



# Impact Report 2023

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Expanding Clubfoot Care to Prevent Disability

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# MESSAGE FROM OUR FOUNDER



Growth

Collaboration

Support

Our 2023 impact report gives the opportunity to reflect on progress made in our goal to eliminate disability by supporting effective clubfoot treatment. Steps continues to grow and we are touched every day by the stories of the children we support in their triumph over clubfoot. Their resilience, and the care from their families, is what makes our work so rewarding.

Yes, there are challenges, but 2023 has proved that together we can make a difference. As I wrote in my year end letter:

*Ubuntu is the importance of community for survival. Seeing another's humanity with kindness, gentleness and compassion, and supporting each other.*

*In the clubfoot community, I believe that we embody the spirit of Ubuntu because it is truly a team effort. There are many parts to supporting a child born with clubfoot, and without one of those parts, treatment will surely fail.*

*The families who bring their child to the clinic and the community that supports them. The health professionals who work tirelessly with dedication to care for that child, often with minimal resources. The support organisations like STEPS that bridge the gaps to provide the best care for that child. The donors who give generously to support that child. Together we are the beacon of hope for these children. It is only through us all working together that a child can look forward to a bright future of living to their fullest potential.*

I am so proud of what has been achieved over the twelve months. But, I know that none of it would have been possible without the generous support of others. If you have been a part of this story, I thank you. I sincerely hope that you will be proud of what we have achieved together.

My heartfelt gratitude to you all: our Partner Clinics, our Donors and Partners, the Global Clubfoot community, the Steps Board, Children born with Clubfoot and their Families, and my Team.

I know that 2024 will have its own unique obstacles. But, with your support, I also know that more children can look forward to happy and healthy lives.

Thank you for caring about clubfoot.

Warmest regards,



Karen Mara Moss  
Executive Director  
March 2024

# 01

OUR WORK



# OUR STORY



The Steps story started in 2003 with the birth of a boy with clubfoot in South Africa. After his successful treatment by Dr Ponseti in Iowa, his mother returned home and told the story to local doctors. She founded Steps in 2005 to introduce and promote the Ponseti Method of clubfoot treatment in Southern Africa and support families going through treatment.

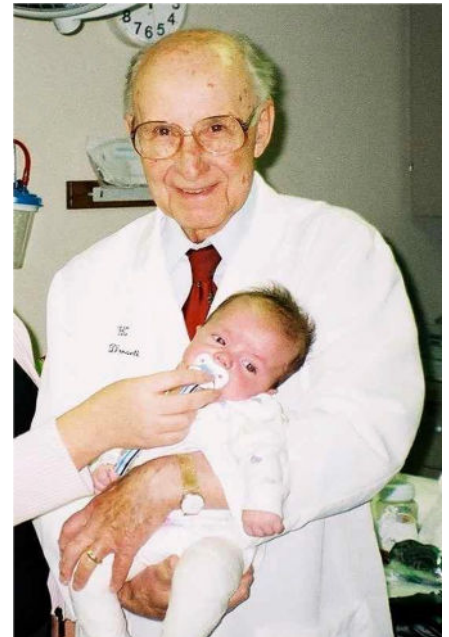
The 1<sup>st</sup> Steps Ponseti seminar in 2006 gained consensus from local orthopaedic surgeons that the Ponseti Method is the best treatment for clubfoot. Endorsed by Dr Ignácio Ponseti, with faculty trainers from Brazil, Canada and the UK, the successful training drove the change of clubfoot treatment in the region.

The 2<sup>nd</sup> Steps Ponseti training in 2007 focused on sustainability. Ponseti clubfoot clinics were established by doctors in main centres around South Africa. Ugandan orthotists taught local orthopaedic technicians to make the low-cost Steenbeek clubfoot brace.

The Ponseti Method is now part of the South African medical school curriculum for doctors and was endorsed by the South African Paediatric Orthopaedic Society (SAPOS) in 2012 as best practice. Steps partners with SAPOS on all our training workshops. We have held 29 training sessions in South Africa, Namibia, Botswana, the Seychelles and virtually for over 1600 health professionals. Steps organised and hosted the first African Clubfoot Conference in 2022.

Steps is a registered NPC, NPO and PBO based in Cape Town, working with clubfoot clinics in South Africa, Namibia, Botswana, Lesotho, Swaziland, Tanzania and the Seychelles.

Our solution, which offers support and expanded clubfoot care, changes the future of a child born with clubfoot by giving them mobility and the means to access education and make a living.



Dr Ignácio Ponseti



## Steps improves the lives of children born with clubfoot.

We are the only clubfoot support organisation in South Africa.

Our model is focused on innovative clubfoot treatment support and capacity building.

## Steps Clubfoot Care's model is aligned to the United National Sustainable Development goals:

**SDG Goal 1:** End poverty in all its forms everywhere.

**SDG Goal 3:** Ensure healthy lives and promote well-being for all at all ages.

2023 Winner CSI Legacy Awards, Best Rising NGO  
2018 Winner SAB Foundation Social Innovation Disability Empowerment awards  
2017 Gold 2017 Impumelelo Social Innovation Awards

# OUR VISION AND MISSION



## NO CHILD WITH CLUBFOOT LEFT UNTREATED

Our Mission is to offer every child born with clubfoot the brightest future imaginable. We're not merely treating a medical condition; we're unlocking doors to a life brimming with potential.

We Partner with a national network of specialist clinics in the South African state health sector to bridge the gap in resources and improve successful outcomes.

Our Four-Pillar model for change provides sustainable support that changes the future of a child born with clubfoot by giving them mobility, and the means to access education and make a living.

## OUR OBJECTIVES

Patient-centred care

Empowering the patient caregiver

Standardised clinic excellence

Increasing access to treatment

Increasing the number of patients treated



## OUR VALUES

S

**Sustainability** - Lean management, financial responsibility and working smart to secure the future of clubfoot treatment for posterity.

T

**Trust and Integrity** - Open communication with our donors, partners and stakeholders.

E

**Empathy** - Understanding and prioritising the welfare of children born with clubfoot.

P

**Passion** - Keeping and reinvigorating enthusiasm for our cause in the challenging sector of healthcare.

S

**Simplicity** - Staying focused on our core purpose while keeping the clubfoot child in mind.

**Connection** - We collaborate and share knowledge.

**Innovation** - Finding ways to maximise and improve our impact.

# ABOUT CLUBFOOT



Clubfoot (Congenital Talipes Equinovarus) is a common congenital birth condition.



Visible at birth, one or both feet are rigid and twisted inwards and downwards.



Without treatment, it can cause significant disability.



With early intervention and the Ponseti Method, a non-invasive treatment, children born with clubfoot can lead normal, active lives.



## CLUBFOOT INCIDENCE IN SOUTHERN AFRICA



Around 180,000 children are born every year with clubfoot, the majority are in developing countries. There is a higher incidence rate in Southern and East Africa than the global average (according to studies).



Every year the number of new clubfoot cases is estimated to be at least:

- 2,000+ in South Africa
- 3,000+ in neighbouring countries



Clubfoot affects  $\pm 1$  in 500 children in South Africa.



The approximate ratio is 2:1 boys to girls.

Lwandi, 3 years old,  
Johannesburg



- Untreated clubfoot is a disability.
- The clubfoot sufferer cannot walk normally or wear shoes.
- Children with clubfoot are often teased and shunned.
- Mothers are often blamed for the condition.
- Families hide children from their community.
- Some are told to amputate.
- This leads to a life of pain, shame and isolation.
- The child is trapped in a poverty cycle, unable to access education and the economy.

Untreated clubfoot



## CHALLENGES AND BARRIERS TO TREATMENT IN RESOURCE RESTRICTED SETTINGS

- Low awareness in the community and health sector that clubfoot is treatable.
- Delayed diagnosis and late referral to clinics.
- A shortage of trained health professionals to treat clubfoot effectively.
- Long and costly travel for treatment at main centres.
- Effective treatment limited by an under-resourced healthcare system.
- Establishing new clinics requires funding and training.
- The treatment is long and requires commitment from families.
- High patient default risk due to socio-economic and travel challenges.
- Stigma or superstition further burdens families who are often poor and dealing with multiple social problems
- Shortage of clubfoot braces or braces of sufficient quality can result in treatment failure.

Treated clubfoot



# SOLUTION: THE PONSETI METHOD

- Suited to restricted resource settings.
- Effective, +90% success rate.
- Gentle and less invasive with minimal surgery.
- Global best practice.
- Steps introduced the Ponseti Method to South Africa, Namibia, Botswana, Lesotho, and the Seychelles.



Dr Ponseti and Karen Moss

## PONSETI METHOD - BIRTH TO AGE 4



Diagnosis



Weekly Casts



Clubfoot Brace

“

*My advice to other parents is, don't panic, your child will be all right. I am so excited that my son has normal feet. He walks to school, he loves playing soccer and running. He can do everything he wants to do – your child can too!*

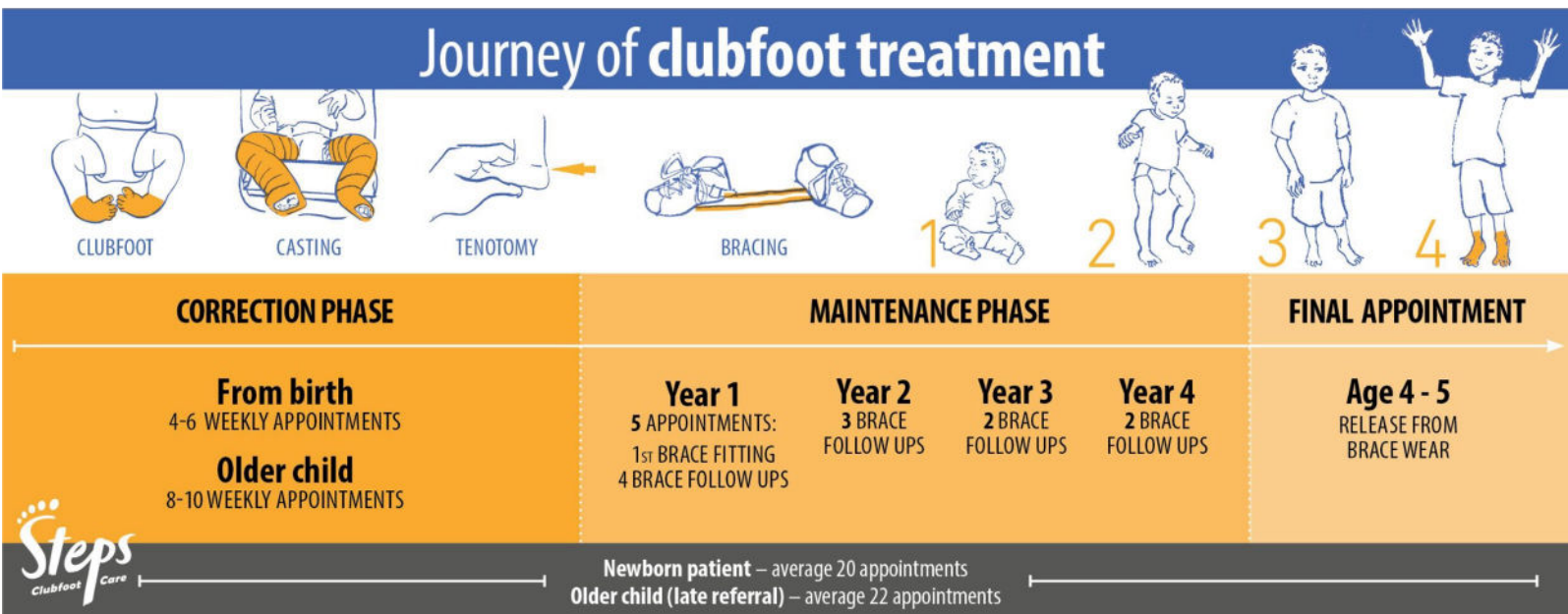
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# CLUBFOOT TREATMENT JOURNEY

Patients will have at least 20 clinic appointments over the four-year treatment of clubfoot. It's important to continue during the Maintenance Phase, when the night-time brace is worn to prevent recurrence. Routine check-ups ensure adherence and bigger braces are provided as the child grows.



For many families, travel to the clinics is far and expensive. The cost of the initial regular weekly treatments for the casting phase is tough for many families that are dealing with financial stress due to unemployment or reduced income and other challenges. Treatment can fail if patients do not attend the clinics regularly, resulting in disability.

## ECONOMIC BARRIERS OF ACCESSING CLUBFOOT TREATMENT

Consistent support is vital not only for clubfoot clinics, but also to improve patient access to specialist clinics for the four-year treatment. Unpublished cost estimates from South Africa indicate that about 5% of the total treatment cost is borne by the patients on transport alone. If the time costs were included it would be quite a substantial impact on the household expenditure.

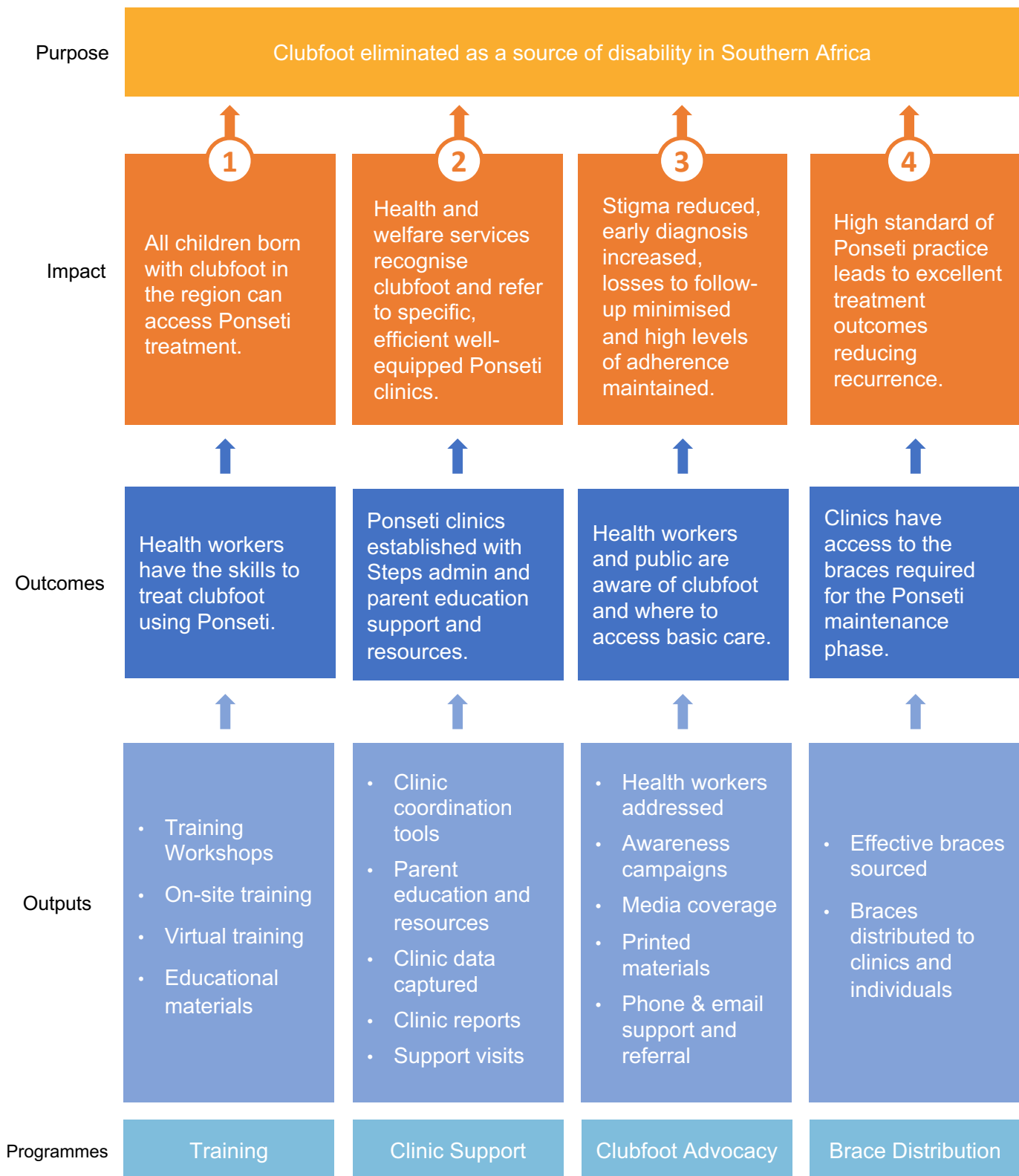
Care should take place as close to home as possible, especially in less developed settings. Care must be as simple as possible – the Ponseti Method is ideal as it can be offered in resource restricted settings.



Sustainable giving - R60 per month or a R2 500 donation supports one child's four year journey.

10

# OUR THEORY OF CHANGE MODEL



# STEPS MODEL FOR CHANGE



## EFFECTIVE, HIGH IMPACT, SUSTAINABLE

We believe in a comprehensive approach to tackling clubfoot. By addressing each aspect of clubfoot care, we ensure holistic support for patients and their families.

### 1 TRAINING



**IMPACT:** Increase number of children treated.

### 2 CLINIC SUPPORT



**IMPACT:** Increase patient adherence to treatment

### 3 ADVOCACY



**IMPACT:** Remove stigma and increase early referral.

### 4 BRACES



**IMPACT:** Successful 4 year treatment without recurrence.



**Improved life and the alleviation of pain with a solution.**

“

*My advice to parents: Do not panic. I am so excited that my son has normal feet and can now do everything. Your child can too.*

”

# 02

## OUR IMPACT



# TOP 5 ACHIEVEMENTS IN 2023



## I am Possible #StepItUp Campaign

Our innovative dance challenge for Disability Awareness Month, featuring our champion, the talented dancer Musa Motha, had significant traction, with 2.9 million plays on TikTok.

## 13% increase in patients supported at partner clinics

We saw a 13% increase in new patient enrolments and patient visits, supported 4,704 patients, 536 more patients supported than in 2022.



## 39 partner clinics supported

Our national network of partner clinics continues to grow, with the addition of Bedford Orthopaedic Hospital in Mthatha, Eastern Cape.

## Stepify's Official Launch

Stepify is our social enterprise company that provides quality paediatric orthopaedic products to health providers in Southern and East Africa. This not only increases the number of children accessing clubfoot braces, but also supports clubfoot patients as profit dividends support the Steps Clubfoot Care programme.



YEARS OF  
CARING ABOUT  
CLUBFOOT  
THANK YOU!

## Our 18<sup>th</sup> Birthday

We celebrated 18 years of work, expressing our gratitude to donors, clinic teams, healthcare professionals, caregivers, parents, and the over 19,000 children treated since our inception.

# PILLAR 1: TRAINING



## FOCUSED AND INTENSIVE TRAINING TOOK PLACE

3

Ponseti Training Workshops held - Northern Cape, KwaZulu-Natal, Gauteng

708

CPD points awarded to trainees

57

Health professionals trained

3,919

Educational video viewings (Steps Clubfoot Education - Vimeo)



Steps was invited to give a guest lecture at Tshwane University of Technology. The 2.5 hour presentation by our executive director was for students studying orthotics and prosthetics. The lecture covered the identification of clubfoot, the Ponseti Method, the clubfoot brace and the orthotist's role. This education is essential for knowledge on how clubfoot is treated, when the foot is ready for the brace, noting signs of recurrence and supporting patient families.



## Outcomes

- More patients can be treated.
- Patients have successful treatment outcomes.
- More clinic workers have access to Ponseti and clubfoot patient-centred care training materials.
- Consistency of treatment quality increased.
- Clinics have well-trained staff who are knowledgeable about clubfoot.
- Improved skills at smaller clinics reduces the burden on main centres.



## PILLAR 2: CLINIC SUPPORT

### OUR PARTNER CLINICS AND CLUBFOOT PATIENTS RECEIVED A LOT OF SUPPORT



39

**Partner Clubfoot Clinics** in our support programme.

4704

**Total children in treatment** at partner clinics.

1162

**New patients enrolled** at partner clubfoot clinics.

18,090

**Patient clinic visits** supported.

1247

**Education materials** distributed

742

**Clinic support visits** by Steps.

8

**Clinic Clinic Coordinators** working in partner clinics.

## Outcomes

- Clinics are well-equipped and streamlined and treating patients effectively.
- More parents feel supported and empowered for their child's treatment.
- Families can access clinics closer to home, resulting in regular clinic visits and improved adherence.
- Improved processes, data capture and reporting.
- Patients are retained for the full treatment period.

*More Detailed statistics are in Section 3*

# PILLAR 3: ADVOCACY



## FOCUSED CLUBFOOT AWARENESS AND ADVOCACY REACHED MORE PEOPLE

3

Awareness Campaigns

We had incredible support from the media – TV Radio, Print and Online:

- Reach of more than **107 million people**
- Advertising value equivalent = **R2,202,806.00**

- Our **‘Stepping Up’ sustainable donor** campaign grew to support **126 children**, (R60 monthly supports one child through their four-year treatment).
- **World Birth Defects Day (March)** - We shared the message that clubfoot is treatable, our executive director gave a presentation at the **2023 World Birth Defects Conference**, Chile.
- We were honoured to win **Best Rising NGO** at the CSI Legacy Awards in March.
- **World Clubfoot Day (June)** - We joined Achilleus for the ‘Shoelace Challenge’.
- **18<sup>th</sup> birthday (July)** - We had a **Gratitude Gathering** to thank our pro bono supporters
- Our executive director was an invited speaker for The Sub Saharan Congenital Anomalies Network & the The Global Health Network webinar **“Advocacy for Congenital Disorders and Rare Diseases in SSA - An Expert Discussion”** in August.
- **Disability Awareness Month** (November), we had a **TikTok dance challenge with Musa Motha**.

## Outcomes

- Clubfoot is a recognised condition.
- More support from the public.
- Communities are sensitised and stigma of clubfoot reduced.
- Clinic staff morale increased.
- More people know that clubfoot is treatable.
- Through early diagnosis more patients are treated soon after birth, reducing the burden of over-crowded clinics.

## PILLAR 4: CLUBFOOT BRACES



### MORE CHILDREN RECEIVED CLUBFOOT BRACES

The clubfoot brace is a vital part of treatment success. Without a reliable supply of comfortable and effective clubfoot braces, treatment fails. Clubfoot braces help to prevent disability from clubfoot. The Clubfoot Brace is included in the World Health Organisation's Priority Assistive Products List.

Steps works with international partners to source and supply medically endorsed clubfoot braces for Southern Africa. Steps supplies parents, healthcare professionals and clinics in the government and private health sector and provides support and education for sizing, fitting, and brace protocol.

958

Clubfoot braces distributed

6

Language versions published, 'My Clever Night Night Shoes' (Amazon)



Value of brace donations to our partner clinics in 2022: **R 281,400.00.**



**Stepify**, the social enterprise entity owned by Steps, became the sole distributor in South Africa for the Mitchell Ponseti brace (MD Orthopaedics)



We dramatically improved our brace distribution by automating our internal processes.

### Outcomes

Clinics and patients have increased access to braces to ensure optimum treatment and prevent recurrence.

Children have comfortable and effective clubfoot braces.

Risk of recurrence reduced.

Burden on clinics decreased.



# 03

## STATISTICS

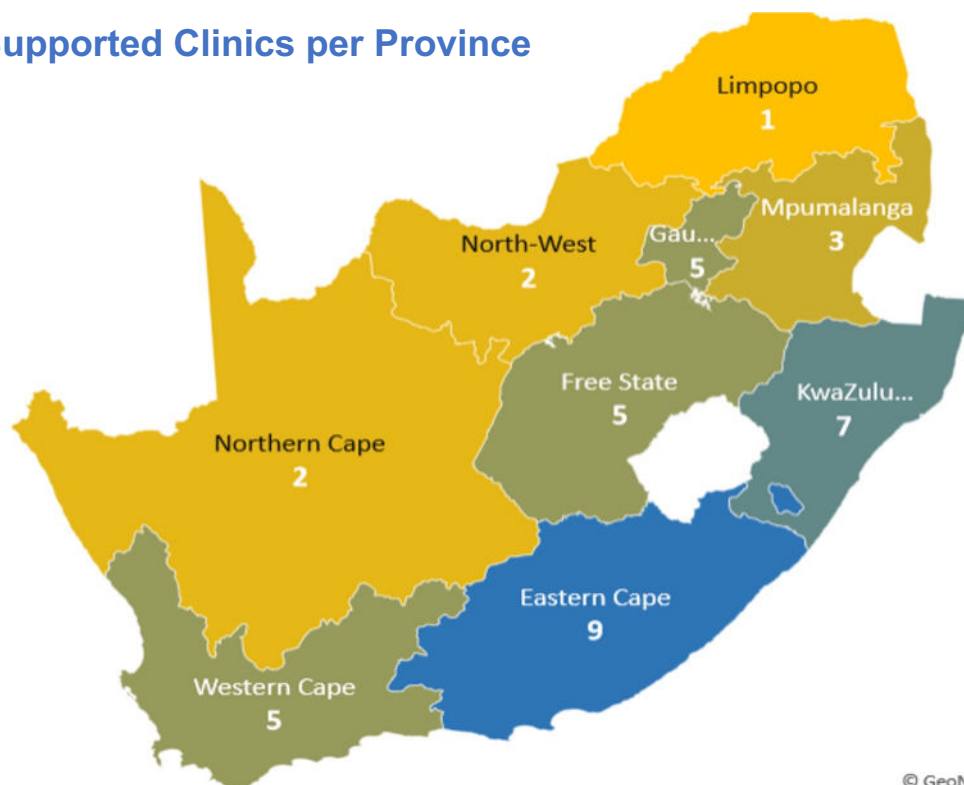


# STEPS SUPPORTED CLINICS



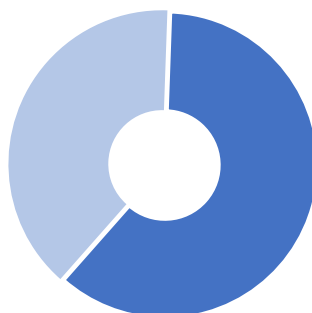
JANUARY 2023 – DECEMBER 2023

## Steps Supported Clinics per Province



## National Trends

### Male vs. Female



■ Male ■ Female

### Bilateral Vs. Unilateral



■ Bilateral ■ Unilateral

## Steps supported 39 clubfoot clinics in nine provinces

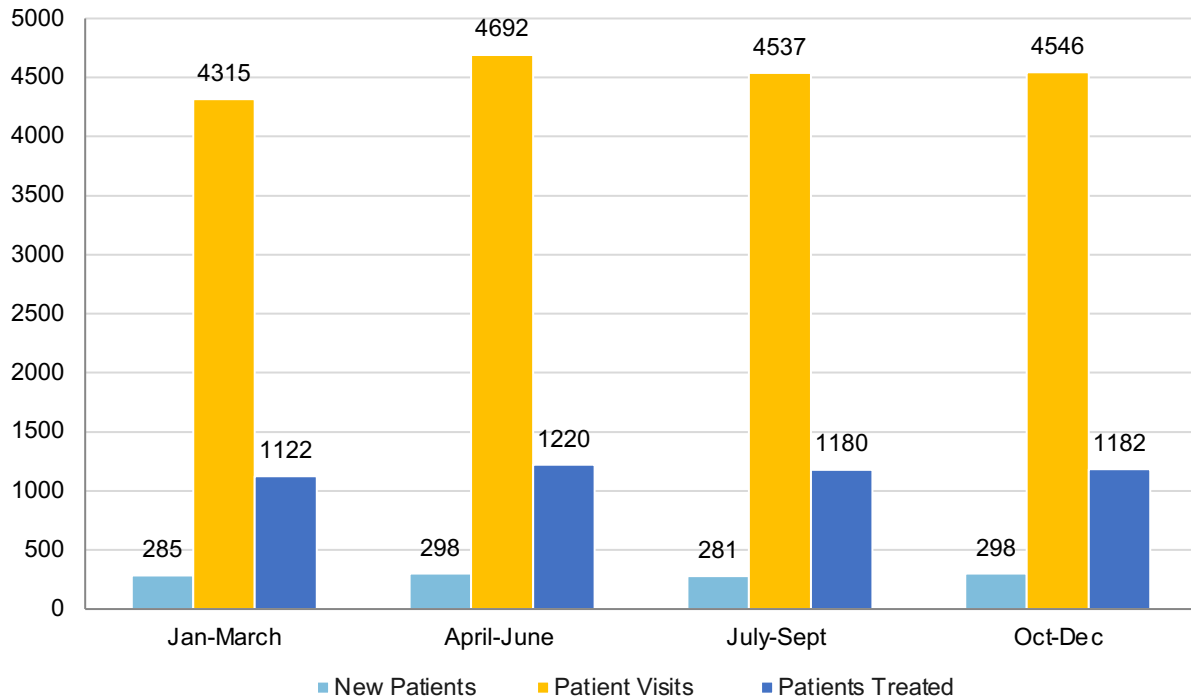
The new partnership with Bedford Orthopaedic Hospital, in Mthatha took place in November 2023 following the Steps Ponseti Training workshop. This increased the number of supported clinics in the Eastern Cape to nine, expanding the reach of clubfoot treatment and care in the province. The Eastern Cape has the highest concentration of Steps supported clinics, a mix of urban and rural.

# PATIENTS SUPPORTED PER QUARTER



JANUARY 2023 – DECEMBER 2023

Patients Numbers per Quarter



## Quarterly Stats Overview

Patient visits remained steady. No significant challenges, internal or external factors hindered operations, ensuring a continuous flow of patients throughout the year. Each quarter exhibited a consistent trend in both new patient visits and total patient visits. Q2 recorded the highest number of patients treated. Q2 & Q4 equally experienced the greatest number of new patient visits.

Thank you!!

To Steps donors

Thank you for always make things easier for us. You help Steps from day one till today, kind I assure that you're always there for us. You inspiring us to do our best. I am grateful for your help and for your insight.

I'll never forget your support and kindness. even our parents really Thank you for the time you've taken to support them as always. They are really thankful for your unwavering support.

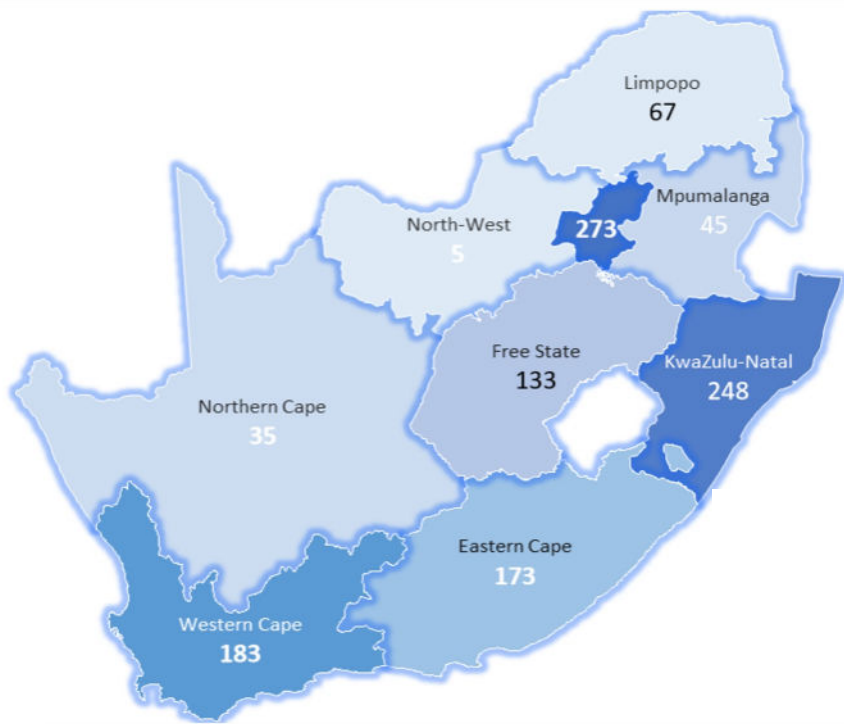
I remember one of our patients that touched my heart. She didn't give up on her journey, was very difficult but mom didn't give up. She attended her treatment until the baby was on brace. that mother give me hope that in life some of the thing may take long but at the end of the day it will make sense.

Phumzile Zondi



**PHUMZILE ZONDI**  
Clinic coordinator and parent adviser

# NEW PATIENTS PER PROVINCE



The map illustrates the number of new patients that were enrolled per province.

The pie chart is the percentage of new patient visits allocated to each province. The bar chart also displays patient visits per province in terms of highest volume of patients to lowest.

The 5 partner clinics in Gauteng recorded the highest number of new patients (23% - 273 patients)

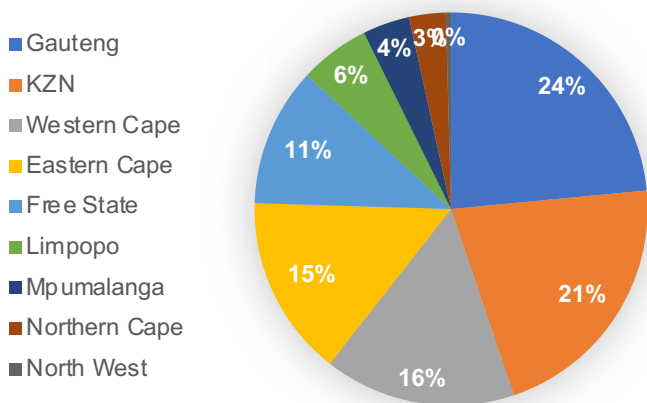
KwaZulu-Natal's 7 partner clinics were very close to Gauteng, with (22% - 248 patients).

The Western Cape and Eastern Cape clinics are on a par with the number of new patients recorded. The two provinces account for approximately 30% of the national total.

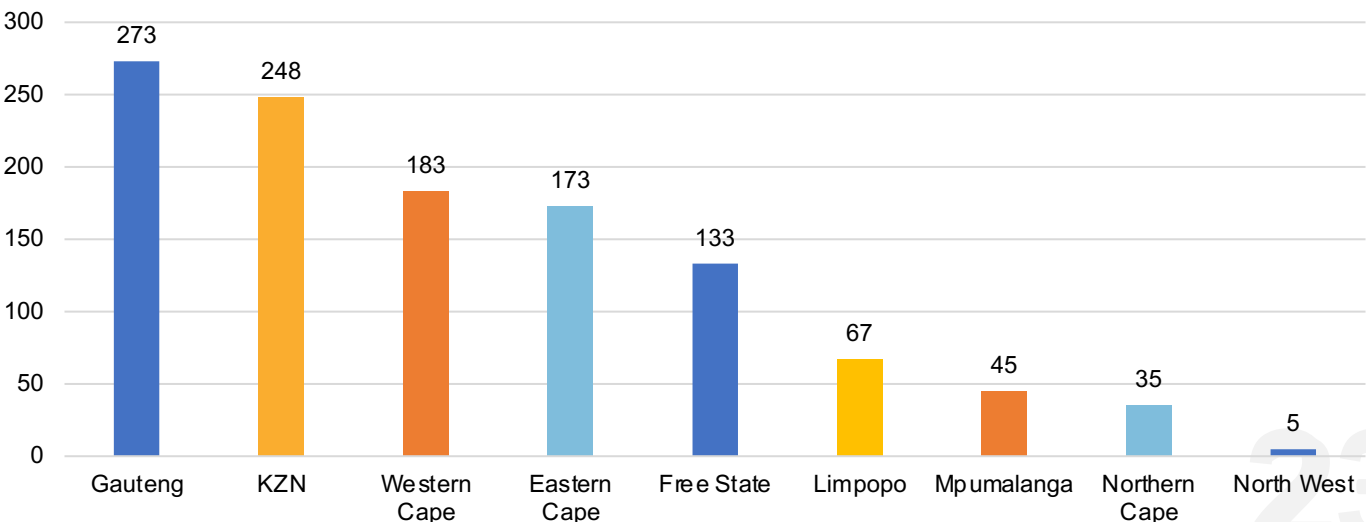
Limpopo's partner clinic enrolled 67 new patients, 6% of national total. Mpumalanga had 45 new patient visits recorded between its three partner clinics (4%).

The North West had the least new patients. We see their seeking treatment at large Gauteng clinics.

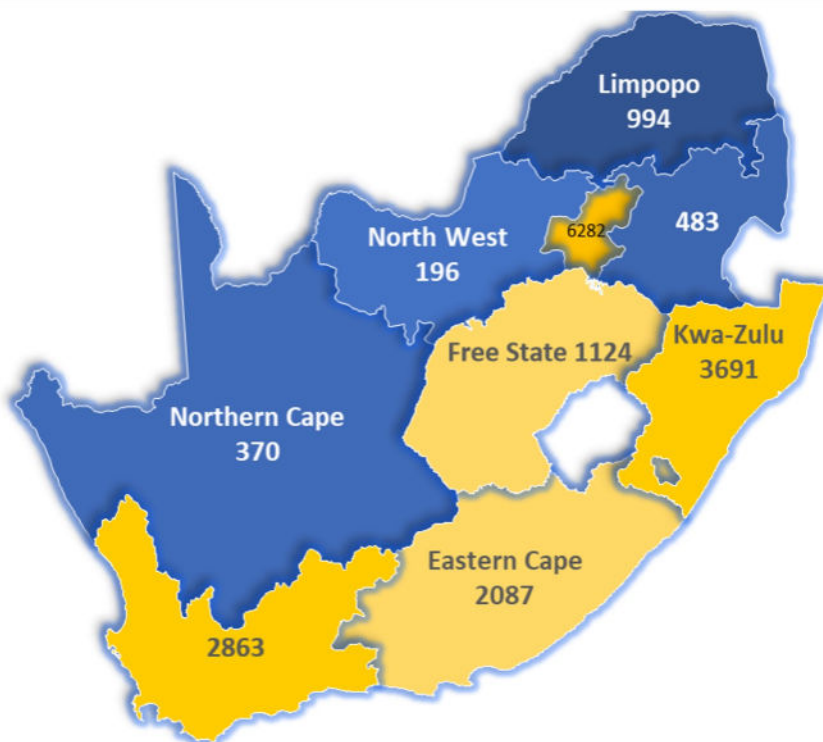
Steps Supported Clinics - New Patient Visits per Province



Steps Supported Clinics – New Patient Visits per Province



# PATIENT VISITS PER PROVINCE



The map illustrates the number of patient visits per province. The pie chart measures the percentage of patient visits allocated to each province from the National total. The bar chart below displays patient visits per province in terms of highest volume of patients to lowest.

Gauteng sees the highest number of patient visits (6282), 103% more than KwaZulu Natal, which has the second highest in volume (3691)

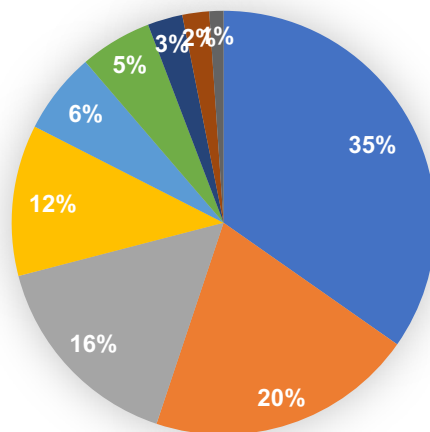
However, Gauteng's 'new patient visits' account for only 4% of all patients visits. The provincial average is between 7-10%. This indicates that Gauteng sees a higher proportion of recurrent patients compared to other provinces.

The trend may be due to a higher incidence of recurrence, or patients travelling far from other provinces due to delayed diagnosis, or the lack of effective treatment where they live.

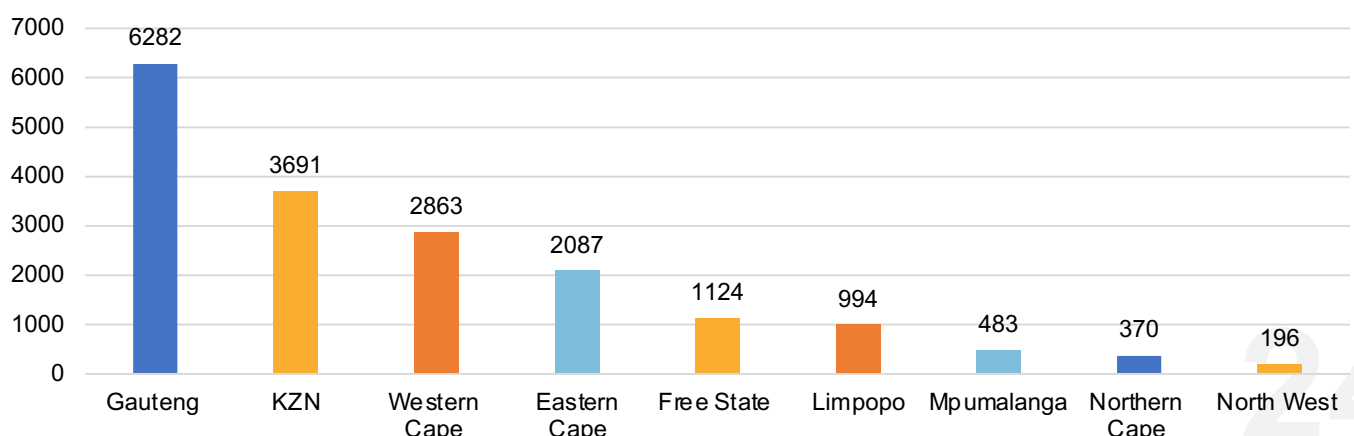
Western Cape sees the third highest amount of patient visits followed by Eastern Cape. Free State and Limpopo are on a par with each other. North West Province sees the least amount of patient visits.

Steps Supported Clinics - Patient Visits per Province

- Gauteng
- KZN
- Western Cape
- Eastern Cape
- Free State
- Limpopo
- Mpumalanga
- Northern Cape
- North West



Steps Supported Clinics - Patient Visits per Province



# STEPS CLINIC COORDINATORS



The STEPS Clinic Coordinator is part of a dynamic team of clinic staff that provide the highest quality of parent and patient care within the Steps Clubfoot Care support programme.

A Steps clinic coordinator is a compassionate person with a friendly personality, ready to go the extra mile to ensure the patient families' knowledge, comfort and well-being. Clinical staff are often too busy to provide vital detailed education and support to parents and caregivers. Steps created the position of a clinic coordinator to help support our clubfoot clinic partners.

Steps identified the need to employ more STEPS clinic and data coordinators in 2023 to provide streamlined patient-centred support. Steps is committed to enhancing clubfoot care delivery and supporting the success of all partner clinics and their patients throughout South Africa.

In March 2023, Steps placed a coordinator for RedCap data management at Tygerberg and Maitland Cottage clubfoot clinics in the Western Cape.

In June 2023, Steps placed a clinic coordinator to support parent education and the smooth running of Frere clubfoot clinic in East London, Eastern Cape.

In July 2023 Steps placed a clinic coordinator at King Edward VIII clubfoot clinic in Durban, Kwa-Zulu Natal.

## STEPS CLINIC COORDINATORS PER PROVINCE:

**Western Cape**

- Tygerberg Hospital\*
- Maitland Cottage Hospital\*

*\* 2 Steps staff members per clinic*

**11%** of patient visits nationally

**Eastern Cape**

- Frere Hospital

**5%** of patient visits nationally

**Gauteng**

- Steve Biko Hospital
- Charlotte Maxeke Hospital
- Chris Hani Baragwanath Hospital\*
- Dr George Mukhari Hospital\*

*\* 2 Steps staff members per clinic*

**27%** of patient visits nationally

**Kwa-Zulu Natal**

- Greys Hospital
- Harry Gwala Hospital
- King Edward VIII Hospital

**10%** of patient visits nationally



**8**

Steps clinic coordinators are employed in clinics across 4 provinces



**3**

New clinic coordinators have been employed in 2023



**10**

Partner clinics have STEPS clinic coordinators on site



**53%**

Patient visits take place in clinics with STEPS clinic coordinators

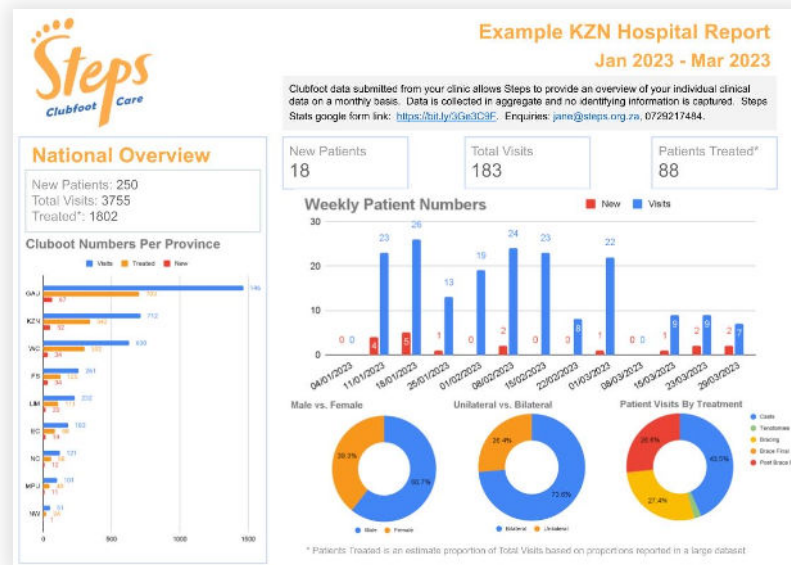
# INDIVIDUAL CLINIC REPORTS (ICRs)



The ICRs have been developed in consultation with clinics and were tested with a pilot programme before rollout. The reports serve as a regular communication tool, providing individual clubfoot clinic statistics and indicators derived from the clinic's weekly data submissions.

The ICR's present the data in a clear, concise and visually appealing one page format, enabling clinics to monitor their clubfoot key performance indicators effectively.

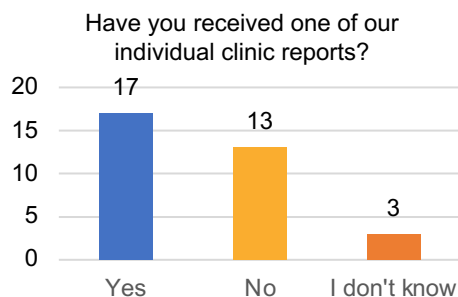
The aim is to foster two-way communication and encourage ongoing data submissions, while assisting clinics in advocating for clinic budget allocation, such as for braces to ensure smooth clinic operations.



STEPS sent out a Google form in June 2023 to assess the usefulness of the ICR'S.

Responses are summarised in the charts below.

**Feedback from Partner Clinics:** The google form was sent to 35 clinics. 33 responses were received from 28 individual clinics, a 71% response.



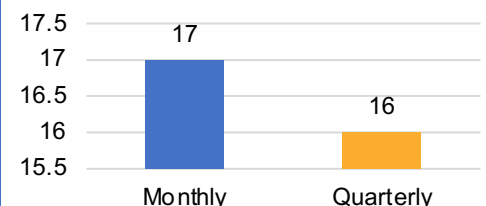
52% answered yes to receiving the ICR, 39% stated they had not seen the reports and 9% didn't know.

For those that did received/see the ICR; did you find it useful?



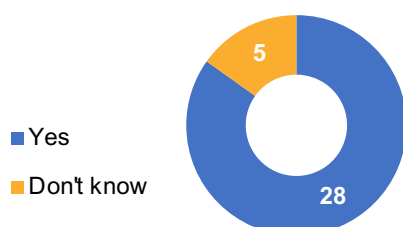
94% found the report useful, 6% were not sure.

Would you like to receive your individual clinic report on a monthly or quarterly basis?



The responses to preference of monthly vs. quarterly ICR's monthly 52% opting for monthly and 48% quarterly

Do you think this report could help motivate for more resources at a hospital or provincial level. For example: braces



## Results & Analysis:

- 39% of clinics who responded have not yet seen the report.
- We did an email audit and none of the mails had bounced, they will also be sent via WhatsApp going forward.
- STEPS is determining the best interval for reports, as monthly and quarterly were equally preferred. The larger clinics would benefit from monthly reports while smaller clinics would only require quarterly reports.
- 85% that had received the report responded that it would help to motivate for more resources at a hospital and provincial level.

## STEPS STATS DATA COLLECTION

### Clinic submission

All of the number-based statistics are submitted weekly, on the day allocated to each clinic.

#### Basic numbers from every clinic:

- How many new patients?
- How many patients are repeat visits?
- What numbers of each treatment were performed? (casting, tenotomies, brace fittings, check ups, etc.)
- How many patients are finished with treatment?

These statistics are recorded and checked weekly. This means Steps can monitor trends and identify clinics or provinces where we may need to offer more support.

- Received data is automatically safely stored in the cloud (on our Google Drive).
- Automatic reports are generated to be used and distributed to partner clinics.

### Submitted statistics are recorded and checked weekly

#### Can be calculated:

- Over any given time period
- Per clinic
- Per province
- National

#### Using data, Steps can:

- Monitor trends and identify clinics or provinces where we may need to offer more support

#### Number of:

- New patients enrolled
- Patient follow-up visits on clinic day
- Each treatment performed on clinic day (castings, tenotomies, brace fittings, check-ups)
- Patients completed treatment

#### Percentage of:

- Patient gender
- Unilateral/bilateral cases

### What we don't collect:

Data is all 100% anonymised. Steps only gets the numbers and are never sent the patients' names or anything about individuals. This protects the patients' rights and keeps Steps compliant with the law.

At some of the largest clinics Steps will sometimes assist with entering clinical data on the hospital's data system, but we have no access to that data, in compliance with POPIA. It belongs to the hospital and is for their use only. This data would typically be used by the doctors for research projects.

# DATA COLLECTION OVERVIEW



2023 saw significant improvements in the number of clinics reporting figures. The patient numbers being treated in Steps supported clinics continues to increase beyond pre-COVID levels.

The statistics we collect at our partner clinics are useful for planning and give a good overall reflection of clubfoot treatment that would otherwise not exist as there is no active birth defect surveillance in the South African health sector. The majority of children born with clubfoot in South Africa are being treated with the Ponseti method in clinics supported by Steps.

Our efforts in data management and reporting have enhanced our ability to track impact and streamline operations.

We dramatically improved our tracking of brace distribution and educational material, made new tools for turning data into useful reports, continued to improve our individual reports to clinics, and began rationalising and consolidating our partner, training attendees, and contact data. We are capable of better oversight and responsiveness to clinics and partners than most organisations of our size.

## Individual Clinic Reports (ICR) and Data Reporting

We refined our Individual Clinic Reports to give clinics some aggregated periodising stats to help focus their efforts. We used feedback from a recipient survey to make changes to the presentation of data. These simply presented reports provide useful information for clinic management, and encouragement for excellence in Ponseti clinics,

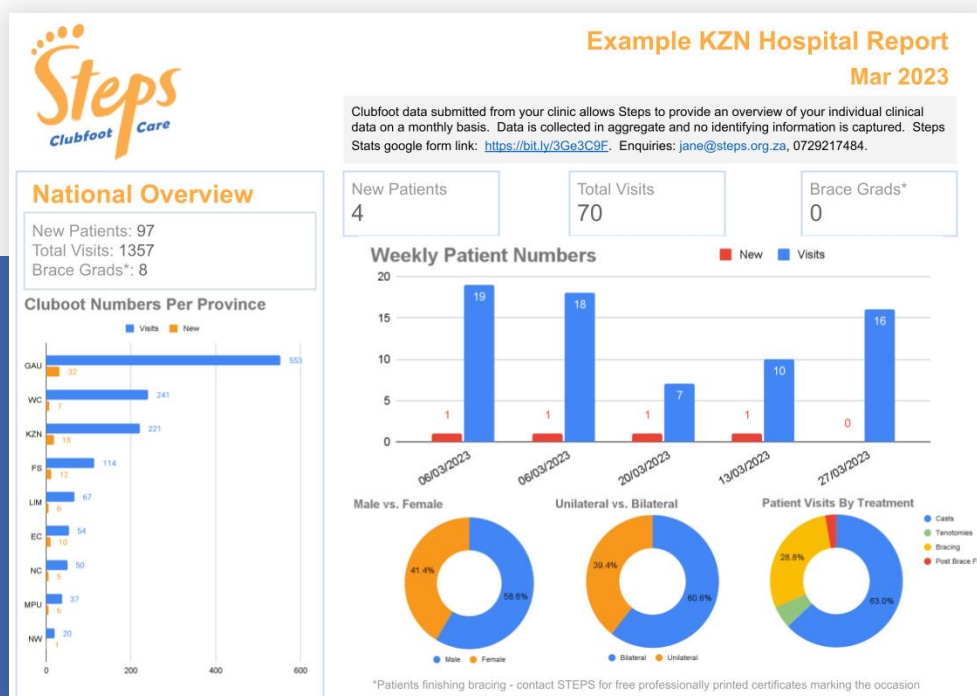
## Improved Data Tools

We made some new tools for extracting relevant information for reporting. These tools allow for more flexible examination of data, so that we can easily extract the figures needed for reporting.

## Streamlining Processes

We streamlined internal processes by improving our ability to generate reporting figures over any time period in minutes. Our goal is for technology take on the burden of repetitive tasks to increase the value of every donated Rand to kids with clubfoot and their families.

We made major progress in incorporating data on our distribution of clubfoot braces and other items into our reporting, including per province breakdowns.



04

**CLUBFOOT  
STORIES**



# TUMISO MOLOI'S CLUBFOOT JOURNEY



## AN 18 YEAR OLD WONDER

In 2005, Brenda Moloi emailed Karen Mara Moss with a query about her 4-month-old baby, who was born with clubfoot. With that email, Tumiso became one of the first babies in South Africa to receive the Ponseti treatment for clubfoot.

STEPS was but a baby then too. In 2023, we both celebrated our 18th birthday and Tumi's journey of hope, which is thanks to the introduction of the Ponseti Method all those years ago.



“

*The way I feel about Ponseti is simple. Tell others about it.*

– Brenda Moloi

”

30

# TUMISO MOLOI'S CLUBFOOT JOURNEY



“

## **Brenda says:**

*“My baby boy Tumi was born with clubfoot. It was something completely new for our family. We knew nothing about it or what causes it.*

*After I gave birth in 2005, they told me that he was going to have casts. I was so stressed. They told me that he is going to attend the clubfoot clinic every Wednesday for the change of casts.*

*You won't believe what happened. We took Tumi for about 5 months with no change. When I got back to work after my maternity leave, I looked for help on the internet and I found help from this amazing woman Karen Moss who changed my life.*

*I phoned her. Karen told me that the Charlotte Maxeke Johannesburg Hospital could help me but that I would need to get a referral letter. When I asked for this letter, I was told to wait for another 10 months to see how my baby's feet reacted to the casting and to 'be patient'.*

*Karen was concerned that it was far more difficult to treat a baby that was over a year old with the Ponseti method. She arranged with a doctor in private practice who she was working closely with that he would treat Tumi at a reduced rate, covering only his material costs.*

*When I took my Tumi to see him, he was so surprised that he had gone through 20 casts and there was no change in his feet. Do you know why he was surprised? It's because they were not using the Ponseti method in that hospital.*

*When I took Tumi to Dr Mark, he only had 6 casts and then a small operation on his right foot and his feet were good. Karen arranged for one of the donated foot braces.”*

”

“

## **Tumi says:**

*“After getting my clubfoot treated, I was involved in sport which was karate. I think participating in this sport truly showed me how well my leg has recovered because we know karate is a contact sport which requires you to have the physical strength in both your legs. At first, it wasn't easy, but as time went on, I started enjoying karate and I won a few medals and trophies from tournaments. So that really showed me how well the leg was treated and how good the recovery had been.*

*What I can say to parents of toddlers having clubfoot treatment is that they should have hope and never give up in trying to treat the clubfoot. It may not be an easy journey, but it's a journey worth undergoing as nothing worthwhile comes easy. I think parents should let the toddler be themselves and not let them think they are different from others which is what my mom did for me. She didn't really reveal to me much about my condition and I thought I was pretty much the same as others.*

*There will be challenges along the way, but what's important is to focus on recovering well. Last year I had an accident where I had a gate fall on me. I thought maybe I had broken my leg and triggered the clubfoot again somehow, but luckily, I didn't damage the leg and everything was fine.*

*My dream job has always been to become a physiotherapist, so I've been applying to various universities for physiotherapy. I just hope I get accepted and get a bursary which will help me pay for fees. That's my plan after matric. That's my wish, to help others. It's what I value the most in life.”*

”

# MASHEGO BOHLOKWA'S CLUBFOOT JOURNEY



## TREATMENT SUCCESS STORY

Two year old Mashego Bohlokwa is a bubbly, busy little girl who loves to explore. She was born with clubfoot but you'd never know that unless you were told about it!

Mashego lives in Alexandra in Johannesburg, Gauteng. She went for her clubfoot treatment at our long time clinic partner clubfoot clinic at Charlotte Maxeke Johannesburg Academic Hospital.

Mavis, Mashego's mother, is so thrilled with the progress she has made and the amazing success of her treatment.

"When I found out that Mashego had clubfoot I was very sad. She was our first girl and neither of her two big brothers had clubfoot. But the encouragement I received from the doctors and nurses at Charlotte Maxeke hospital, and Ivy from Steps, soon made me realise that everything would be fine.

Treatment started when Mashego was only 2 weeks old and after 7 plaster casts and a tenotomy she is now wearing her night-time boots and bar.



“

*Mavis' advice to other parents is to not give up: 'Come for your check-ups, follow the doctor's orders. You have to be strong and you will see the results'*

”

# BOHLOKWA'S CLUBFOOT STORY



## EMBRACING HOPE



Bohlokwa Mokhoathatsane was born with bilateral clubfoot in September 2021 in Dewetsdorp. She was treated at the Steps partner clubfoot clinic at Universitas Hospital in Bloemfontein, Free State. She travelled with her mother for 45 minutes to the clinic for each of her appointments and is now in the maintenance phase of treatment, wearing her clubfoot brace at night.

Her mother Selina says:

*"It has been a tough journey but I am so happy with the results. I would advise other parents to follow the doctor's instructions and not lose heart because clubfoot can be corrected and fixed. The clubfoot clinic at Universitas really helped because the lady who works there from Steps explained everything about Clubfoot. The pamphlet handed to me helped and was easy to read and understand. I took it home to my family to read too, so they understood. And from that day we all had hope that our child would be okay. Bohlokwa is now wearing the braces they are also helping. Thank you to the Clubfoot Clinic at Universitas and Steps for changing my daughter's life."*

### Journey of clubfoot treatment



#### 1. CORRECTION PHASE

**From birth**  
4-6 WEEKLY APPOINTMENTS  
**Older child**  
8-10 WEEKLY APPOINTMENTS

Newborn patient – average 20 appointments from start to complete  
Older child (late referral) – average 22 appointments from start to complete

### Journey of clubfoot treatment



#### 2. MAINTENANCE PHASE

**Year 1**  
5 APPOINTMENTS:  
1st BRACE FITTING  
4 BRACE FOLLOW UPS  
**Year 2**  
3 BRACE  
FOLLOW UPS  
**Year 3**  
2 BRACE  
FOLLOW UPS  
**Year 4**  
2 BRACE  
FOLLOW UPS

Newborn patient – average 20 appointments from start to complete  
Older child (late referral) – average 22 appointments from start to complete

### Journey of clubfoot treatment



#### 3. FINAL APPOINTMENT

**Age 4 - 5**  
RELEASE FROM BRACE WEAR

Newborn patient – average 20 appointments from start to complete  
Older child (late referral) – average 22 appointments from start to complete

# LUBANZI'S CLUBFOOT JOURNEY



## 10/10 FOR TREATMENT!

Six year old Lubanzi Molio was born with bilateral clubfoot treatment and started treatment at Grey's clubfoot clinic in Pietermaritzburg when he was four weeks old.

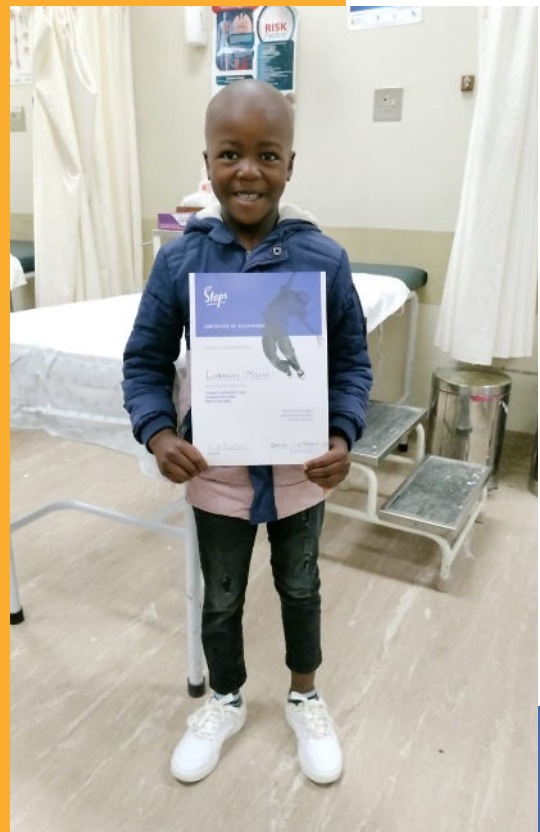
Nomasonto Molio, Lubanzi's mother says:

Lubanzi's treatment went well but he had 3 recurrences. Sometimes it was difficult to find the money for transport to the clinic, and I did not make sure he wore his clubfoot braces as instructed.

I brought my son again to Grey's clubfoot clinic when he was two. I was scared but no one judged me. They were happy to see us and said Lubanzi must restart his treatment.

They started casting him again and then he received another tenotomy. He went back to full time bracing, and now I understood what would happen if he did not wear the brace.

Phumzile from Steps went over everything with me again in detail and explained how important it is for me to make sure that my son wears the boots for 3 months, 23 hours a day then at night time after that. We stuck to it this time and our whole family is so happy.



“

*Lubanzi's journey was very good overall. We had small problems along the way, but we fixed it. We did not give up and I am so thankful for everyone at Grey's clubfoot clinic.*

*My son has now graduated from his treatment. I give my son's clubfoot treatment 10/10!*

”

# 05

## OTHER HIGHLIGHTS



# TIKTOK DANCE CHALLENGE



## NOVEMBER DISABILITY AWARENESS MONTH

We challenge you to  
**#StepItUp** for kids  
born with clubfoot.

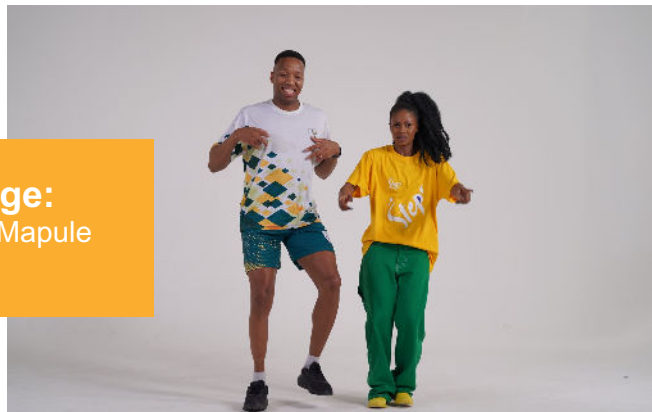
**"I AM POSSIBLE"**



#StepItUp was our biggest awareness campaign to date. We challenged the public to download a specially produced song by making a small donation, learn the choreographed dance, and share it on their social media. [Watch the campaign video](#)

The campaign's anthem, **"I am Possible"** by Dino Moran, Bee DeeJay and DJ Schuster, was the heartbeat of the campaign. Our campaign champion, **Musa Motha**, is a professional dancer whose incredible talent has inspired millions, on Britain's Got Talent and America's got talent. Additionally, our Clubfoot Champion and Paralympian **Mpumelelo Mhlongo** shared his own journey and joined the dance challenge to raise clubfoot awareness. Our partner clubfoot clinics also joined the challenge with dance-offs on their clinic days.

**The Dance Challenge:**  
Mpumelelo Mhlongo and Mapule  
Mazaza (Choreographer)



**702.**

**CAPETALK**  
567AM  
JOIN THE CONVERSATION

**eNCA**

**iAfrica**

**e**  
tv news  
& sport

**good hope fm**  
CAPE TOWN'S ORIGINAL

**G**  
**GOODTHINGS GUY**  
ONLY GOOD THINGS!

**KC** 107.7

  
**THISABILITY**  
For Children and Adults with Disabilities

**Sowetan**

36

# TIKTOK DANCE CHALLENGE



## CAMPAIGN RESULTS AND PARTNERSHIPS

<b>Media Coverage:</b>	29 379 669 people reached
<b>Advertising Value Equivalent:</b>	R1 318 124
<b>The campaign raised:</b>	R 303 693
<b>Which will support the treatment of:</b>	121 children
<b>Streaming stats to date for 'I am Possible' song:</b>	2,986,956 TikTok views



Standard Bank CSI supported us through their matched giving campaign, and raised funds to support 4 children through treatment.



We attended the VIP Rookie USA fashion show with Musa Motha, Rookie USA donated a percentage of their sales during the campaign month to support 6 children through treatment.



## THE OSLO REPORT

### Programme Expansion: Strategy and Toolkit to Increase Access to Clubfoot Treatment

We participated in The University of Oslo Student Internship Programme run by Social Enterprise Academy and UCT Graduate School of business. Two intern students were placed with us for a two-month project: Marthe Ramtsad (Bachelor in Renewable energy, engineering education) and Kristin Tvedt (Master's Degree Programme in Clinical psychology). We set them the task of investigating economic, logistical and emotional barriers to treatment experienced by families.

#### The Oslo Report's Findings:

- South Africa's struggles directly impact our work and effectiveness. There are economic factors that create barriers to accessing clubfoot treatment that have nothing to do with the quality of care offered.
- The real challenge is that people cannot afford to come for treatment. People are begging for transport to get to clinics, they have to decide between food and healthcare.
- Out of 24 caregiver respondents, 54.2% answered that it is "hard to afford," hospital transportation and 16.7% said it is "sometimes hard to afford".
- A significant proportion of the respondents' expressed feelings of worry, stress, and anxiety.
- Some of the stress is related to the financial burden associated with traveling costs.
- Another concern is safety. Some caregivers feel unsafe travelling to the clinic by public transportation and worry about crime.

#### Recommendations:

- A temporary Care Dependency Grant from SASSA (South African Social Security Agency) is a solution to assist families struggling with transport costs for treatment.
- The grant will assist greatly with transport costs and help to improve treatment adherence.
- Steps Family Resources Toolkit that outlines the processes and documents required from families and clinics to access the SASSA grant during the treatment phase.

#### The story of a mother and father

*A mom and dad, who came to the clinic with their son, told us they spent their last money paying for the transport to the clinic that day. They did not have the money to get back home and said they would have to beg. When asked if they have ever missed an appointment because of the costs related to travel, the father replied, "I will rather walk here all night with my baby than stop treatment".*

## EXTRACT FROM THE OSLO REPORT:

To put the area of interest in context, accessing health care is generally a challenge in South Africa.

*“Going to the hospital is not just a health problem, it has become an economical problem for families”*

*“This issue can be linked to the urban development in African cities, which has been characterised by a government policy focusing on rapid development. This has resulted in the establishment of communities with crowded, underserved, disconnected, and costly solutions. Today, this affects all families that are dependent on a well working health system, including the families of clubfoot children. Caregivers spend considerable time and resources travelling to clinics, adding to their burden.”*

- N. Marrengane, personal communication, 12 July 2023

“

A mother and her child will leave their home in the early hours of Wednesday morning on the transport that goes around to the different hospitals. They only leave the last hospital in the early hours of Thursday morning to access treatment. After treatment they travel back and get to the hospital late in the evening. Some sleep over at the hospital waiting areas and only travel back home on Friday morning. The cycle starts again the following week when the child is still in the casting phase

”

“

A group of friends donated money to me last night. Without that, I am not sure I would have made it to the clinic today.

”

“

I worry about being robbed, kidnapped, or stabbed. Sometimes it is scary travelling with strangers, and I don't feel safe.

”

“

“I try to save money for transportation, but sometimes we must buy bread, diapers, or something else”

”

## University of Cape Town Health Economics Dissertations

Two Masters students at the UCT Department of Health Economics, Liezl Joubert and Yulisha Naidoo are doing their dissertations on clubfoot. They are being supervised by Head of Department Prof Edina Sinanovic. STEPS is providing information and assistance as required. Publication date is late 2024.

# SHOELACE CHALLENGE



## 2023 WORLD CLUBFOOT DAY

To raise awareness about clubfoot, we joined Achilles in the Czech Republic for the 2023 WCD 'Shoelace Challenge'.

We asked people to try the WCD Shoelace Challenge with us to highlight the importance of effective early clubfoot treatment. When you try to walk, you will realise how challenging it really is, and gain insight into the importance of treatment.

The challenge was simple, tie your laces together, film or photograph yourself and post onto Facebook or Instagram tagging Steps. Our [campaign video](#) had 15,665 plays on Facebook, and 49,216 reach.

We also launched our Stepping Up – our sustainable donor campaign.

We featured clubfoot success stories across our social accounts (Facebook, Instagram, Twitter and LinkedIn), sharing a 34 posts over the month of June.

**World Clubfoot Day 2023**

**Join our SHOELACE challenge!**

Wear something yellow & join our STEPPING UP monthly donors.

- 1** Tie your laces together, try to walk or run.
- 2** Film or photograph yourself.
- 3** POST IT to the STEPS Facebook page or Instagram using the hashtag **#shoelacechallenge**

Don't forget your step count!

**Steps Clubfoot Care** / **#shoelacechallenge**

- Online, print and broadcast reached an audience of 1,041,940
- Advertising Value Equivalent of R519,535.00

**Weekend Argus**

**The Citizen**

**DAILY SUN**

**Bushradio**  
99.5fm

**good hope fm**  
CAPE TOWN'S ORIGINAL



Sustainable giving - R60 per month or a R2 500 donation supports one child's four year journey.

40

## 2023 BEST RISING NGO

We were honoured to win the 2023 CSI Legacy Awards category Best Rising NGO.



**BEST  
SOCIAL  
ORGANISATION**

**CSI LEGACY  
AWARD  
WINNER**

**SOUTH  
AFRICA**

**2023**

RECOGNISED LEADER IN CORPORATE SOCIAL RESPONSIBILITY

## 2023 BIRTH DEFECTS CONFERENCE

Our Executive director attended the 2023 International Conference on Birth Defects and Disabilities in the Developing World, in Chile. She presented a talk “The Steps Clubfoot Care Model - South African Case Study”



## SSCAN ADVOCACY WEBINAR

The Sub Saharan Congenital Anomalies Network & The Global Health Network’s webinar “Advocacy for Congenital Disorders and Rare Diseases in SSA - An Expert Discussion”

Our executive director was invited to join a panel of key advocacy stakeholders for a discussion regarding advocacy for rare diseases and congenital disorders in SSA.. Live questions and comments were taken and answered via the Q&A and chat functions of the virtual platform.

[Recording link](#)

Sub Saharan Congenital Anomalies Network  
& The Global Health Network Webinar

**Advocacy for Congenital  
Disorders and Rare Diseases in  
SSA: an Expert Discussion**

August 31, 2023 - 14:00-15:30 London

UK Medical Research Council sSCAN THE GLOBAL HEALTH NETWORK

# 2023 PONSETI WORKSHOPS



Our gratitude to our training partners, Essity and MD Orthopaedics (OPSB), the host hospitals and the training faculty.



Upington, Northern Cape



Mthatha, Eastern Cape

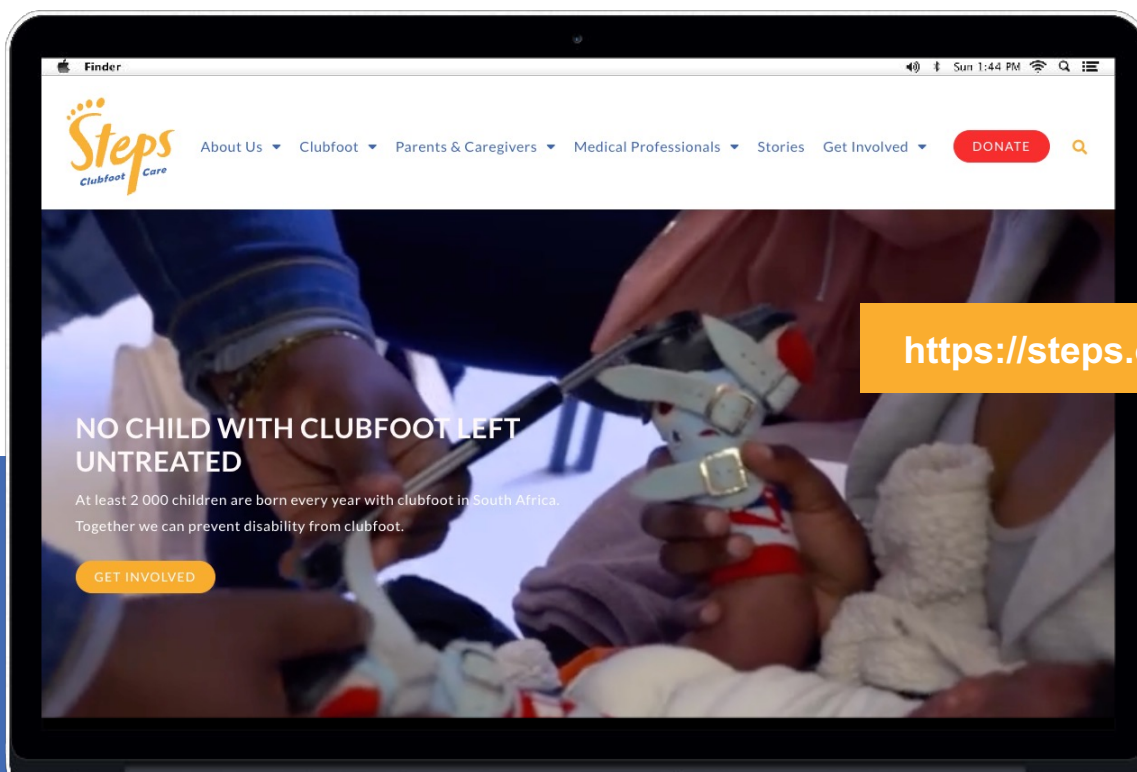


Pietermaritzburg, KwaZulu-Natal

# WEBSITES LAUNCHED



We created two new websites in 2023. A website to launch Stepify's, and a redesign of our Steps website. A big thanks to the talented team at Expand Agency for making our vision a reality.



## WE ARE AN ACTIVE MEMBER OF THE GLOBAL CLUBFOOT INITIATIVE



The Global Clubfoot Initiative is an umbrella body of international organisations working together to eradicate the disability caused by clubfoot with coordinated biannual surveys of treatment providers in LMIC and UMIC to assess provision of, and access to, effective treatment.

Steps executive director Karen Mara Moss is a member of various working groups including the #runfree2030, Training, and Pre-Service Training groups.

In June 2017, GCI launched **Run Free 2030: A Global Strategy to End Clubfoot Disability**. Run Free 2030 sets out an ambition to ensure that by 2030 at least 70% of children born with clubfoot in lower and middle income countries can access treatment. By working towards 2030, the Global Clubfoot Strategy aligns with the World Health Organisation Rehabilitation 2030 Call to Action, the Lancet Commission on Global Surgery 2030 and the UN Sustainable Development Goals 2030.

### #RUNFREE2030 Objectives for target low and middle income countries by 2030:

- 100% to have a national clubfoot programme delivering comprehensive clubfoot care.
- At least 70% of children born with clubfoot in target countries to have access to Ponseti treatment..
- 100% of national clubfoot programmes to meet at least 70% of the global clubfoot quality metrics.
- 100% of national clubfoot programmes to meet at least 70% of the global clubfoot sustainability metrics.

***RUNFREE*** <sup>2030</sup>

GLOBAL  CLUBFOOT INITIATIVE

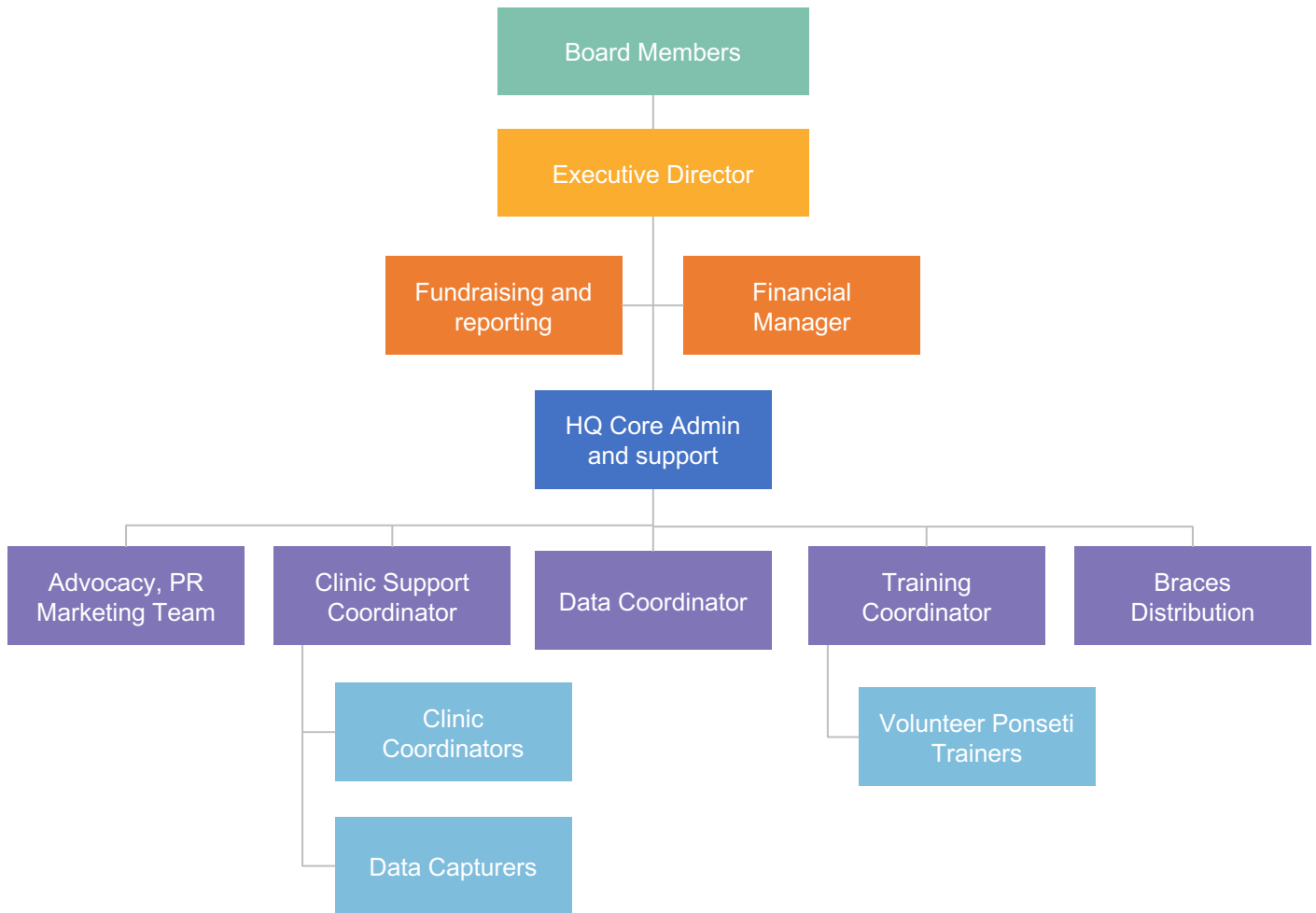
<https://globalclubfoot.com/runfree2030/>

# 6

## SUSTAINABILITY STRUCTURE FINANCIALS



# OUR STRUCTURE



To our valued sponsors and donors  
I have had the pleasure of being  
a Parent Advisor for Steps for more  
than 10 years now.

I have met hundreds of children  
and their families and have had  
great joy seeing how they go from  
being overwhelmed or afraid to being  
confident and excited about the end  
result.

There is nothing more rewarding than  
seeing the smiles on the faces of  
parents whose children have beautiful  
straight feet after successful treatment.

Knowing that my presence in the clinic  
and the advice and guidance I give,  
makes them feel more empowered  
and less alone is fantastic.

I wouldn't be able to do, and love,  
what I do if it wasn't for you,  
our generous donors. Your contribution  
makes ALL the difference in the  
lives of the families we treat!

Thank you, thank you, thank you!  
Ivy Muffler.



**IVY MUFFLER**  
Clinic coordinator and parent adviser

# OUR TEAM



## Steps Clubfoot Care

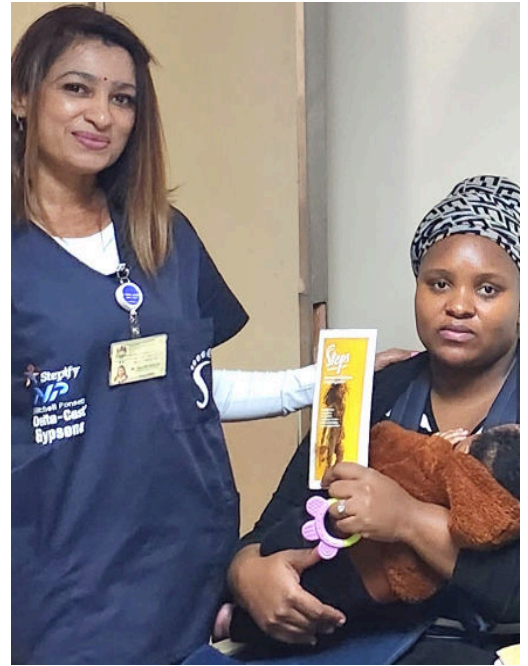
Smangele Dladla  
Luke Engel  
Penny Hlakula  
Lynne Huppert  
Refiloe Khosa  
Ursula Kibido  
Jane Mackinnon  
Alan Millar  
Karen Mara Moss  
Ivy Muffler  
Nirasha Ramessur  
Gabrielle Rademeyer  
Linda Nonhoza Vuso  
Phumzile Zondi

## Steps Board

Prof Jacques du Toit  
Cheryl Howard  
Erin Leigh Goliath  
Denalda Tuckett  
Karen Mara Moss  
(Executive Director)

## Ambassadors

Bernelee Daniell  
Charne Felix  
Mpumelelo Mhlongo  
Thato Molamu



To our donors,  
We needed you and you were there!  
Thank you so much for your continuous donations.  
Through your support, we are able to work and reach  
our communities at large to gain access to the  
Clubfoot treatment.  
Your support also ensures that we have resources  
to educate our communities and walk with  
them throughout the journey.  
You truly make the difference for us, the clinic-  
coordinators, the doctors, the nurses and the communities  
we work in.  
Here is to helping and creating happy, functional kids!  
Thank you!  
Refiloe Khosa (clinic-coordinator)



**REFILWE**  
Clinic data capturer

# 2023 CLUBFOOT CLINIC PARTNERS



**We partner with specialist clubfoot clinics who share our goal of improving the lives of children born with clubfoot. We are privileged to support their important work.**

## Eastern Cape

Bambisana Hospital  
Canzibe Hospital  
Frere Hospital  
Isilimela Hospital  
Livingstone Hospital  
Madwaleni Hospital  
St Elizabeth's Mission Hospital  
Zithulele Hospital  
Bedford Orthopaedic Hospital

## Gauteng

Charlotte Maxeke Academic Hospital  
Chris Hani Baragwanath Academic Hospital  
Dr George Mukhari Academic Hospital  
Steve Biko Academic Hospital  
Tembisa Hospital

## Limpopo Province

Letaba Provincial Hospital

## Mpumalanga

Lydenburg Hospital  
Themba Hospital  
Tintswalo Hospital (*includes patients transferred from Mapulang hospital*)

## Western Cape

George Hospital  
Maitland Cottage Children's Orthopaedic Hospital  
Tygerberg Hospital  
Vredendal Hospital  
Worcester Hospital

## Free State

Boitumelo Hospital  
Bongani Regional Hospital  
Dihlabeng Provincial Hospital  
Pelonomi Academic Hospital  
Universitas Hospital

## Kwa-Zulu Natal

Greys Hospital  
Harry Gwala Hospital  
King Edward VIII Hospital  
Ladysmith Provincial Hospital  
Madadeni Hospital  
Manguzi Hospital  
Ngwelezana Hospital

## North West Province

Gelukspan District Hospital  
Mahikeng Provincial Hospital

## Northern Cape

Dr Harry Surtie Hospital  
Robert Mangaliso Sobukwe Hospital



# PROGRESS MADE TOWARDS OUR OBJECTIVES



In 2023, we continued to make significant progress.

We leveraged advocacy, clinic support, innovation, and partnerships to improve outcomes for children across South Africa.

As we move forward, we remain committed to our mission of ensuring every child born with clubfoot receives timely and effective treatment, empowering them to live full and active lives.

- The reported number of children being diagnosed and treated with the Ponseti Method is increasing as more clinic partners are added, and consistent reporting from clinics.
- Hundreds of children have effective clubfoot braces sourced and supplied by Steps, reducing the risk of recurrent clubfoot.
- Clubfoot is a recognised condition by health workers and the community, through advocacy campaigns and good media coverage.
- We further diversified our income stream with a social enterprise to supply clubfoot braces and other paediatric orthopaedic devices.
- We have improved clinic service by placing more Steps clinic coordinators to busy clinics to assist with family education and processes.
- We consolidated and strengthened our partner clinic support by using evidence based data to evaluate and plan.



“

*We deeply appreciate and give credit to all of our partners, donors and supporters for your commitment. Our impact is only made possible by your generosity, assistance and collaboration.*

”



Identify areas where treatment is needed.



Assist with resources for clinic set-up:

- Education literature
- Family support
- Clubfoot data capturing
- Clubfoot braces
- Clinic coordination toolkit



Identify champions.



Social enterprise:

- Braces
- Training



Provide training.



Awareness campaigns.

## OUR SUSTAINABILITY PLAN SUMMARY

- Diversified revenue stream
  - Grants
  - Fundraising campaigns
  - Events
  - Product sales
  - Training
- Partnership with South African Paediatric Orthopaedic Society
- Automated resources and tools
- Integrated into the South African Public Health System
- Lean management principles



# SUMMARY OF AUDITED FINANCIAL STATEMENTS



**1 JULY 2022 – 30 JUNE 2023**

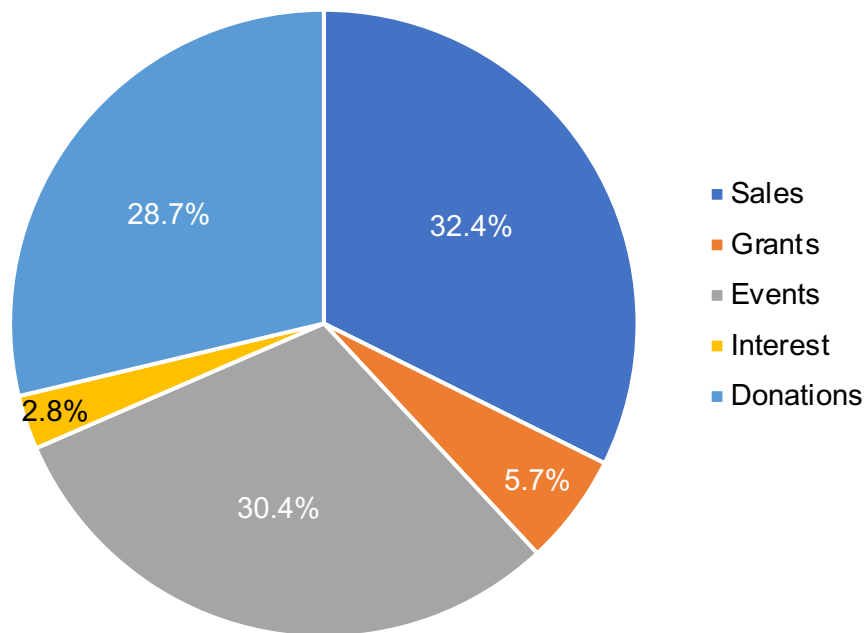
	2023	2022
	R	R
<b>REVENUE</b>	<b>7 235 501</b>	<b>7 272 781</b>
Donations received and event funding	3 209 185	3 334 816
Donations in kind (Clubfoot braces)	2 204 800	1 856 919
Clubfoot Brace sales	1 821 516	2 081,046
<b>COST OF SALES</b>	<b>(1 684 445)</b>	<b>(2 032 847)</b>
Donations in kind (Clubfoot Braces)	(2 204 800)	(1 856 919)
<b>GROSS SURPLUS</b>	<b>3 346 256</b>	<b>3 383 015</b>
<b>INVESTMENT INCOME</b>	<b>138 066</b>	<b>71 385</b>
<b>OPERATING EXPENSES</b>		
<b>Core Activity</b>	<b>(3 158 568)</b>	<b>(2 632 986)</b>
Clinic advocacy	496 946	804 336
Clinic support	757 373	1 123 938
Ponseti training	236 752	521 188
Event costs	1 560 128	-
<b>Support Activity</b>		
Support cost	107 369	183 524
<b>OPERATING SURPLUS/DEFICIT</b>	<b>R 325 754</b>	<b>R 821 414</b>

# OUR SUPPORTERS



We deeply appreciate our generous supporters and partners. Without you, we would not be able to create the impact that we do.

## Income Sources For Period January To December 2023



Our funding comes from diverse sources - R60 monthly donations, major private donors that invest to make a sustainable impact, corporates, and foundations.

We deeply appreciate our donors and partners. Thank you for your generous support.

We also generate our own income through sales of medical devices and events.

- Self generated income (sales and events): 62.8%
- Donations and Grants income: 34.4%



Sustainable giving - R60 per month or a R2 500 donation supports one child's four year journey.



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Further information: [info@steps.org.za](mailto:info@steps.org.za) / [www.steps.org.za](http://www.steps.org.za)

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