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## **ANNUAL REPORT JANUARY – DECEMBER 2020**



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## **A WORD FROM EXECUTIVE SECRETARY 2020.**

This end year report (annual report) is the description of interventions, activities and the goals reached within the period of January – December 2020. From January 2020 CBIDO continued working within 20 program villages in five zones that are Nkwenda, Rugu, Rwambaizi, Bushangaro and Bugene in Karagwe and Kyerwa Districts focusing in four strategic areas in supporting children and youngsters with disabilities that are;

- Comprehensive Health and Rehabilitation
- Inclusive Education support
- Social Economic empowerment ( Social inclusion, Livelihood and Empowerment).
- Institutional Development ( Governance tools & infrastructural development).

With this report I would like to thank the Almighty God for being with us in both challenges and successes. As this year will always remain in memories of all people around the world, the same it will remain to CBIDO. Since the outbreak of the catastrophic challenge of Covid-19 pandemic disease, CBIDO has been thinking of the strategies of protecting/supporting it's beneficiaries for the contact of the disease as well as from other disasters since they came with impacts both socially and economically.

All of these would have not been possible if not because of the good collaboration we have received from Board of Directors, management team and staff, local and Central government, internal and external stakeholders, development partners without forgetting to mention Children and Youngsters with Disabilities and their parents and caregivers in general.

On behalf of CBIDO beneficiaries I would like to extend my gratitudes and heartfelt thanks to all CBIDO donors whatever little or big you gave it ment alot in transforming lives of children and youngsters with disabilities, even though they have been passing through difficult times fighting against Covid -19 but they have never stopped their support, if it was not for their generous giving every achievements CBIDO has reached could be impossible may the Almighty God keep on fighting for them and protecting them.

Special gratitude to Mr. Stijn Skneppers for all the moral support through the patronage role to CBIDO, through him we have learnt a lot for the development of the organization, may the Almighty God keep blessing and protecting him.

Generally it is difficult to mention one person to another but the mangement acknowldges every individual cooperation and collaboration, much appreciation goes to our caring, loving, tolerant and supportive families of Children and Youngsters with Disabilities, may the Almighty God be with them always.

We finally wish you all Merry Christmas and Happy New Year 2021.  
I thank you all!

## 1.0 ABOUT CBIDO

**Vision Statement:** An inclusive society where Persons with Disabilities attain full potential and live in dignity.

**Mission Statement:** To enhance the resilience and quality of life of children and youngsters with disabilities.

### **Core Values:**

1. **Integrity:** We hold ourselves to the highest standards of honesty, ethical, transparency, accountability and moral uprightness.
2. **Innovation:** We are committed to learning as a basis for continuous improvement of self and others.
3. **Teamwork:** We leverage others' competencies to attain greater efficiency and scale impact.
4. **Solidarity:** We stand with and passionately support PWDs to attain their full potential and dignity.
5. **Inclusion:** Driven by compassion and love for humanity; we champion equitable access to rights, resources and opportunities for PWDs, their families and society at large.

The Community Based Inclusive Development Organization (CBIDO) is a not-for-profit Non-Governmental Organization (NGO) based in Karagwe District of Kagera Region, Tanzania. CBIDO was registered in 2019 with a legal mandate to operate nationally.

CBIDO pursues participatory programme approaches that entail working closely with PWDs, their families and complementary multi-level stakeholders, both State and Non-State-Actors (NSAs). At community level, CBIDO works with Village Rehabilitation Workers (VRWs), who make weekly home visits to support CYWDs. These are besides regular mobile village health clinics, often attended by doctors from local hospitals. Further, CBIDO has full access to KCBRP central rehabilitation center where CYWD receive intensive physiotherapy. The rehabilitation center is also used to train parents/caregivers of the CYWDs and volunteers.

CBIDO's main concern is enhancing the quality of life, dignity and inclusion of Persons with Disabilities particularly Children and Youngsters with Disabilities under the age of 25. CBIDO works in twenty programme villages within Karagwe and Kyerwa districts and its main areas of focus are with respect to Community Based Rehabilitation (CBR) domains that are; **Health, Inclusive Education, Livelihood, Social inclusion and Empowerment** in which CYWDs access social services. The interventions under CBIDO serves/supports CYWDs through CBR approach/strategy principled by **'Low cost high impacts'**.

The major conditions of CYWDs that CBIDO works with are such as Cerebral palsy(CP), Malnutrition, Epilepsy, Down syndrome, intellectual impairment, sickle cell, Deaf, Autism, Albinism, burns contractures, osteomyelitis, Bowlegs, Knocking Knees, Clubfeet, Hydrocephalus and Microcephalus, Cleft lip and palate, Eye problems, Dwarfism, Elephantiasis, Muscular Dystrophy, Spinal Bifida, Hernia, Amputations, other deformities.

Within the year 2020, CBIDO planned to reach 1,244 CYwDs within its programme villages, but due to Covid-19 pandemic disease outbreak, CBIDO managed to reach one thousand, one hundred and eighty seven (1,187) CYwDs. Each child received different kind of interventions depending on the individual rehabilitation plans set per child. 24 children graduated/exited from the programme due to various reasons including death, relocating, poor cooperation from the family and community, above age of 25 and plans succeeded/completed, hence remaining with 1,163 CYWDs within the programme. For the year 2021 CBIDO anticipate to reach 1,150 beneficiaries within its programme in all interventions.

## **1.0 IMPLEMENTED ACTIVITIES THROUGHOUT THE REPORTING PERIOD**

### **2.1. COMPREHENSIVE HEALTH AND REHABILITATION.**

In 2020, CBIDO focused on awareness to the communities related to disabilities for prevention strategies while supporting for promotion of persons with disabilities through assistive devices, Rehabilitation (therapies, treatment and operations) and Habilitation to improve their disability conditions and hence participation and inclusion.

#### **2.1.1. Home Visits**

During field work, a total number of 3189 home visits were conducted to 1187 CYwDs by zone facilitators in collaboration with Village Rehabilitation workers (VRW's) within the period of January to December 2020. Due to Covid-19 pandemic disease outbreak, in preventing the spread of the disease, home visits were conducted less on March and May and on April no home visit was conducted.

During the home visiting programmes, field Facilitators and VRW's did the initial assessment of the child, set individual rehabilitation plan for each child, conducted simple therapies and repaired local assistive devices, provided appropriate referrals and follow-ups on previous made plans made. Home visits were also conducted by a physiotherapist, Occupational therapist, Nutritionist and a psychosocial counsellor for the children that needed specialized rehabilitation services at home.



*Facilitator already for home visit*



*A child with CP being trained by Facilitator on self-feeding*



### 2.1.2. Outreach Clinics

Twenty (20) outreach clinics were conducted within the period of twelve months (January – December 2020) within CBIDO programme villages, the outreach clinics were conducted twice in a month but on April, May and June it was not conducted due to Covid-19 pandemic disease outbreak. During the outreach clinics community members both with and without disabilities were gathered at one point in a village to meet with zone facilitators, Village Rehabilitation Workers (VRWs), specialists depending on the programme village need such as Optician, Psychosocial counsellor, Physiotherapist, Occupational therapist and Nutritionist mainly for identification of people with disabilities, awareness creation on various issues related to disabilities and prevention strategies, optical services (spectacles and eye medications), referral provision to clients to attend both at CBIDO and KCBRP rehabilitation Centre, and other health facilities, prescription of assistive devices, as well as to reach children with disabilities that were not able to reach come to the center for therapies due to various reasons and making follow-ups to those attended in previous months.

During the outreach clinics the total number of 1246 People with disabilities. Those with physical disabilities were provided with simple therapies and provided with referrals to appropriate places, and with eye problems were provided with medications and spectacles with contribution of 40% of the costs as well as the optician taught them on optical issues and how to protect their eyes especially on hygienic matters



*Facilitator talking to the members of the community who attended one of the outreach clinics*

### 2.1.3. Support for referrals and treatment/operations

Within the period of twelve months (January – December 2020), a total number of 92 CYwDs with different complicated cases received operation/treatment support whereby they were referred to different specialized hospitals for expertise treatments, the hospitals they were referred to are

St. Joseph hospital Kagondo, Bugando Medical Centre, CCBRT, Bukoba Government hospital and Nyakahanga Designated District Hospital . These CYwDs were supported with transport costs, lab tests, diagnostic imaging like X-rays and CT-scan, operation/treatment costs and hospital upkeeps. Beneficiaries contributed 40% of the treatment costs as their cost sharing though most of them failed because of the higher treatment/operation costs.

All the operations were successful with exceptional of 2 that died on the process of operation, 23 Children and Youngsters with Disabilities (CYwDs) had repeated operations and 11 has healed hence exited from the programme, others are still continuing with hospital follow-ups and therapies.



*A 16 years old boy with chronic osteomyelitis on his right leg before and after operation, currently still admitted in hospital*



*A child with Hydrocephalus before and after treatment (shunt placement)*



#### 2.1.4. Physiotherapy at the center and home visits

Within the period of January – December a total number of two hundred and twenty eight (228) of Children and Youngsters with Disabilities were referred by CBIDO's zone facilitators and Village Rehabilitation Workers to CBIDO physiotherapist for expertise assessment, diagnosis and physical therapies, as well as the clients were also provided with right referrals depending with their disability conditions like referral to hospitals for those needed the medical care/treatments. Physiotherapist guided and instructed parents on simple therapies as well as on appropriate use of assistive devices while at home for the better prognosis of the children. The physiotherapy sessions were conducted at CBIDO center and during home visits.



*A physiotherapist conducting therapies*

#### 2.1.5. Occupational therapy

A total number of two hundred and twenty four (224) children and youngsters with disabilities especially those encountered with difficulties of daily living (ADLs) such as grooming, feeding, toileting, playing, dressing, schooling, household activities, and social issues due to physical impairment, sensory processing difficulties and cognitive difficulties like inattention or hyperactivities which limits them in other physical development and performance in different activities of daily living. These children were provided with occupational therapy assessment and interventions whereby they were trained on different occupational therapy techniques for functional independence and adaptation of the environment which was also accompanied with

prescription and provision of appropriate functional assistive devices to enable CYwDs to participate in daily life activities. Occupational therapy sessions both individual and group was provided at the Centre as well as during home visits.



*An occupational therapist conducting therapies to children with CP together with her parent*



*An occupational therapist conducting assessment and observing abilities to two boys with Down syndrome*

#### **2.1.6. Nutritional therapy**

Referrals of children with disabilities who are also having malnutrition were done by zone facilitators and Village Rehabilitation Workers (VRWs) to CBIDO nutritionist. A total number of two hundred and thirty nine (239) were attended within the period of January – December. The nutrition sessions were done both individual and group sessions, whereby parents were taught both theoretically and practically on balanced diet, how to prepare and feed their children. For those children with feeding difficulties, nutritionist worked with an occupational therapist and physiotherapist on practically training the parents on good feeding techniques so as the child could not get complications due to poor feeding such as aspiration pneumonia, malnutrition and others. Furthermore much effort was put on parents on insisting them on making their own vegetable gardens and cattle rearing for economy benefits as well as nutritional inputs. For those children with severe malnutrition are referred/linked with health centers for further expertise managements, moreover CBIDO nutritionist worked closely together with District Nutrition Officer mainly for sharing experiences and for follow-ups.



(a)

*(a) Nutritionist showing the parents on how to prepare nutritious porridge flour*



(b)

*(b) Parents feeding their children after training*

#### 2.1.7. Psychosocial counseling

Many of parents/caregivers of CYwDs especially those with severe conditions faces a lot of challenges such as denial, stress, financial crisis, shame, mental illness, separation and some even reaches into suicidal because most of them fail accept their children conditions due to false beliefs and poor prognosis of the conditions. Therefore with this challenges CBIDO using its psychosocial counsellor provided psychosocial support to these parents whereby they were empowered to accept the challenges they are facing, to use the resources they have to solve their own problems, also provide them with information of changing perception towards CYwDs, psych educating on self-awareness, parenting care and acceptance. Within the period of January – December the total number of two hundred and twelve (212) received the psychosocial support which in turn relieved them from the challenges they were facing. The psychosocial counselling was conducted at the center and during home visits which was also either individual counselling, group counselling or family counselling for the complicated cases, they were referred to District Social welfare for further management.



*Psychosocial counsellor conducting a group counselling to parents of CWDs*



### 2.1.8. Assistive devices

Within the period of twelve months (January – December 2020) the total number of one hundred and thirty three (133) different kinds of assistive devices and one hundred and sixty three (163) spectacles were prescribed and provided to Children and youngsters with different types of disabilities. The assistive devices provided were local assistive devices which were prescribed and made by VRWs in collaboration with zone facilitators for those complicated cases they were referred to physiotherapist and occupational therapist to make appropriate prescription and ask carpenter to make as per requirements, other assistive devices were imported such as wheelchairs, walking sticks and crutches. The assistive devices provided to CYwDs has helped them to improve their functional abilities, strengthening their muscles, positioning as well as mobility.



Prone board



Corner chair



Special chair (special desk)



A 12 years old boy with CP writing with his leg on a special made desk



The assistive devices provided were as follows;

corner chair	33
CP chair	13
Walking bike	8
Prone board	26
toilet seat	2
AFO splints	1
Bucket seat	1
Wheelchair	18
clutches/walking sticks	7
Parallel bars	12
Standing frame	8
Locally made toys	1
Artificial leg	1
Neck collar	1
Special shoe	1
Spectacles	163

### 2.1.9. Sexual Reproductive Health

Due to reported cases of early pregnancies, transmissions of HIV AIDS and other sexual transmitted diseases and occurrence of disabilities due to Gender Based Violence's, CBIDO psychosocial counsellor managed to provide education to youngsters with and without disabilities in groups about Sexual Reproductive Health. A total number of five hundred and eighty six (586) beneficiaries were provided with Sexual Reproductive Health education at CBIDO vocational training centers, village meetings and Disability People Association (DPA's).



CBIDO psychosocial counsellor creating awareness on Sexual Reproductive Health

### 2.1.10. Training to parents and VRWs

Within the period of January – December 2020 a total of nine (9) trainings to parents and Village Rehabilitation Workers were conducted reaching a total of ninety one (91) Children with disabilities and their parents and twenty (20) village rehabilitation workers. The main purpose of parental trainings is to bring parents together especially those with children with severe disabilities such as cerebral palsy, hydrocephalus, Microcephalus and others to share experiences and learn from each other on how to better support and take good care of their children and acceptance as well as to impart them with skills on how to do simple therapies at home, feeding and nutrition, hygienic issues, acceptance, prevention of disabilities and income generating activities.

The respective zone facilitators in collaboration with the Physiotherapist, Occupational therapist, Nutritionist and Psychosocial counsellor were responsible in handling the whole week session for 5 days, VRWs joined the session to practically learn so as they are able to make follow ups, but also they can use the gained skills/knowledge to help as many other children from their respective villages.



*Parents of children with disabilities practicing doing simple therapies to their children during the practical training*

### 2.1.11. Intensive therapies

Nine (9) intensive therapies were conducted within the period of twelve months where by one hundred and forty three (143) children with disabilities were provided with intensive therapies with a multi-disiplinary team of a physiotherapist, occupational therapist, nutritionist and a psychosocial counsellor for five days. Intensive therapies were done to children with potentials of improving including the ones that are post- operations from referral hospitals after discharge. Intensive therapy was done for the main purpose of helping children to improve, training parents/caregivers simple therapies, nutrition and parenting care. In April, May and June no intensive therapy was conducted due to Covid-19 pandemic disease outbreak.



*In group photo were parents and CWDs gathered together for intensive therapy*

### 2.1.12. Intensive CBR training to VRWs

Within the period of January – December 2020, two days intensive CBR training to Village Rehabilitation Workers was conducted quarterly on 26<sup>th</sup> and 27<sup>th</sup> March, 26<sup>th</sup> June, 24<sup>th</sup> and 25<sup>th</sup> September and on 7<sup>th</sup> and 8<sup>th</sup> December, aiming on updating them on CBR matters, good practice and raising awareness on complicated topics that will facilitate them to effectively continuing supporting communities in rehabilitation services. The following topics were covered.

- Eye problems and management
- Down Syndrome and Autism, these were two conditions that was confusing the team especially VRWs as the result failure to put clear individual rehabilitation plan.
- General discussion about progress of DPAs, their contributions towards lives of persons with disabilities.
- CHF; why is it important to CWDs and their families and how the cards will be used
- Measuring and making local assistive devices,



- Simple occupational therapies at home to children with difficulties with activities of daily living
- How disability and nutrition link to each other and techniques to combat malnutrition.
- Techniques to offer psychosocial support at home (during field works).
- Furthermore VRWs were also more informed about Covid-19 outbreak, spread and how to prevent one another from contacting it especially our beneficiaries.
- Reflection of what have been done in 2020 and tips for the upcoming pilot project of DPRS (Disability Prevention Rehabilitation Services).
- As well as set up of the annual activity plan for the year 2021.



VRW's being sensitized about Down syndrome and Autism cases

#### 2.1.13. Register and Support for Health Insurance / Provision of Community Health Fund (CHF)

Within the period of January - December, CBIDO in collaboration with families of CYwDs managed to register and provide Community health fund cards to **130 families of CYwDs**. Each family benefited from this scheme contributed Tshs. 10,000 and Tshs. 20,000 was covered by CBIDO, and in each family 6 people was registered and will benefit from this scheme. The insurance will help the families with guarantee of treatment throughout the year as well as reducing the treatment costs although there are other treatments like operations the CHF card did not cover for them. This insurance card worked in all government health facilities with the region.





*The beneficiaries being supported with Community Health Fund*

#### **2.1.14. One day training to stakeholders**

CBIDO managed to conduct three workshops to stakeholders quarterly for the period of January - December. On 21<sup>st</sup> February 2020 one day training to local village leaders was conducted which in turn has led to positive impact especially on DPA's development and sustainability and inclusion of PWDs from marginalized families in Tanzania Social Action Fund (TASAF) project.

One day training to Head teachers and special unit teachers was conducted on 5<sup>th</sup> September 2020, the training was about inclusive education to children and youngsters with disabilities which was facilitated by special education officer in Karagwe region. From the agreements reached during the workshop, teachers have started developing strategies on formation of disability clubs in their school for the year 2021 in which CBIDO will be involved in capacity building on disability issues as well as Teachers in collaboration with CBIDO by involving the government and different stakeholders to bring changes towards inclusive education for CWDs.

And on 18<sup>th</sup> September, CBIDO had another one day workshop to religious leaders on two main areas i.e. mental health specifically Epilepsy, this was done because some religious leaders use a lot of time holding persons with disabilities praying for them hoping that the person might be witched, and as the result of delaying attending to hospitals for medication some persons with epilepsy ends up having mental retardation, this session was conducted by psychiatrist from District hospital. The second topic was a discussion about the infrastructures around buildings i.e. churches and mosque, during this one day workshop it was agreed religious leaders will be providing referrals health centers and renovation of their buildings to be disability friendly, total

of 32 religious leaders including, evangelists, reverends, priests and Muslims attended the workshop, they have started referring persons with various disabilities to CBIDO.

On 15<sup>th</sup> December 2020, CBIDO conducted one day workshop to health practitioners (clinical officers) in health centers within CBIDO programme villages. The main objective of this workshop was to build partnership with the clinical officers (doctors) so as they could encourage safe deliveries of pregnant mothers so as to prevent occurrence of disabilities as well as early identification and referrals of children with disabilities.



*Psychiatrist was sensitizing the religious leaders about Epilepsy disease*

## **2.2.INCLUSIVE EDUCATION TO CHILDREN WITH DISABILITIES**

Within the period of January – December 2020, CBIDO supported one hundred and eighty one (181) CYwDs with scholastic materials, school contributions and boarding fees and transport from school. These CYwDs are studying at Mugeza inclusive primary school, Mugeza School for Deaf, Kaigara School with special unit, from Muleba, Nyakahanga, Maguge primary school, Ruhinda, Mabira, Ibanda, Shaybush and Dodoma secondary schools, and others are in regular schools within their villages. CBIDO also did school visits to these children in schools to see their progress in studies. Five (5) students that have graduated in standard seven and Two (2) in form six, all of them have passed their national exams waiting to join school next year. In 3<sup>rd</sup> December, CBIDO in collaboration with District special education officer managed to support the enrolment of CYwDs in different schools, 6 were enrolled in Mugeza inclusive primary school, 14 in Kitengule and 5 in Kaigara School with special unit, all of them will join school in January 2021.





*CBIDO staff distributing hand washing materials and scholastic materials to CYwDs in school*

Rukole primary school in Karagwe district which also enrolls students with special needs, the school had no disability friendly classroom for CYwDs instead it used the teachers house as the classroom, therefore on November 2020 CBIDO collaborated with school committee and parents to construct a special class with friendly infrastructures for children with disabilities with the financial support from Barcelo foundation, the classroom will start being used from January 2021.



*A special unit class constructed at Rukole primary school*

### 2.3. LIVELIHOOD PROGRAMMES

For the year 2020, January to October CBIDO offered with vocational skills training to fifty (50) young girls (40 with disabilities and 10 without disabilities) being trained on tailoring, sweater knitting and leather materials production as their co-courses, also girls learned on other skills like gardening, entrepreneurship and marketing skills, knitting bed sheet, socks and piece of clothing for decoration. Vocational skills training was offered in three Centre's that are CBIDO Training Centre in Kayanga, Ihanda Community-based Training Centre and Kafunjo Community-based Training Centre. CBIDO supported them by buying and supply of training materials to all three Centre's to enable young girls to learn and continue well with their studies, as well as covering for school uniforms, transport, school fees and learning materials and parents are contributed for food in terms of kind or cash.

This was the one year program that trainees started on July 2019 and was supposed to graduate in July 2020 but due to Covid -19 pandemic disease outbreak, Vocational skills training programme (Polytechnic) was also been closed as well following the preventive measures of spread of the disease hence the girls graduated in October 2020. Out of 50 students from the three centers only 48 graduated, two dropped from the training due to various family issues and related problems.

After the graduation of young girls, CBIDO and parents ensured the support of the girls to continue with their skills development in their villages especially those from tailoring and sweater knitting class, some of the parents were able to buy the machines for their daughters and some attached their daughters with the experienced local tailors in their villages. For the girls that graduated from the leather material production class, their parents were not able to buy them the machine nor to link them anywhere because the machines are very expensive, hence CBIDO continued them with the machines to enabling them to work together and gain experience for one year while their parents/care givers are struggling to find money for buying leather product machines although they are expensive. Currently all graduated trainees from all three courses have received orders from different individuals and institutions, they have already made school uniforms, sweater knitting and shoe making for pupils/students from different primary and secondary schools.



*Leather material production class making the order of school shoes.*



*A young girl with disability linked with the local tailor in her village*



Also within the period of January – December 2020, CBIDO linked sixteen (16) boys with disabilities in available vocational training institutes and personnel with vocational skills for skills training. CBIDO continued covering 60% of the training fees and the beneficiaries' covers for the remaining 40%, CBIDO together with parents monitored the progress of these boys with disabilities throughout the year.



*A young boy with disability who linked to local personnel with vocational skills for welding skills training.*

The table below shows number of boys linked to the Vocational Training institutes and personnel with vocational skills for skills training and their course

Training course	Number of boys	Training Centre
Carpentry	5	Village
Tailoring & Sweater knitting	1	Village
Welding	1	Karagwe District VTC
Mechanic	4	Village
Tailoring	1	Village
Welding	2	Village
Mason	2	Village

## 2.4. SOCIAL INCLUSION

Community sensitization and awareness about disability was done through Radio programs which were conducted weekly in Fadeco Radio and Karagwe Radio. A total of one hundred and two (102) sessions were conducted within the period of January – December 2020, the programs were live in air and others were recorded where as listeners were able to ask questions and being answered through calling, sending text messages.

CBIDO's VRWs and zone facilitators, have been working to ensure and enable CYWDs to participate in social activities like attending religious events, community meetings, political elections, environmental cleaning and domestic chores, as well as CYWDs engaging with their fellows in activities/ events like in inclusive schools/ collage and in sports and entertainments.

*16<sup>th</sup> June was the African Child day in which CBIDO honored it by bringing together children with disabilities and those without disabilities to raise their voices upon equity and equality and participate in different sports and games such as music and dances, soccer, playing cards etc., this day was commemorated in all schools at district level. Access to a child-friendly Justice System in Africa”*

On 3<sup>rd</sup> December 2020, CBIDO commemorated World Disability Day, whereby the main Theme for World Disability Day 2020 was “**Building Back Better: toward a disability-inclusive, accessible and sustainable post COVID-19 World**”. In this day community was informed about the global crisis of COVID-19 which is deepening pre-existing inequalities, exposing the extent of exclusion and highlighting that work on disability inclusion is imperative. In which People with Disabilities are one of the most excluded groups in our society and are among the hardest hit in this crisis in terms of fatalities.

CBIDO used community radio's and the community gathered to talk about Disability inclusion in a COVID19 response and recovery that better serves everyone, more fully suppressing the virus, as well as building back better.

## 2.5. ECONOMIC EMPOWERMENT

People with disabilities (PWDs) have been empowered through DPA's which are formed for the aim of bringing people with disabilities and parents of children with disabilities together in order to share experience, economic empowerment and joining efforts for lobbying and advocacy activities for people with disabilities.

People with disabilities through DPA's have been mobilized, capacitated and linked them with local government authorities for registration and accessing of funds from the government for self-sustained future. Out of 20 DPA's which CBIDO mobilized in their formation, 17 DPA's are registered and are known by the local government authorities. Within the year 2020 four DPA's have managed to get a soft loans, of which two got a loan of Tshs. 3,000,000/= and the other two obtained the loan of Tshs. 2,500,000/= from the local government. CBIDO in collaboration with District Development Officer CBIDO conducts monitoring to ensure the given funds are used as planned.

## 2.6. INSTITUTIONAL DEVELOPMENT

Within this year CBIDO has been able to purchase one (1) house in Kayanga town. This house has been purchased with the aim of being able to serve as a rental home to increase internal source of income. Currently this house is used for rental.

On April 2020, CBIDO manage to purchase three motorbike for three staffs to make simpler transportation for its staffs to be able to do office jobs and also be able to mobile easily during field works and home visiting to reach CYwDs at right time at their villages. Also CBIDO managed to purchase 2 computer laptops to facilitate functionality for staffs.



Picture of CBIDO rental house at Kayanga



CBIDO staff with their motorbike

❖ **CBIDO programmes donor monitoring visits.**

CBIDO had an opportunity to physically meet with two donors that are KCBRP on 11<sup>st</sup>-12<sup>nd</sup> August, 2020 and FoCT on 19<sup>th</sup>-23<sup>rd</sup> December, 2020 who came to visit CBIDO for the purpose of Monitoring visits which involved physically visiting programmes in villages and in families receiving various support from CBIDO in which donors and CBIDO exchanged experiences and learnings various developmental issues were discussed and will be part of 2021 implementation.

The table below shows the donors/development partners that through their funds and supports made the above reported projects/programmes possible;

S/No.	NAME OF THE DONOR/DEVELOPMENT PARTNERS	COUNTRY
1	LOCAL GOVERNMENT	TANZANIA
2	BARCELO FOUNDATION	SPAIN
3	BENJAMIN STITCHING FOUNDATION	NETHERLANDS
4	KCBRP / LILIAN FOUNDATION	TANZANIA & NETHERLANDS
5	ANGLICAN AID	AUSTRALIA
6	FoCT (Friends of Children of Tanzania)	UK
7	OWCF (One World Children Fund)	US

From January to December 2020, CBIDO managed to do what has said above with the following team who contributed importantly to the milestone and success as explained above.

S/NO	POSITION	TOTAL NUMBER
1.	Village Rehabilitation Workers	20
2.	Support Staff	02
3.	Security guard	01
4.	Life skills programme trainers	04
5.	Community Facilitators	05
6.	Data coordinator	01
7.	Physiotherapist	01
8.	Occupational therapist	01
9.	Psychosocial counsellor	01
10.	Nutritionist	01
11.	Accountant	01
12.	Executive Secretary	01

In 2020 CBIDO works closely/collaborate with different stakeholders to support Persons with Disabilities whose need mult-stakeholder involvement and participation. CBIDO works with good collaboration with the following stakeholders whereby their contribution were very important to support and serve Persons with Disabilities as well as reaching the above successes; these were:-



- Local government leaders
- Donor agencies/ Development partners
- Religious institutions
- Financial institutions
- Health facilities
- Educational institutions
- Disabled People Associations (DPAs)
- Medias
- Individuals with disabilities, their parents and care givers.
- Community and other Non-Governmental Organizations (NGOs)
- Furthermore CBIDO cooperate with different networks such as KCBRP, Tanzania CBR network, Karagwe development network and DPOs.

### 3.0. SUCCESS CASE STORIES

#### 3.1. A STORY OF TUPENDANE GROUP

Tupendane meaning **“LOVE EACH OTHER”** is a Disabled People Association (DPA) in Kamagambo village which is one of CBIDO programme villages. As it is for other DPA's, Tupendane group was formed for the aim of bringing people with disabilities and parents of children with disabilities together in order to share experience, economic empowerment and joining efforts for lobbying and advocacy activities for people with disabilities.

Tupendane group started with thirty (30) members (13 Male and 17Female), currently the group members are sixty (60) people (23 Male 37 Female). In 31<sup>st</sup> May 2019 the association was registered by Karagwe district council with registration number KDC/CD/CBO/1339, therefore it is legally recognized.

*“Our association meets twice a month to share experiences, solving emerging challenges especially those related with people with disabilities as well as to make new strategies for the development and sustenance of our Association. Furthermore our association is working closely with a variety of stakeholders to build relationships and gain opportunities. In October this year we were able to get a soft loan of 3,000,000/= from the district council, from which we started a small project of livestock rearing such as chickens, goats and cows which are given to the group members, as well with the loan members of the association can borrow money to be able to cover their needs in which they pay with 5% interest. All of these are possible because we get entrepreneurship education from the monitoring visits of CBIDO staff and the district development officer.”* ..... Said Tupendane group chair person



*Tupendane DPA goat keeping project*

The members of Tupendane DPA have benefited with the following services from the association;

- They have gained more knowledge about disability issues that is provided by CBIDO during the monitoring visits.
- They also gained knowledge in entrepreneurship skills and running of small projects. This was provided by CBIDO as well as from other projects in Kamagambo village such as Bushangaro ADP and SHAUKU.
- With the soft loans, members of the association are able to cover for their family needs such as food, scholastic materials for their children, treatments and others.

Together with CBIDO, Tupendane DPA is very thankful for the donors that are supporting people with disabilities, may the almighty God bless them abundantly.

### 3.2. A SUCCESS STORIES OF ANSETH

It was one busy day as usual at the office on November 2018, came a woman carrying a child on her back, she seemed very stressed and tired, before we even started talking she started crying, she was a woman with disability (Dwarfism) and her child had a type of disability called **“Osteogenesis Imperfecta”** commonly known as "glass bone disease" which causes increased bone plasticity and brittle bones which usually causes fractures and bone deformations which in turn can lead to seriously deformed dwarfism. We took time to calm her down then she started talking....

*“Anseth is my first child, he is now 6 years old, his disability was recognized as soon as I gave birth to him, he was really thin and small everyone was really surprised with his appearance, he is a very delicate boy, he sustained several fractures in his lifetime, we spent most of time in hospitals beds, he delayed walking until he was five years old. Before we were living with my husband’s family but we were forced to shift to another village called Bugene where we are renting a room, they were blaming me of being the cause of Anseth’s disability because I have dwarfism and the child is showing signs of dwarfism too and they were even convincing my husband to divorce me and find another woman, it is really paining me because I am the reason of Anseth’s disability, he has inherited it from me, and what was paining me more is remembering the difficulties I went through while growing up, there was a lot of discriminations and being laughed at, I even dropped out from school, I see my child’s life is ruined.*

*One day when he was playing with other kids outside, he fell down and broke both his legs, I am just a tailor and my husband is a bus conductor we cannot afford to take him to hospital. Luckily your Village Rehabilitation Worker heard about Anseth from my neighbors and decided to pay us a visit, that’s why am here to seek your support”.*

Anseth had severe fractures in both his legs therefore he needed an orthopedic surgeon, he was referred to Kagondo hospital in Bukoba district and started his treatments. He went through several operations, medications, nutrition and therapies for the whole year of 2019. While Anseth was continuing with his treatment, CBIDO staff did counselling to Anseth’s parents however they went far and visited Mama Anseth’s in laws and educate them about disability issues.

Currently Anseth is able to walk but with difficulties, he cannot walk long distances nor stand for long periods therefore from February this year (2020) CBIDO in collaboration with Anseth’s parents started looking for a school for him since he has reached school going age. It was very difficult to find a school for him because of his delicate condition, it was not possible to find a boarding school for him because he needed a special attention, by chance we found a school called Karadea which is nearby his home, they accepted him and he got enrolled. Surprisingly when the schools were reopened on July after Covid-19 Anseth refused to go back to school and when he was asked why he complained of his fellow students were laughing at him because of his short stature and his walking style. Anseth’s father, CBIDO facilitator and VRW visited his school and talked with his fellow students and teachers about disability issues and putting more emphasis on the rights of children with disabilities.



***“I am so happy for my child, now he is in school and everyone is treating him well especially the students, they have been playing with him and help him when he needs assistance though being careful not to push or hit him, at first I thought his life will be ruined as mine but thanks to CBIDO for their support now I can see his bright future”.....*** Said Anseth’s mother with a smiley face

Currently Anseth is receiving school support from CBIDO whereby he is being supported with scholastic materials and school uniforms and CBIDO facilitator and VRW has been visiting him in school to see his progress, all thanks to the donors for their generous giving.



*Anseth during treatment/ operation*



*Anseth after treatment*



*Anseth in school with his fellow classmates*

