

Trustees Annual Report 2023 - 2024

Africare
17 Brackenridge
Carrickfergus
BT38 8FW

Charity Registration No NIC 101141 Trustees: Brian Dorman MBE, Bed (Hons)
Phil Dorman B Tech Mech Eng (Hons)

Africare is constituted as a charitable trust, governed by a deed of trust dated 16th May 1986 and an addendum dated 3rd July 2015.

The purpose of the charity, as stated in the deed of trust, is the relief of poverty and the advancement of Evangelical Christian religion.

Main activities: To bring a practical expression of Christ's love through the location, assessment, treatment and rehabilitation of disabled children. Advocacy on behalf of the disabled through community work, publications, and partnerships with the Ugandan government and other NGOs.

Compliance: The trustees of Africare ensure compliance with the Public Benefit statutory guidelines through Acheru (Afaayo Child Health Education and Rehabilitation Unit) and assistance to Ugandan partners. Africare established and developed Acheru, building at Kabembe in Mukono District, but the reach of the work has grown through partnerships. A large number of disabled children were treated during the year, with a slight reduction in surgical patients but a significant increase in outpatient and community work. The most common inpatient admissions are for osteomyelitis, cleft palate, and burns. The most common outpatient attendances are for club feet and cerebral palsy.

Acheru is a registered Ugandan NGO, accountable to Africare and to the Ugandan Ministry of Health. A new, legally ratified, memorandum of understanding was drawn up with the Acheru board, ensuring proper accountability to Africare in respect of all property and assets.

Africare continues to be run on a voluntary basis. All donations, unless specifically designated otherwise, go to the running costs of Acheru.

Acheru provides Africare with monthly reports and accounts, with a full annual audit.

Costs in Uganda have risen significantly but the effectiveness of the work has been maintained through a number of partnerships, enabling larger numbers of children to be reached without significantly increasing the running costs. Our relationship with Salama (a government school for blind children) has been fruitful, with Acheru staff now regularly participating in organized activities there, and with plans to develop (jointly with Acheru) skills training, with a particular emphasis on how this can be followed up after the children leave school.

In Northern Uganda our satellite unit at Minakulu was handed over to local control, and discussions continue with local government about setting up a new unit at Napak in Karamoja, identified as an area of need after outreaches there. Local representatives informed us that nothing like our work has ever been carried out there.

Conclusions: The Acheru staff are maintaining high standards and are reaching increasing numbers of children. The level of funding, against a difficult background, remains encouraging and we plan to fund the new work at Napak. Our focus is on using donors' money to meet the needs of as many disabled children as possible, and to reduce the suffering caused by neglected conditions.

Reports received from visiting medical professionals confirm that the work there satisfies our aims and objectives, and we can give our unreserved support to the staff in Uganda.

Brian Dorman 15th April 2024

