

2011 Annual Report

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2011 Overview: A year of building and strengthening

In 2011, TTL continued to solidify our presence in vulnerable communities across the mountains of Lesotho, spreading and strengthening our roots to identify those children most in need of support. TTL has continued to strive to provide quality care and support to some of the most vulnerable children in Mokhotlong and Thaba-Tseka. Focus was placed on continuing to expand the Outreach program to reach families in more isolated villages, developing new initiatives such as testing children for anemia, and strengthening the Village Health Worker network and relationships with rural clinics. TTL continued to improve its monitoring and evaluation system, including training all relevant staff on the use of TTL's electronic database. In addition, TTL embarked on its first green energy project, installing solar panels to provide the TTL campus with hot water and electricity.

In 2011, 288 orphaned and vulnerable children were supported through Outreach services. TTL made over 1,600 visits to individual households, providing these children and their families with a range of services including nutritional assessments, food packages, support with accessing health services and medication, as well as training and education for caregivers. TTL also continued to provide specific support to HIV+ mothers to help diminish the devastating impact this disease can have on young children and their families. TTL's safe-home experienced its busiest year yet providing care and shelter to 52 children – a 30% increase from 2010.

Throughout 2011, efforts were made to continue to build TTL's referral network through our Village Health Worker (VHW) program. In 2011, TTL provided training sessions and site visits in 3 of our existing program locations – Malefiloane, Moremoholo and Sehonghong - and added a new site in Mokhotlong. This program not only helps to improve VHWs capacity to respond to the needs of their community but improves TTL's ability to identify more vulnerable children in need of support.

TTL's significant growth and advancement is attributable to both our innovative integrated model that focuses on individual families and their communities as well as the strength of our leadership and local staff base. TTL employs over 30 local Basotho men and women whose knowledge and experience of the region are critical resources in guiding and improving TTL's operations. Furthermore, by building ties and working with other relevant non-profits, various government partners (particularly those in health and social welfare), as well as village leaders, TTL improves the effectiveness and reach of its activities while also supporting the development of stronger health systems in the region. In combination, these approaches serve to ensure TTL's overall sustainability, quality of service, and efficiency in targeting vulnerable clients.

Touching Tiny Lives has served more than 975 children in the Mokhotlong and Thaba-Tseka districts since its inception in May 2004. Despite these achievements, TTL recognizes that there are many more children in need. TTL hopes to continue to grow and strengthen our services in response to the needs of the communities we serve. In 2012 and beyond, TTL aims to expand our reach even further and support more children without losing our focus on achieving success one child at a time.

TTL Accomplishments in Numbers

- **1652** Visits made to children's homes through the Outreach Program to provide nutritional and medical support, as well as training to caregivers
- 246 Visits by clients to clinics and hospitals, facilitated by TTL
- 401 Visits made to new and expectant HIV+ mothers to aid in the Prevention of Mother-to-Child Transmission (PMTCT)
- 36 Trainings/site visits to strengthen the Village Health Worker Network and identify children in need of support
- 125 HIV + mothers supported in their role as caregivers
- 178 New child clients served through the Outreach programs
- **156** Child clients who reached health and stability and successfully graduated from the Outreach Program
- **52** Children rehabilitated in the Safe-home
- 288 Total number of child clients supported in 2011

Total number of TTL child clients served to date 975



When Mpontseng was brought to the safe-home she was extremely lethargic, malnourished and suffered from a painful rash. Additionally, TTL discovered that Mpontseng's blood was unable to clot due to extremely low platelet levels, a condition likely related to her positive HIV status.

While at the safe-home TTL arranged for a blood transfusion for Mpontseng in Maseru because the Mokhotlong hospital had run out of blood and collection bags. Mpontseng was also started on ARVs and began to improve tremendously. We were able to reunite her with her grandmother a few months later, where she is continuing to be monitored by the Outreach team.

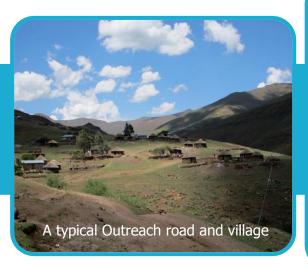
Mpontseng is just one example of the type of personalized care TTL is able to offer through our unique model.

1. Outreach

At the core of TTL's activities is its Outreach program, serving on average 100 children every month. These children face complex and often overwhelming challenges. TTL is dedicated to providing each child with personalized support while keeping families intact. The help TTL provides takes whatever form is needed, whether it is the delivery of monthly food packages, counseling and education for caretakers on how to seek and adhere to medical treatment, or financial support for transport to the hospital and hospital fees. TTL's Outreach program allows vulnerable children to receive lifesaving services, while keeping families and communities involved, enabling the sustainability of positive results.

Of the 288 children served in 2011, 227 were from Mokhotlong district, with the other 67 residing in the Mashai area of Thaba-Tseka. In order to serve these clients TTL made over 1600 individual home and rural clinic visits. By reaching clients in their homes, TTL establishes personal relationships with each individual family, and tailors its services to the specific needs of that family. These home visits also offer opportunities to provide caregivers with training on proper nutrition, basic medical issues, and disease prevention. In turn this training benefits other members of the household, extending the impact of Outreach activities beyond the child client.

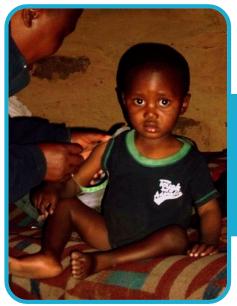
With TTL's support, these clients also made over 240 visits to local clinics and hospitals. By encouraging and enabling these visits through education and financial support, TTL not only ensures appropriate medical care, but also instills strong treatment-seeking behavior for the future. Some clients may continue to receive this form of support even after graduating from the Outreach program if financial barriers would prevent a child from accessing life-saving medical support – such as Antiretrovirals (ARVs).





Of the 288 clients served, 159 clients were successfully "graduated", having achieved stable health and nutritional conditions. With TTL's support, each of these children passed through a period of great vulnerability and is now able to live and be supported by their families and communities.

Sadly, 11 outreach clients passed away during 2011. They are a poignant reminder of the hardships faced by orphaned and vulnerable children in Lesotho, and the support they so critically need. Their struggles and deaths will not be forgotten, but will feed TTL's desire to help save the lives of more and more children into the future.



Relebohile being assessed for growth during an Outreach

2. Support for HIV+ Mothers

In 2011, TTL witnessed the significant change of Prevention of Mother to Child Transmission (PMTCT) services becoming available to all women free of cost at rural clinics across Lesotho. As a result of this positive development, TTL's PMTCT program has evolved into more specific support for HIV + mothers after they have delivered their child.

Based on the needs of the child and guidance of medical professionals, TTL will support households with HIV + mothers and exposed children to provide nutritional support and formula when necessary- particularly when a mother suffers from HIV related illnesses. In addition, TTL provides education about basic hygiene, HIV transmission and breastfeeding. These regular visits also provide the opportunity to encourage healthy behavior, including regularly attending health clinics, and support the correct administration of medications and ARVs. Lastly, and perhaps most significantly, these regular visits are an important form of psycho-social support for women who may be struggling to care for their child because of conditions related to HIV. This past year, TTL made over 400 visits to HIV+ mothers as part of this initiative.

At the end of 2011, TTL is currently supporting 50 HIV+ mothers and their children.

Tlotliso (here at 7 months) and her mother have been supported by TTL since she was 1 month old



3. Safe-home

This year marked the busiest yet in the safe-home with TTL providing shelter and rehabilitation to 52 children.

Of these children, 40 were successfully reintegrated with their families and are currently supported through outreach services. One child was placed with an orphanage because no family members could be identified. Sadly, two children passed away after arriving at TTL in critical health. Both were under 1 year of age and exposed to HIV, once again highlighting the numerous challenges faced by Basotho children and the importance of the Outreach and VHW programs to identify seriously ill children as early as possible. There are currently 9 children residing in the safe-home.



Boikano (here with Safe-home Coordinator, M'e' Mamosa Mekhoa), unfortunately passed away in 2011

Many of the children that have stayed with TTL this year have made remarkable recoveries, overcoming severe malnutrition, TB and other HIV related illnesses to become smiling, playful babies ready to return to their families. As the number of children TTL is able to reach continues to grow, the safe-home will continue to serve as a final safety net for the most vulnerable.



Ralitakong arrived at the safe-home in late 2011, aged 2 years but weighing only 6 kg. Critically ill, malnourished, and too weak to stand, he had just started ARVs and showed signs of TB. Two and a half months later (weighing 7.3 kg), he now seems to be safely on the road to recovery.



Saving Lives, One Child at a Time: Khutliso's story

For TTL client Khutliso, 2011 was a long and difficult journey of set-backs and triumphs.

When he arrived at the safe-home in late 2010, 1 $\frac{1}{2}$ year old Khutliso was critically underweight and suffering from Marasmus, a form of severe malnutrition. Khutliso had also been exposed to HIV and was subsequently confirmed HIV +. Because of his poor

condition, he was failing to develop normally, demonstrating extreme lethargy and unable to crawl properly.

His first 6 months in the safe-home proved extremely difficult. Even with 24-hour care Khutliso struggled to gain weight and failed to go a single month without getting sick. Eventually, he was diagnosed with TB and started treatment. During this time, his mother passed away from HIV related causes.



But by May 2011, Khutliso reached a turning point. He was finally managing to go a month without getting sick, began to develop an appetite, and was reacting positively to his TB medication.

Khutliso quickly began making up for lost time - crawling normally, learning to stand on his own and starting to speak. In July, he was started on ARVs and by the end of August he could not only walk by himself but was running, dancing and laughing. He had become the most playful and outgoing kid in the safe-home.



In early September, almost a year since his arrival in the safe-home, Khutliso was reunited with his father and grandmother. Outreach continues to follow up with his care, providing nutritional support and ensuring that he is taking his ARVs correctly. He is now a happy and healthy 2 ½ year old - a complete transformation from a year ago.

Sept 2011, a week before he graduated from the safe-home





Dec 2011 at an Outreach check-up with Grandma

Village Health Workers Program

Since 2008, TTL has been working directly with Village Health Workers (VHWs) to strengthen their capacity to serve as "first responders" in the fight against malnutrition and HIV/AIDS. By engaging with these key local stakeholders through training meetings and site visits TTL is able to build our referral network and ability to identify those children most in need of our support.

In 2011, TTL continued to strengthen and build relationships within three of our existing VHW program areas: Malifiloane and Moremoholo in Mokhotlong and Sehonghong in Thaba-Tseka. In addition, we added a new clinic catchment area in Mokhotlong (Moeketsane) bringing our total number of VHW program areas to 9.

Through these efforts, TTL provided training to over 100 VHWs. In addition, the Outreach team made 29 site visits assessing over 1500 children for the danger signs of malnutrition and HIV/AIDS. As a result, TTL was able to identify 34 new clients who required our support.

VHW are trained to assess malnutrition by the WHO standards of weight, height and middle upper-arm circumference









One of TTL's VHWs working as our "eyes and ears" in rural communities

Green Changes at TTL

In 2011, TTL took its first steps towards decreasing our carbon footprint with the initiation of a solar energy project. Working in partnership with Aktionsgruppe Gummersbach der Welthungerhilfe, TTL is implementing a solar powered hot water and electricity system.



In mid-July, Phase I of the project was completed with the installation of three 150 L solar geysers. These geysers are now supplying solar heated hot-water to the safe-home, adjacent kitchen and volunteer accommodations.

Plans are already in place to complete Phase II by early 2012. Phase II involves the installation of a complete photovoltaic system to convert solar energy into electricity. This will produce between 2000-3000 kWh of electricity each year – roughly half of the electricity consumed in the Safehome and kitchen.

This initiative will not only decrease TTL's impact on the environment but also our utility costs, freeing up essential funds that can be put towards improving the health and nutrition of vulnerable children in Lesotho.

Staff Development

TTL is powered by a team of 30 local Basotho men and women, many of whom may have had limited opportunities for further education. As an organization, TTL is committed to supporting the knowledge and skill development of its staff, helping to foster confidence both in their roles at TTL and their daily lives.

In 2011, all Outreach and Safe-home staff were provided with additional training focusing on infant health and child development, facilitated by TTL's highly skilled medical volunteers. Outreach staff were also trained on the use of TTL's electronic database which maintains accurate records of all TTL's clients. In addition, at the end of 2011, all TTL staff participated in a one-day workshop held at the Mokhotlong



Hotel, focusing on motivation, team building and leadership skills.

TTL hopes to be able to continue to provide similar development opportunities for staff in the coming years.

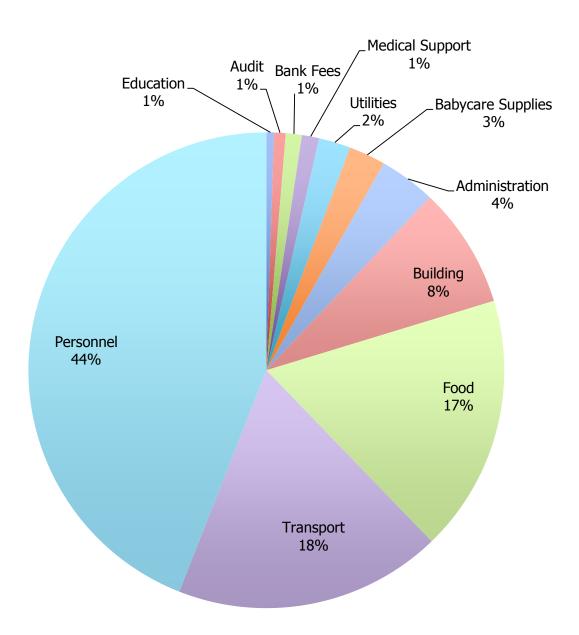
Financial Details

1 January 2011 – 31 December 2011

SAR 7 = ~USD 1

	SAR	USD
Total Income	R 1,814,025.35	\$259,146.48
Total Expenditures	R 1,770,866.36	\$252,980.91
Administration	R 67,739.35	\$9,677.05
Audit	R 13,821.00	\$1,974.43
Babycare Supplies	R 44,216.80	\$6,316.69
Bank Fees	R 19,370.70	\$2,767.24
Building	R 145,885.60	\$20,840.80
Education	R 9,261.50	\$1,323.07
Food	R 309,596.96	\$44,228.14
Medical Support	R 20,664.50	\$2,952.07
Personnel	R 779,757.02	\$111,393.86
Transport	R 322,235.33	\$46,033.62
Utilities	R 38,317.60	\$5,473.94

2011 TTL Expenses



Lesotho is suffering from a triple threat of the worst kind. Chronic poverty, food insecurity – increasingly exacerbated by climate change – and the HIV/AIDS epidemic have had devastating consequences for Basotho communities. HIV rates are estimated at near 24%, rates of associated infections, such as TB, are soaring, and under-5 mortality is persistently increasing where currently 1 in 9 children will pass away before their 5th birthday. As a result, more than 200,000 Basotho children have been orphaned (about 9% of Lesotho's total 2.1 million population), and 65% of these cases are directly attributable to HIV/AIDS. In addition, approximately 28,000 children have contracted HIV from their mothers and it is estimated 40% of children under-5 suffer from chronic malnutrition.

The Mokhotlong and Thaba-Tseka districts where TTL operates are some of the poorest in the country and the lack of infrastructure and poor road conditions (impeding access to health services among other difficulties) only serve to intensify the complications of the overall situation. Despite the immensity of the challenges faced, these highland districts are some of the most underserved areas in Lesotho.

Managed and staffed by 30 local women and men, Touching Tiny Lives has served more than 900 kids since beginning work in 2004. On average, TTL provides life-saving support to 100 children every month.

Our Mission:

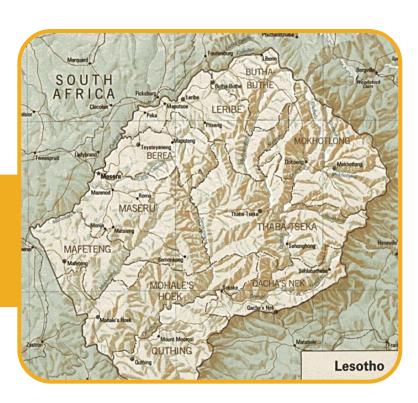
TTL seeks to mitigate the effects of HIV/AIDS on the most vulnerable infant children under five years of age by supporting their health, nutrition, development and emotional needs while empowering extended families and others who care for them to provide a better future for these children

TTL has shown innovation and leadership in OVC care by employing a unique model of three integrated programs that is able to respond to the individual needs of our clients and the changing contexts where they live. At the core of the Touching Tiny Lives model is an outreach program that supports children in their homes by providing nutritional, medical, and educational support. A complementary program targets HIV + mother to provide them with the knowledge, skills and support they need to keep themselves and their child healthy. Finally, TTL operates a safe-home in Mokhotlong where severely malnourished and sick children are rehabilitated. The safe-home is the final safety-net for the most vulnerable kids, and a temporary home to them while they recover.

What sets us apart:

- -TTL is recognised as the only organisation exclusively dedicated to serving orphaned and vulnerable children across the Mokhotlong and Thaba-Tseka districts.
- -TTL's unique model allows us to provide personalised assistance to every child, ensuring that children receive the support they need for a successful start in life.
- -TTL is committed to supporting families and communities to raise healthy children. By keeping children at home, TTL builds local capacity, increasing the sustainability of our efforts in some of Lesotho's most isolated and remote villages.

TTL currently operates across Mokhotlong district and the Mashai region of Thaba-Tseka.





Caregivers returning home after having their children assessed at a Village Health Worker site visit

Our 2011 Partners & Supporters

Touching Tiny Lives Foundation

Sentebale

Ministry of Health and Social Welfare (Government of Lesotho)

Aktionsgruppe Gummersbach für die Welthungerhilfe/Initiative für Kinder in Lesotho

Theresa Adams and Treading the Forgotten Sky

US Ambassador Community Grants

Shared, Inc.

Roses & Rosemary

Ralithakong, one of TTL's 2011 safe-home residents





A reunification with a very

Thank you to all the volunteers and friends of TTL who have supported us during 2011 both on the ground and from afar.

















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