



Quarterly Report

January February and March

2011

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Ethiopia

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1. Introduction

Abraham's Oasis started its activities because of children, these have always been the most vulnerable and marginalized in our work here in the Northwestern Zone of Tigray, the small child surviving on the streets, the bigger children starting to steal and developing into troubled teenagers leading to delinquency and an added burden to the community.

We have set up several services. Firstly - the child with some infrastructure in place who simply needs a helping hand with school and medical costs as either s/he has been abandoned / left orphan or parent(s) / relative (s) have gone away for work.

Secondly - the lone infant or child with no one to help them, too young to survive alone and where all semblance of family life is absent, no bed, no meal and usually no hope.

Thirdly - the refugee – the unaccompanied minor who has wandered across borders and has nowhere to go and cannot return 'home' because of closed borders...

When parents die and leave children destitute, schooling becomes an unknown luxury, due to the need to survive especially for the older child who must work to provide for younger siblings what little food can be eked out. Thus providing / supporting schools benefits the children.

In rural Ethiopia both the child and the woman are vulnerable in that they are the labour force in farming communities. The wife and children may be exploited though this may not be seen as exploitation because '*life has always been like this*'. It is the mother in the rural Tigray and her daughters who prepares the food, collects the firewood from far and fetches the water from remote water sources and helps their subsistence farming husbands / fathers in all the diverse farming activities.

For women, life is exceedingly burdensome, little realizing that their work is far heavier than their male counterparts; they simply accept it as par for the course and their 'raison d'être'. Hence gender awareness and support is of great value to these women.

Being healthy is of great value, many of our poor and rural citizens live on the borderline of what is accepted as normal health. Underweight, underfed, low mineral intake; little or no health monitoring from birth to the grave leads to a shorten existence and the interim period a grim test of survival. Of these once again the women and children remain the most vulnerable. These are the ones we seek to support.

1.1. Description of Abraham's Oasis

Abraham's Oasis is a registered Ethiopian Resident Charitable Society (Registration Number 0905) at the Charities and Societies Agency of the Ministry of Justice of the Federal Democratic Republic of Ethiopia.

1.2. Target Groups

- Orphans and vulnerable children in the community
- Lone, destitute, abandoned women
- At risk women / girls of reproductive age

1.3. Vision

“Sustainable opportunities for the vulnerable and marginalized”

1.4. Mission

“Generating a sustainable environment whereby social, economic and cultural integration of the said marginalized and vulnerable will occur; enabling them through income generation activities, childcare, basic maternal health and gender awareness that will result in dignity and independence of the individual and eventually the whole community.”

1.5. Goal

To reach and assist target groups in and around North-Western Zone of Tigray, Ethiopia in order to re-establish individual dignity and independence.

1.6. Objectives

- To safeguard the basic needs of the orphaned, abandoned, vulnerable, ostracized and / or troubled child through schooling and basic supplies.
- To ensure a future for the residential child care at Grace Village
 - By providing good education at Grace School
 - By income generation activities created from Grace Farm.
- To support women headed householders towards independence in farming projects outlined and developed by their individual cooperatives.
- To strengthen maternal health through health education and clean delivery kit support
- To raise awareness and facilitate for women with obstetric fistulae

1.7. Demographics

Abraham’s Oasis is near Shire, in North-Western Zone of Tigray Region in northern Ethiopia and we serve a rural population of 888,363 of which 224,577 are women of reproductive age and 353,551 are children under 14.

2. Current Report

The beginning of the year means planning, audit, General Assembly and Board meetings, preparation of Annual Activity and Audit Report for donors and government agencies. This has been done and now we look forward to the activities of 2011.

We are streamlining our programmes dividing them between Orphans and Vulnerable Children (OVC) and Women in Need (WIN). Each programme will have their own Programme Officer who will manage the projects and monitor the budget lines developed during this first quarter. Regular meetings with the Programme Officer will permit the Director to ensure that these projects are being carried out as per the lines set out by the agreed proposals.

Under the OVC Programme will be Grace Village, Grace Dairy Farm, Grace School, Community OVC, Elementary School Support, Libraries and any other child related project that may be introduced.

The Women in Need Programme will be for Maternal Health Awareness and Prevention, Assembly and Dissemination of Delivery Kits, Identification and Prevention of Obstetric Fistula, training of fistula patients wanting to work and live at Grace Village, Gender Based Violence focal self help groups.

3. Reports from Team Leaders

3.1. Childcare Activities

3.1.1. Grace Village

Activity	M	F	All	Remarks
Nurturing the children at Grace Village				
No. new children	7	7	14	
No. residents	31	23	54	
Food and clothing	31	23	54	
Discipline and counselling	5	2	7	
Developmental and Recreational Activities	21	27	48	
Water supply and sanitation	31	23	54	
High School student re-integrating	2	0	2	
Staff	1	18	19	

Successes

The children have been developing well and remain happy in their family units. Moving the former house mothers (who are now the cooks) back into the village has created a sweet environment for both the adult and child helping to form lasting relationships that may resemble as much as possible a family unit.

We have appointed house parents in to provide oversight that has led to better supervision in the village. We were concerned about the Baby Care Nursery so have appointed a competent worker who is caring well for the babies during the daytime, they are with their families in the evenings and at the weekend.

Constraints

Apart from some problems of rudeness to teachers and their seniors in the home, the children are relatively well behaved; we are working hard at helping the children learn to be polite and considerate towards each other and their seniors.

Our main constraint and frustration remains the low water supply. Despite having constructed a second storage reservoir we found that the inner pillars were not well sealed and allowed much of the stored water to leak away! We hope this has now been corrected by the contractor. The lake water has held well and we have enough for watering the trees and for the cows and barn.

Human Interest Story

She was crying on the streets of one of the towns to the north, the policeman picked her up and brought her to the station where her presence was recorded. Then a lady was found to care for her, Social Affairs informed. A telephone call came through to our office, "Could we take this six week old baby?" Of course we could and we have! So our latest addition is a beautiful little baby girl.

3.1.2. Grace School

Activity	M	F	All	Remarks
Grace Village School				
No. Nursery workers	-	1	1	12 th Grader
• Nursery children	4	3	7	2months to two year olds
No. KG Teachers	-	1	1	KG teaching certificate
• Pre-school	3	2	5	
• KG Two	4	5	9	
• Slow learners	2	1	3	
No. of Elementary Teachers	3	-	3	Teaching certificate/ Diplomas
• Grade One	4	3	7	
• Grade Two	4	1	5	
• Blind Children	1	2	3	
• Grade Three	-	6	6	
• Grade Four	2	-	2	
Elementary	-	-	-	Distance Learning (Mandela)
• Grade Five and Six	2	-	2	
• Grade Seven	3	1	4	
• Grade Eight	1	2	3	
Secondary	-	-	-	Shire High School / Prep School
• Grade Nine	3	-	3	
• Grade Ten	1	-	1	
• Grade Eleven	2	-	2	
Total	35	27	67	

Successes

This quarter has seen some improvement both academically and in behaviour. The teachers repeatedly counsel the children in how to perform better and behave in a better manner. There is however, room for improvement for all the children. We also had for one month two teachers from USA who taught all grades plus KG English as a second language.

Constraints

We believe the success outweigh the problems; some minor issues such as speaking loudly and when they receive minus points they feel angry, obedience is more difficult for some children than for others. Others are irresponsible because they forget the time and are playing when they should return to class.

Points of Interest

The children upon questioning tells us of their dreams, some would like to go to university to study Social Science, Medicine, Scientists and do Research; others would like to do Special Education so that they can in turn help needy children such as the blind and deaf. Others have less altruistic goals, to be drivers, football players etc. As a whole though, they would like to attend university and receive good grades.

3.1.3. Community OVC Project

SN	Activities	M	F	All
	Community Child Care			
	<ul style="list-style-type: none">• Identification of vulnerable children in the area	1101	933	2034
	<ul style="list-style-type: none">• Provision of funding	48	82	130
	<ul style="list-style-type: none">• Supervision of sponsored children	18	25	43
	<ul style="list-style-type: none">• Medical Support	2	1	3
	<ul style="list-style-type: none">• Home visits done in this quarter	12	21	33
	New children added this quarter	0	3	3
	Children who failed to pass exams	3	2	5
	Children dropped because of absenteeism			4

Successes

The majority of children have managed to keep up at school and attend school regularly.

Constraints

Sadly some children have not attended school and we have had to drop them from the project as; our objective to help children attend school.

Human Interest Story

A rather tragic story about a fifteen year old who attended Hibret school is currently unconscious and despite efforts by the psychiatrist has made little progress. His family is currently taking him for traditional treatment with the hope of seeing an improvement.

3.1.4. Community School Project

SN	Activity	M	F	All	Outcomes
1	Kelakil School	470	610	1080	

	Phase One				Completed
	Phase Two				Shop started income generation
	Phase Three				Not yet
2	Degana School	562	607	1169	
	Proposal				Money received
	Phase One				Started building classroom
	Phase Two				Not yet

Successes

The school shop in Kelakil is working well; the children are able to buy their supplies from nearer home than preciously.

The classroom at Degana School is in process of being built and this will make a big difference for the school where classes are very overcrowded.

Constraints

Degana is somewhat behind schedule.

3.1.5. Child Protection at My Aini Camp

SN	Activity	M	F	All	Remarks
1	No. of unaccompanied children	877	143	1020	Stone houses and tin hall
	No. of community children	694	584	1278	
	No. of shelters received	14	1	15	Lack of shelters
	Total number of shelters	63	12	75	6 rooms in reception hall
	No. of new OVC registered	37	43	80	From Screening centre
	Food supplied to	877	143	1020	WFP / UNHCR
	Blankets supplied to	120	13	133	UNHCR funded
	Clothes given to	877	143	1020	UNHCR funded
	Floor mats supplied to	145	34	179	UNHCR
2	No. Reception Centres	6			
	No. of youths	153			
	• In Reception Centre	140			
	• Re-housed	9			
3	Oasis for Kids services				
	No. children resettled	0	0	0	Not started yet
	No. children reunified with family	0	0	0	
	No. children assessed (BIA)	53	5	58	January training
	No children helped emotionally	13	5	18	
	No. children protected from perpetrators	877	143	1020	
	No children given psych. Counseling	13	9	32	
4	No children attending school				
	• Primary School	486	281	763	
	• Secondary School	28	17	45	

	No children with problems in school				Not notified of problems
6	Youths moved to independent living	12	-	12	
	• Building their shelters	17	-	17	
	• Completed their houses	12	-	12	

SN	Activity	M	F	All	Remarks
7	Community refugee children				
	• With parents	889	349	1238	
	• With extended families	18	15	33	
	• With foster families	6	7	13	
8	Medical assistants to children				
	• No. Locally assisted	271	202	473	
	• No. Transferred to Shire	5	3	8	
	• No. Transfer to Mekelle	2	-	2	
	• No. transfer to AA	5	1	6	
9	Incidents of violence	0	0	0	
	• Sexual based	0	0	0	
	• Other types	0	0	0	
10	Escapes from the camp				
	• Attempts	53	17	70	
	• Non returned	8	0	8	
11	Special needs children				
	• Amongst unaccompanied minors	13	5	18	
	• In community	15	7	22	
12	No of intra-agency activities				
	• Meetings				5 meetings

Successes

Abraham's Oasis has been able to meet the day to day requirements of the children at the My Aini Camp with regards to protection, security, food and fuel for the past quarter. We have been able to hand over in a correct manner all assets to concerned parties. The complete data base has been finalized and submitted.

Constraints

The constraints throughout our activities have been the untimely funding and the lack of partner support from certain quarters. It is for these reasons Abraham's Oasis has decided not to extend the Tripartite Agreement with United Nations High Commission for Refugees (UNHCR) and the Administration for Refugees and Returnee Affairs (ARRA). This is the last quarter our charity will manage Child protection activities. As of 1st April all assets, equipment, supplies and furnishing have been handed over to UNHCR. By mid April all

finances will also be finalized.

Comment

Abraham's Oasis carried out the work amongst the children with full heart; it is with sadness that we now withdraw from these activities. Our own organization was being swallowed up by the magnitude of the refugee OVC, both in manpower hours, personnel and finances to such a point that Abraham's Oasis was being seriously compromised. We will always count it an honour to have helped for a brief time the refugee OVC at My Aini.

3.2. Health Care

	Activity	M	F	All	Remarks
1	Rural health awareness activities				
	• Fistula / Maternal Health Ed and Awareness	39	59	98	
	• Simple Delivery Kits distribution	596			
	• Clean delivery assembly plans	Completed			Awaiting funds
	• Identify pts and referrals to Mekelle Fistula Centre	-	10	10	10 identified, 5 referred, 4 waiting 1 refused to go
	• Staff with Fistula referred	-	2	2	
2	Gender Based Awareness				
	• No. of sessions	-	-	-	Car constraints
	• No. Victims assisted	-	1	1	
3	Grace Village				
	• No. Referrals to Addis Ababa			1	
	• No. who had surgery (outcomes)			1	In process
	• No. Growth monitoring	23	24	47	Younger children
	• No. Health supervision			4	School & Village
	• No. HIV residents / children		5	5	
	• No. given Health Education	17	15	32	
	• No sessions of Environmental Sanitation	32	32	64	2 sessions

Successes

Despite constraints due shortage of transportation we were able to identify many fistula patients. The good rapport we have with Woreda health officers has helped so much. The Women's Affairs contact us and helps us by informing us of needy women throughout the Zone.

We have distributed clean delivery kits and finalized the proposal with the Birth Kit Foundation, Australia, for assembly here in Shire.

We were able to help a lady with cancer of the vulva and a Spina Bifida female child to go for further treatment.

Constraints

We have had car problems that are now resolved; this has limited our travel during the quarter. This next quarter we hope to catch up on rural maternal health and Gender Based Violence activities.

Another problem is fear or husbands unwilling to permit fistula patient to come for their appointments, one refused to go to Mekelle and has since returned home to Dima. We will follow up with these women and in some events they may be willing later on.

Human Interest Story

Asmaru Gebru, 30 years old from Tselemti Woreda in the village of Sekota, gave birth to three children, one of them a stillbirth. This last pregnancy and delivery resulted in the sad plight of urinary incontinence. Her husband then abandoned her and she struggled alone. Then as is often the case she then took up with another man and again became pregnant. She again went into prolonged and traumatic labour and with her new partner came to the hospital where she was delivered of a live baby by cesarean section.

She was catheterized to assist in healing of potential birth injury due to a second traumatic injury sustained during labour. She was discharged from hospital and told to go home with the catheter, but she said there was no way she could go home with the tube in her bladder. But the hospital was not able to keep her; her bed was needed for an urgent maternity case. So there was no food, no transportation money and no support locally. She came to us to wait out the remainder of the time of indwelling catheter; by this time the new partner had left her.

Sadly, after a few days here, she removed the catheter herself and asked to go home, still leaking urine. We will follow her through the local health facility. Despite our willingness to help, sometimes the patient is not willing to be helped.

3.4 Farming

	Grace farm	Plan	Work	Remark
1	Office space provided	done	100%	
2	Preparation of record keeping, boards etc	5	100%	General Farming records
3	Material/ crops obtained	-	100%	Board and crops
4	Concentrate feed prepared	10 Q	100%	Mixing
5	Repairs done to broken equipment	-	100%	
6	Training of farm workers	2	50%	
7	Towels for cows for teat cleaning	18	100%	
8	Treating disease animal	-	2	1 calf - 001B
9	Land prep. For veg. and fodder	2	0%	Selected areas, awaiting rains
10	Ear tags for cows	6	100%	
11	Green feed - suspenia given 3 x week	-	100%	

12	Milk processing room prepared	refurbish	94%	Painting remains
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Successes

- Reducing the consumption of feed to 4 quintal (i.e. almost half) with decreasing the milk output
- Increasing the content of concentrate feed with minerals, vitamins, protein, carbohydrates balanced feed for maintenance, growth and preventing disease
- Insemination of 2 cows by changing feeding systems and type to show heat on time.
- Individual cow has file for milk, health and breeding record
- Timely green feed and feed, free and adequate water supply.
- Adequate supervision now even on Sunday and all work being done as per plan

Constraints

- There was a lack of workers initially but this problem has now been resolved.
- Lack of market for dairy products due to 'fasting' time
- Shortage of water
- Snakes and rodents are causing problems; a barn cat would be beneficial.

Activity	M	F	All	Outcomes
Women's Farms				
Review proposals from community		90	90	
Support the active women's coops.		144	144	
Supervised		144	144	
Handover to co-op when ready		82	82	

Successes

Lemlem has started to paint the barn, and is moving along according to their plan. The missing money has been returned and the chairwoman has been replaced. This project could turn out quite well and should be encouraged.

Kelakil Project

SN	Activity	F	Number made	Profit made EB
1	Women's rehabilitation			
	• Tea shop	10	-	300
	• Basket making	5	27	150
	• Shop	7	-	426
	• Shiro making	5	20 kg	166
	• Chair making	5	35	245
	Total	32		1287
2	Food support			
	Maize		90 quintal	-
	Chick peas		90 quintal	-

Successes

Tea shop is the most successful but taking from its profits this is not doing too well

Constraints

The basket, shiro and chairs are not producing well, poorly motivate with a beggar like mentality.

The Administration has not provided land therefore the women are demoralized and use their profits for paying for rent of buildings. Poor results.

4. Conclusion

This quarter has been exceedingly busy. We have completed the phase out of the Child Protection Activities at the My Aini Refugee Camp. We will now concentrate on the activities that we have always done, that of orphans and vulnerable children in the community and in residence at Grace Village. We plan to carry out a Needs Assessment and Baseline Study of the orphans and vulnerable children in the Northwestern Zone of Tigray to be better placed and equipped to assist these children.

The farm is now being supervised by Dr. Henok Mamu a local veterinary surgeon who has already made some great inroads into feeding, milk outputs and the general cleanliness and daily routine required for a dairy farm.

The ongoing needs of women in the Northwestern Zone has led to us to rename our women's programme to 'Women in Need' – this includes, maternal health awareness, prevention of obstetric fistula, assisting women with childbirth injuries, helping the women's affairs offices to create focal groups for vulnerable women's self help income generation activities.

Yours sincerely,

Catharina van den Bosch
Director