

Of course, the main event that overshadowed our activities (and the whole world) in 2020 was the **COVID pandemic**. This report explains the ways in which COVID affected our work and also the degree to which we were able to cover 'business as usual' in the midst of this.

South Africa went into a 'hard lockdown' on Friday 27 March which in the end lasted over 3 months. During this period, movement was severely limited for all people, including homeless citizens. Because of our role in chairing the eThekweni Task Team on Homelessness, and the good offices of the then Deputy Mayor, the DHC was able to work with other NGOs, the corporate sector and Government to set up, within three days, 11 emergency shelters hosting up to 1,700 homeless people. (Some of these shelters have continued post-lockdown to provide a 'safe open sleeping space' for homeless men as well as a free women's shelter).

The DHC building was one of the shelters, housing 100 sick, elderly and disabled homeless men, providing them with the necessary care and support 24/7. The majority of the men's shelters were tented camps.

We provided, at our cost, healthcare cover for all the central Durban shelters for almost one month until the Department of Health introduced their own provision (and even then continued to supplement when theirs was inadequate). We partnered with a specialist team in providing support for people going through drug withdrawal and ensured that all who needed to, were able to access their TB medication and ARVs. As far as we know, not a single homeless person in Durban died of COVID in 2020; moreover, in many ways the health of homeless people actually improved in the last year thanks to the committed work of our clinic team and the greater stability of the homeless community.

We provided a manager for one of the shelters; for the whole network of shelters, we set up an interfaith team of chaplains to provide spiritual support and also ensured deliveries of newspapers and books. We helped bring together Christians, Muslims, Hindus and Jews to work side by side to feed the homeless and we worked very closely with Municipal officials (especially Metro Police) to help them understand the needs of the poor. We also participated in weekly meetings of the National Homeless Network throughout this period so that best practice between cities could be shared.

Recognising the desire of the general public to support the efforts of the NGOs, we led a shared fundraising campaign which reached R1.66 million. Though managed through our financial systems, all the funds were earmarked and treated separately (and thus are not included in summaries below). A group of five advisors (all of whom were independent of any of the possible beneficiary NGOs, including the DHC) reviewed applications for grants and distributed the money to 10 different organisations (the DHC was the recipient of about 15%). (A separate report on this Appeal was published in August 2020). We did not receive any remuneration for managing this fund nor for any of the services that we provided for the Municipality, despite promises of subsidies.

Since July 2020, decreasing levels of lockdown have permitted us slowly to resume our usual activities though with significant restrictions. All the activities of **Usizo Lwethu, the DHC Clinic** went up and down with the effect of the various lockdown regulations. When we were able to resume primary healthcare to refugees and the urban poor at the Clinic in our building, numbers were initially low as people were slow to leave their homes.

Outreach healthcare continued throughout the year from our mobile clinic and also our converted container at Dalton Beer Hall. The pre-school at Dalton was suspended for most of the year.

11,131 consultations were provided at the Afrisun Clinic. 57% were for men (which is higher than in the past), 43% were to refugees (as usual); 21% were to patients aged under 21. Outreach numbers were high because of the emergency shelters - 2,672 consultations on the streets and a further 264 at Dalton. Voluntary Counselling and Testing for HIV (VCTs) were given to 1,342 people (62% of them men). As in previous years, reactivity rates for women (24.1% of those tested are HIV+) were much higher than for men (15.5%).

In total, the clinic had 14,067 patient interactions. This is equivalent to 66 patients per day for each of the 212 consulting days of the clinic (about 30 days lower than in previous years). This number does not include the patients on ARVs and TB medication seen for Daily Observed Treatment (since these sessions were not recorded during the year).

We received medicines from Government, worth R224,111 (though the value amount has declined since the donation started in 2017). In addition, we purchased R144,000 of medicines.

The Project Co-ordinator, Ruth Birtwhistle SRN was supported by a fully paid team of 9, comprising one more registered nurses (two at some points), five community health workers, a social worker, pre-school teacher and a driver. The clinic was not able to benefit as much as in the past from social work interns. Throughout the year Dr Stephen Carpenter volunteered 1 or 2 mornings a week and there were more local doctors volunteering during the hard lockdown (though no overseas doctors).

**Nkosinathi** is dedicated to welfare for the homeless and comprises:

- providing nutritious food, regular access to ablutions and laundry service
- opportunity to speak to a counsellor or social worker, family reunification
- education on addiction, and preparation for rehabilitation for substance abuse

For 4 months (April to July) these services were focused on our residents. This enabled us to ensure that almost all who were entitled to grants were able to access them and use this money to return home or to pay for a permanent shelter rather than go back to the streets after lockdown. During the rest of the year, we provided a drop-in feeding service as before, though sometimes providing takeaways or serving outside because of COVID protocols. Use of the showers was suspended from late March.

In 2020, we operated on 283 days (more than 5 days a week) and served 74,147 freshly-cooked lunches plus 104,347 breakfasts or sandwich packs. That means an average of 630 meals per day and 178,000 meals in the year (77% higher than our previous record year).

The Project Co-ordinator Sr Cathy Murugan HF is assisted by a team of cooks and a social auxiliary worker. Volunteering was greatly diminished with only 689 sessions of work, about 1/3 of what it had been in previous years. We missed out on the pre-COVID volunteering from schools, parishes, corporates, SVDP and Cathedral Sodalities.

Sadly, our work in **Disability Empowerment** with the teams of deaf young adults being trained to run St Augustine's Café did not survive the COVID lockdowns.

**Economic Empowerment** struggled because of the stranglehold that COVID had on the local economy. Stuart Talbot who usually leads this was instead focused on the residential programme and then securing IDs for the homeless, though this was frustrated by the stop-start practices of Home Affairs. Our **Street Lit** programme was badly hit because almost none of the usual book-selling venues were available. Nevertheless, through on-line sales and other creative initiatives, all the 12 pre-COVID booksellers were kept solvent through the year. St John remained a key partner in providing storage space for books.

(Note that the work of **Refugee Pastoral Care**, though based at the DHC, is not part of our Trust but instead reports directly to the Archdiocese of Durban.)

Almost no live **events** were carried out at the DHC once COVID hit. Our AGM and a very successful jazz fundraiser took place just before lockdown; a number of on-line fundraising events were organised on our behalf by various artists and performers during the year.

The Denis Hurley Centre **Administration** consists of a Director (Raymond Perrier), Finance Manager (Errold Victor) and part-time Administrator (Leanne Banks). The building is run by a Manager (Jean-Marie Ntamubano) supported by a Caretaker and assistant plus volunteer reception staff.

In 2020, total **funds raised** were R4.69M (7% over budget). In addition, a further R3.85M was raised as part of a special appeal to long-term donors to provide a sustainability fund that is set aside to spend as needed in future years, anticipating the long-term economic effect of COVID. **Our expenses** were R4.54M (which was 5% lower than budget). There were also unbudgeted expenses of R275,000 which were items that were specifically incurred because of COVID (PPE, sanitiser, eco-friendly takeaway containers). The 2021 budget is set at R5.1M.

We benefit from a wide range of **donors**. In 2020, we received 27% of our funds from overseas and 73% from SA. Of this, 32% came from individuals (including the Centenary Club), 14% from grant-making trusts, 9% from faith-based organisations, 6% from corporates, 6% from renting out space in the DHC, 3% from interest (thanks in part to legacy bequests), 1% from fundraising events and <1% from Emmanuel Cathedral (which was closed for most of the year). Many thanks to all who give funds.

After the cost of running the building, the Clinic is our single largest area of spend (31% of what we raise) – but it is hugely efficient given the number of patients we see. The cash spend on Nkosinathi is minimised by the great amount of volunteering and donations of food. Overall, salaries were our single largest cost: they accounted for 64%—though with 20 full-time-equivalent staff these are still very modest average salaries. Almost all of our staff were kept on full salary throughout the year through a combination of working remotely, taking extended leave and working back extra time. No post was terminated because of COVID.

After salaries, our largest areas of spend in descending order are utilities, cleaning, medicines, IT and repairs. **Audited Financial Statements** are available on our website; BDO will conduct our 2020 audit and this will be posted during 2021.

Although we did not lose any staff member, we mourn the loss to COVID of Mgr Paul Nadal (Trustee and Patron), Rt Rev Abel Gabuza (who was due to take over as Archbishop) and Virushka Ganga (former staff member); a number of employees and volunteers lost family members.

We are grateful to all those who have helped us, in small and large ways, by donating funds, goods and time to enable us to serve the literally thousands of people whose lives we touch every month. We commend our staff and volunteers for their flexibility and resilience in coping with the ups and downs of the last year and continuing to provide excellent service.