



**KCA.**  
KEEP A CHILD ALIVE

ANNUAL **REPORT** 2021.

*Whilst 2021 saw many services resuming after the lockdowns of the previous year, we still saw how the pandemic continued to impact the individuals, families and partners around our programs. Despite these ongoing challenges, we were able to work with our partners to see effective changes in the way services were delivered - and hope starting to emerge amidst the adversity that so many have suffered.*

*Several of our partners were able to begin transferring to online delivery for parts of the service or in some cases using entirely new digital strategies to reach as many people as possible. In South Africa and India for example our partners' innovative approach to work post pandemic saw them able to reach out to significantly more people through radio shows, WhatsApp groups and designing and distributing video content in the communities.*

*In 2021, we also saw the rise of civil unrest in parts of South Africa which resulted in devastating fires, looting and violence in many communities. We were sent stories of people hiding in their homes without electricity or access to shops and supplies. As always, Keep a Child Alive stands ready to activate a direct response and we were able to support partners with an emergency grant to ease the impacts of the crisis. The support was used to help start up food growing initiatives so that community members can gain the skills and knowledge to become self-sufficient and not have to worry about where their next meal would come from.*

*As well as our Local Partner programs and emergency relief program, we were also able to support 100 children in need in Costa Rica with a Christmas donation of books and toys - we truly believe that all children should feel loved and supported, particularly at times like Christmas when children can so often be left behind.*

*And we are proud to have initiated a refugee resettlement program - already helping Afghani refugees fleeing to safety find shelter and support in safe countries.*

*There is no doubt that 2021 was another huge challenge for everyone but KCA will always work tirelessly to ensure that children and families feel like there is a future for them - even in the face of a pandemic. We are incredibly proud of the way that alongside our dedicated partners we continue to be agile in the face of the uncertainty we all face and ultimately that we are able to continue to support the children and families that need us.*

*Yours,*

A handwritten signature in black ink, appearing to read 'Antonio Ruiz-Giménez, Jr.', written over a light blue horizontal line.

*Antonio Ruiz-Giménez, Jr. Executive Chairman & CEO*

# KCA BOARD OF DIRECTORS:



**Antonio Ruiz-Giménez, Jr.**

Executive Chairman & CEO

Antonio Ruiz-Giménez, Jr. serves as the Chairman and CEO of Keep A Child Alive and has been a board member since 2015. In addition to his work with KCA, he is a dynamic entrepreneur involved with a number of successful growth-oriented investments. Antonio is a co-founder and Managing Partner at ATW Partners, a Venture Capital/Private Equity investment firm. Prior to ATW Partners, he co-founded P3 Global Management, a public-private partnership enhancing cities. He is also the co-founder and chairman of SolidOpinion, a commenting platform. Antonio holds a Law Degree from Universidad Complutense of Madrid.



**David Wirtschafter**

David Wirtschafter is a board member at WME. As the president of the former William Morris Agency, he was instrumental in shaping its June 2009 merger with the Endeavor agency. Dave currently represents clients in every area of the entertainment industry, including writers, directors, producers, musicians, fashion designers, and athletes.



**Nicole David**

Nicole David began her agent life by forming Rifkin David in 1982. As time went on, it grew and eventually was acquired by WMA in 1992. Her client list, which included both actors and musicians, was extremely eclectic. She represented everyone from Julie Andrews and Emma Thompson to Whitney Houston and Alicia Keys. Since leaving WME in 2013, she has worked as a consultant for brands like Starbucks and partnered with Lisa Erspamer to produce the documentary, Whitney. She has been on the board of KCA for more than ten years.



**Evan Vogel**

Evan Vogel is currently the head of growth at Mission. He was also the founder of Night Agency (AdAge Small Agency of the Year, 6X Webby winner), and Animatic (one of Apple's "favorite apps"). As a creative entrepreneur and business partner, Evan has helped to build, scale and exit multiple world-class brands.



**Kerry Propper**

Kerry Propper is Co-Founder and Non-Executive Chairman of Chardan, as well as, Founder and Managing Partner of ATW Partners, a Private Equity fund based in New York.

Mr. Propper is a founding member of Nadia's Initiative; he also serves on the Executive Board for Voices of Rwanda, Yazda and Digital Citizens Fund. He serves on the Advisory Council of the International Crisis Group and is the Producer of Watchers of the Sky, an award-winning documentary on Genocide. Mr. Propper has focused his activism on helping marginalized populations that face mass atrocities.

Mr. Propper earned his BA in Economics and International Studies from Colby College.

# AN OVERVIEW OF OUR 2021 IMPACT:

Together in 2021, we were proud to work with 11 partners across 8 countries. We directly impacted 156,023 children and families and reach 1,600,000 more people with advice and information.

Through our local partners in South Africa, India, Kenya, Rwanda, Uganda, Eswatini, Spain and Costa Rica we have provided:

## HEALTH CARE:

- Comprehensive HIV/AIDS Care and Treatment
- Psychological support and counseling
- Maternal and Child Health services
- Early intervention support
- Providing Medication
- Rescue, representation and reintegrate children that have been raped or sexually abused

## EDUCATION:

- Educational support to orphans, vulnerable children and children with special needs
- Aftercare, family restoration & support for recovering drug addicts
- School supplies including fees, uniforms, transport and food allowance/lunch boxes
- Sports program - assisting child refugees in Spain integrate into social and educational systems, using football and sport
- Livelihood skill training for women and youth infected and affected by HIV
- Job orientation and employment links for clients
- Business management skills, access to loan schemes to young women living with HIV

## EMERGENCY RELIEF:

- Emergency grants were issued in South Africa after the violent unrest caused destruction to homes, businesses and livelihoods.

## CLIMATE

- We have secured a \$5million grant which will plant over 32 million trees and impact over 7.5 million people in the next four years.

## INNOVATION

- We made a donation of Christmas gifts to 100 children in Costa Rica who would not have received anything otherwise. After the turmoil of the pandemic and a world that seems so fragile, we are committed to making sure every child feels loved and cared for, especially at Christmas.

## AFGHAN REFUGEE PROGRAM

- This year we launched a program to assist refugees living in unsafe or unsuitable conditions find refuge in countries where they can thrive. Towards the end of 2021 we were able to help an Afghani refugee find accommodation and support and we look forward to continuing this work in 2022.



# LOCAL PARTNERS PROGRAMS.

## UGANDA, AMS

**Alive Medical Services (AMS)** provides free comprehensive and differentiated high-quality HIV/AIDS services and related clinical care and services that include HIV Prevention Services, HIV testing Services, HIV care and treatment that include treatment of opportunistic infections and ARVs, psychosocial support, sexual and reproductive health and rights (SRHR) interventions for the most marginalized and vulnerable populations.

This year AMS were able to deliver a full complement of services to the community after last year saw some restrictions, and were able to reach out to people again with less disruption through the Covid19 pandemic

The achievements of AMS were possible due to several interventions used, including Integration of some services into initiatives like immunization days, community days, peer to peer mobilization and campaigns like 'Know your child's status'. AMS were also able to target outreach activities for adolescents and be more flexible with their contact hours, making themselves available later in the evening and on the weekends. Home based visits were also reinstated after the pandemic which saw a renewed uptake in services.



**People Reached with Local Program**



# LOCAL PARTNERS PROGRAMS.

## UGANDA, AMS CASE STUDY

Mical, a 43-year-old HIV positive client of Alive Medical Services (AMS) is a live saver! She is doing her best to stop the spread of HIV by supporting fellow women and children. She lives in a village far away from AMS but ensures that she and the people she cares for adheres to their medication. She knows that ARVS saves lives but also that ARVS prevents the spread of HIV and ensures quality life.

One day, she heard that their neighbors, who were husband and wife had died. She got concerned and went to this household to see what was really happening. Mical found a sad and hopeless old woman with a starving little boy who looked severely malnourished.

Mical was filled with compassion for the little boy (who had just lost both parents) and his grandmother.

*“With tears rolling down my face, I respectfully asked the boy’s grandmother for his custody, and I promised her to take care of him just like he was my own. Lucky enough, the grandmother saw this as an opportunity. She accepted because I meant well for him”. Mical explains.*

*“When I held this child in my arms, it felt like I was holding a corpse” Mical frowns her face. Although Mical did not know much about Stanley except his name, she decided to bring him to Kampala for medical assistance and this has restored Stanley’s health.*

*“When I came back to my husband in Kampala in 2014, my husband saw this boy that I had carried all the way from the village and was not happy. He humiliated me and said I had lost my mind, maybe I have become a witch and he shared with close people how his wife is running crazy.” Mical narrates.*

*Mical who was already in care at Alive Medical Services decided to bring Stanley to Alive Medical Services for assistance. When she came in with Stanley, an HIV test was immediately done because no one knew Stanley’s family background, not even Mical. His result was an HIV positive one. Stanley’s terrible condition kept Mical nervous.*

*“Almost every illness in the world was diagnosed with him and I was terrified he would die.” Mical gives a worried smile.*

*“I met with Counsellor Julian, and it’s like she let the light in our lives. Stanley got all the treatment he needed, I took all the advice from the counsellor on how to help this young boy live life and grow healthy. I have been with Stanley for 6 years now, those who said he was a corpse are now apologizing to both of us, though he doesn’t completely understand how bad the situation was.” She twinkles a little.*

*“Stanley is currently in school; he is a bright boy; he dreams of becoming a pilot. Thank you, Alive Medical Services, you have helped me and Stanley a lot, the food program has always been a blessing. You have not only helped me and Stanley with medication but also psychological support because we both need it. I used to cry so much wondering what if anything happened to this poor child, where would I take him, how would I explain to my husband, but luckily nothing did. Although we come all the way from my village to the facility which is a long journey, I do not think I will ever transfer to any other clinic, and I think there is no other that is equivalent to AMS. Since he is now in good health which proves that I am doing a good job, they support us by giving us 6 months refill. Alive is a good place and I am going to name Stanley another name, Alive. Thank you, Alive Medical Services.”*



# LOCAL PARTNERS PROGRAMS.

## SOUTH AFRICA, ZOE LIFE

In early July 2021 South Africa was gripped by more than a week of chaos with riots affecting many in South Africa. KCA generously supported the proposed Zoe-Life intervention to immediately begin to establish a culture of growing-your-own in the community in which Blue Roof is located.

Zoe Life were able to make the most out of digital services as the effects of the pandemic were still present

WhatsApp support services for groups were a focus so that youth could continue to feel connected to their services.

Another digital initiative was developed with our inability to provide face-to-face HIV testing due to lockdown restrictions and the team used their resources to develop the first-of-its-kind Online HIV testing platform for youth. The piloting of the digital platform known as Talk Test Treat was started, and reached 22 youth in the month of October, with a soft-launch of the product that coincided with World Aids Day on 1 December 2021 and ran throughout the week on social media.

Careers Digital services – in previous years, more than 6000 youth would normally receive onsite Career Guidance services at Blue Roof annually. With the pandemic restrictions, the team has almost completed an online digital Career Guidance Virtual Tour, which will enable us to take this service much further than the original site.

Blue Roof tapped into the Radio Broadcasting arena and partnered with Durban Youth Radio to take the Blue Roof messages across the city. Blue Roof has a long-standing relationship with Duke University's Duke Engage program. The breadth of Duke Engage's U.S.-based and international immersion programs, place students in communities worldwide for a minimum of eight weeks and is a cornerstone of the experience. Throughout the summer, students work with Duke faculty and local partners to address societal issues while learning how communities develop solutions and create change.

Nutrition and Growing-your-own Education program. Where possible youth are also educated with practical interventions on growing your own and healthy eating, and along with seedlings and compost the program, encouraging self-sufficiency over time to come, improving health and reducing the long-term need for emergency food aid.

Zoe Life will be moving from Blue Roof in June 2022. An audit has been completed by a local consultant with a series of recommendations for KCA to establish Blue Roof as our centre of excellence in South Africa. We have now started the process of recruiting a regional program director who will complete a smooth transition from Zoe Life to KCA and work with us going forward.



**People Reached with Local Program**



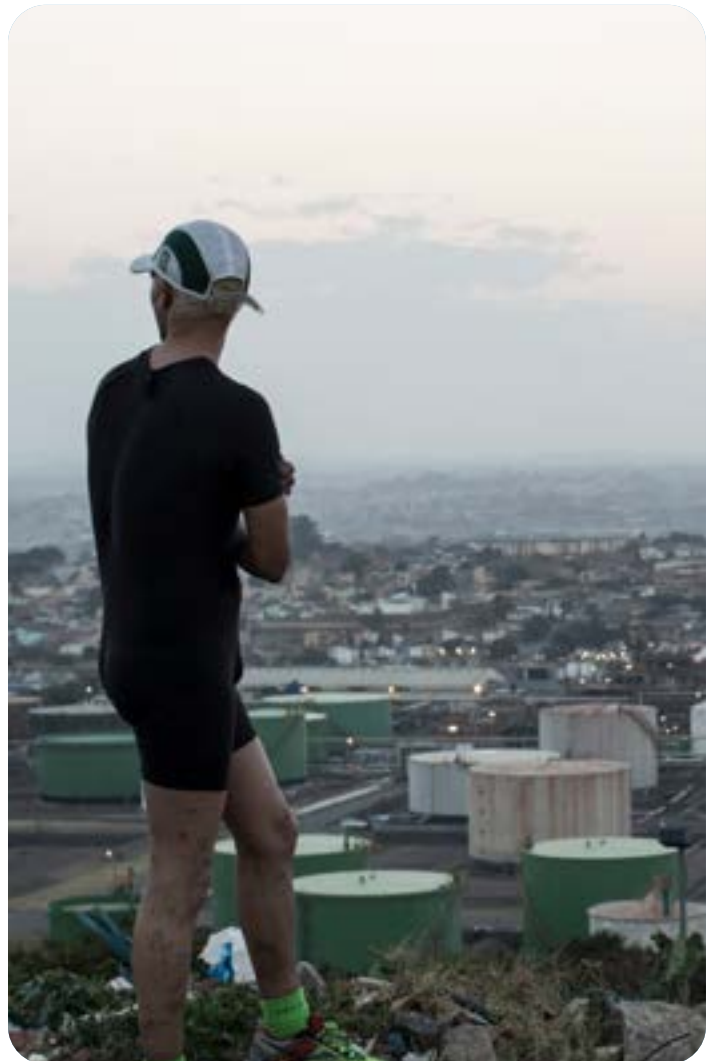
# LOCAL PARTNERS PROGRAMS.

## SOUTH AFRICA, ZOE LIFE CASE STUDY

The Johnny Makhathini youth center (JM) is a recent youth partner organizations who has been instrumental in advancing community engagement and partnership in the community of Lamontville.

The partnership enables training through their funder, Department of Social Development (DSD), and Zoe Life has recruited, trained and are still mentoring their youth.

Lukhona is one of the youth interns from JM youth centre. Lukhona, identifies with the community of LGBTQI, and has received abuse and discrimination from family and is generally badly bullied by society for this reason. Even though he has been faced with many challenges in his life; he is gentle, determined and conscientious. During the training part of his internship at Blue Roof, he was encouraged and found freedom in the sessions on GBV to speak out about the bad treatment he received from his community. Being part of the Blue Roof internship has been life changing for Lukhona. He has learnt to speak out and accept himself as he is. His openness has assisted the other youth interns to understand this marginalized community, and the many struggles they face in society. Due to his earlier tertiary studies, Lukhona has also helped the interns that were unable to access the National Student Fund Association Society (NSFAS) to further their studies in different Universities, and this has further assisted Lukhona to gain confidence.





# LOCAL PARTNERS PROGRAMS.

## SOUTH AFRICA, BOBBI BEAR

Bobbi Bear will always exist to rescue, represent and reintegrate children that have been raped or sexually abused. Bobbi bear in south Africa, was founded by an amazing activist – Jackie, who had herself experienced abuse and wanted to help children in her community in Durban, to be protected and supported when the worse happens. They have created an innovative model for supporting children in the immediate aftermath of sexual abuse, as well as using their unique bear, to enable children to tell their story of abuse quickly so they are not left waiting for 2 years in a court system, reliving the abuse.

In some areas the number of children Bobbi Bear were able to reach dropped drastically because of existing Covid 19 restrictions and the lockdown. Sadly, the domestic violence and rape and sexual abuse on children increased due to families being locked up for extended periods of time.

The biggest challenge during 2021 has been the lockdown and looting. This has really hampered the work on a huge scale. Schools have been closed; staff have not been able to come to the office and had to go directly to the satellite offices, resulting in much higher taxi fees, no school talks or public awareness talks. There has been a huge increase in domestic violence with children, murder and also an increase in rapes. Families have been locked up together for long periods of times and a huge part of the country lost their employment, causing aggression in fathers who could no longer support their families, and the children suffered.

Staff has also been put under a lot of strain having to work from their homes and not being able to travel after curfew unless a police escort could be arranged, which in itself is a huge challenge.

The main priority is to try and secure extra funding due to the funding that we lost during 2020 with so many companies closing their doors. Secondly is to get our Saturday Support group properly functional again, depending on lockdown. The children in our community have really suffered badly because they have not been able to meet with the team weekly.



**People Reached with  
Local Program**



# LOCAL PARTNERS PROGRAMS.

## SOUTH AFRICA, BOBBI BEAR CASE STUDY

*I am a Take n Pay Supermarket baby, but you cannot buy me....My mommy lost everything during this Covid lockdown even her job and can no longer care for me. She felt it safer to leave me at Take n Pay Supermarket with a note explaining her desperation, also knowing that I would be safe and someone would find me.*

*These are the type of heart breaking cases that we at Bobbi Bear get called out for, even worse now during this lockdown period. What is even more heart wrenching is that we have no idea who this little boy is, no name, no birth certificate, we don't have his medical history, nor do we know if he has allergies or what medicine he may be on, just a little boy with the clothes he has on and a note from his mommy, we think he may be about 2 years old. And then the same night a 7yr old little girl is also found and dropped off with a similar story. And this is one of the reasons we are always begging for help, food, nappies, clothes and shoes, because if we get these type of cases in we are not always lucky to have spares of anything and we have to literally make a plan to go and buy. Thank you to all our CSO's for always be ready to go more than the extra mile for the children we rescue, you are all truly our heroes. Another two precious little humans warm and safe tonight and on Monday we will start the process.*



# LOCAL PARTNERS PROGRAMS.

## ESWATINI, SWAPOL

Swapol exist to ensure equitable and participatory access to life saving treatment for people living with HIV/AIDS especially children below the age of 16 years. The KCA grant has been beneficial to the community and SWAPOL have been delivering support groups to the community where people come together to discuss health, HIV/AIDS status, food and nutrition and many other subjects.

The attendance in all three support groups has been fair with still some issues arising from the Covid 19 Pandemic. The support group members have been extremely grateful and motivated by the visit. Topics that were discussed include food and nutrition, farming which entails backyard gardens and communal gardens. Groups have also discussed issues childcare, maintaining COVID 19 regulations as means to reduce the spread of COVID 19. HIV/AIDS and routine viral load testing and the importance of keeping ART refill appointments in the mist of COVID 19.

The team have been further emphasizing use of Personal Protective Equipment's especially face masks (to prevent the spread of COVID-19) and condom to prevent further HIV/AIDS infection. Support group members have highlighted how some of their vegetable crops were destroyed due to heavy rains and storms - the problem of extreme weather affecting crops is getting more apparent and shortage of vegetable supply had an effect on the recommended daily food allowance for the children in the neighborhood care point and heavy rains also caused a mass destruction on our roads and bridges which then brought about challenges in reaching some of our community support groups.

Despite heavy rains/ bad weather, the organization maintained a constant food supply in some NCPs, which had a positive impact on the nutrition status of children. A majority of support group members are now knowledgeable on the prevention and spread of COVID-19. KCA has been very helpful to the community support groups, particularly the children in the neighborhood care points.



**People Reached with Local Program**

## ESWATINI, SWAPOL CASE STUDY

On one of our community visits, the project team also went to visit a child headed household that entirely depends on the local soup kitchen (NCPs) for their daily meals. The purpose of the visit was to monitor the situation since the implementation of KCA project. According to the elder sibling, I quote “the situation at home has greatly improved, before I would engage in sexual relations with men just so that they provide me with money to buy food for my siblings, but with the help of KCA we were able to live normally for a month. Fortunately, I also started working as a domestic worker and the situation at home is far better now”. She further passed her sincerely gratitude to KCA, the one-month food supply was a turning point for her.



# LOCAL PARTNERS PROGRAMS.

## KENYA, HANDS OF HOPE

Hands of Care and Hope (HCH) is a faith-based organization based in Kariobangi North, Nairobi, Kenya. It is run by Franciscan Missionary Sisters for Africa FMSA, a Catholic religious congregation registered in Kenya.

HCH offers services that respond to the great needs of families and children living in extreme poverty situations in the slums of Kariobangi, Huruma and Korogocho, HCH began reaching out to children by initiating informal schools and feeding programs. Over the years the program has grown and currently has two Primary and one Secondary school and several activities to empower people with skills and training in an effort to improve the quality of their lives through provision of basic education and other socio-economic interventions for Youth and parents/guardians.

The Year January 2021 to December 31st, 2021, has been one marked with challenges, but despite COVID 19 Pandemic Hands of Hope were able to achieve most of the program plans. Despite some time of lockdown in the country community training were able to be reinstated and permission was granted from the District Commissioner to continue training youth in Life skills.

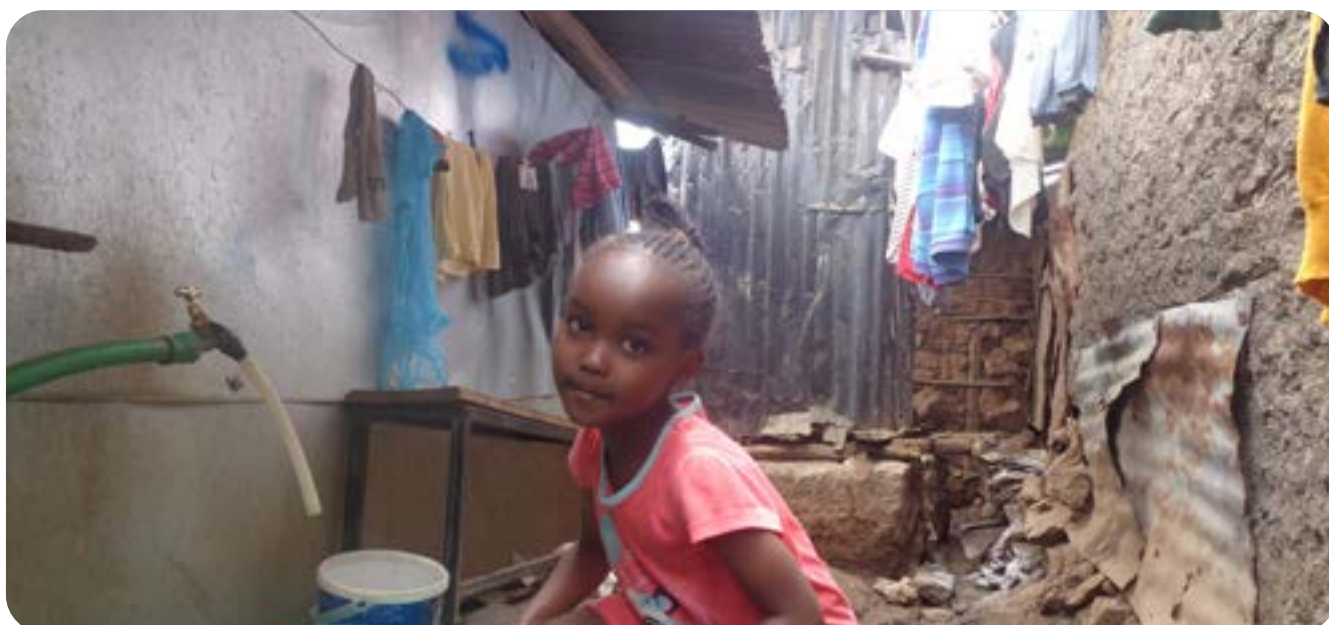
Youth are identified by a skilled group of social workers who are active in the community Many youths when they come are feeling hopeless, a sense of failure in life, others are on drugs or involved in anti-social behavior.

The Life Skills Training helped to equip them to face the challenges in life, to know their strengths and weakness, to manage time, to build relationships, how to handle conflict without resorting to violence. Individuals were helped to break with addictive habits, to set Goals in life, and how to prepare for interviews among many other skills.

Part of the program involves undergoing a Behavior Change Process for a week. This has helped the youth to identify where they need to change if they are to succeed in Life. The process involves helping the participants to discover where they need to change, and what alternative they need to put in place.



**People Reached with  
Local Program**



# LOCAL PARTNERS PROGRAMS.

## KENYA, HANDS OF HOPE CASE STUDY

*My name is Anastasia Odhiambo aged 23 Years. I was born in a family of six by a single parent until the age Of 14 Yrs. When I was taken to live at my grand-parent's Home, under the care of my aunts, due to unavoidable circumstances.*

*I became a beneficiary of the Youth program in 2018. I was guided through the eight weeks training and I have actively put the activities we were trained on and the areas of training in my daily routines which has showing a great impact in my change of Behavior and my character formation. The training groomed me to be a firm and assertive lady with great financial management skills that are now guided under a strong spirituality after the Behavior Change Process that I went through. After the 8-week program I attended a course on Early Childhood Development Education after advice from our facilitators. My education process is better each passing day. The program has been a great stepping stone to my career choice impacting my life and improving my social skills and abilities.*

*I am no longer shy to speak about my life story because with it comes my transition from what I was, which is a young girl with no clear picture of the future to whom I am, a teacher and a recourse to my community. I appreciate Hands of Care & Hope for this chance and most of all I thank the Almighty God for this opportunity in my life.*



# LOCAL PARTNERS PROGRAMS.

## INDIA, SAAHASEE

Over the last year, the project has improved the general health of the clients and students. Made the access to hospitals for Saahasee clients much smoother and better thus, reducing the time taken for them for check-up and medication.

Saahasee has made significant efforts in making the services offered lean and more effective, so have reduced unnecessary discussions on HIV, TB, COVID, that negatively impact the client families and instead enhanced focus on better a varied earning through increasing knowledge and skills. Covid is still having an impact on operations - and whilst there are less employment opportunities to offer in the local job market, there has been a large boost in home-based business startups which cater for the local community and are doing well.

Saahasee has also been distributing food and resources which has helped many families survive the tide of lockdowns. The project has instilled hope in the hearts and minds of the client families through enhanced income possibilities, creating a light of hope within their lives. Despite the ongoing restrictions, Saahasee has been able to enhance the income and capacities of the beneficiary families by increasing their core skills, improve their employability through building soft skills making them more skilled and marketable.



**People Reached with  
Local Program**

## INDIA, SAAHASEE CASE STUDY

I am 31 years old. My name is Ruksana. I am in the Saahasee training centre. It is thanks to the encouragement of my neighbors that I could attend the training. My friend, - she told me that Saahasee offers a wide variety of skill training activities including Fashion Designers Course, so I enrolled in Saahasee Skill Garment Tailoring Classes. We are three members in my nuclear family living in the slum here; my husband, my son and myself. My husband who is a vegetable vendor works from his shop. This is a small rented make shift shop that is 6ft by 4ft. We live nearby, in a rented house.

We struggle a lot to survive because we don't earn much. Our daily income is meagre, never meeting our daily expenses. Before my marriage, I finished 7th grade, and I had a dream to pursue higher studies but unfortunately, I lost both my parents to their sickness when I was young and from thereon had to live with my relatives. As a result of hopelessness, I was married before I became 18 and could never complete my studies.

I always wanted to support my husband financially. That is why I have enrolled and taken the Saahasee Fashion Designing Course. With the help and guidance from

Saahasee, I have finished my 6-month course and now started my own little business from home. Since I successfully completed my course, I have submitted a written request to the Saahasee Managers to help me set up a shop and achieve my ambition of

becoming a fashion designer in my locality. They have seen my dedication and my skill and are linking me to a government scheme that will help me to access a bank loan for starting my local business. My deep thanks to Saahasee!



# LOCAL PARTNERS PROGRAMS.

## INDIA, PRAYAS

Prayas (Initiatives in Health, Energy, Learning and Parenthood) is a public charitable trust, which was registered in 1994. Members of Prayas are professionals working to protect and promote public interest in general and the interests of disadvantaged sections of society in particular. Prayas Health Group (PHG) works mainly in the area of sexuality and HIV/ AIDS.

Following on from the arrival of the pandemic and the subsequent lockdowns Prayas have taken steps forward in digitalizing programs to much success.

E-workshops have been conducted to engage with youth through the restrictive measures placed on the communities of young people which have helped encourage people to still use the services.

Prayers have been developing digital aids, like video and interactive games and have been working on engaging content and concepts that will work for people. They have also been providing online psychosocial support to adolescents and youths and linking them to relevant services, which is crucial.

There are now almost three hundred youths linked to a virtual community via WhatsApp and other platforms to enable monthly meetings to be carried out and where topics discussed are suggested by the youth or by the expert facilitators. Staying connected to people is a lifeline for people - this year Prayas have been able to maintain links with service users and offer flexibility in support despite the changing times.



**People Reached with Local Program**



# LOCAL PARTNERS PROGRAMS.

## INDIA, PRAYAS CASE STUDY

Ashfaq, a 23-year young man, has had many questions in his mind, since he learned about his HIV infection. He was very concerned about his HIV status disclosure, about his future and relationships. T

he counsellor from the ART clinic counselled him in each session but it did not help. The things were going beyond his control and so he was being unable to handle the stressors around the issues, this was reflecting on his mental health too. Counsellor suggested Ashfaq to participate in the Prayas workshop for YLHIV. Initially he was reluctant, because of fear of HIV status disclosure to the other participants. After being constantly followed up, he agreed to participate but, on some conditions, that he would not disclose his identity and would never switch on the camera.

Ashfaq shared his concerns with the workshop coordinator too. She assured him about the confidentiality. The coordinator was regularly interacting with him. Ashfaq participated in the pre-workshop meeting, also interacted a bit with other members, which might have helped him to reduce the stress to some extent. On day one only, Asfaq felt so reassured that he turned on the camera and introduced himself. Throughout the workshop he was very interactive, asked many questions, and shared his concerns. We observed that gradually his fear about disclosure disappeared and then through the workshop he kept his camera on. At the end of the workshop, he was so comfortable that he even proudly disclosed about his gender identity that he belonged to the LGBTQ community. On the last day of the workshop, Ashfaq shared his feelings about how workshop processes gave him the self-confidence. He realized that he could live life with dignity, and fearlessly, which he now understood as his right.





# LOCAL PARTNERS PROGRAMS.

## RWANDA, WE-ACTx FOR HOPE

WE-ACTx for HOPE's aim is to empower vulnerable communities to live healthier and productive lives. They help people living with and affected by HIV acquire the skills and capacity they need to fight disease and poverty and live happier and more productive lives.

WE-ACTx for Hope's innovative and notably successful comprehensive care and support model for addressing ARV adherence with consequent viral load suppression contributed to improved quality of life of youth followed in the regular clinic provided at WE-ACTx for Hope. As teens and young adults used to struggle with treatment adherence, We Actx for hope has responded by providing friendly services, non-judgmental, peer-based support for patients in these age groups with successful results.

Despite the disruption to our services last year, WE ACTx for Hope has been able to continue group therapy for adolescents in the age range of 15-24 years old. In this group therapy, the focus is on building life skills and the future for adolescents in HIV program which has shown results in the mental wellbeing and motivation of the clients.

WE Actx for Hope has also started the integration of non-communicable diseases (NCDs) in services offered to patients. Another addition to the services offered has been the screening of diabetes and Hypertension.



**People Reached with  
Local Program**

## RWANDA, WE-ACTx FOR HOPE

NI is a young girl aged of 17 years old, she is an orphan of both parents and she lives with her sister, she lost her parents when she was too young. Their deaths were related to HIV. NI tested positive in 2012 and started ARTs on April 11, 2015, now she is stable and have a very good adherence as shown on her clinical report, her Viral Load is undetectable. We found another sponsor to support her school education.

WE-ACTx FOR HOPE helped her by providing antiretroviral treatment, nutrition support, psychosocial and School materials as well. Her hobby is listening to music and she has a dream to be a journalist and IT Engineer.



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# LOCAL PARTNERS PROGRAMS.

## SOUTH AFRICA, ZOE LIFE CASE STUDY

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The partnership enables training through their funder, Department of Social Development (DSD), and Zoe Life has recruited, trained and are still mentoring their youth.

Lukhona is one of the youth interns from JM youth centre. Lukhona, identifies with the community of LGBTQI, and has received abuse and discrimination from family and is generally badly bullied by society for this reason. Even though he has been faced with many challenges in his life; he is gentle, determined and conscientious. During the training part of his internship at Blue Roof, he was encouraged and found freedom in the sessions on GBV to speak out about the bad treatment he received from his community. Being part of the Blue Roof internship has been life changing for Lukhona. He has learnt to speak out and accept himself as he is. His openness has assisted the other youth interns to understand this marginalized community, and the many struggles they face in society. Due to his earlier tertiary studies, Lukhona has also helped the interns that were unable to access the National Student Fund Association Society (NSFAS) to further their studies in different Universities, and this has further assisted Lukhona to gain confidence.



# LOCAL PARTNERS PROGRAMS.

## INDIA, SAHARA AALHAD

Pune was the worst-affected city in India, with over 1 million cases by June 2021. Its impact was reflected by the overburdened medical field, and the education system with many exams being cancelled due to schools taking to online classes. The children suffered by not meeting their friends and school peers and by not being allowed to play outside. Transportation was still an issue and many of the beneficiaries of Sahara were greatly affected as their connection to the city was being held up. Many people lost their jobs and after the first wave, the government rarely made any arrangements to help them.

This made Sahara dive deep in to help these clients along with their family members to help them recover from having no income, to get the much-needed medical assistance and continued education for their children. We were able to extend our services to newer areas where we conducted workshops and health camps. Many of the attendees came for COVID/HIV/TB testing and admission to the Sahara Aalhad care home.



**People Reached with  
Local Program**

This year Sahara were also able to advocate for preventive and prophylactic interventions for Opportunistic Infections for ADH (Advanced HIV Disease) as per WHO guidelines which were not available in the public healthcare system. They continued telemedical consultation and proxy pickups for clients who were not able to access medical facilities physically. And Sahara also continued with high-quality services like physiotherapy, psychiatric evaluation, and nutritional assistance. And they were able to continue to deliver enhanced quality services to all the orphaned A/CLHIV living with at Sahara homes through various activities, education support and life skills sessions.

# LOCAL PARTNERS PROGRAMS.

## INDIA, SAHARA AALHAD CASE STUDY

Sangeeta Badhe 34 / F widow lives in Bharat Nagar, Pimpri, and has 3 children. Sangeeta was an orphan, so she married at the age of 13 years. After 4 years her husband left her, she had no income so she started rag picking and would do informal sex work at night. Her elder son Dhananjay also started doing rag picking, pickpocketing, etc. Due to an unsafe environment, Sangeeta got her daughter married at the age of 14 years because Sangeeta knew what she had been through and didn't want the same for her daughter. The area she lives in is known for frequent rape and violence against women.

Sangeeta's husband would beat her up mercilessly under the influence of drugs and alcohol. His name was Pappu Badhe. Pappu was a pick pocketeer. When Sangeeta was pregnant for her youngest son Prathmesh, who is now 2 years old, Pappu Badhe was murdered by a girl's boyfriend that Pappu was pursuing.

After Pappu's murder, Sangeeta was in shock and her mental health was in bad condition. Her son Prathmesh was born on 23-03-2019 and due to her mental state of mind he was not vaccinated for TB, Polio drops, Hep-B, etc. Prathmesh was born with a lot of complications like his head is continuously nodding, weakness in his bones, abnormal behavior, deaf and mute, etc. To earn money, Sangeeta would leave baby Pritesh alone in a tin shed at night to go rag picking, formal sex work, etc.

During outreach activities, Sahara's DIC team met Sangeeta and her son, Prathmesh, they saw Prathmesh abnormal behavior. The DIC team sent them to the OPC clinic to see Dr. Pratima at the DIC in Pimpri. Dr. Pratima checked Prathmesh and advised a CT scan, MRI Brain, etc. be done for further treatment. Sangeeta could not afford it, so she has requested Sahara to help. After Sangeeta's request, the team brought Sangeeta and Prathmesh to Sahara Aalhad care home, Wagholi on the 19th of February 2021, and admitted them after their COVID-19 test and TB tests returned negative.

Prathmesh with the mother was taken to Sassoon Hospital, Budhrani hospital and KEM hospital for his whole-body CT scan, MRI Brain with Contrast, Pediatrician, Eye specialist, ENT specialist, Psychiatrist, Vaccination, etc. by Sahara, and also did follow up for Prathmesh Vaccination up until 3 months. Every test that was needed to be done and his follow up in the hospital were taken care of by Sahara. Today Prathmesh is much better and stronger.

On the 20th of May 2021, Sangeeta and Prathmesh were discharged and dropped home by the DIC team, before leaving Sangeeta was given raw rations for 1 month and all the medicines that Prathmesh needed, in addition, Sangeeta was also told to collect rations and medicines from Sahara regularly. The Sahara team did a home visit and saw that mother and son were doing fine and had shifted to a better place than before. Sangeeta is working as a maid, and she is taking good care of herself and Prathmesh. Sangeeta is grateful for all the help that she has received from Sahara, even for the love, care, concern, crisis nutrition and medicines which she continues to get.

On one of our latest outreach visits, we met Sangeeta and asked her how she was coping, and she said that she lost her job and started doing the same old work as before, rag picking and informal sex work. One day she went for garbage picking and Prathmesh was with her, the police caught her and arrested her with Prathmesh. They sentenced her to one month with Prathmesh in Yerwada Jail.

When she was released, she called Sahara Aalhad because Prathmesh needed to see the doctor as he was not well. We told her to bring Prathmesh to the Sahara care home. When they arrived, we showed Prathmesh to a Physiotherapist, Dr. Akshay Oswal, and he referred Prathmesh to a child Physiotherapist and child Psychiatrist Sangeeta has since been offered to be trained for a job t Sahara, so that she can send Prathmesh for physiotherapy and psychiatric evaluation.



# LOCAL PARTNERS PROGRAMS.

## SPAIN, ASDEFOR

This year we adopted a new partnership with Spanish organization, Asdefor who we worked with on a project called Refugees and Soccer for help

Asdefor are an Association created 15 years ago who are using soccer as a powerful tool to help children of all backgrounds overcome challenges and difficult situations.

This project is focused on working with child refugees and helping them integrate into a new society and life through football. This way they learn skills in a welcoming environment that they enjoy and recognize, whilst working on life skills - confidence, language and socialization to help them overcome their ordeals.

In this partnership we have reached 96 children who were able to compete in tournaments at the same time as making new friends and starting a new life.



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# LOCAL PARTNERS NUMBERS.

## YEAR 2021

	2021 Grant	2021 Direct Beneficiaries
AMS, Uganda	\$20,000	78,512
We Act for Hope, Rwanda	\$85,000	6,903
Bobbi Bear, South Africa	\$60,000	12,557
Ikageng, South Africa	\$15,371	-
Zoe-Life, South Africa	\$39,000	1,989
Sahara, India	\$90,768	8,039
Prayas, India	\$40,070	1,254
Saahasee, India	\$22,451	855
Hands of Care and Hope, Kenya	\$10,000	3,910
SWAPOL, Eswatini	\$10,000	472
Asfedor	\$38,413	96
<b>Total</b>	<b>\$431,073</b>	<b>114,587</b>

# TEAM KCA.

## WE FIGHT RUNNING

Team KCA is a group of dedicated people who run for our cause in events all over the world.

After the cancellation of all events and races in 2020 we were hoping to come back strong in 2021 - and we did! We had 35 fantastic runners who took part in the LA, London and NYC marathons for us, raising over \$180,000 for our programs.

**We are hugely excited to continue to build on this going into 2022.**



# 2021 FINANCIALS.

	Actual	Budget	over Budget
Income			
Total 4100 Individual Giving	\$287,834	\$740,500	\$(452,666)
Total 4200 Merchandise Sales	\$229	\$15,000	\$(14,771)
Total 4300 Other / Misc Income	\$1,229	\$4,000	\$(2,771)
Total 4570 Other Events	\$-	\$2,080,000	\$(2,080,000)
Total 4700 Corporate Giving	\$5,048,782	\$294,833	\$4,753,949
Total 4750 Foundation Giving	\$5,800	\$-	\$5,800
<b>Total Income</b>	<b>\$5,343,874</b>	<b>\$3,134,333</b>	<b>\$2,209,540</b>
<b>Gross Profit</b>	<b>\$5,343,874</b>	<b>\$3,134,333</b>	<b>\$2,209,540</b>
Expenses			
Total 5100 Grants	\$453,612	\$1,786,000	\$(1,332,388)
Total 5200 Special Events	\$64,253	\$-	\$64,253
Total 5300 Merchandise Cost	\$16,112	\$-	\$16,112
Total 5400 Insurance (not Health)	\$3,319	\$3,549	\$(230)
Total 5500 Marketing & Promotion	\$2,160	\$20,000	\$(17,840)
Total 5800 Payroll Taxes/Ins	\$(3,342)	\$4,016	\$(7,358)
Total 5900 Occupancy	\$2,367	\$2,232	\$135
Total 6000 Professional Fees	\$227,393	\$174,000	\$53,393
Total 6050 Accounting Fees	\$27,446	\$30,000	\$(2,554)
Total 6100 Information Technology	\$23,019	\$20,057	\$2,962
Total 6200 Outside Services	\$14,651	\$15,150	\$(499)
6250 Postage and Delivery	210	1,500	(1,290)
Total 6300 Printing	\$575	\$1,000	\$(425)
Total 6400 Travel	\$84	\$20,000	\$(19,916)
Total 6600 Other Expenses	\$13,901	\$84,200	\$(70,299)
PayPal Fees	5		5
Total Salaries	\$37,345	\$142,500	\$(105,155)
<b>Total Expenses</b>	<b>\$883,108</b>	<b>\$2,304,204</b>	<b>\$(1,421,097)</b>
<b>Net Operating Income</b>	<b>\$4,460,766</b>	<b>\$830,129</b>	<b>\$3,630,637</b>
<b>Total Other Income</b>	<b>\$40,582</b>	<b>\$-</b>	<b>\$40,582</b>
<b>Net Other Income</b>	<b>\$40,582</b>	<b>\$-</b>	<b>\$40,582</b>
<b>Net Income</b>	<b>\$4,501,348</b>	<b>\$830,129</b>	<b>\$3,671,219</b>