children. These parents are found to be physically and emotionally exhausted by the condition of their children, and with the improper assistance the children too suffer in terms of their progress and potential. Our parent facilitators understand and empathise the role of these parents all too well since they themselves were once in their position.

We find that parents who access these services (CP clinics) share a deep connection with our parent facilitators because they feel this level of understanding. The intervention provided with the input of the parent facilitator is much better received and followed through, and the wellbeing of both our children with CP and their parents and extended families have improved through this support. Not only are our parent facilitators able to provide this type of support, but they are uniquely skilled in actually providing intervention for children with CP during the clinics under the supervision of the local rehabilitation teams. They have been trained to be an integral part of the team and in some ways a solution to the gap that is found between patient and therapist on connecting the medical aspect and intervention to the reality of the parent and child's context, culture and environment. Pictured below is our parent facilitator from Lesotho, Matiisetso treating children in the CP clinic. You can clearly observe the ease and comfort with which she handles and interacts with the children, and this is modelled to the parents. They are given hope of a deeper relationship and understanding of their child through this and learn to love them as they are!



About Musa

Here is another example of an intervention we were able to undertake for a child in need. Musa Nohana is a young boy with level 5 Dystonic CP. He is unable to walk or hold his body up in a position for sitting. The family lives in at Morifi Ha Qoa village, in a remote area of Lesotho and can therefore not afford to attend the local hospital on a monthly basis for physiotherapy. Musa also does not have a suitable chair to assist in proper positioning.

Our parent facilitators were able to make contact with all those children who are unable, due to financial reasons, to access the local healthcare facilities to receive the consistent and graded treatment that is so vital for their conditions. They are also able to have an in depth understanding of the context and resources available to these children through their experiences of visiting their homes. They have the lived experience of this condition and impact the lives of the families in ways in which generic healthcare professionals cannot.

Musa's case shows us the importance of running a project such as this in the rural communities. Musa's family is of a very low economic status and Lesotho does not offer disability grants to children with severe disabilities. Therefore, access to the healthcare facilities is solely at the expense of this already struggling family. The local rehab identified Musa as a suitable candidate for our parent facilitators to visit at home since his parents cannot afford to travel to the clinic on a monthly basis. This came about after there was an extended period of Musa not attending the clinic and when he finally did, they all had observed a marked decline in his functioning on a physical level. Musa had become stiffer and the parent facilitators as well as the therapist were afraid that nothing was done, this could cause permanent effects. Our parent facilitators set out to continue to see Musa at home with guidance from the local physiotherapist. Upon visiting the family our parent facilitators discovered that due to the lack of equipment, Musa was not being positioned appropriately. This is what is assumed to have caused the increased stiffness.

The parent facilitators then became creative and taught Musa's family how to position him appropriately using the everyday items they had already possessed. Surprisingly, a wash basin was used along with blankets and towels to place Musa in a seated position that was good for his entire body. He was able to interact with everyone around him and appeared to be in less pain. Musa and his parents had a long way to go in terms of how to care and prepare his body for positioning and activities. Here are some of the quotes from Musa's family:

"I am thankful that my son is being helped at home"

"We are grateful to the parent facilitators for teaching us how to care for Musa."

The picture provided is of Musa on the second visit to his home. Our Parent Facilitators found him positioned in the washbasin as taught, as you can see. Although the family needed some practice, it was an excellent start to something that is definitely sustainable for them. Following this, our parent facilitator taught his mother how to seat him on the bench and prepare and massage the stiff parts of his body. This is an essential preparatory activity since it makes positioning and movement all that more effective for changing the tone in his muscle, which is a primary cause for stiffness and later further deformity. Through our intervention, Musa will receive better care, and there is less likelihood that the stiffness will continue to increase, his pain will decrease, and his quality of life will be much better.



About Nosipho

The work and presence of Parent Facilitators in our hospitals in different provinces pays an important role. These women are parents themselves to children born with the condition known as Cerebral Palsy. Malamulele Onward is where these parents are being trained to be the wheels of change for their local hospital and neighbouring hospitals to support and teach the families all they need to know about a child with CP, and how the families can care for their children so they will have a better life. Zandile Mafuleka is one of our PFs, coming from the Mseleni hospital in the KZN province. While working on home visits she came across Nosipho Gumede and her family - her mother and siblings. When sharing the information about CP with her mother/ caregiver, Zandile was torn apart as the mother to Nosipho told her that she does not want Nosipho anymore, and if no one is coming up to take Nosipho away then she will throw her in the river near their home. Zandile then contacted her mentor at the Malamulele offices - Lydia to ask for advice on what to do as the mother seemed very serious.

Lydia asked her several questions relevant to this case such as if her local therapists know about this case and if the case has been reported to the social workers and the police. The therapist with Zandile and the social workers went to this family home, and Nosipho's mother then confessed her feelings to all once again. The social workers then discussed finding a home for Nosipho with her mother. Now it is Zandile's mission to go to the home every day to bath Nosipho and work with her until a new home is found for her. Our parent facilitator along with the assistance from the local therapists and team were able to manage a very difficult and sensitive situation for this little girl. While the situation is not ideal for the moment, the role our parent facilitator plays in this child's life currently is incredibly crucial to her well-being.



Tributes

Malamulele Onward would like to remember and acknowledge several children we worked with who have sadly and unfortunately passed away this year. It is always hard when those children we work with are no longer with us. We would like to remember Liteboho Ntomane (pictured right), born in 2003; and also Azakhe Zulu, born in 2015, and Tshepiso Mashea, born in 2010. Our thoughts and prayers go to their families, we will miss them and they will always be in our hearts.

Covid19 Response

During the pandemic, most of our activities were suspended. It quickly dawned on us that the most vulnerable of our beneficiaries would not only be prevented from receiving regular intervention, but their economic context posed a serious risk to their overall wellbeing especially during this time. In order to minimize the effects of COVID-19 on the quality of life of these vulnerable children with CP and their families we sought to provide the children living with CP and their families with basic needs in order to enable them to cope with the challenges imposed by COVID-19 as well as to raise awareness and build capacity of parents of children with CP to prevent a further spread of COVID-19.

With the assistance of our Parent Facilitators we identified 100 families of children with CP who were most vulnerable during this time. Thanks to our donors, we were able to provide the following aid:

1. Groceries
2. Winter clothes
3. PPE materials
4. COVID19 Education

While this project took us right out of our comfort zone and is not an actual programme of the organisation, we could not ignore the effects of the economic fallout on the lives of our beneficiaries. While we focus on rehabilitation, we know all too well the effects of poor nutrition, immune support and stress on our children and their families. Therefore, we felt it our duty to advocate for them in this way.

All parent facilitators of Malamulele Onward were required to conduct COVID-19 education to as many beneficiaries and families of children with CP as possible. However, we needed to provide the training and educational tools first. This was a challenging endeavor since we had to rely on online and remote methods of training in order to achieve this. These challenges came about since our parent facilitators live in areas where there is little to no cellphone connection, and very poor internet connection.



- However, we managed to successfully train all parent facilitators through WhatsApp voice calls, phone calls and voice notes. We also developed a COVID-19 pamphlet in 4 local languages that was distributed electronically to as many beneficiaries as possible and shared on all our social media platforms. Our parent facilitators received detailed instructions on how to train and educate parents on COVID-19 and their children. They successfully conducted these sessions when distributing the respective PPE (personal protective equipment) and when conducting home visits.
- We want to offer special thanks to the donors, Australian High Commission, AVI, anonymous donors, as well as PEP, Boxer Stores and Jabulani foundation for all their assistance and donations.
- *On the right is the COVID-19 pamphlet we developed in English. This was then translated into 3 other languages.



Keep yourself and your children safe during the COVID-19 pandemic! A quick guide for a caregiver of a child with CP



Practice good hygiene

-  Stop hand shakes and avoid excessive touching of the face, eyes and mouth.
-  Clean hands as soon as you get home or after touching surfaces. Clean with soap and water for 20 seconds.
-  Disinfect surfaces like doorknobs, tables, and floors regularly. You can use chlorine bleach detergents or disinfectants such as Dettol.
-  Cover your mouth when coughing or sneezing with a tissue or into a cloth
-  Increase ventilation by opening windows, but avoid cold winds to prevent illness.

How to protect your child

- Boost their immunity! A diet rich in vitamins from fruits and vegetables is key in strengthening their immunity. Make sure they're getting enough water too in order to keep hydrated.
- Keep them moving! Practice stretching, movement exercises and play with your child to ensure good blood flow and breathing.
- Limit the amount of people interacting with your child. Those who do interact with them should wear masks and sanitize regularly.
- Suspend all non-essential travels and trips to limit the exposure to the virus.

Stay home if...

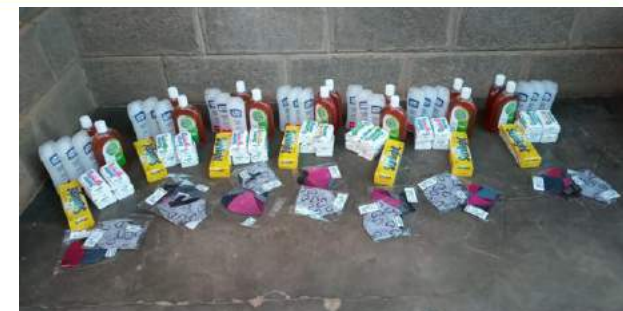
- You are **feeling sick**
- You have a **sick family member at home**



DO NOT ALLOW SICK PEOPLE TO INTERACT WITH YOUR CHILD AS THEY ALREADY HAVE LOW IMMUNITY

Take care of your emotional and mental well-being

Outbreaks are a stressful and anxious time for everyone. We're here to support you! Reach out to one of our parent facilitators or contact us through info@cpchildren.org anytime.



Equipment distribution

Malamulele Onward strives to meet our beneficiaries at every point of need. We have been so fortunate to have received funding for therapeutic equipment for our beneficiaries, who so desperately need it. The equipment provided allows our children to access a quality of therapy that compliments and further enhances the hands-on work by our parent facilitators. This equipment can allow children to move around their home, go to the shops with their parents, get stronger legs or even simply prevent severe stiffness and permanent contractures in their limbs, meaning less pain and a better quality of life!

Standing Frames

We were successful in procuring some Standing Frames: These are prescribed for children with CP who need to get stronger in their lower limbs. The inexpensive frame is a great tool in providing the support and stimulation in standing that will cause muscles in the legs to get stronger. This is done to improve function, reduce contractures, improve pain and hopefully prepare their limbs for independent standing! However often families can't afford to purchase the frames or have difficulties in accessing them. We gave these four Standing Frames below to these beneficiaries identified by our parent facilitators as being in need.



Wheelchair distribution

We know all too well the grave shortage of appropriate wheelchairs for people with disabilities. The wrong chair can cause more harm than good, causing pressure sores, dislocations and increasing disability. Although costly, the right chair can mean so much for a child with CP. Their pain is reduced, they are properly positioned, and they are able to mobilise in their homes, community and even schools. This is an absolute necessity, and we are determined to ensure that all our beneficiaries who need appropriate wheelchairs are given them.

The 3 chairs ordered from Shonaquip were fitted and prescribed for beneficiaries at our sister organisation Bophelo Day Care centre.



Soft Splints

This piece of equipment does not look like much, however its purpose is truly unparalleled. It is relatively cost effective and easy to make by a skilled person. These splints are used for children who have increased stiffness in their limbs. Due to CP, their muscles become incredibly stiff, so much so that their limbs are permanently bent and should this be left long enough, they will harden in place. The splints are placed onto the affected limbs in order to counteract the effects of the CP. The correct wearing regimen can reduce stiffness significantly. This means less pain and improving ability!

Thirty splints were ordered by the parent facilitators at our Far East Rand site in Gauteng for the beneficiaries at Oliver Tambo Memorial hospital. They were also supplied with quite a number of bibs for the children. These bibs are necessary for them to use, for hygiene and cleanliness purposes, as some children have difficulties with closing their mouths or dribbling. The bibs, like the soft splints, are made by Malamulele Onward staff and are available also for purchase for families that need them, with funds raised going to support our programs.



Training

THERAPISTS COURSES:

In March, the Practical course on Cerebral Palsy for therapists was conducted at our premises, the day after President Ramaphosa declared a national state of disaster due to the Corona virus pandemic. This resulted in all 24 participants feeling anxious and concerned for their wellbeing as well as the children used for the practical aspect of the course.

The practical course was conducted over 5 days and ran smoothly with accommodations made for COVID-19 precautions such as sanitizers, and disinfectant hand wash. This did put all the participants and parents at ease for participating in the course and no one involved was reported having fallen ill thereafter. The last training for the year (in December) was conducted in Eastern Cape for the Health Department's 24 therapists together with 14 care givers of children disabled by CP. The course provided the therapists with the much-needed practical skills on the management of CP.

As usual, the course received positive and encouraging feedback:

“Very practical but still rich in theory, incredible handout”

“Very detailed I have learnt so much more than I ever could have imagined. This course was worth every penny!”

“I’m excited because I’ve learnt that no matter how severe, something can always be done to increase comfort, decrease pain, increase quality of life and inclusion, decrease caregiver burden and bring hope. I never knew a physio could help with communication and eating!”

Unfortunately, due to the lockdown and rising number of Covid19 infections only few trainings were conducted.

DISCOVERY DISTINGUISHED VISITOR AWARD TO MANGUZI

Another exciting and rewarding venture executed by our trusted outreach team, Dr Gillian Saloojee and Lydia Ngwana. The team visited Manguzi hospital to continue the distinguished visitor programme that had been postponed due to the COVID-19 restrictions on travel.

The second half of the programme was conducted to meet the overall outcome that is to assist the hospital in improving the outcomes in children and adults with moderate and severe disabilities. This then required the training of 3 parent facilitators at the Manguzi site on the Carer-2-carer training programme workshops and conducting workshops on management and frameworks for treatment approaches with the rehabilitation team.

In conclusion, the training conducted was well received by the rehabilitation team at Manguzi. We are thankful to the Discovery foundation for this incredible opportunity!



UGANDA TRAINING

PREPARATORY TRAINING FOR CURIE III INTERVENTION STUDY

The Malamulele team, comprising of Dr Gillian Saloojee and master trainer Lydia Ngwana, were honoured to conduct therapist and parent facilitator training for participants in Uganda for the second year in a row as part of the Curie III intervention study conducted in the Iganga area for 98 children with Cerebral Palsy.

The practical training course for therapists was conducted over a 7 day period for 12 therapists and two attending doctors. 4 parents were also identified and trained on the famous Carer-2-carer training programme to begin work as parent facilitators to support parents of children living with CP in their communities.

The Feedback from the therapists to Dr Saloojee on the course was as follows:

“The therapists appreciated the comprehensive nature of the approach to the management of CP, and that is was presented in a simplified format. Therapists commented on the power of training parents within their communities and said they learnt how to engage caregivers and encourage their active participation in practical sessions, and how important this was.” –*Dr Gillian Saloojee, Uganda training report Feb 2020*

The feedback from the parents to Master trainer, Lydia Ngwana on the CTCTP was as follows:

“The Parent Facilitators commented that they had gained more confidence in themselves and in their ability to teach and to share their experiences with other parents. They also found it useful sharing their knowledge with the therapists and working together with therapists as partners. They felt they especially gained knowledge about communication and how to play with children with CP. Another highlight was a deeper understanding of what the child’s body is always doing, and how they can help rather than harm the children.”- *Lydia Ngwana, Uganda training report Feb 2020*

Overall, the work conducted by our team in Uganda proved extremely beneficial to the beneficiaries as well as those conducting the study. While there still remains a long road ahead to ensuring the success of the program and the study, we are optimistic and excited for our continued work in the country and with the research team!



Site visits

While the calendar for site visits was planned well in advance, the restrictions posed by the nationwide lockdown was enforced immediately after our first site visit for the year. Since our organization works with children who are already immune compromised as well as those who do not have easy access to healthcare, we made the choice to postpone all site visits until 2021. Thus, we conducted 2 site visits for 2020. We visited Tambo Memorial hospital in Gauteng in February, and Nquthu in Kwa-Zulu Natal in March.

TAMBO MEMORIAL HOSPITAL SITE VISIT- FEBRUARY 2020

The Malamulele Onward team, comprising of the founder, Dr. Gillian Saloojee, Executive Director, Matseliso Ntsoelikane, Master trainer, Lydia Ngwana and Therapist, Raeesa Khan, all paid a visit to our Gauteng site. Here the team participated in the CP clinic run by the therapy department and our two parent facilitators. Discussions were had about the service and how it could be made more efficient and how the role of our parent facilitators could be maximised. The team then joined the parent facilitators on a home visit to one of the beneficiaries at the site. There, they observed how the home visit was conducted by the parent facilitators and training was provided. This one-day visit proved to be a great indication of the performance of our programme and the role it plays in the hospital and community setting.



NQUTHU, KZN SITE VISIT - March 2020

Our March site visit proved a successful and eventful trip. Our team, comprising of Dr. Gillian Saloojee, Lydia Ngwana and Raeesa Khan spent a week in rural Kwa-Zulu Natal, where they conducted home visits, distributed equipment and attended the CP clinic at the local Charles Johnson Memorial hospital and visited the home and workshop of the local APT (Appropriate Paper Technology) tradesman.

Whilst on the visit, it was concluded that a new activity should be added to the program in Nquthu. Our parent facilitators identified the need for the establishment of a community support group for the parents and beneficiaries who have been discharged from the local CP clinic. The need was identified since once these children have discharged from the hospital, they do not have contact with other parents and children in an organised setting. They do not have the support and engagement from trained professionals even though this is a definite need. This cannot be managed by the hospital due to the extremely high caseload of children with CP in the area. Our parent facilitators discussed this concern with the team, and together, the community support groups were established and piloted on their visit.

The support groups are independently run by the parents of the children, with the monthly mentoring and support of our parent facilitators. Overall, the trip was insightful and incredibly beneficial for both the parent facilitators and the team. It was insightful to witness independent problem solving and pragmatic solution findings by the parent facilitators. We also gave support to one of our local partners who makes APT for the children.



Thank you to all our supporters – We want to thank our donors and others who have supported us through the past year. Without your support, whether financial or in-kind, we would not be able to do what we do. From the bottom of our hearts, we say thank you for believing in what we do and for making it possible.

- Allan Gray Trust
- Anglo American Chairman’s Fund
- ApexHi
- Axis House
- Australian Volunteers Program – Impact Fund
- Australian High Commission in Pretoria
- Australian Volunteers Program
- Charlotte and Douglas Roberts Trust
- Clive and Anita Green
- Clyde and Co
- Discovery Foundation
- Dept of Health, Easter Cape
- EdgeData Technologies
- The Elma Foundation
- Europcar
- Hirsheda Jeram
- IDRf
- Jabulani Rural Foundation
- Jane Worsley

- Kim Rosslee and Tsavo
- Malamulele Onward Canada
- Maryke Bezuidenhout, RuReSA
- Modular Mining
- Msleni Fund
- MySchool MyVillage MyPlanet
- National Lotteries Commission
- Onnyx Holdings
- The Paige Project
- Rocabolt Technologies
- RMB Trust
- R B Hagart Trust
- Samantha and June Bartlett
- Secret Donor (facilitated by Symphonia for SA)
- Shonaquip
- Timion
- Tokelo Foundation
- Wendell Westley



Financials

Malamulele Onward NPC
 (Registration number
 2006/032287/08)
 2010 FINANCIAL REPORT
 Summarized extract from audited
 Annual Financial Statements
 Statement of Financial Position
 Detailed Income Statement

Malamulele Onward NPC				
(Registration number 2006/032287/08)				
Detailed Income and Expenditure Statement for the Year 31 March 2				
			2020	2019
Revenue - Donations and Grants				
Anglo American			525000	350000
Allan Gray			0	95910
Australian Community Support			18352	0
Clyde and Co			0	16623
Charlotte Roberts Trust			50,000	45000
DG Murray Trust			0	250000
Discovery Trust			2000000	0
Gifts In Kind			208295	88934
International Development and Relief Fo			101613	98278
Malamulele Onward Canada			53784	94187
Onnyx			200400	0
Other designated grants and general don			287526	214398
Paige Project			50000	0
Rocbolt Technologies			160000	200000
RB Hagart Trust			250000	0
St Mary's DSG			0	60000
The Elma Foundation			550000	550000
Total Donations			4454970	2063330
Other income			246440	446654
Total Income			4701410	2509984
Expenditure			1,886,449	2,627,923
Total surplus/deficit			2,814,961	-117,939
Investment received			80616	16005
Financial costs				319
Final surplus/deficit			2,895,577	-102,253

To view our full audited
 annual financial statements,
 please visit our website at
www.cpchildren.org

Malamulele Onward Staff



Matseliso Ntsoelikane



Raeesa Khan



Vutomi Ringane



Lydia Ngwana



Andrew Milnes



Taryn-Zoe Gurr



Keith Viljoen



Tobias Mushroom



Victoria Zwane

The Malamulele Onward Board



Zviko Mudimu



Tarryn Janssen Van Vuuren



Wiedaad Slemming



Gillian Saloojee



Kobus Snyman



Pulane Baloyi - Chair



Kabi Krige



Theresia Ralintja



Melangini Pillay

We would like to thank our Founder Gillian Saloojee and past Chairman Wiedaad Slemming for their long term support and Board membership, who retired from the Board at the end of 2020. Thank you both for all the work you have done for the organisation.

Our Parent Facilitators

Parent Facilitators - volunteers at 19 sites located at:

Gauteng: 1. Far East Rand (OT Memorial)

Mpumalanga: 1. Matikwana 2. Matipidi 3. Acornhoek

4. Tonga Hospital

Limpopo: 1. Donald Fraser 2. Dilokong

North West: 1. Mahikeng

KwaZulu Natal: 1. Mseleni 2. Nquthu 3. Manguzi

Eastern Cape: 1. Madwaleni 2. Zithulele 3. Butterworth
4. Umthata

Lesotho: 1. Butha-Buthe 2. Motebang 3. Mohaleshoek
4. Mokhotlong

1. Rebaone Phete (Gelukspan)

2. Tshegofatso Moreojang (Gelukspan)

3. Nodutch Mboxo (Madwaleni)

4. Nontembeko (Madwaleni)

5. Zikhona (Madwaleni)

6. Zandile Gumede (Mseleni)

7. Nkosingimele (Mseleni)

8. Tumi Matlou (Oliver Tambo Memorial)

9. Hilda Zwane (OT Memorial)

10. Sibongile Mokgotho (Dilokong)

11. Lethabo (Dilokong)

12. Makabelo Maja (Motebang, Lesotho)

13. Ntebohelong Kebane (Mohaleshoek, Lesotho)

14. Matiisetso Kebane (Mohaleshoek, Lesotho)

15. Maseretse Makhothi (Butha Buthe, Lesotho)

16. Matalenta (Mokhotlong, Lesotho)

17. Gracious Nkosi (Matikwana)

18. Lindokuhle Khosa (Matikwana)

19. Jennifer Malatjie (Tintswalo)

20. Princess Singini (Tintswalo)

21. Dudu Mashabane (Tonga)

22. Thembelinhle Singwani (Tonga)

23. Philiswa Zilibele (Zithulelele)

24. Them Emilee (Zithulelele)

25. Simangani Khumalo (Nquthu)

26. Babhekile Matlala (Nquthu)

27. Rose (Donald Fraser)

28. Patricia (Donald Fraser)

29. Jedi (Matipidi)

30. Noluyolo (Butterworth)

31. Mandisa (Butterworth)

32. Simangele (Manguzi)

33. Nosipho (Manguzi)

34. Phumelele (Manguzi)

35. Noncedo (Nelson Mandela Hospital)

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PBO No 930025084

Facebook: <https://www.facebook.com/CPchildren/>

Twitter: https://twitter.com/MO_cpchildren

Instagram: https://instagram.com/malamulele_onward/

