

# REWARDING COLLECTIVE WORK



Day Care Centre, Kosovo



**Every morning when I turn on my computer, my screen saver – a photograph of a determined young girl waiting in goal taken in Rustenburg – reminds me that the work we do in the One to One Children's Fund London offices improves and transforms the lives of many children in some of the poorest communities of the world.**

Following our latest monitoring visit in September to our project in

Kosovo, my head is still full of wonderful images from one of the Day Care Centres where children with special needs arrive in the morning full of excitement ahead of the activities they are about to join in. Many of these children had never left their home until One to One centres started providing essential social and counselling services, unique in Kosovo, in February 2010. The progress of some of these children is so phenomenal that I could not believe that Genta, 7 years old with cerebral palsy, who was painting and chatting in front of me could hardly walk or talk when she first attended the centre in March this year. I also relish the telephone conversations I have with Nonkosi Ndalasi our Project Coordinator in the Eastern Cape and the update reports she sends to us quarterly (read more on our latest conversation on page 2).

With the support of our local partners (Small Projects Foundation, the PATA network of clinics, Whizzkids United, One to One Kosova, SDSF) and our local One to One team members in the Eastern Cape and Kosovo, we work to strengthen, expand and replicate our HIV, trauma and education programmes. Collectively, we are making a substantial difference to many children's lives. And beyond the direct beneficiaries of our projects there are also many indirect beneficiaries, although much more difficult to quantify. Entire communities, teachers, nurses and doctors, even local and national governments also benefit from the impact of our projects through training, community and peer support, prevention or awareness raising and behavioural change.

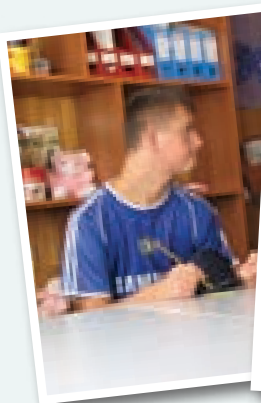
I feel privileged that I am able to work with so many amazing people dedicating their lives to children in crisis. I feel privileged to have met and continue to meet so many children who understand and make the most of what these projects can bring to them.

I feel privileged to contribute to the impact One to One Children's Fund is making.

Finally, I would like to use this opportunity to thank our current (and future) supporters and donors who, knowing that there are many good causes worth supporting, choose this one.

*In this issue, you can also read our overview article about the ART Support Programme in the Eastern Cape and a short interview with Nonkosi, Project Coordinator, about her work.*

**Nathalie Renaud,  
Programme Director**



Peja, Kosovo

# The One to One ART Support Programme in the Eastern Cape (South Africa)

## Outreach care for HIV+ children

**In South Africa, 43,000 children died of HIV/AIDS related illnesses last year. The Eastern Cape Province is one of the poorest regions in South Africa. In 2009, it was estimated that 23,000 children were infected with HIV in the Eastern Cape alone.**

In 2004, One to One Children's Fund and its partner, Small Projects Foundation (SPF), developed a successful model which has contributed to reducing the number of infected children in the province. Through the Anti-Retroviral Treatment (ART) Support Programme, we work hand in hand with local stakeholders and community workers to eradicate HIV, stop the transmission of HIV to babies, identify and support HIV+ babies, children and adolescents and provide treatment and care for their families within the community. The projects also aims to fill critical gaps in the provision of care by the provincial health department, by providing nurses and community outreach.

In May 2010, thanks to funding from the Medicor Foundation over two years, One to One Children's Fund has been able to extend the programme to two new clinic sites. Our two existing sites are Uitenhage Provincial Hospital, receiving referrals from eight local clinics (mostly rural), and Dora Nginza Hospital which has ten satellite clinics. The new clinic sites are Queenstown Hospital, receiving referrals from ten satellite clinics and Isilimela Hospital which is the referral establishment for seven rural clinics. Both Queenstown and Isilimela have a prevalence rate superior to the provincial rate of 26%. As many as 500 children and babies respectively should receive ART, but until now there has been no provision for these two local hospitals to treat paediatric patients with ARVs.

## Each clinic is set up to provide:

- ART to children and babies in clinics and through home-based care.
- Voluntary Counselling & Testing (VCT) and Preventing Mother-to-Child Transmission (PMTCT) care.
- HIV education and services for families affected by HIV.
- Organisation of community support groups to follow up on ART clients.
- Counselling and supervision of patients, caregivers, volunteers and medical staff.
- Capacity building and provision of holistic care in children and adolescent-friendly clinics.
- Gardening and nutrition programme to include all families on ARVs.

## The Gardening Programme:

The Gardening project is becoming an important component of this programme. The knowledge of gardening in South Africa has been eroded by the importation of intensive farming practices and by the decimation of an entire generation infected by HIV and other diseases. The gardening project, through its training activities, ensures that the vital knowledge of gardening continues to be passed from generation to generation – especially important for child-headed households.

Africa needs to focus on a new feeding model suiting both society and land. The gardening project will provide independent food security for the clinic, the people trained and their family as they could feed themselves and manage their own resources more sustainably.

# The Child Activist

**When we catch up on the phone, Nonkosi tells me first-hand stories about the children they manage to put on Anti-Retrovirals (ARVs) and some of the families who have started growing their own vegetables on their little plot of land. When we last spoke, I asked Nonkosi about how Siphosethu Warrington was doing – whom many of you saw in the latest One to One film talking about wanting to be “a policeman to catch the bad guys”.**

On 18 September, thanks to Nonkosi, Siphosethu, who lives in a township with his caregiver, was admitted into a very good school where they teach English. After only 10 days in the school, Nonkosi asked him to tell her something in English and he said: “I am Siphosethu, I am HIV positive. I am on ARVs...”. Nonkosi did not expect him to say this but, having been nicknamed the “child activist” at the age of 11 she was not surprised either. Two years ago, Siphosethu started sharing his experience with school children and communities to warn young people about HIV and the importance of taking ARVs. Today, Siphosethu is fully aware that by learning English and developing his communication skills he will be able to reach many more people in his role as an “activist”.

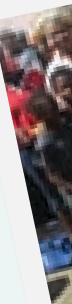
**Nathalie Renaud, Programme Director**



**Nonkosi Ndalasi and Siphosethu Warrington**

## **Beneficiaries & impact:**

- **2,500 children on ARVs receiving comprehensive care**
- **Over 7,000 HIV+ caregivers and parents benefiting from family support programmes**
- **40 health professionals receiving extensive training and support**
- **30 expert patients and community volunteers receiving training**
- **As many as 40,000 indirect beneficiaries benefiting from community support and peer education**
- **Over 250 new home and community gardens in 2 years.**



# Interview with our Project Coordinator in the Eastern Cape

*"It is my mission in life to care for people"*

**Sister Nonkosi Ndalasi is a nurse. In 2005, she started working on the One to One ART Support Programme as Project Coordinator.**

Nonkosi spends most of her time working in the local community, giving adherence counselling to the families of HIV positive children and running a gardening programme to reduce malnutrition among HIV positive children.

## The outreach programme

When she first started over 5 years ago, Nonkosi's main responsibility was to chase up children on anti-retroviral treatment (ART) who were not turning up for their appointment at the local clinics.

*"If they didn't come, I went to visit their families to find out what the problem was."* explains Nonkosi.

*"I found out that the main reason why they didn't turn up was poverty. Often the mother would tell me that her child still had antiretroviral tablets and when I asked why she hadn't given her child all the tablets, she would say, 'I'm afraid to give my child tablets on an empty stomach.' This is why we came up with gardening project - so the HIV positive children would have something to eat."*

When asked about how successful the outreach programme is, Nonkosi proudly replies:

*"The hospitals I work with have a very low default rate. People from other areas ask how we do it. I think it's important to communicate on people's level. I don't put on a nurse's uniform and high heels when I visit people who are living in poverty. Instead I put on my jeans and tackies [trainers]. It's also important to take a holistic approach. When a person has defaulted [from their ART regime] and you go to their house, you shouldn't just look after the defaulter. If someone is in a wheelchair, or is pregnant, they may need help too."*

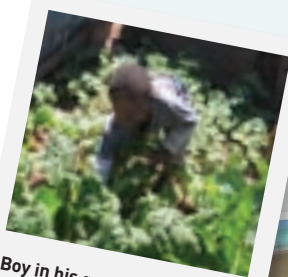
## The gardening programme

An HIV positive child needs nearly 30% more nutritious food than a child without HIV. Also the anti-retroviral drugs need to be taken with substantial food. Therefore, the ART Support Programme provides nutritional support to families affected by HIV.

In September, Nonkosi reported that as many as 243 home and community (in schools and churches) gardens have been growing in the Port Elizabeth area. Nonkosi tells us how the gardening project starts for each family:

*"We ask the caregiver to prepare a small area of land. Often this may just be a small space between the tin shacks in a township. One to One provides various seedlings to the family, such as spinach, cabbage, beetroot, onions and cauliflower. When I go around delivering seedlings, they call me 'Mama Wegadi', which means Mother of the Garden in Xhosa."*

Boy in his garden, Port Elizabeth



HIV information day in a school



*"We often find that once the family have got a small garden and see it's working, they extend it. This means they end up with extra vegetables which they can sell to get a small income. We try to only give seedlings once, so we can help as many people as possible. The gardening project has been a great success - it has improved adherence and has reduced malnutrition."*

When asked about what she enjoys most about her work, Nonkosi replies with her amazing contagious energy:

*"It's amazing when you see a child who has been very sick come into hospital and after six months you see them running around playing..."*

Nonkosi is now 69 years old but she tells us:

*"I can't retire, at least not from helping people. I don't see this as a job, I feel it is my mission in life to care for people."*

Boys involved in one of the community gardens, Port Elizabeth



## Broken Glass



**On Monday 2nd October, One to One Children's Fund was delighted to host a charity evening at the Tricycle Theatre in North West London.**

The evening centred round Broken Glass - one of Arthur Miller's less well known plays about the traumatic effect of Kristallnacht on a New York Jewish housewife and its impact on her repressed husband, who is terrified that he is somehow to blame for her illness, and precipitates a betrayal of a lifetime spent repressing his Jewishness to try to succeed in a Gentile world.

We chose this production because lead actor Sir Antony Sher is a One to One Children's Fund supporter; in fact he and our very own David Altschuler were at school together in South Africa.

The evening began with a drinks reception, where guests were able to learn more about One to One's work from staff and a team of enthusiastic volunteers, who also did a great job at selling raffle tickets.

**A UNIQUE EVENING  
IN THE COMPANY OF  
SIR ANTONY SHER**

The performance was intense but thrilling, and wonderfully acted by Sher and a strong supporting cast, who gripped the audience throughout.

Post show, the sell-out house was treated to a fascinating Q&A with polymath Sher (he writes, directs, acts, paints) who gave us a fascinating insight into his life. He revealed to Bridget Galton (Ham & High theatre critic) that growing up in South Africa he had been completely unaware of some of the atrocities that were going on, and that it was only when he came to the UK that he understood the full consequences of the apartheid regime, which shocked and affected him profoundly. He also revealed that his most challenging role had been Primo Levi (a play he also wrote), while that playing Christopher Robin in Winnie the Pooh had been fun!

We would like to thank all of you who attended the event, which raised in excess of £3,000 in ticket and raffle sales.

**Ginny Greenwood,  
One to One Children's Fund**

## Calendar of Events and Challenges

### Young Professionals Drinks Reception at The Groucho Club, Soho

**26th October 2010, 7.30pm**

Gather with an interesting mix of young professionals, listen to a short presentation by Olympia, a member of the Young Professionals group, on how mobile phone technology could benefit our Expert Patient healthcare programme in Africa, and find out how you can make your own mark on children's lives.

Call 020 7317 7040 to reserve your place (£10 charge to cover drinks).

### Quintessentially Soho Dinner at the House of St Barnabas

**8th December 2010**

Exclusive 3-course dinner by Absolute Taste to be hosted by hedge fund guru and One to One Children's Fund Trustee Kevin Gundle. Kevin will speak about the future of the hedge fund industry and also tell you why he supports One to One Children's Fund. Places are limited so book now (020 7317 7040) to avoid disappointment!



### White Boy/ Black Nanny Screening

**With panel discussion, January 2011 (date and venue tbc)**

The director's cut of Mark Rossiter's journey back to South Africa to find the nanny who raised him, with stimulating post-film discussion. Keep an eye on [www.southafricapositive.org](http://www.southafricapositive.org) for more details.

### Mount Kilimanjaro Trek

**2-13 February 2011/12-23 Oct 2011**

A chance to climb the world's tallest freestanding mountain, view amazing landscapes, and raise funds for the charity. Visit nearby Kibong'oto hospital where some of your sponsorship will go. Call us for more details.

### House of Lords Dinner with Lord Mitchell

**7th February 2011**

Special opportunity to hear from our project partners Dr Danny Brom and Prof. Mohammed Shaheen about prospects for reconciliation in the Middle East and our programme to heal the trauma of children affected by violence.

### London to Paris Bike Ride

**29 April - 2 May**

Join a special One to One Children's Fund group, cycling the 286kms from England's bustling capital, London, riding through beautiful French countryside, to the Eiffel Tower in Paris.

### Backgammon & Poker Tournament

**15th May 2011 (tbc)**

A star studded evening of backgammon, poker and champagne for both "professionals" and "amateurs".

### Play Football for Life 6-a-side Corporate Tournament

**Early June, Stamford Bridge/Upton Park (tbc)**

Following the success of our 2010 tournament, contact us to reserve space for your company's team.

### London Triathlon

**30/31 July 2011**

Take part in the world's largest triathlon, swimming, cycling and running around London's Royal Victoria Dock. Individual and team relay places are available, on Olympic, Sprint and SuperSprint distances. All ages & abilities can take part - please email us to register your interest.