Last year saw our ground-breaking Enable project continue to show extraordinary results. More than 99% of HIV-positive mothers on the programme had their babies without transmitting HIV to them.

Enable is an example of our focus on innovation. Our pioneering evidence-based interventions leverage local knowledge and lived experience to fill core gaps in care for vulnerable children. In 2018/19, we have piloted new approaches to mental wellbeing for adolescents in South Africa and teenage refugees in the UK. And we are applying original research to foster early childhood development in Cape Town. We don’t intend to stop here – we are now looking to scale these ideas to transformative levels.
In November 2018, journalist Miranda Prynne visited our Enable project and joined Mentor Mothers on a house visit. The rambling hilltop villages on the Wild Coast, Eastern Cape are beset with health issues – high infant mortality, malnutrition, HIV and more. Healthcare is hard to come by in an area where you must travel many miles on foot to reach a clinic or hospital. Once there, there is no guarantee the drugs you need will be available due to widespread shortages.

The mother we visit is nine-months pregnant; due any day. She is weighed, her blood pressure checked, she talks to Zanlle and Vuyokazi as they update her files. She has their mobile numbers if she needs any help. They advise her to ring the clinic if the pain in her hip gets worse and she must arrange to go to the clinic the moment she goes into labour. They hand her a sealed package containing antiseptic and wipes to clean the umbilical cord, just in case.

The advice from the Mentor Mothers is simple enough – breastfeed your babies, feed your children a varied diet with fruit and vegetables when possible, ensure your children are immunised, if you carry HIV, do not stop taking your antiretrovirals, ever.

Until meeting the Mentor Mothers, this expectant mother had no birth papers. As far as the South African government was concerned, she did not exist. This would have meant she could not register the birth of her new baby or apply for the child support grants she dearly needs. The Mentor Mothers help local women navigate the bureaucracy necessary to access government support.

MOTHERS & BABIES

No child should be born with HIV. Without intervention, one in three babies born to mothers living with HIV will contract the virus either in the womb, at birth or while being breastfed. But, with integrated treatment, care and support it is possible for children to be born, and remain, HIV-free.

THE SIMPLICITY OF THE ENABLE MODEL IS ITS SECRET. THIS IS NO GLAMOROUS VANITY PROJECT. IT IS A PRACTICAL, LOW-COST SOLUTION THAT WITH THE RIGHT BACKING COULD BE APPLIED ON A MUCH WIDER SCALE.

DOOR-TO-DOOR HEALTHCARE IN SOUTH AFRICA

In November 2018, journalist Miranda Prynne visited our Enable project and joined Mentor Mothers on a house visit.

The simplicity of the Enable model is its secret. This is no glamorous vanity project. It is a practical, low-cost solution that with the right backing could be applied on a much wider scale.

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In 2018/19, we entered the third year of our flagship project, Enable, to train local women to become Mentor Mothers. They provide the most vulnerable expectant mothers and young children with maternal healthcare and nutritional advice from pregnancy until the child is five. While most projects focus on one aspect of health, Enable recognises that real improvements in child and maternal health require integrated interventions.

Achievements so far:
- 1,452 households, including 669 children, directly cared for by Mentor Mothers.
- 36,905 community members have benefitted from Enable services.
- Less than 1% transmission rate of HIV from mother to child in an area where 24% of mothers we work with are HIV-positive.
- 75% of underweight children are at, or on their way to be, a healthy weight.
- Vaccination rates have almost doubled.

Looking forward: In the coming year, we will integrate the project into government systems by training 30 government-funded community health workers in the Mentor Mother methodology. We will provide them with equipment and deliver ongoing support to enable them to work with the Mentor Mothers to reach 4,000 vulnerable women and children.

This project is funded by UBS Optimus Foundation UK.

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### IMPACT

**OVER 120,000 PEOPLE HAVE BENEFITTED FROM OUR WORK SINCE 2001**

Plus more than 1.2 million people have been reached through the scale up of our projects. We have invested almost £10 million in ground-breaking projects in Africa, India, Kosovo and Palestine.

#### A YEAR OF INNOVATION

We developed new projects to respond to the emerging risks and challenges facing children and young people.

#### BRIGHT START

**150 CHILDREN** have improved early childhood development opportunities through guided parent-child play.

- **Bright Start**: We have started early childhood development support to 150 children aged 2-5 years-old living in Crossroads Township, Cape Town, an area with high HIV and deprivation. Play is essential to development, helping to build cognitive, physical and social skills. Grounded in the research of our academic partner UCL/Royal Free Hospital, community members have been trained to deliver toy-based play sessions. Structured for graded learning, the sessions encourage caregivers and their children to integrate play into their daily routine at home.

  - Each toy has been carefully selected and the project is based on the concept of cognitive rehearsal – that simple, repetitive tasks such as sorting shapes, doing puzzles and sorting sequences can aid the development of specific skills.

  - **Looking forward**: We believe there is significant potential for this community-based initiative to be adapted and adopted in a variety of locations. The project will be evaluated to understand its impact and potential for scale up.

#### BETTER TOGETHER

**106 YOUNG PEOPLE** living with HIV and chronic disease receive peer support and clinical advice to cope with the challenges they face.

#### ONE LONDON

**26 YOUNG REFUGEES** benefit from psychosocial support to help build their lives in the UK.

#### ENABLE

**30 LOCAL WOMEN TRAINED.**

**1,452 WOMEN AND CHILDREN ACCESSING HEALTHCARE.**

**36,905 COMMUNITY MEMBERS BENEFIT FROM HEALTH SESSIONS.**

### CHILDREN

There is mounting evidence that children who live in HIV-affected households experience developmental delays and cognitive deficit, even if the children themselves are not HIV-positive. Early childhood is a critical stage of development that forms the foundation for children’s future learning and wellbeing.

#### BRIGHT START

We have started early childhood development support to 150 children aged 2-5 years-old living in Crossroads Township, Cape Town, an area with high HIV and deprivation. Play is essential to development, helping to build cognitive, physical and social skills. Grounded in the research of our academic partner UCL/Royal Free Hospital, community members have been trained to deliver toy-based play sessions. Structured for graded learning, the sessions encourage caregivers and their children to integrate play into their daily routine at home.
Whether you are living with HIV or a refugee starting life in Britain, being a teenager can be particularly tough. They are faced with issues of identity and peer pressure but also have huge reserves of creativity and resilience. Young people are at the heart of driving our work to improve access to peer support, counselling, and youth-friendly health services.

**BETTER TOGETHER**

Last year, we went back to Groote Schuur hospital, Cape Town, where we pioneered our ARV treatment programme in 2004. Now, treatment is broadly accessible but there is very limited provision for young people to meet their specific challenges.

In response, we are supporting a world-first project to bring together young people who are living with chronic disease, including HIV, with an aim to reduce stigma and isolation.

Achievements so far:

- 14 Peer Mentors have been trained to co-facilitate a weekly support group where a total of 106 young people have received information including managing their illness, physical, mental and sexual health, and vocational choices.
- In response to issues arising in the weekly sessions, a psychologist has been employed to better support the Peer Mentors, work with individuals who have mental health issues, and start weekly parental support and education groups.

- Group members have reported that the sessions are a safe, non-judgemental space and they now feel less stigma, sad less often about their illness, and there are fewer times when their illness keeps them from doing things.

**Looking forward:** In the coming year, we plan to broaden the project to include a new weekly group for younger children and a parents’ coffee club under the guidance of the psychologist.

We believe the project has exciting potential to transform how young people living with chronic disease are supported – not only bringing together those with HIV but also those living with communicable and non-communicable diseases.

**ONE LONDON**

Many young asylum seekers and refugees have been traumatised as a result of experiences in their home country, on the journey to the UK or since arriving in this country.

Last year, we launched a project in collaboration with Wac Arts and Barnet Refugee Service to provide an integrated arts-based programme linked with counselling to help young refugees in London make sense of their experiences, rebuild their lives and develop their self-esteem.

13 young people from countries including Sudan, Iran, and Eritrea who are aged between 7–19 years attended a 10-week course at Wac Arts, and accessed support from the BRS youth worker. A further 13 young people with specific needs have been referred to counselling sessions with BRS.

Looking forward: There is a clear gap in psychosocial provision for young refugees. We believe there is considerable potential in this model to transfer to other services across London and nationally. In the coming year, we will evaluate the project and bring other organisations together to assess the potential for scale up.

“IT HAS MADE ME MORE CONFIDENT. AT SCHOOL I WAS AFRAID TO GO IN FRONT OF THE CLASS. NOW I’M NOT AFRAID.”

– ONE LONDON PARTICIPANT
**FINANCIAL SUMMARY**

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted &amp; Designated Funds (£)</th>
<th>Restricted Funds (£)</th>
<th>Total (£) 2018-19</th>
<th>Total (£) 2017-18</th>
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<td><strong>TOTAL EXPENDITURE</strong></td>
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<td><strong>360,361</strong></td>
<td><strong>636,838</strong></td>
<td><strong>756,973</strong></td>
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</tbody>
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*Note: We were fortunate to receive a substantial grant at the end of our 2018-19 financial year. This will be spent in 2019-20.

**LOOKING FORWARD – CONNECT MALAWI**

50% of new HIV infections in Malawi are among young people. The impact of HIV on their health, life chances and poverty continues to be severe in a country where overburdened health facilities struggle to offer the services for young people to enrol, and stay, in treatment.

Working with local partner, YONECO, we are delighted to launch our new project, Connect Malawi, to tackle the rising HIV rates in 10 communities. Using the proven peer support model, the three-year project will train 24 Peer Mobilisers to work in clinics and the community to support 8,700 young people to make positive, informed choices to stay HIV-free or engage in treatment for those already living with HIV.

The project aims to make long-term change by developing gender and age-friendly health services in three clinics, benefitting a further 20,000 people.